

Belarus

Country programme document 2011-2015

The draft country programme document for Belarus (E/ICEF/2010/P/L.3) was presented to the Executive Board for discussion and comments at its 2010 annual session (1-4 June 2010).

The document was subsequently revised, and this final version was approved at the 2010 second regular session of the Executive Board on 9 September 2010.

Basic data[†]
(2008, unless otherwise stated)

Child population (millions, under 18 years)	1.8
U5MR (per 1,000 live births)	13 ^a
Underweight (% , moderate and severe, 2005)	1 ^b
Maternal mortality ratio** (per 100,000 live births)	3 ^c
Primary school enrolment (% net, male/female, 2007)	90/89
Survival rate to last primary grade (% , 2006)	100
Use of improved drinking water sources (% , 2006)	100
Use of improved sanitation facilities (% , 2006)	93
Adult HIV prevalence rate (% , 2007)	0.2
Child labour (% , children 5-14 years old, 2005)	5
GNI per capita (US\$)	5 380
One-year-olds immunized with DPT3 (%)	97
One-year-olds immunized against measles (%)	99

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

^a Recent data available indicate that U5MR in 2007 was 7 per 1,000 live births. Source: “Children of the Republic of Belarus”, Statistical Book, 2008.

^b WHO child growth standard.

^c The 2005 estimate developed by WHO/UNICEF/UNFPA and the World Bank, adjusted for underreporting and misclassification of maternal deaths, is 18 per 100,000 live births. See http://www.childinfo.org/maternal_mortality.html.

Summary of the situation of children and women

1. Belarus is a middle-income country. Since 1996, it has experienced continuous and substantial economic growth with an annual average increase of 8 per cent in gross domestic product. Benefits from economic growth have been broadly shared with the population. According to national statistics, Belarus boasts one of the highest per capita income levels in the Commonwealth of Independent States, marked by an increase from \$2,780 in 2005 to \$5,380 in 2008.

2. In 2009, because of the impact of the global financial and economic crisis, the macroeconomic situation in Belarus has deteriorated. During 2009 consumer prices increased by 10.1 per cent. Lower growth rates of real incomes have been observed. While aiming at restoring macroeconomic stability in the long run, the Government has adopted a set of measures to minimize the immediate consequences of the crisis. The State budget has remained socially oriented, channelling 66.7 per cent of expenditures to social sectors. This has helped to ensure a high level of social protection and access to health, education and other social services.

3. In general, Belarus has already achieved almost all Millennium Development Goals. The under-five mortality rate fell from 9.3 deaths per 1,000 live births in 2005 to 7.0 in 2007. Similar trends have been noted with infant and maternal mortality. In 2008, the infant mortality rate was 4.5 deaths per 1,000 live births, down from 7.1 in 2005. In 2008, the maternal mortality ratio was 3 per 100,000 live births, compared to 9.9 in 2005.

4. Belarus has also achieved the Millennium Development Goal to eradicate extreme poverty and hunger. The poverty level of households with children decreased significantly, from 47.8 per cent in 2000 to 8.6 per cent in 2008. Despite progress, there are population groups highly vulnerable to poverty, including families with three or more children, single-parent households or low-income households, as well as families with disabled people on social pensions. The risk of being poor increases with the number of children a family has, rising moderately up to two children but steeply thereafter. In 2008, the proportion of families with one child living under the poverty line was 4.9 per cent, and with three or more children 32.8 per cent.

5. In recent years, Belarus has made significant progress in improving child well-being. For example, in 2009, 79.1 per cent of children under six years of age were enrolled in preschools, including 91.4 per cent of children 3-6 years of age and 100 per cent of children five years of age. Nevertheless, more measures have to be taken to improve the economic conditions of families with children; to ensure the good health status of children, young people and pregnant women; to prevent the spread of HIV, alcohol abuse and drug addiction; to strengthen family relationships; and to enhance parental responsibility for children's upbringing, prevent social orphanage and prevent children from becoming in conflict with the law.

6. Negative trends in youth health are observed despite the concerted efforts of the Government to maintain the high level of the health care system. In 2008, 21.7 per cent of adolescents had chronic diseases and disabilities. Comprehensive measures on prevention of smoking, alcohol consumption and drug use by adolescents are important for maintaining of their health and development.

7. As of January 2010, the cumulative number of HIV cases had increased to 10,690. Young people are particularly vulnerable to the HIV epidemic, given that 66.8 per cent of those infected are aged 15-29. The spread of the HIV epidemic is characterized by a growing number of women who are HIV positive. By January 2010, 1,511 children had been born to mothers who were HIV positive, with 217 such children born in 2009 (compared with 159 in 2005). The mother-to-child transmission rate was reported to be 4.5 per cent in 2007, down from 8 per cent in 2005. Belarus is making concerted efforts to achieve Millennium Development Goal 6.

8. Due to focused interventions, child disability has decreased in the country. According to official statistics, 25,867 disabled children and some 120,000 children are in need of special education. Children with disabilities represent 35 per cent of all children living in institutions. In recent years, the trend has shifted away from placing children with disabilities in special boarding schools towards providing these children with integrated education. Assistance provided to families of children with disabilities includes early intervention services, day-care centres, a network of correctional and recuperative services, and rehabilitation and vocational training programmes.

9. As of January 2009, there were 27,738 orphans and children deprived of parental care. Out of these, 9,589 children (34.57 per cent) resided in 85 public residential care institutions, and 18,149 children (65.43 per cent) were in substitute family care, including guardianship, foster families, and family-type children's homes. However, as a result of focused policy, more children are being placed into family-based care, with the percentage having increased by 10 per cent from 2005 to

2008. During the past five years, the number of national adoptions has increased by 32 per cent.

10. Gender equality and women's empowerment have been addressed through the 3rd National Action Plan on Gender Equality for 2008-2010, the 2007-2010 national programme on Demographic Security and other measures taken by the Government. Belarus will continue work on the transformation of gender stereotypes.

11. Prevention and mitigation of the consequences of domestic violence need to be addressed. In 2009, about 43.5 per cent of victims of crime were women and 5.2 per cent were children.

12. While over last the five years the number of crimes committed by minors decreased by 34.5 per cent (from 9,096 in 2005 to 5,957 in 2008), a high level of crime recidivism points to the need for additional efforts to be made to support adolescents in conflict with the law so that they can receive individual rehabilitation and educational opportunities in their place of residence.

13. Belarus attaches high importance to the prevention and combating of trafficking in human beings. Recently, national normative and institutional mechanisms for combating trafficking were put in place. These include the 2006-2010 State programme on combating crime and the 2008-2010 State programme on combating human trafficking and irregular migration.

14. Belarus made significant rehabilitation efforts in the areas affected by the Chernobyl disaster. Nevertheless, the consequences of the disaster still require significant resources. As of January 2009, 256,617 children, or 14.4 per cent of the total child population in Belarus, were living in the affected areas, which are more ecologically and economically disadvantaged.

Key results and lessons learned from previous cooperation, 2006-2010

Key results achieved

15. Through technical assistance, modelling of good practices and capacity development, the programme contributed to the efforts of the Government to introduce an integrated approach to early identification of children with special needs and to the improved access of these children to quality health and social services. A network of early integration services now provides methodological and information assistance to specialists and parents, as well as training of specialists around the country.

16. The programme facilitated the efforts of the Government to improve the health of adolescents, and promote healthy lifestyles and safe behaviour of young people, through the development of life skills-based education, the peer education concept and improved methodologies in education. A network of the youth-friendly health centres (YFHCs) has been established in 10 regions. These YFHCs, together with those supported by the United Nations Population Fund (UNFPA), provide services to 15 per cent of adolescents at their place of residence. The centres have received strong support from local authorities, and are included in regional health plans and budgets.

17. The programme of cooperation assisted the Government in implementation of the adopted strategy for prevention of micronutrient deficiencies. Support ranged from strengthening the legislative framework and research to improving the monitoring system and increasing public awareness. As a result, Belarus is close to approaching the universal salt iodization/iodine deficiency disorders target recommended by the World Health Organization (WHO). The national median urinary iodine (UI) excretion has reached 171.1 mcg/L, compared with the WHO target of 100 mcg/L.

18. Some 20 per cent of people living with HIV/AIDS have improved access to psychosocial services in five epidemiologically disadvantaged regions. These efforts have mitigated the unfavourable social and psychological consequences for families with women and children who are HIV positive. The effectiveness of this work increased during the programme period due to United Nations inter-agency collaboration, cooperation with non-governmental organizations, and civil society involvement.

19. Improved national policies and legislation on de-institutionalization have been coupled with the enhancement of capacities of service providers on the use of referral mechanisms, interdisciplinary planning of interventions, the child environment assessment framework, individual protection plans for children, including those with disabilities, rehabilitation plans for families in crisis, and the prioritization of family placement over the institutionalization of the child.

20. Using DevInfo technology, a national database was developed: BelarusInfo. This database provides access to information on demographic and socio-economic indicators disaggregated by gender, and allows monitoring of the achievement of the Millennium Development Goals.

Lessons learned

21. Taking into account the adverse impact of the global economic and financial crisis, the new programme should pay greater attention to the use of cost-effective innovative models and documentation of good practices. Review of the country programme and discussions with the Government highlighted that UNICEF should place high emphasis on disseminating and sharing advanced international expertise and methodological approaches to assistance to Belarus.

22. Following the priority of the Government of taking programmes to greater scale, UNICEF focused on supporting national initiatives aimed at system changes, including social policy reform. In order to accomplish this goal, inter-agency cooperation has been strengthened to support the reform of social policy, the improvement of the quality of services for children and families, and the development of new services. The joint projects implemented together with other United Nations agencies allowed all partners to gain positive experience in consolidating financial, human and institutional resources as well as knowledge both at national and international levels.

23. The country-led evaluation and 2009 subregional consultation showed that childcare reform requires the development of quality standards for services and the clear division of roles and accountabilities among service providers. Measurable quality requirements for each type of service will ensure the uniform provision of services in urban and rural areas. A deinstitutionalization policy should envisage

close inter-agency collaboration. The policy should also emphasize standardized selection of foster families and substitute parents and their training and supervision, and the monitoring of the situation of children in substitute care. A formal procedure is also needed to assure closure and re-profiling of residential public care institutions.

The country programme, 2011-2015

Summary budget table

<i>Programme</i>	<i>(In thousands of United States dollars)</i>		
	<i>Regular resources</i>	<i>Other resources</i>	<i>Total</i>
Social policy for children	850	900	1 750
System-strengthening for child well-being	1 500	3 300	4 800
Cross-sectoral costs	1 400	—	1 400
Total	3 750	4 200	7 950

Preparation process

24. Preparation of the new programme started with 2008 midterm review coordinated by the Ministry of Foreign Affairs. Recommendations of the midterm review, as well as specific inputs from, and consultations with, the line Ministries helped to align the overall goal, strategic focus, priorities and expected results of the new country programme with the Belarus national development agenda in the spheres of motherhood and childhood and child rights protection. Also considered were recommendations of the annual review meeting of the ongoing country programme as well as the discussion of the new country programme for 2011-2015, which took place in January 2010.

Programme component results and strategies

25. The country programme aims to support national efforts in ensuring that all children and young people, particularly those who are in need of special protection, enjoy and exercise their rights to health, development and well-being. In support of national social development priorities, the country programme will contribute to the achievement of the following key results: (a) by the end of 2015, a comprehensive social policy securing child rights protection and monitoring is developed, resourced and implemented; and (b) by the end of 2015, an increased number of vulnerable children and families benefit from quality social services in education, health and protection.

26. Programme results will be achieved by the incorporation of a human rights-based approach, gender mainstreaming and communication for development in all aspects of programming, focusing on key factors having a major impact on child well-being. The programme will employ a combination of the following strategies: (a) modelling, testing and scaling up of innovative, cost-effective and evidence-based interventions in child well-being; (b) national capacity development through exposure to international expertise, knowledge and best practices; (c) building strong partnerships and new alliances between the central and local authorities, and

between these authorities and civil society, the media, the private sector and major development partners so as to broaden advocacy and policy dialogue around children's issues, to support efforts on fundraising, to promote innovative approaches, and to strengthen the programme complementarities; and (d) integration of ongoing emergency preparedness and response (man-made and natural disasters, and epidemics) into work on policy and system-strengthening.

27. The programme will be built upon the results achieved during the prior cycle and will be centred on sectors that bring together national priorities and commitments as well as areas of UNICEF comparative advantage, expertise and experience. Research activities, studies and evaluations will be initiated for generating knowledge on the situation of children, and on addressing gaps in information on emerging issues in order to provide evidence and support for national policymaking. Essential components of the new country programme will include the following: cross-country fertilization within and beyond Central and Eastern Europe and the Commonwealth of Independent States, effective follow-up on lessons learned, and an improved networking that will include an exchange of information, good practices and innovations.

Relationship to national priorities and the UNDAF

28. The country programme will be based on the national development priorities for 2005-2015. In programme planning, implementation and assessment, due consideration will be given to the following: the National Report on *A World Fit for Children +5*; the 3rd and 4th Joint National Report on the Implementation of the Convention on the Rights of the Child and reports on implementation of the Optional Protocols to the Convention, and forthcoming recommendations of the Committee on the Rights of the Child; the 7th Periodic Report on the Convention on the Elimination of All Forms of Discrimination against Women; and future recommendations of the Universal Periodic Review of the United Nations Council for Human Rights for Belarus.

29. The programme is firmly aligned with the United Nations Development Assistance Framework (UNDAF) for 2011-2015, which has mutually reinforcing outcomes and strategies. UNICEF will directly contribute to following UNDAF outcomes: the sustainability of the social and economic development is supported; people, especially vulnerable groups, are better protected from the risks detrimental to their health; and effectiveness of the national governance system is enhanced.

Relationship to international priorities

30. The principles of the Convention on the Rights of the Child and its Optional Protocols, the Millennium Declaration, the Millennium Development Goals, and the priorities of the UNICEF medium-term strategic plan (2006-2013) are integrated into the country programme, which has a strong focus on improvement of social policies for children and the child protection system, especially regarding vulnerable children. Special attention will be given to prevention of family breakdown, combating violence against children, support to children with disabilities, and support to children living in Chernobyl-affected areas, in accordance with the United Nations Action Plan on Chernobyl.

Programme components

31. The country programme comprises two mutually reinforcing components: social policy for children and system-strengthening for child well-being.

Social policy for children

32. The social policy for children component aims to assist the Government to improve regulatory frameworks and implementation guidelines mechanisms and increase the efficacy and efficiency of social policy. This component will be centred on child-focused planning, regulations regarding protection of children, knowledge management and State-led child rights monitoring. All activities will be based on strengthened partnerships for children.

33. The programme will contribute to the improvement of the national legal and normative frameworks on child protection and care. UNICEF will support the Government in developing national capacities and policies. Effective models of budgeting and costing of services will be used in the formulation of social sector development plans to ensure improved support and protection of children and families.

34. UNICEF will work with the Government and other partners concerned to address the institutional capacity gaps in analysing the impact of the global economic and financial crisis on vulnerable families with children, and to develop in cooperation with the World Bank measures for cushioning the social impact of the crisis. The social assistance package for families with children will be reviewed to ensure effective social protection.

35. The programme will support the efforts of the Government to strengthen reliable and disaggregated data collection and management and policy analysis for informed decision-making at central and local levels. A child well-being index will be introduced in close cooperation with the National Statistical Committee, the Ministry of Labour and Social Protection, and other line Ministries to ensure the multidimensional assessment of child well-being. Support will be provided for strengthening national monitoring and evaluation systems as well as for improvement of the quality assessment, focusing on the compliance of national strategies, policies and programmes for children and families with the Convention on the Rights of the Child.

System-strengthening for child well-being

36. This programme component aims to assist the Government in strengthening the social sector system so that improvements are made in access, quality and effectiveness of care and preventive and protection services for children, adolescents and women. Two key elements of this programme component are the health and development of children and adolescents, and child rights protection.

37. Early childhood development will be strengthened by the introduction of modern and innovative early childhood development (ECD) knowledge and practices, by improved counselling capacities of ECD professionals, by the integration of early childhood learning and development standards into the preschool system, and by a strengthened ECD quality monitoring system. Support will be provided to further expanding gender-sensitive “better parenting” programmes. The issues covered will include education and awareness-raising on

child morbidity and mortality from accidents, including road accidents, traumas and poisoning.

38. The programme will provide technical assistance to the strengthening of the national system of early childhood interventions and monitoring. The aim is ensure that children with special needs, and their families, have access to comprehensive quality health care, integrated education, psychological and social assistance, and counselling and training in their place of residence.

39. The programme will support the development and implementation of the national strategy on the health of children and adolescents, promoting enhancement of the national system on prevention of disability, morbidity and mortality in children and adolescents; improvement of the normative regulatory framework for youth-friendly health services; and strengthening of monitoring and evaluation. These efforts aim to secure the quality of services for prevention of HIV/sexually transmitted infections, smoking, and drug and alcohol abuse.

40. In the area of HIV/AIDS and children, the joint activity of UNICEF, the United Nations Development Programme (UNDP) and WHO will focus on maintaining the sustainability of the system for prevention of mother-to-child transmission; and on universal access to treatment, care, and social and psychological support to children and women who are living with HIV/AIDS, and their families.

41. In the area of de-institutionalization, the focus will be on the development and implementation of the national child protection standards system. Efforts will include (a) the development and implementation of standards on the identification of children in difficult circumstances; (b) interdisciplinary planning of interventions to assist these children; (c) the monitoring of procedures and indicators to evaluate the quality of interventions; (d) the development of standards on the closure, transformation or downsizing of residential care institutions; and (e) the further expansion of family-based alternatives. The aim is to decrease the number of children in institutions and prevent child abandonment.

42. The programme will support setting up institutional mechanisms and social programmes to address violence against children and women, child trafficking and the sexual and economic exploitation of children. Programme efforts will substantially contribute to the improvement of the data collection and advocacy for “zero tolerance” to violence.

43. The programme will continue to support the strengthening of institutional capacity as well as the professional capacity of those involved in the administration of juvenile justice, aiming to prevent children from becoming in conflict with the law and to support rehabilitation of minors in conflict with the law.

44. Regular resources will be used to further support: development of the national capacity for policy development and implementation, participatory monitoring and social mobilization, capacity development, technical expertise, innovations and modelling, strengthening coordination among programme areas, and key partnerships. Other resources will be mobilized for specific programmatic interventions.

45. Cross-sectoral costs cover cross-sectoral staff salaries as well as travel and training and will also include additional operational support for country office management and administration.

Major partnerships

46. Partnership, networking and alliance-building will be critical strategies for improved relevance, efficiency and proactive work. For high-level policy and other central-level initiatives, UNICEF will cooperate with the Ministries of Foreign Affairs, Education, Health, Labour and Social Protection, Justice, Interior, Emergency, Economy, and Finance; the Supreme Court; the General Prosecutor's Office; the National Statistical Committee and the National Commission on the Rights of the Child. UNICEF will also collaborate with Parliament on improvement of the legislative base and issues related to child rights monitoring and budgetary allocations for children.

47. At the subnational level, especially for the implementation of the local "child-friendly cities" initiative, UNICEF will collaborate with local authorities and civil society. Partnership with academic and research institutions will be expanded to develop knowledge and research tools. The alliances for children, civil society and the private sector will be involved in actions for children's rights.

48. Collaboration with United Nations agencies will continue to achieve the established UNDAF outcomes for 2011-2015. Partnership with UNDP will focus on mitigation of the consequences of the Chernobyl disaster, particularly on the improvement of people's lives in affected areas. UNICEF, in conjunction with UNDP, the International Organization for Migration, the Office of the United Nations High Commissioner for Refugees, and other United Nations agencies and international organizations, will continue to work on combating trafficking in human beings and provision of assistance to and protection of child victims of trafficking. UNICEF, in collaboration with UNFPA, and other United Nations agencies and international organizations will continue to work on counteracting domestic violence. Within the national social reform agenda, collaboration will be pursued with the European Union and World Bank.

Monitoring, evaluation and programme management

49. Major data gathering, review, analysis and knowledge management activities for each programme component will be consolidated in the framework of the multi-year Integrated Monitoring and Evaluation Plan, coordinated with national partners and the United Nations team through UNDAF. This will include evaluations and surveys, situation analysis of children, and midterm and annual reviews with partners.

50. The programme will support monitoring the implementation of the commitments under the Convention on the Rights of the Child. National statistics, TransMONEE and BelarusInfo will be used for data collection and reporting on progress towards achieving the Millennium Development Goals and national targets for children.

51. The key indicators to track progress and to measure the impact of the programme interventions on children will specifically reflect the quantitative and qualitative targets of the relevant programmes. Progress against the indicators will

be measured using data disaggregated by sex, location and socio-economic conditions. For indicators relating to law, strategy, action plans or standards, information will include the official documents issued by the Government, including its various institutions. The assessment of the impact of awareness campaigns and Communication for Development will be carried out through specific surveys and other evidence-generated sources. For indicators where no systematic data collection exists, the programme will use primary data collection.

52. In 2009, the UNICEF office in Belarus was upgraded to become a full-fledged country office. Therefore, UNICEF programme and operations structures in Belarus will be adjusted accordingly to meet criteria for programme management efficiency and control, and the expanded demands of the country programme. The Ministry of Foreign Affairs will coordinate the cooperation between UNICEF and national partners.
