

Dominican Republic

Country programme document 2012-2016

The draft country programme document for the Dominican Republic (E/ICEF/2011/P/L.41) was presented to the Executive Board for discussion and comments at its 2011 second regular session (12-15 September 2011).

The document was subsequently revised, and this final version was approved at the 2012 first regular session of the Executive Board on 10 February 2012.

Basic data[†]
(2009, unless otherwise stated)

Child population (millions, under 18 years)	3.8
U5MR (per 1,000 live births)	32
Underweight (per cent, moderate and severe, 2007) (per cent, urban/rural, poorest/richest)	7
Maternal mortality ratio (per 100,000 live births, 2008, adjusted)	100 ^a
Primary school enrolment (per cent, male/female, 2007)	87/90 ^b
Primary schoolchildren completing final primary grade (per cent 2007)	78
Use of improved drinking water sources (per cent, 2008)	86
Use of improved sanitation facilities (per cent, 2008)	83
Adult HIV prevalence rate (per cent)	0.9
Child work (per cent, children 5-14 years old, 2000)	10
Birth registration (per cent, under 5 years old) %, male/female, urban/rural, poorest/richest, 2006	78 82/70 59/97
GNI per capita (US\$)	4 530
One-year-olds immunized against DPT3 (per cent)	82
One-year-olds immunized against measles (per cent)	79

[†] More comprehensive country data on children and women is available at www.childinfo.org/.

^a 160 deaths per 100,000 live births is the 2007 estimate developed by the Infant Mortality Estimation Interagency Group (WHO, UNICEF, UNFPA and the World Bank, together with independent technical experts), adjusted for underreporting and misclassification of maternal deaths. For more information, see: http://www.childinfo.org/maternal_mortality.html.

^b Database.

The situation of children and women

1. The population of the Dominican Republic is 9.3 million,¹ of which 48 per cent is under 18 years of age.
2. The Dominican Republic has ratified a number of international treaties concerning children and its legal and institutional framework recognizes the obligation of the State to guarantee, respect and protect the rights of children and adolescents. Nevertheless, in 2008 the Committee on the Rights of the Child called upon the Government to amend its laws, regulations and practices in order clearly to prohibit all types of discrimination against children and to ensure full compliance in order to guarantee the right of all children to equal treatment.
3. Major institutional and political transformations since the late 1990s have strengthened the rule of law and democracy as the country's political model. Political and macroeconomic stability have been enhanced, thereby promoting increased economic growth over the past decade, with GDP currently at approximately 6 per cent.

¹ Preliminary figures from the ninth Population Census, 2010.

4. The Dominican Republic must take better advantage of the opportunities created by institutional transformation and growth in order to be in a position to strengthen sustainable human development, particularly as concerns children. Notwithstanding the progress achieved, inequalities persist and in some cases are increasing. Large numbers of children living in the *bateyes* (the communities originally concentrated in and around sugar plantations and mills), marginal urban areas and poor rural areas in the major provinces and along the border have yet to benefit. The human development index of the Dominican Republic is one of the ten lowest (0.663) in the region.²

5. The maternal mortality rate declined from 187 per 100,000 live births in 1991 to 159 in 2007.³ However, this figure is very high for a country where 95 per cent of pregnant women receive prenatal care and 98 per cent⁴ of births are attended by qualified personnel. Neonatal mortality, which accounts for some 70 per cent of infant deaths, has remained unchanged over the past 20 years. Both of the mortality rates resulted from preventable conditions. The lack of early diagnostic procedures to detect possible congenital malformations makes it difficult to design timely interventions to enable all children to thrive from birth. The 2006 National Household Survey reported that 4.5 per cent of children aged 2 to 9 have some form of disability. Global malnutrition is at 3.1 per cent nationwide, 10.5 per cent⁵ in border areas and 14 per cent among children born to Haitian mothers.⁶

6. Basic education, comprising eight grades, is nearly universal. Attendance increased from 80 per cent in the early 1990s to 92 per cent currently.⁷ However, 26 per cent of 5-year-olds do not attend preschool, which is compulsory.⁸ Forty-eight per cent of female children and 63 per cent of male children 13 to 17 years of age do not attend secondary school, a figure that increases in the border regions to 75 per cent and 85 per cent for females and males, respectively.⁹ The percentage of students who are older than the average is 12 per cent at the primary level and 21 per cent at the secondary level.¹⁰ Poverty, lack of birth certificates (which is compulsory for secondary-school registration), violence and pregnancy are factors that cause adolescents to leave school. Education quality is another challenge. In a regional assessment conducted in 2008 the Dominican Republic came in last in the areas of reading, mathematics and science (SERCE, 2008).¹¹ Such failings are the result of weaknesses in the education-system decentralization process and in the management capacity of regional and district bodies. Investment in education is barely 2.2 per cent of GDP,¹² whereas the General Education Law (Law 66-97) mandates 4 per cent.

² Human Development Report 2010, UNDP.

³ National Report on the Millennium Development Goals, 2010, Ministry of Economy, Planning and Development.

⁴ ENHOGAR 2006, National Statistical Office (ONE).

⁵ ENDESA, 2007.

⁶ *Política Social: Capacidades y Derechos* (Social Policy: Capacity and Rights), Ministry of Economy, Planning and Development, 2010.

⁷ ENHOGAR, National Statistical Office, 2006.

⁸ Cáceres and Morillo, *Situación de la Niñez en República Dominicana* (The Situation of Children in the Dominican Republic), 2008.

⁹ Ibid.

¹⁰ Ministry of Education (MINERD, 2009-2010).

¹¹ *Segundo Estudio Regional Comparativo y Explicativo* (Second Regional Comparative and Explanatory Study (SERCE)), UNESCO, 2008.

¹² Statistical Bulletin, Ministry of Education, 2010.

7. Violence against children occurs at home, school and in other settings. Corporal or psychological punishment is used to discipline children in 82 per cent of households.¹³ In 2009, the Human Rights Council recommended that the Government should “prohibit corporal punishment of children in all settings”. A study on commercial sexual exploitation¹⁴ revealed that only 3 per cent of the population considers perpetrators to be the responsible party, while 59 per cent blame the victim and the victim’s family, signalling a culture that legitimizes abuse and inadequately enforces legislation. A total of 20.8 per cent of the under-5 population is not officially registered in birth records and the figure rises to 41 per cent in the poorest quintile,¹⁵ leaving thousands of children facing life without an official identity or access to basic services. In 2008, the Committee on the Rights of the Child recommended that the Dominican Government should take steps to ensure that no children remained stateless.

8. The HIV/AIDS epidemic has tended to stabilize (0.8 per cent).¹⁶ However, owing to inadequate investment in preventive programmes the infection rate has remained elevated in high-risk groups, including drug users (8 per cent), men who have sexual relations with other men (6.1 per cent) and sex workers (4.5 per cent).¹⁷ The absence of effective prevention policies and programmes within and outside the education system leaves adolescents vulnerable to HIV infection. Only 14 per cent of pregnant women are screened for HIV; the prevalence of vertical transmission of HIV is high, at 10 per cent;¹⁸ and the rate of congenital syphilis is 1 per cent.¹⁹ Persons living with and affected by HIV continue to face stigma and discrimination.

9. The Dominican Republic is situated in the path of hurricanes. This threat, together with the impact of climate change and seismic movements, exposes the population to many risks. Children in poor rural and marginal urban areas are particularly vulnerable. One of the major challenges the country will have to face in the next few years is the need to improve its emergency preparedness and response systems, with an emphasis on protecting children and families.

Relationship to national priorities and the United Nations Development Assistance Framework (UNDAF)

10. The Draft Law on the National Development Strategy for 2010-2030 expresses the Government’s willingness to confront development challenges and achieve peaceful coexistence, social cohesion and collective development. Universal health care and social security, quality education for all, sports and recreation, employment and decent housing, equality and equity and poverty

¹³ ENHOGAR, 2006.

¹⁴ *El Comercio sexual con personas menores de edad. Segundo estudio de tolerancia social* (Commercial Sex with Minors in Central America, Panama and the Dominican Republic. Second Social Tolerance Study), ILO/IPEC, 2009.

¹⁵ ENHOGAR 2009-2010. Official publication of this survey is planned for November 2011. The use of this most updated data was authorized by the National Office of Statistics.

¹⁶ ENDESA, 2007.

¹⁷ *Primera Encuesta de Vigilancia de Comportamiento con Vinculación Serológica en Poblaciones Vulnerables* (First Behavioral Surveillance of Serostatus in Vulnerable Populations), 2008.

¹⁸ *Informe de Acceso Universal* (Universal Access Report), DIGECITSS, 2011.

¹⁹ *Encuesta Nacional de Vigilancia Centinela* (National Sentinel Vigilance Survey), 2006.

alleviation are among the Strategy's objectives directly affecting the well-being and development of children.

11. The main strategies under the United Nations Development Assistance Framework for 2012-2016 that will facilitate achievement of the objectives set out in the National Development Strategy are (a) protection of children, adolescents and youth; (b) empowerment and rights of women; (c) socio-economic inclusion; and (d) environmental sustainability and natural disaster risk reduction.

12. The UNICEF medium-term strategic plan has helped to place the rights of children at the centre of the Dominican Republic's development programmes and of the cooperation provided by the United Nations system, leading to a fruitful association between the UNDAF and the new programme outlined here, the National Development Strategy.

Relationship to international priorities

13. The programme focuses on achieving the Millennium Development Goals (MDGs) and on implementing the Convention on the Rights of the Child, the Convention on the Elimination of All Forms of Discrimination against Women, the Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography, and the recommendations made by the Committee on the Rights of the Child in 2008. The programme incorporates the recommendations of the United Nations study on violence against children and international commitments regarding the prevention and elimination of sexual exploitation of children and adolescents, and is in line with the Education Goals for 2021 put forward by the Organization of Ibero-American States for Education, Science and Culture and with the Ministerial Declaration "Preventing through education" adopted in Mexico.

Key results and lessons learned from previous cooperation, 2007-2011

14. Monitoring of the situation of children and evidence-based policy development have been recognized as significant programme accomplishments. The implementation assessment of the Code for the System of Protection of the Fundamental Rights of Children and Adolescents,²⁰ institutional ethnography and research on the impact of violence, sexual abuse and exploitation merit special mention. Institutions providing protection have incorporated recommendations from these evaluations in their plans, and have accorded priority to establishing statistical information systems and formulating an institutional coordination protocol to assist child and adolescent victims of violence, abuse and commercial sexual exploitation. The joint evaluation of the National Programme to Reduce Vertical Transmission of HIV/AIDS has enabled the Ministry of Health and its collaborators to reorient the strategy and increase their coverage.

15. Collaboration with the National Statistical Office (ONE) for the purpose of generating credible official information regarding the status of children and women has highlighted territorial inequities and inequalities and identified which groups in society are the most excluded. Using the evidence gathered,

²⁰ Law 136-03.

the Children's and Adolescents' Rights Observatory at the Catholic University of Santo Domingo created the Children's and Adolescents' Rights Fulfilment Index, which is a national monitoring tool.

16. Under the leadership of the National Council for Children and Adolescents (CONANI) and the Ministry of Education, the Consultative Panel on Early Childhood was established to develop an integrated policy on health, nutrition and early stimulation, with particular reference to children under 3 years of age. UNICEF helped to coordinate action taken by public entities and civil society and to scale up pilot projects in nurseries and community playgrounds.

17. The "Iodized Salt or No Salt" campaign led to increased consumption of iodized salt. As a result, iodine-deficiency disorders no longer are a public health problem.

18. A study conducted by UNICEF, the Pan American Health Organization (PAHO) and the Ministry of Health regarding water quality and basic sanitation at 11 hospitals revealed the poor quality of water quality in maternity wards and its correlation with high maternal and neonatal mortality rates. The study's findings led to the installation of constantly monitored water purification filters at five hospitals. The study also helped to identify the group of actors responsible for water and sanitation and to design the cholera prevention campaign.

19. With the strengthening of the country's emergency preparedness, response and recovery capabilities in connection with Hurricane Noel and tropical storm Olga in 2007 and the earthquake that struck Haiti in 2010, the office has become a key player with respect to such disasters.

The country programme, 2012-2016

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>
High-quality inclusive social services for health and education	1 489 000	2 185 000	3 674 000
Protection of children and adolescents, and institutional reform	993 000	2 880 000	3 873 000
Knowledge generation and policy support for social inclusion and equity	363 000	2 440 000	2 803 000
Cross-sectoral costs	905 000	2 495 000	3 400 000
Total	3 750 000	10 000 000	13 750 000

Programme preparation process

20. The cooperation programme is based on: (a) the 2009 midterm review; (b) the 2008 recommendations of the Committee on the Rights of the Child; (c) the National Development Strategy for 2010-2030; (d) the Common Country Assessment and the United Nations Development Assistance Framework for 2012-2016; and (e) contributions provided by State institutions and civil society at strategic thinking workshops.

Goals, major results and strategy

21. The programme, which will be equity-driven, will help to accelerate achievement of the MDGs and implementation of the Millennium Declaration and will focus on children, adolescents, the poorest and most excluded communities and victims of discrimination. This will be achieved by scaling up investments, reducing national disparities and eliminating practices that apply differential treatment.

22. The overall objective of the programme is to enable children and adolescents to enjoy their rights. This will be possible when the country has made progress towards eliminating barriers to access to quality social services, creating protective community environments and building a grand social alliance for the monitoring and achievement of those rights.

23. Key results of the programme will be: (a) reduced disparities in access to inclusive, quality social services in the areas of health and education; (b) increased capacity of State institutions to protect children against violence, abuse, exploitation and trafficking; and (c) generation of knowledge to support the incorporation of inclusive policies and increased investment in children.

24. The following strategies will be employed to achieve these results: (a) increased national and local capacity for managing basic social services with a view to improving coverage and quality and reducing gaps; (b) prioritization of ten provinces in the southeast and along the border, in selected *bayetes* and in marginalized areas in Santo Domingo and Santiago; (c) alliances with civil society, knowledge centres, communications media and the private sector to enhance universal fulfilment of human rights; and (d) social mobilization in support of the rights of all children who live in the Dominican Republic.

25. There are four cross-cutting components: (a) participation of children and adolescents; (b) comprehensive management of risks and basic commitments regarding children; (c) communication to promote changes in practices and behaviours that guarantee equal treatment and social inclusion of all children; and (d) gender equity in order to reduce exclusion, discrimination and vulnerability.

26. South-South cooperation between Haiti and the Dominican Republic will be encouraged in order to optimize the impact of the two countries' interventions and ensure the inclusion of the most vulnerable groups. Particular emphasis will be placed on preventing child trafficking and smuggling, protecting unaccompanied Haitian victims and children, and combating HIV and other diseases common to both countries. With support from other UNICEF offices, and in coordination with the Government, technical assistance will be shared by the regional public administrations for health, education and justice.

Programme components

27. In order to enable the Dominican State to meet its obligations to ensure the achievement of children's rights, the 2012-2016 country programme will comprise three components focusing primarily on reducing inequalities and ensuring social services for all.

Inclusive, quality social services in the areas of health and education

28. This component will help to eliminate all barriers that deny the poorest children and adolescents access to quality social services.

29. Within the framework of the National Development Strategy, the Ten-year Health Plan 2007-2015 and the “Zero Tolerance” strategy, action will be taken to (a) reduce maternal and neonatal mortality in prioritized hospitals; (b) reduce mother-to-child transmission of HIV and the incidence of congenital syphilis; (c) expand coverage provided by health and nutrition programmes for the comprehensive care of young children; and (d) continue to control the cholera epidemic.

30. In order to reduce maternal and child mortality, UNICEF will assist in implementing the new criteria for the Amigos de la Niñez y la Madre (“Friends of Children and Mothers”) hospital initiative at 11 hospitals with the highest incidence of maternal and neonatal mortality. Support also will be provided to reactivate the Newborn Alliance and implement the protocol for monitoring the causes of neonatal morbidity and for early identification of potential disabilities. Adolescents Units will be strengthened and coordinated with the education system. Exclusive breastfeeding will continue to be promoted, as will complementary feeding with micronutrients and early growth and development measures. UNICEF will promote the integration of successful community strategies into State health and social protection programmes. Assistance will also be provided to implement the protocol for eliminating congenital syphilis and mother-to-child transmission of HIV.

31. Support will be continue to be provided for the efforts of the Ministry of Health to control the cholera epidemic through enhanced coordination between the responsible actors in the water, sanitation and hygiene sector and by increasing access for the most vulnerable families to safe water. Community hygiene practices will be improved through social mobilization.

32. With regard to the survival and full development of children, UNICEF will continue its work with the State and civil society under the Early Childhood Comprehensive Care Policy. The social security system will be encouraged gradually to expand the number and capacity of nurseries in poor neighbourhoods and poor rural areas and include family- and community-based models as components of strategies for comprehensive early childhood care. Assistance will also be provided for early stimulation training for community teachers and assistants.

33. With regard to education, the programme will support the implementation of the National Education Plan and the Education Goals for 2021, which are strategies to foster cultural change and human development. The component will focus on (a) enhancing the quality and coverage of preschool education; (b) spurring progress in enhancing learning achievement at the primary and secondary levels; and (c) reducing the secondary-school dropout rate.

34. In order to improve learning achievement and the quality of the education process, the management capacity of the education system at the regional and district levels will be strengthened. To reduce the dropout rate and increase retention, the programme will assist the Ministry of Education with late birth registration of children and adolescents attending school and with capacity development for implementing the integral component of life skills, which aims to reduce teenage pregnancies and HIV transmission and to foster the values of coexistence and citizenship.

35. The cross-cutting components in the area of education will be: (a) communication and social mobilization to reduce school violence and develop capacities for inclusive education of children with special needs; (b) monitoring of access and quality indicators throughout the country under the Ten-Year Education Plan; (c) strengthening the integral capacity of risk management; and (d) promoting the participation of children, adolescents, families and communities in school management.

Protection of children and adolescents, and institutional reform

36. UNICEF will help to bolster the leadership role of the National Council for Children and Adolescents (CONANI) and will assist institutions of social protection, the judicial branch and civil society organizations in building their capacity to (a) protect children from violence, abuse, exploitation and trafficking; (b) guarantee all children the right to identity by increasing the birth registration rate; and (c) reduce the number of children who are institutionalized owing to poverty or conflict with the law. The State will continue to receive support in implementing Law 136-03, the Code for the System of Protection of the Fundamental Rights of Children and Adolescents; the recommendations of the Secretary-General of the United Nations concerning violence; and the recommendations of the Committee on the Rights of the Child.

37. In order to protect children and adolescents from violence, abuse, exploitation and trafficking, the programme will support the country's efforts to (a) legally prohibit violence and corporal punishment as forms of discipline in all settings; (b) expand the coverage and improve the quality of social protection programmes and services for children who are victims of violence, abuse, trafficking and exploitation; and (c) establish complaint mechanisms accessible to children, as well as an information reporting system.

38. In order to end low birth registration, UNICEF will collaborate with the Central Electoral Board, the Ministry of Health and Education and community and religious organizations to improve registration practices and accelerate implementation of the 2010-2016 strategic plan of the Electoral Board. Priority will be given to provinces and urban areas with the highest concentration of unregistered children by (a) ensuring that civil registry units in hospitals in the Friends of Children and Mothers initiative are fully operational and (b) conducting late registration campaigns for unregistered children. Legislative initiatives to simplify procedures and reduce the time required for late registration also will receive support.

39. In order to reduce the institutionalization of children and adolescents, UNICEF will continue supporting the efforts of CONANI to (a) implement the programme for alternative child-care options and (b) strengthen the system for certifying, registering and monitoring community host organizations in accordance with international standards. UNICEF will continue to collaborate with the Office of the Public Prosecutor and the judicial branch to democratize the juvenile justice system by (a) specialization of juvenile courts; (b) creating an independent mechanism to monitor detention centres; and (c) promoting the national programme on socio-community alternatives to institutional confinement.

Knowledge management and policy development for social inclusion and equity

40. In keeping with the recommendations of the Committee on the Rights of the Child and in compliance with international standards, the programme will help to strengthen national capacity to generate and analyse quality, disaggregated information on children and adolescents that will highlight the most excluded and marginalized groups and facilitate the design of cost-effective interventions. This will be achieved in a number of ways: (a) in cooperation with the National Statistical Office (ONE), CONANI and the Office of the Public Prosecutor, a subsystem will be created to develop statistical data disaggregated by gender, age, race, origin, territory and socio-economic status; (b) studies, assessments, research and analyses will be carried out in order to identify the causes of social exclusion of children and adolescents, analyse the impact of political and economic decisions and generate evidence that will help to improve the quality and coverage of education and the quality of health services, reduce the prevalence of HIV and eliminate all forms of violence against children. This work will be undertaken in collaboration with national and international knowledge centres, and sustained attention will be paid to the impact of climate change and migration on children; and (c) knowledge will be disseminated in order to build national alliances, influence decision-making and advocate for the fulfilment of the rights of all children who live in the Dominican Republic.

41. With assistance from the National Congress and other monitoring bodies, support will be provided to conduct budgetary and economic analyses of laws in order to ensure the fiscal sustainability of social programmes in the areas of health, education and protection. By taking into account successful experiences and knowledge generated in the Dominican Republic and the region, the programme will help to build national capacities for monitoring and evaluating the objectives of the National Development Strategy that focus on children.

42. Support will continue to be provided to the Child and Youth Town Councils in order to broaden participation by children and adolescents in municipal decision-making processes and improve their ability to prevent violence and enforce their rights. Cooperation will continue with the Children's and Adolescents' Rights Observatory on knowledge generation and articulation with other monitoring processes.

Cross-sectoral costs

43. Cross-sectoral costs cover a proportion of common operational costs, monitoring and evaluation as well as technical assistance for several country programme components.

Major partnerships

44. Main Government bodies are CONANI, the Ministries of Health and Education, the Ministry of Economy, Planning and Development, Congress, the judicial branch and the Office of the Attorney-General, the National Commission on State Reform, the National Statistical Office and the *Cámara de Cuentas* (audit court). At the local level, UNICEF will work with decentralized bodies concerned with health, education and protection, and local governments.

45. The process of preparing the Common Country Assessment and the United Nations Development Assistance Framework for 2012-2016 strengthened coordination and joint planning among the agencies of the United

Nations system. UNICEF will collaborate with the Office of the United Nations High Commissioner for Refugees and the International Organization for Migration in protecting irregular and unaccompanied immigrant children and in combating child trafficking and smuggling. UNICEF will cooperate with the Pan American Health Organization, the United Nations Population Fund, the Joint United Nations Programme on HIV/AIDS and UN-Women on reducing maternal and infant mortality and HIV, encouraging participation of adolescents and youth, improving sexual and reproductive health and promoting gender equality. UNICEF will cooperate with the United Nations Development Programme on governance issues.

46. UNICEF is a member of the *Mesa de Donantes* (board of donors), a coordinating body that brings together the major organizations providing international, multilateral and bilateral cooperation, including the World Bank, the Inter-American Development Bank, the European Union, the United States Agency for International Development and the Spanish Agency for International Development Cooperation.

47. The new cooperation programme offers new opportunities to expand alliances with religious and civil society organizations.

48. Strategic alliances will be established with the private sector in order to strengthen corporate social responsibility and to serve as a catalyst, and maximize resources, for the benefit of children and adolescents in the Dominican Republic.

Monitoring, evaluation and programme management

49. UNICEF will support monitoring and evaluation of the status of children and compliance with the recommendations of the Committee on the Rights of the Child. To that end, it will contribute to capacity-building at the national and local levels and will continue to help the National Statistical Office to generate statistical information on issues relevant to the cooperation programme through the identification of social groups and territories with high levels of social inequality.

50. The situation analysis to be conducted in 2011 will serve as the baseline for monitoring and evaluating the results of the 2012-2016 programme. A five-year monitoring and evaluation plan will be prepared and will determine the mechanisms for the evaluation. The midterm review will provide an opportunity to incorporate required changes and adjustments.

51. The Ministry of Economy, Planning and Development, as the institution responsible for planning and evaluating public policy, will be the main entity responsible for the annual workplan reviews and the midterm review, all the while recognizing the benefit of those exercises for its own capacity-building efforts. The annual reviews will be carried out within the context of UNDAF, with input from implementing agencies of the Dominican Republic and the United Nations system.