### General comments

The Commission welcomes the draft country programme for Ethiopia and appreciates the consultation exercise. The priority areas of the programme remain relevant in the Ethiopian context and in line with the comparative advantage of the organisation. We trust that the multisectoral, integrated, and comprehensive programme will contribute to progress towards the achievement of the child related Sustainable Development Goals in the country.

Ethiopia is likely to be strongly affected by the direct and indirect effects of the Covid-19 pandemic (i.e. pressure on the health system, widening fiscal gap, decline in exports, inflows of remittances and foreign direct investments). According to IMF estimates, the growth of the Ethiopian economy for the 2019/2020 fiscal year will drop from 9% to 3.2%. These unexpected circumstances put at risks some of the social and economic progress and reforms that Ethiopia has achieved in the last years and makes development and humanitarian partners’ support even more important.

We understand that the draft programme was elaborated before the outbreak of the crisis and would welcome that the final version reflects how UNICEF intends to adapt its activities to address the new challenges.

Indeed, the CPD was prepared ahead of the COVID-19. However, UNICEF Ethiopia has developed a full COVID response plan which is being incorporated in our Humanitarian Action for Children for 2020, which is out of the CPD, but closely related to it.

There are several elements of the programme which aim at systems strengthening across the health, education and WASH sectors and all those elements/actions contribute to building resilience in the system to be able to deal with shocks such as covid-19.

We have also inserted reference to Covid-19 in the updated version of the CPD.

In the meantime, UNICEF Ethiopia is also currently undertaking a reprogramming exercise in close coordination with the Government and donors.

From a humanitarian perspective, we regret that the document does not reflect the ongoing critical Humanitarian needs in Ethiopia requiring consistent and effective surveillance, response and follow up. Moreover, the
document does not include elements on the operationalization and especially on the past and current context specific challenges and lessons learnt, namely coordination/collaboration with WFP, humanitarian access to IDP’s, timely rapid emergency response, etc.

UNICEF is a key and lead sectorial agency with experience and capacity – recommended to be further extended particularly at regional level- to ‘stay and deliver’ and ensure ‘last resort’ principled response in times of acute crisis. Recent years in Ethiopia have demonstrated the necessity to prepare, maintain and secure rapid response capacity for the sectors under UNICEF mandate. Partial or periodic state responsibilities failures would require UNICEF to have anticipated – and budgeted – potential expansion in emergency responses.

UNICEF Country Program Document (CPD) makes clear reference to the humanitarian situations in country and has mainstreamed the humanitarian response across outputs as well as in the results framework. However, as the Other Resources Emergency (ORE) are not reflected in the CPD as per UNICEF global guidance, the core of our humanitarian response is instead reflected in the 2020 Humanitarian Response Plan (HRP) which is a document developed under the guidance of OCHA and in the 2020 Humanitarian Action for Children (HAC) which is UNICEF specific document. Detailed Humanitarian preparedness and response strategies and actions are reflected in those two documents as well as in the UNICEF Emergency Preparedness Platform (EPP) – updated at least once a year.

The EU may be glad to hear that UNICEF has developed a Joint Plan of Action with WFP which is about to be launched and shared with donors and partners. The plan aims at prevention of wasting which is a critical area of work in Ethiopia.

We recommend that the CPD further integrates risks and assumptions potentially affecting its flagship programs, particularly security deterioration impacting any sustained delivery of proposed support.

UNICEF has indeed referred to ethnic tensions, insecurity and conflict in its Situation Analysis, which accompanies the CPD. As a complementary analytical piece, UNICEF has also just finalized (in mid-April 2020 and therefore after the CPD submission) a full social cohesion study. Such in depth analysis will be important in our programme work.

Finally, the Commission shares the analysis that children on the move –as refugees, returning migrants, or internally displaced persons- are at greater risk of violence and exploitation; and would welcome that their rights and needs are taken into account more explicitly in each of the country programme priorities.

Children on the move has been explicitly mainstreamed across sectoral programmes and we have a dedicated position reporting to the Deputy Representative Programmes to address refugees/migrants/returnees issues as well as a whole Field Operations and Emergency Team addressing the related IDP issues. This has been put in place in order to ensure a multi-sectoral, holistic and integrated approach to all children on the move and the appropriate linkages between humanitarian action and development.
Children on the move is referred to in the CPD narrative in the Programme Rationale, as well as under the child protection and education outcomes. There are also some dedicated indicators in the expanded results framework such as “Number of children on the move who receive protective services through UNICEF-supported programmes”.

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<th>Comments on specific aspects of the country programme document</th>
<th><strong>Health</strong></th>
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<td>Health is a focal area of EU development cooperation in Ethiopia. Despite the decline in infant and child mortality, we share the concern about the limited improvement in neonatal mortality and the high levels of maternal mortality. The EU Health Sector budget support programme will continue supporting the Ethiopia’s Health Transformation Plan for improved quality of health care, reduced inequity in health service delivery, increased domestic financing and sector governance. Special attention is paid to indicators related to the deployment of skilled birth attendant in narrowing the gap between the bottom 10% woredas and the national average, Ante-natal care 4 visits coverage, number of hospitals equipped with level 3 NICU, overall increase of health expenditure, etc. We welcome continued collaboration with UNICEF in our policy dialogue with the Government in these areas. Ethiopia is one of Africa’s most advanced country in its engagement to fight undernutrition and the integration of wasting treatment in the health system. This integration is one of the main recommendations of the GAP 2020 for improved treatment of wasting. Yet there is no reflection of this integration in the country program (i.e. mention of wasting identification and treatment in the paragraph dedicated to health, or mention of the fact that wasting is de facto integrated in health facilities and already at scale in the nutrition paragraph). Although it is understood that these sectors are distinct and have specific roles and priorities within UNICEF country program, we think this document is also an opportunity to highlight existing achievements and UNICEF’s will to encourage further efforts on integration.</td>
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<td>Point well noted. Indeed, the strong linkages between health and nutrition is a strategic priority of the Ethiopia CPD, whether by incorporating nutrition matters in health facilities or in the work of health extension workers. It is however noted that nutrition is beyond health and includes several sectors, including for example agriculture, water, sanitation and hygiene, education and industry. Hence the need to go beyond health only when we talk nutrition.</td>
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| Nutrition |
| UNICEF remains a key partner supporting the Government of Ethiopia in the definition of actions and interventions linked to nutrition (from the development of data collection systems, defining content for nutrition packages provided by Health Extension Workers for Infant and Young Children and developing the training packages). We recommend however to be very vigilant not to substitute national systems (ie taking a step back in training aspects in order to establish a feasible long term approach). We appreciate the collaboration with UNICEF in this area and look forward to the upcoming EU-Unicef partnership (including also the private sector) on food fortification and the provision of nutrition sensitive support to children and pregnant mothers. |
In the document, the nutrition paragraph appears a bit as a mix bag, where wasting, stunting, micronutrients deficiencies/treatment and prevention are mentioned or referred to in the same paragraph. We would like to see more clearly what are the main priorities and what overall strategies will be applied to tackle them.

We would also expect to see mentioned the specific current challenges faced in the sector in Ethiopia, mainly: identification and treatment of wasting in infants (<6 months), challenges in the integration of MAM (in collaboration with WFP), challenges in discrepancy between surveillance data (W/H) and admission criteria (MUAC), advocacy for screening by community members.

The key strategy of the country programme is around systems strengthening across the various sectors. Output 4 of the Nutrition Programme (see below for each output) is fully dedicated to system strengthening including coordination.

The Nutrition priorities of the CPD are based on four (4) main distinct outputs, as shown below:

- **Output 1**: with focus on prevention of wasting and treatment of children with acute malnutrition services
- **Output 2**: with focus on increasing demand and access to improved nutrition for adolescents and pregnant/lactating women to prevent chronic malnutrition.
- **Output 3**: with focus on access to micronutrient programmes to prevent deficiencies
- **Output 4**: with focus on building capacity of national institutions to be able to implement the multisectoral policy on nutrition

The specific situation, bottlenecks to implementation and overall rationale of each of the output areas, as well as the theory of change and chosen strategies are fully developed and fleshed out in Programme Strategy Notes that are a detailed complement to the CPD. Due to word limits of the CPD, full detailed elaboration is accompanied through the Programme Strategy Notes.

**Water, Sanitation and Hygiene:**

Water, sanitation and hygiene is an area where the EU has been active (e.g. deep water drilling in arid areas with the cooperation of the EU’s Joint Research Centre). The provision of permanent water and sanitation in arid areas and poor suburbs will remain an objective of EU development cooperation in the coming years and we welcome cooperation with UNICEF in this field. Complementarity of the upcoming EU support in addressing Social Determinants of Health (SDH) for Gender Equality (in Ethiopia’s Developing Regional States) and UNICEF initiatives in WASH and Nutrition at sub-national level will be sought.

Well noted and will work with the EU in this direction.

We would recommend that the WASH in School indicator reflects the impact on the existing coverage the program would have (as other WASH related indicators do).

Point well taken. The expanded results framework (not included in the CPD but shared with and approved by the Government) envisages the following indicators:
Number of institutions with basic WASH services in the reporting year only, with UNICEF direct support.

Number of schools with Menstrual Hygiene Health Management implemented in schools programmes as a result of UNICEF direct support and/or leveraged through national programmes.

Number of institutions with basic water supply and sanitation services.

Learning and development:

The main focus seems to be on pre-primary education, which is in line with what the Government wants to achieve in this regard even though pre-primary education is still not compulsory in Ethiopia.

Pre-primary education is only one of three outputs of the Learning and Development strategy. The Government is looking in the upcoming Education Act at making mandatory at least one year of pre-primary education, as recently confirmed by the Ministry of Education. UNICEF is heavily involved in advocacy around this matter.

Out of school children remain an important target, through alternative education programmes. We encourage UNICEF to emphasize the need for these programmes to be fully accredited and certified by the government; and to define/name these programmes (catch-up, AEPs).

UNICEF flagship program “every child accessing learning opportunities” has indeed been designed in this sense, not to exclusively focus on formal schooling, hence the reference to “learning” instead of “school”. Paragraph 34 makes clear reference to alternative learning pathways and para 36 to alternative basic education centres.

The detailed Programme Strategy Note on education focuses on Alternative Basic Education for pastoralist areas; Child-to-Child; Speed-schools; as well as ICT based solutions, especially relevant in this COVID context and currently being developed with the Ministry of Education with special focus on radio and TV.

The importance given to lower-secondary education should be greater in this strategy; one the reason of drop-out at upper-primary level is possibly the lack of secondary education supply/opportunities, particularly in rural areas. UNICEF playing on both humanitarian and development side, it is expected that their support should be greater at that level.

UNICEF will not engage in large infrastructure efforts related to secondary education and high schools. We will continue to support school construction in the context of humanitarian action and refugee host communities settings, with focus also on enhancing WASH services in existing schools.

The Out of School Study which we are proposing, and which we hope the donors will strongly support, will identify more in detail the reasons for drop out and the barriers to the transition to secondary education, among other areas. This evidence will contribute to better targeting our advocacy.

Notwithstanding all the above, we would like to point out that our Program Strategy Note details out the following focus areas to counter adolescents’ drop out: (a) Strengthened gender clubs for adolescent girls; (b) addressing school related gender-based violence
with attention to girls; (c) integration of gender responsive pedagogy within teacher education system; and (d) by focusing on “every child learning”, the programme is also contributing to the flagship result of the CPD on “ending child marriage”.

Gender is well included in all the education components.

Although education in not currently a focal sector of EU development cooperation in Ethiopia, the EU contributes to the Global Partnership on Education and the Education Cannot Wait fund. The EU Delegation in Addis would welcome to be more regularly informed about progress of activities funded by these programmes at local level.

Well noted. UNICEF has a minor role on GPE with a specific grant of 140,000 USD for COVID-19 response. Most of the GPE-relevant discussions happen at the Education Technical Working Group, led by Ministry of Education with Finland and DFID as co-chairs. The Group is open to all those who wish to participate. The World Bank has a larger role to play in the GPE management.

In relation to Education Cannot Wait (ECW), EU’s membership to the Steering Committee would be a welcome move, noting that the decision will have to be made by the Ministry of Education as to membership of the Steering Committee. UNICEF will raise this matter with the Ministry.

Child protection

We welcome UNICEF’s work on addressing harmful norms and practices, violence against children, child marriage and FGM. We would like to flag that the EU will soon start the implementation of the programme ‘Social Determinants of Health for Gender Equality’ that will support the Government’s efforts to improve sexual and reproductive health services and to fight harmful traditional practices in the country’s Developing Regional States.

Well noted.