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**For decision**

### United Nations Children's Fund

Executive Board

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Item 8 (a) of the provisional agenda\*

### Country programme document

#### Sri Lanka

#### *Summary*

The country programme document (CPD) for Sri Lanka is presented to the Executive Board for discussion and approval at the present session, on a no-objection basis. The CPD includes a proposed aggregate indicative budget of \$4,735,000 from regular resources, subject to the availability of funds, and \$52,500,000 in other resources, subject to the availability of specific-purpose contributions, for the period 2018 to 2022.

In accordance with Executive Board decision 2014/1, the present document reflects comments made by Executive Board members on the draft CPD that was shared 12 weeks before the second regular session of 2017.

\* E/ICEF/2017/14.



## Programme rationale

1. Within the United Nations Sustainable Development Framework (UNSDF) for Sri Lanka (2018-2022), the UNICEF country programme 2018-2022 will support the national implementation of the Sustainable Development Goals in Sri Lanka, the country's transformation from a post-conflict society to a stable democracy, and enable its social and economic aspirations to become an upper-middle-income – and even high-income – country.
2. Sri Lanka is currently a lower-middle-income country, with a per capita income of \$3,924 in 2015. Following a 30-year civil war that ended in 2009, the economy grew at an average 6.4 per cent per year between 2010 and 2015, reflecting both a peace dividend and the relative success of reconstruction and growth initiatives.<sup>1</sup>
3. Sri Lanka has long been notable for its impressive human development indicators. In 2015, it ranked 73 out of 188 countries and territories, with its Human Development Index value at 0.757, putting the country in the “high human development” category.<sup>2</sup> A long tradition of investment in education, health and poverty-alleviation programmes is largely responsible for these positive development outcomes.
4. Sri Lanka achieved many of the Millennium Development Goals well ahead of the 2015 target, although recent data is required to ascertain whether these trends are being sustained. The country has achieved near universal primary education enrolment, which varies little by province or gender.<sup>3</sup> Nonetheless, Sri Lanka has a considerable unfinished agenda, which, if unaddressed, will hamper its future development aspirations and progress in achieving many of the Sustainable Development Goals.
5. Despite impressive economic growth, with a dramatic overall reduction in income poverty from 22.7 to 6.7 per cent between 2002 and 2012/13, inequality has increased and living standards remain low.<sup>4</sup> A large proportion of the population remains vulnerable to poverty, with a quarter of the population living just above the official poverty line of \$1.50 per day, but below \$2.50 per day. Out of 1.7 million children under 5 years of age and 6.2 million children under 18 years, 10.6 per cent and 11 per cent respectively, were either income poor and/or multi-dimensionally poor in 2012/13.<sup>5</sup> The districts of Mullaitivu, Mannar and Kilinochchi in the Northern Province, Batticaloa in the Eastern Province and Moneragala in Uva Province have the largest share of people living below the poverty line.<sup>6</sup>
6. Under-five mortality has declined, but inequities persist, and neonatal mortality remains a challenge. Data show a gradual reduction in neonatal, post-neonatal, infant, perinatal and under-five mortality rates between 2007 and 2013. Nevertheless, pockets of unnecessarily high levels of all under-five mortality are evident in some districts, primarily

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<sup>1</sup> World Bank. *Sri Lanka: Ending Poverty and Promoting Shared Prosperity – A Systematic Country Diagnostic*. Washington, D.C., 2015.

<sup>2</sup> UNDP. *Sri Lanka Briefing Note on the Human Development Report 2015: Work for Human Development*. New York, 2015.

<sup>3</sup> Institute of Policy Studies (IPS). 2010. *MDG country report: 2008/09*. Colombo: Institute of Policy Studies of Sri Lanka.

<sup>4</sup> *Ibid.*

<sup>5</sup> Nanayakkara, W. (2015), *Child Poverty: Who are the Poorest Children in Sri Lanka?* Institute of Policy Studies of Sri Lanka (IPS.)

<sup>6</sup> *Ibid.*

in the northern, eastern and central regions of the country. Neonatal mortality accounts for close to 75 per cent of infant mortality.<sup>7</sup>

7. Malnutrition remains a major challenge, indicating the acute need for quality services. Rates of acute malnutrition (wasting) are exceptionally high, at 19.6 per cent, with the highest prevalence found in the east and north (e.g., Kilinochchi, 34 per cent). Undernutrition in pregnant women contributes to intergenerational undernutrition in children, presenting a persistent barrier to appropriate child development for some children and to sustainable development as a whole. An alarming 23 per cent of pregnant mothers recorded a low body mass index in 2013.<sup>8</sup>

8. Less than half of children aged 3 to 5 years are enrolled in an early childhood education centre, jeopardizing opportunities for optimal early childhood development, school readiness and, ultimately, the country's long-term, sustainable social and economic development. Given that preschool education is largely private and fee-based, significant disparities in access to early childhood education (ECE) services are evident. ECE enrolment among children aged 3 to 4 years in the richest quintile is 56 per cent compared with 39 per cent among the poorest quintile. There are also significant disparities in ECE enrolment, with 59 per cent of children in urban settings enrolled in ECE compared with 48 per cent and 50 per cent in rural areas and the estate sector, respectively.

9. Other key challenges include (a) inequitable access to key preventive and curative health and nutrition services, including for mental health and adolescent sexual and reproductive health; (b) emerging concerns related to increasing levels of non-communicable diseases and overweight/obesity; and (c) a continuing high level of violence and abuse perpetrated against women and children.

10. Large disparities remain across Sri Lanka in learning achievement, suggesting that not all children benefit from equitable access to quality education. Sample-based learning outcome assessments conducted regularly by the National Education Research and Evaluation Centre for grades 4 and 8 since 2007 show large disparities in learning outcomes in languages, subjects and geographic locations. The literacy rate has improved since 2007, and is now at 97.8 per cent among people aged 15 to 24 years, with female literacy slightly higher (98.2 per cent) than male (97.2 per cent). Lower levels of achievement on grade-5 exams and lower levels of literacy frequently correlate with poverty and other child rights deprivations, and are most observable in the estate sector, and in the Northern and Eastern provinces.<sup>9</sup>

11. Among children with disabilities aged 5 to 14 years, more than one in three has cognitive disabilities.<sup>10</sup> Despite near-universal primary school enrolment rates, nearly one in four children with disabilities aged 5 to 14 years is still excluded from education and their educational attrition rates remain high.<sup>11</sup>

12. Ensuring a protective, caring and safe environment for children remains one of the key challenges for Sri Lanka. According to government reports, violence against children is

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<sup>7</sup> 2013 Ministry of Health and Indigenous Medicine – Family Health Bureau.

<sup>8</sup> Ibid.

<sup>9</sup> 2012/13 HIES.

<sup>10</sup> Institute of Policy Studies. *Barriers and Opportunities in the Provision of Education for Children with Learning Disabilities in Sri Lanka*. Colombo, 2014.

<sup>11</sup> Ibid.

on the rise, with 2,068 cases reported in 2014 and over 12,000 cases in 2015, an increase partly due to increased reporting. Corporal punishment, while illegal, is practised in schools and accepted by parents. While more than 14,500 children live in long-term state residential institutions, it is estimated that an additional 20,000 children live in unregulated private and religious orphanages or boarding houses. The country's child-protection system lacks the necessary framework, capacity and resources to prevent the abuse, neglect and exploitation of children and to provide timely responses.<sup>12</sup>

13. Sri Lanka is categorized as a high human development country and obtained a gender inequality index ranking of 72 out of 188 countries, which is high compared with other countries in the region. However, even though gender parity has been achieved in most social indicators for children, including in the health and education sectors, disparities emerge during adolescence and adulthood.

14. Given the current demographic shift, the country has to increase the level of public spending in social sectors related to children and adolescents, in order to maintain strong gains in human development. Between 2006 and 2013, government spending on education declined from 2.7 per cent to 1.8 per cent of gross domestic product (GDP). Over the same period, spending on health declined from 2 per cent to 1.4 per cent of GDP, and on social welfare from roughly 4.2 per cent to 2.2 per cent. Current levels of expenditure on health, education and social welfare are considered low relative to other middle-income countries in the region. In addition, there are questions about the absorptive capacity of the respective line ministries.

15. Sri Lanka witnessed natural disasters over the past few decades that caused human, physical, financial and environmental losses and made substantial impacts on the national economy. Children bear the brunt of climate change indiscriminately and its adverse impact. In a region with existing vulnerabilities, including poverty, malnutrition, inequality and exclusion, this impact is magnified. Further, repeated cycles of natural shocks and disasters exacerbate the existing vulnerabilities and have a devastating impact on the well-being, physical security and development of children.

16. As the population ages and the birth rate slows, there is growing recognition of the importance of investing in the approximately 3.3 million adolescents (16 per cent of the total population).<sup>13</sup> Transitioning to a dynamic knowledge-based economy requires that children and adolescents develop new skills adapted to the highly connected digital age and that investments are made in human capital. In addition to being a target group, adolescents in Sri Lanka must be actively involved as agents of change at the family, community and national levels.

17. Lessons learned from the previous UNICEF country programme, confirmed by the midterm review and consultations with partners, highlighted the need to invest in an integrated, child-centred approach that maximizes synergies and results for the most disadvantaged. Given the two windows of rapid brain development and value formation, there is a unique opportunity to invest in addressing vulnerabilities during early childhood and adolescence to achieve lifelong improvements in cognitive capital. Cognitive capital is defined as the complete set of intellectual, socioemotional and executive-function skills that

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<sup>12</sup> UNICEF Sri Lanka. Child Protection Systems Mapping Report (draft). Colombo, 2016.

<sup>13</sup> UNICEF. The State of the World's Children. 2016.

enable creativity, flexibility and the ability to work collaboratively.<sup>14</sup> Additionally, given the imperative for programme effectiveness, efficiency, coherence and accountability for results, the country programme must be grounded in results-based management, with a clear articulation of demonstrable results for children and adolescents, especially the most deprived.

18. As part of the process of implementing the 2030 Agenda for Sustainable Development, the Government of Sri Lanka has indicated its strong recognition of the role of data and knowledge in monitoring progress. Sri Lanka has also acknowledged the need for greater investment in better analysis and disaggregated data at the subnational and national levels to drive policy and budgetary decisions that leave no child behind.

## **Programme priorities and partnerships**

19. The new country programme 2018-2022 is consistent with and contributes to the United Nations Sustainable Development Framework (UNSDF) and reflects global, national, provincial and United Nations priorities. It is aligned with the Public Investment Programme, which reflects the socioeconomic vision of the Government of Sri Lanka for 2017-2020; the Peacebuilding Priority Plan, which supports the Government to implement its reconciliation and accountability/transitional justice commitments to its people; and the applicable national and provincial, district and municipal plans, sector plans and the national plan of action for children. The country programme will also assist the Government of Sri Lanka to follow up on and implement the conclusions and recommendations of the Committee on the Rights of the Child.

20. The overall vision of the country programme is to contribute to national efforts to accelerate the realization of child rights for all children in Sri Lanka, while promoting strategic investments in children and adolescents to enhance the cognitive capital of Sri Lanka as the basis for sustainable development.

21. The outcomes address gaps in the enabling environment, including social norms, the quality of services and the demand for services pertaining to the full development of the child. They have been formulated following a child-centred approach:

(a) Newborns/infants and their mothers, and young children (prenatal, birth and 0-5 years): children under 5 years in targeted areas have improved access to quality care, protection and development opportunities in their home, care and preschool environments;

(b) Children in middle childhood (5-9 years): girls and boys of primary-school age realize their rights to good health and to appropriate cognitive and physical development supported by appropriate care, development and learning services;

(c) Adolescents (10-19 years): adolescents receive quality education, have access to adolescent-sensitive and protective services and reliable information; essential interventions to empower them to make informed decisions about their lives, realize their full potential for social and economic participation and maximize over time their contribution to sustainable development.

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<sup>14</sup> Noble DJ, Blight S, Fajth G, et al. *Cognitive capital for children in Asia and Pacific*. BMJ Global Health 2016; 1(Suppl2). [http://gh.bmj.com/content/bmjgh/1/Suppl\\_2/i1.full.pdf](http://gh.bmj.com/content/bmjgh/1/Suppl_2/i1.full.pdf).

These interrelated programme outcomes will be supported by an overarching outcome: social policy and child rights monitoring focused on advocating for children's rights, increasing evidence in support of investments in children, strengthening social protection and enhancing the capacity of national and decentralized structures to advance the realization of children's rights and its awareness.

22. UNICEF will support national capacity-enhancement in resilient social services as Sri Lanka begins its transition to upper-middle-income status. While the country continues to face inequalities in development outcomes and/or humanitarian challenges. UNICEF will support the Government to integrate cross-sectoral child-centred risk-reduction strategies into policies and programmes.

23. The programming incorporates actions to support the Government to enhance social protection and to better integrate conflict sensitivity and peacebuilding into development and humanitarian policy and programmes. As part of the reconciliation and resettlement programme, internally displaced and returned refugee children and families, particularly those who may lack personal identification documents or national IDs are included in vulnerability assessments and eligibility criteria for services. A gender lens has been applied throughout the programme, with a special focus on gender-based violence and identifying and addressing the bottlenecks in achieving gender equality in both regular and emergency settings, in line with the draft UNICEF Gender Action Plan, 2018-2021. The programme prioritizes support to monitoring systems to ensure the systematic collection and use of disaggregated data and analysis, with an emphasis on the most vulnerable children.

24. The prioritization of specific geographical locations is based on evidence and analysis that identify disparities in progress against child development indicators, particularly in the high burden focus areas of: the Northern and Eastern provinces, the estate sector and children at particular risk due to displacement and other humanitarian situations. These factors vary between programme components and a differentiated approach is adopted.

25. The country programme is implemented through five interrelated outcomes and aligns with the draft UNICEF Strategic Plan, 2018-2021 and the UNSDF for Sri Lanka 2018-2022. Consistent with the Strategic Plan, 2018-2021, strategic emphasis will be given to the following intervention strategies across all programme components: (a) strengthening systems to improve the delivery of essential services to the most disadvantaged children and promoting demand for services and social norms ; (b) leveraging resources for children, including by influencing the domestic planning, financing and delivery of services for children; and (c) supporting children and adolescents as agents of change. This mix of strategies is aimed at ensuring a balance between upstream and downstream work against the background of the transition of Sri Lanka towards upper-middle-income status. It also reflects a lesson learned from past cooperation on the need to strengthen policy and advocacy to foster government ownership and sustainability, while maintaining a presence in service delivery and demand generation.

### **Programme component 1. Early childhood**

26. The programme component addresses the unfinished agenda of Millennium Development Goals 1, 4 and 5 and the corresponding Sustainable Development Goals, national and UNICEF Strategic Plan priorities by: (a) reducing neonatal mortality and morbidity; (b) addressing childhood undernutrition; (c) increasing access to comprehensive, quality early learning, care and development services; (d) improving coordinated and

centralized child-protection services to identify, record and refer child-abuse cases to relevant care services; and (e) supporting efforts to create and sustain timely national action on the early identification of disabilities and providing intervention services.

27. The priority strategies and results are the following:

(a) Support systems-strengthening to improve the quality of intrapartum care and special newborn care to prevent or reduce preterm birth, still births, asphyxia deaths and long-term morbidity according to the Every Newborn Action Plan. Interventions include: promoting the mainstreaming of the practices of the Early Childhood Care and Development Programme, using the 1,000-day approach to good nutrition during pregnancy; early detection; increasing interventions covering children with disabilities; early stimulation of children below the age of two years for cognitive development; tackling malnutrition, including micronutrient supplementation; and family and community support. The prevention of mother-to-child transmission interventions also ensure high coverage for the testing and treatment of pregnant women and that the validation of the elimination of HIV and congenital syphilis nationally is achieved. Additionally, UNICEF advocates for child-friendly and safely managed water and sanitation, including for hygiene at both the institutional and household levels through the improvement of the public health care system and preschools;

(b) Contribute to further strengthening the national child-protection system to ensure holistic and comprehensive services to prevent and respond to abuse, neglect and violence against young children. Interventions include: support the modelling of central child-protection mechanisms to identify, record, report, refer and monitor cases of children at risk of or victims of abuse; build the capacity of actors, improving functions and resources of the child-protection system in target districts; support the development and implementation of the national alternative care policy; mitigate the unnecessary institutionalization of young children, including children with disabilities; develop and model community services for children separated from families or at risk of separation; and advocate for the reform of the existing system of long-term residential care through partnerships and advocacy on deinstitutionalization;

(c) Support national and subnational government authorities to provide comprehensive and appropriate early learning and school readiness services. Interventions include: strengthening the capacity of parents, caregivers and preschool teachers to provide a nurturing, safe, and positive emotional environment; identifying gaps in preschool curricula and learning materials according to global Early Childhood Care and Development Programme standards and develop and pilot new guidelines and materials, including supplementary learning materials for children with disabilities, in the targeted districts; and advocating for an increase in public investments in early childhood development, which continue to be low.

## **Programme component 2. Middle childhood**

28. The programme component is aimed at ensuring that children aged 5 to 9 years, especially the most deprived, benefit from healthy, nurturing, protective environments and live free from violence. This is critically underpinned by ensuring access to equitable and appropriate care, development and learning services.

29. The priority strategies and results are the following:

(a) Support the Government to leverage efforts to strengthen service-delivery systems to provide quality healthcare, water, sanitation and hygiene (WASH) and nutrition interventions for children aged 5 to 9 years. Key interventions include: increasing skilled human resources in school; strengthening institutional care settings; and increasing the capacity to address WASH, nutrition and health issues. This needs to be strongly backed up with clear guidance and technical advisory support and an accountable governance system at the national and provincial levels. Additionally, a safe environment must be ensured for children to participate and contribute ideas for inclusive development;

(b) Support holistic and child-centred learning and development in primary schools. UNICEF will work with education stakeholders in developing and applying policies, strategies and budgets that are equity-focused and evidence-grounded in areas such as quality of teaching and learning, gender, language in education, and sexuality and life-skills education. The results will be improved learning outcomes and increased skills development for all children;

(c) Accelerate national action to address violence against and the abuse of children. Interventions will include support the establishment of a national coalition of broad-based stakeholders to generate greater awareness about violence against children and its impact on children and communities; building resilience among children to prevent abuse and violence; and improving the skills, knowledge, attitudes and behaviour of parents and community members and generating demand for services.

### **Programme component 3. Adolescence**

30. The programme component is aimed at ensuring that adolescents - especially the most deprived - use high-quality basic social services in a safe, supportive and protective environment and will be active agents of behavioural and social change. It will focus on keeping adolescents in school, improving their health and well-being, protecting them from harmful practices and increasing their resilience and participation and contribution to a more cohesive and peaceful society.

31. The priority strategies and results are the following:

(a) Leverage investments to improve access to adolescent-sensitive health services and psychological counselling in public health facilities; reproductive health and hygiene education in schools; non-formal education and vocational training; and life-skills education. Interventions will include modelling to scale up a comprehensive package of adolescent- and gender-sensitive social services to advocate for the investments needed to ensure the rights of adolescents in both development and humanitarian settings;

(b) Contribute to efforts to revise the national legislative and policy framework; advocate for increased investment in the justice system to improve the capacity for timely, quality and effective services for children and adolescents; and work with all stakeholders to improve equitable access to justice for children;

(c) Strengthen efforts to integrate peacebuilding and social cohesion in primary and secondary schools through further technical support for a new curriculum and support innovative extracurricular platforms, both traditional and digital. Emphasis will be on ensuring that adolescents lead, participate and reflect upon their own learning and have the requisite critical thinking skills and confidence to do so.

#### **Programme component 4: Social policy and child-rights monitoring**

32. The programme component is aimed at developing policies that address the structural causes of inequities to advance the realization and create awareness of adolescent and children's rights. It will focus on advocating for children's rights; increasing resources for investments in children; strengthening social protections; and enhancing the capacity of national and decentralized structures in order to advance the accountability for, and the sustainability of, realized children's rights.

33. The programme component is well aligned with all of the Sustainable Development Goals, and is specifically relevant to Goal 1, on poverty; Goal 5, on gender equality; Goal 10, on reducing inequalities; Goal 13, on climate action; Goal 16, on peace, justice and strong institutions; and Goal 17, on partnerships, as well as with the long-term global commitments of both the Government and UNICEF, other key national priorities and the forthcoming UNSDF.

34. The priority results and strategies are the following:

(a) Contribute to developing and strengthening a national child-rights monitoring system, which operates across sectoral ministries, at both the national and subnational levels, and civil society; establishing an independent monitoring and accountability system; and monitoring the multidimensional poverty focused on children;

(b) Strengthen the capacity of the Government to develop, manage and use monitoring and evaluation systems in addressing the situation of children, especially aged 0 to 5 years and adolescents;

(c) Enhance the Government's abilities to systematically provide inclusive and integrated social programmes and protection. by building the capacity of ministries to effectively design, implement and monitor existing cash-transfer schemes to cover all children;

(d) Improve evidence, capacity and systems for equity-sensitive planning, budgeting and evaluating by bolstering strategic partnerships with civil society, including academia, for evidence-generation and policy advice. As disparities in and low levels of learning achievement have an impact on the transition rates of pupils from primary to secondary education, contribute to the monitoring of the transition rates.

#### **Programme component 5: Programme effectiveness**

35. The programme component ensures that the country programme is efficiently designed, monitored, managed and evaluated to meet quality standards in achieving demonstrable results for children. It includes cross-sectoral support to emergency preparedness and response; disaster risk reduction; advocacy, communications and partnerships; planning, monitoring and evaluation; and supply, logistics and other operational support. The component also facilitates the field presence of UNICEF, enhancing the effectiveness of programmes at the provincial and national levels and promoting engagement with local government and civil society organizations (CSOs).

## Summary budget table

<i>Programme component</i>	<i>(In thousands of United States dollars)</i>		
	<i>Regular resources</i>	<i>Other resources</i>	<i>Total</i>
Early childhood	1 072	15 571	16 643
Middle childhood	411	10 617	11 028
Adolescence	411	13 596	14 007
Social policy and child-rights monitoring	1 323	6 677	8 000
Programme effectiveness	1 518	6 039	7 557
<b>Total</b>	<b>4 735</b>	<b>52 500</b>	<b>57 235</b>

## Programme and risk management

36. The Ministry of Foreign Affairs and the Ministry of National Policies and Economic Affairs, the main coordinating bodies providing strategic direction for government cooperation with UNICEF, continue to be the overall counterpart for the country programme. Programme components and outcomes will be managed with relevant ministries, governmental agencies and coordinating bodies in collaboration with CSOs.

37. The main threats to country programme implementation include the pace of reform; uncertainties relating to social coherence and reconciliation; inequities that make children particularly vulnerable and leaves them behind; persistent institutional bottlenecks in the implementation of policies; and an increase in the intensity and frequency of natural disasters which exceed existing response and resilience capacities. As a mitigation strategy, UNICEF will prioritize institutional capacity-building, strengthen communication and evidence-based advocacy with all stakeholders, support the Government in risk-informed programming and regularly assess and monitor disaster risks. Programme implementation risks related to fund transfers and activity implementation will be monitored through regular updates of risk-management tools, performance reviews of office management practices and standards, and the implementation of the harmonized approach to cash transfers.

38. UNICEF will continue to monitor the effectiveness of governance and management systems, the stewardship of financial resources and management of human resources.

39. Bilateral and multilateral donors, global and country-level partnerships, international foundations, the private sector and UNICEF National Committees will be engaged with evidence to leverage resources.

40. This CPD outlines the UNICEF contributions to national results and serves as the primary unit of accountability to the Executive Board for results alignment and resources assigned to the programme at the country level. Accountabilities of managers at all levels with respect to country programmes are prescribed in the organization's policies and procedures.

## **Monitoring and evaluation**

41. The results and resources framework is the basis for monitoring and evaluation. The Integrated Monitoring and Evaluation Plan, complemented by a costed evaluation plan, define priority monitoring, research and evaluation activities. Significant knowledge will be produced from planned evaluations including: (a) multilevel pedagogy; (b) early learning and school readiness; (c) violence against children; and (d) monitoring of the nutrition status of women and children.

42. UNICEF monitors results through the UNSDF, annual management plans, section work plans and internal and peer reviews with implementing partners to manage key strategic, programmatic results, operational and financial risks and to define risk-control and mitigation measures. Field visits and localized surveys using innovative approaches complement the review and information system data.

43. The strengthening of national and sub-national data systems, disaggregated to show inequities and gender differences, particularly in relation to monitoring of progress towards Sustainable Development Goal indicators, is a key element under the social policy and child-rights monitoring programme component.

44. In coordination with the Government, UNICEF will conduct both midterm and final country programme reviews and contributes to the midterm and final UNSDF reviews. An agile management approach facilitates real-time strategic shifts that keep pace with the evolving programme environment at the provincial, regional and national levels.

## Annex

### Results and resources framework

#### Government of Sri Lanka – UNICEF country programme of cooperation, 2018-2022

**Convention on the Rights of the Child:** (relevant articles) Outcome 1: 6 and 24; Outcome 2: 6 and 24; Outcome 3: 28 and 29; Outcome 4: 9, 19, 25 and 40; Outcome 5: 4, 7, 23 and 26

**National priorities:** Public Investment Programme 2017-2020, Peacebuilding Priority Plan 2016-2018

**UNDAF outcomes involving UNICEF:**

UNSD Driver 1 - Towards improved data, knowledge management and evidence based policy; 2 - Strengthened, innovative public institutions and engagement toward a lasting peace; 3 - Human security and socio economic resilience; 4 - Enhancing resilience to climate change and disasters and strengthening environmental management.

**Outcome indicators measuring change that includes UNICEF contribution:** 1.2, 1.3, 2.4, 3.1, 3.2, 3.3, 4.1

**Related draft UNICEF Strategic Plan, 2018-2021<sup>1</sup> outcome(s):** Outcome 1: Goal Area 1 - Every child survives and thrives; Outcome 2: Goal Area 4 - Every child lives in a safe and clean environment; Outcome 3: Goal Area 2 - Every child learns; Outcome 4: Goal Area 3 - Every child is protected from violence and exploitation; Outcome 5: Goal Area 5 - Every child has an equitable chance in life

UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
					RR	OR	Total
By 2022, children under 5 years in targeted areas benefit from improved access to quality health care, nutrition, protection and development opportunities in their home, care and preschool environments.	Neonatal mortality rate B: 6.2 per 1,000 live births T: 5.2 per 1,000 live births	Family Health Bureau/Report	1. By 2022, the health and nutrition service-delivery systems provide quality health care, WASH and nutrition interventions for pregnant women and children under 5 years from the most vulnerable families.  2. By 2022, a coordinated child-protection system, including an alternative care system, prevents and responds to violence against	Ministries of Health, Nutrition and Indigenous Medicine; Women and Child Affairs; City Planning and Water Supply; Education, National Nutrition Secretariat, provincial ministries/departments, professional organizations, academia and think	1 072	15 571	16 643
	Percentage of children under five years of age who are stunted (moderate and severe) B: 10.5% T: 8%	Family Health Bureau/Report					
	Number of children (0-5)	Report of the					

<sup>1</sup> The final version will be presented to the UNICEF Executive Board for approval at its second regular session of 2017.

UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
					RR	OR	Total
	<p>years) living in residential care</p> <p>B: Approx. 14,500 children (2016) T: Approx. 11,600 (20% reduction)</p>	Department of Probation and Child Care Services/Ministry of Women and Child Affairs	<p>and the abuse and neglect of children in home, care and preschool environments.</p> <p>3. By 2022, national and subnational government authorities enable comprehensive and developmentally appropriate early learning and school readiness.</p>	<p>tanks, national/international non-governmental organizations (NGOs), CSOs; private sector and United Nations agencies</p>			
	<p>Participation rate in organized learning one year before the official primary school age entrance</p> <p>B: 75% (4 years) T: 80%</p>	Household Income and Expenditure Survey (HIES)					
By 2022, children (5-9 years) especially the most deprived, benefit from healthy, nurturing, protective environments and live free from violence.	<p>Percentage of children (5-9 years) who are stunted (moderate and severe) (estimates are taken at 5 and 9 years only)</p> <p>B: 5 years: 7.9%; 9 years: 6.5% T: 5 years: 6.0%; 9 years: 5.5%</p>	Family Health Bureau/Report	<p>1. By 2022, health and nutrition service-delivery systems provide quality health care, WASH and nutrition interventions for children (5-9 years), especially the most deprived.</p> <p>2. By 2022, children and families have the capacity to prevent violence and abuse in home and school settings.</p> <p>3. By 2022, the education system provides holistic and child-centred learning and development in primary schools.</p>	<p>Ministries of Women and Child Affairs; Social Welfare; Justice; Education; Health; City Planning and Water Supply, National Nutrition Secretariat, provincial ministries/departments, professional organizations, academia and think tanks, national/international NGOs and CSOs, private sector and United Nations agencies</p>	411	10 617	11 028
	<p>Percentage of girls and boys (1-14 years) who have experienced violent disciplinary practices by an adult member of the household during the past month</p> <p>B: TBD (through a final knowledge, attitude and practice survey to be conducted in 2017) T: 25% increase (based on final KAP survey in 2021)</p>	Baseline and KAP survey reports					

UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
					RR	OR	Total
	<p>Percentage of students obtained mark of 70 and above in the grade 5 scholarship examination in targeted provinces (disaggregated by sex)</p> <p>B: 2016 East: 62% North: 79.5% Uva: 83.4% Central: 73.1% T: 5% point increase in each province</p>	Ministry of Education/Examinations Department					
By 2022, adolescents, especially the most deprived, live free from violence, have the capability to reach their full potential and contribute to a cohesive and resilient society.	<p>Teenage pregnancy rate by age (10-14 years; 15-19 years)</p> <p>B: 4.9% T: 3.9%</p>	Family Health Bureau/Report	<p>1. By 2022, the health and nutrition service-delivery systems provide quality health care, nutrition and WASH interventions for adolescents, especially the most deprived.</p> <p>2. By 2022, the justice for children mechanisms offer timely, quality and comprehensive justice services for all adolescents, including the most deprived.</p> <p>3. The education system is strengthened to promote peace, reconciliation and resilience among adolescents.</p>	<p>Ministries of Women and Child Affairs; Health; Justice; Ministries of Law and Order; Education; Youth Affairs; Mass Media; Finance; National Policies and Economic Affairs; Social Integration and Reconciliation; and City Planning and Water Supply, Attorney General's Department, National Youth Services Council, Parliamentary Caucus for Children, Secretariat for Coordination of Reconciliation Mechanisms, provincial ministries/departments, professional</p>	411	13 596	14 007
	<p>Average time taken for legal trial related to children cases reduced to one year</p> <p>B: Current average time: more than five years T: Within one year</p>	<p>Reports of Attorney General Departments</p> <p>Reports of the National Child Protection Authority</p>					
	<p>Net enrolment rates in secondary education for children (15-16 years)</p> <p>B: National: 86% (HIES 2012/13) T: 90%</p>	HIES					

UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
					RR	OR	Total
				organizations, academia and think tanks national/international NGOs and CSOs, private sector and United Nations agencies			
By 2022, children and adolescents in Sri Lanka, including the most deprived, have their human rights protected and benefit from an effective child-sensitive social-protection system.	Number of children covered by social-protection systems B: 2.9 million T: 3.045 million (5% increase)	Ministry of Social Empowerment and Welfare reports	1. National and subnational Government and civil society advance and monitor child rights for the most-deprived children Government monitoring and evaluation and information-management systems progressively generate and use evidence to address the situation of children in Sri Lanka.  2. Social-sector ministries and subnational governments have the capacity to develop and implement child-responsive budgets.  3. The Government has the capacity to provide efficient and effective social protection services to the most-deprived children	Ministries of Finance; National Policies and Economic Affairs; Health and Indigenous Medicine; City Planning and Water Supply; Education; Women and Child Affairs, Nutrition Secretariat, National Youth Services Council (NYSC), provincial ministries/departments, professional organizations, academia and think tanks, national/international NGOs and CSOs, private sector, World Bank and United Nations agencies	1 323	6 677	8 000
	Per capita social spending on basic services (education and health) B: 19,212 LKR/per capita T: 20,172 LKR/per capita (5% increase)	Central Bank report					
Country programme is effectively and efficiently designed, coordinated, managed and supported to meet quality programming standards in achieving results for children.	Number of dimensions, in which the Sri Lanka country office is among the 20 top performers within the South Asia region (quality assurance; financial, people, and partnership management; programme performance)	Insight Scorecard	1. Programme coordination: UNICEF staff and partners are provided the guidance, tools and resources to effectively design and manage the country programme and its components.  2. External relations: UNICEF staff and partners are provided	ROSA, Sri Lanka country office staff, Department of Communication, Public Fundraising and Partnerships Division; Government and	1 518	6 039	7 557

<i>UNICEF outcomes</i>	<i>Key progress indicators, baselines (B) and targets (T)</i>	<i>Means of verification</i>	<i>Indicative country programme outputs</i>	<i>Major partners, partnership frameworks</i>	<i>Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)</i>		
					<i>RR</i>	<i>OR</i>	<i>Total</i>
	B: 4/5 T: 5/5, yearly		<p>the tools, guidance and resources for effective communication on child-rights issues with stakeholders.</p> <p>3. Programme planning, coordination, monitoring and evaluation: UNICEF staff and partners are provided the guidance, tools and resources to effectively plan, monitor and evaluate programmes with a focus on the cross-cutting issues of gender equality, climate change/disaster risk reduction; disability; and conflict sensitivity.</p> <p>4. Communication, advocacy and partnerships: UNICEF staff and partners are provided the tools, guidance and resources for effective communication on child-rights issues with stakeholders.</p>	NGO partners			
<b>Total resources</b>					<b>4 735</b>	<b>52 500</b>	<b>57 235</b>