

Iraq

Country programme document 2011-2014

The draft country programme document for Iraq (E/ICEF/2010/P/L.13) 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)	14.4
U5MR (per 1,000 live births)	44 ¹
Underweight (% , moderate and severe, 2006)	6 ^a
Maternal mortality ratio (per 100,000 live births, 2006)	84 ^{b,2}
Primary school enrolment (% , net male/female, 2007)	87/82
Survival rate to primary grade 5 (% , 2004)	70
Use of improved drinking water sources (% , 2006)	77
Use of improved sanitation facilities (% , 2006)	76
Adult HIV prevalence rate (%)	..
Child labour (% , children 5 to 14 years old, 2006)	11
GNI per capita (US\$)	^c
One-year-olds immunized with DPT3 (%)	62
One-year-olds immunized against measles	69

[†] More comprehensive country data on children and women can be found at www.childinfo.org/.

^a World Health Organization child growth standard.

^b The 2005 estimate developed by WHO/UNICEF/UNFPA and the World Bank, adjusted for underreporting and misclassification of maternal deaths, is 300 per 100,000 live births. See http://www.childinfo.org/maternal_mortality.html.

^c Lower-middle-income (\$976 to \$3,855).

Summary of the situation of children and women

1. Iraq is steadily emerging from a series of conflicts and crisis with a resolve to improve the well-being of its children and women. Decades of conflict in Iraq have resulted in weakened infrastructure and proportionately low investments in children. However, with emerging systems for improved service delivery, there is ample scope for innovation and application of a holistic approach to the wellbeing of Iraq's children. The direct impact of these innovations will have a significant bearing on the lives and future of more than 15 million Iraqis who are less than 18 years of age and about 23 per cent of Iraqis are poor.

2. The quality and delivery of essential services that had deteriorated significantly since 1990 are gradually being addressed. Insecurity and weakening of institutions following the events of especially since 2003 had constrained delivery of basic services but are now showing signs of recovery. Greater security along with evidence based advocacy would enable emergence of strong institutions that could play a vital role in improvement in the situation of children and needed to address the structural and capacity gaps in public sector institutions to revive basic services. Greater decentralization of power to governorates is likely to rectify the mismatch of resources with staffing and maintenance of public utilities. Rebuilding the Iraqi

1 Ministry of Health, GoI, reports that according their statistics U5 Mortality Rate had reduced to 35 per 1,000 live births in 2008, which further reduced to 29.5 per 1,000 live births in 2009.

2 Ministry of Health, GoI, reports that according to their statistics Maternal Mortally Rate recently reduced by nearly 50 percent from 84 per 100,000 live births as was reported by IFHS 2006/7.

public sector, therefore, is a fundamental priority. The security situation has been steadily improving since 2004, and the Government of Iraq believes that there has been as much as 60 per cent decrease in violence, the beginning of 2010 seeing the lowest level of violence since 2003. The improved security is also acknowledged by the UN.³

3. Government of Iraq has incorporated the Millennium Development Goals in its strategic plans and the authorities are taking necessary measures for implementation through strengthening partnerships with the donor community, UN agencies and Civil Society Organizations. There is a need for concerted efforts from the Government and other duty-bearers to achieve the Millennium Development Goals, targets of *A World Fit for Children* and Education for All (EFA). Policy updates would provide the necessary focus to the vulnerable groups and to remote areas. Significant disparities exist among regions, and gender inequality that had significantly deteriorated since 2003 is being recognised. Civil society needs strengthening, and opportunities for nation-building must include youth and children. Efforts towards attainment of the Millennium Development Goals and Iraqi commitments under the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women need to be strengthened. Government has indicated that it is pursuing implementation of all provisions of the Convention on the Rights of the Child and providing basic health services to children and mothers and the most vulnerable people in the far flung areas of the country.

4. Goal 1 (Eradicate extreme poverty and hunger) faces particular challenges, considering the proportion of the population living under the poverty line and widespread malnutrition among children and women. Moderate and severe stunting is greater than 20 per cent of children under five, while just 25 per cent of infants are exclusively breastfed.⁴ The situation is exacerbated by widespread low 35.5 per cent of reproductive-age women are anaemic, however, the situation is steadily improving as reported by MOH. The focus in the health sector is on curative rather than preventive treatment. The security situation and deterioration of Iraqi public sector institutions are compounded by the 'brain drain' of professionals. Programmes developed to address this situation focus on symptoms rather than root causes.

5. Primary school net enrolment has improved (87 per cent for boys, 82 per cent for girls in 2007) but remains insufficient to realize Goal 2 (Achieve universal primary education) and the EFA goals. Rural enrolment for girls lags at 68 per cent. Preschool enrolment among children 3-5 years old is only 3 per cent. Nearly 9 in 10 children younger than age 15 do not attend school regularly, largely because of negative attitudes towards girls' education. Many children do not progress to secondary education. Significantly for achievement of Goal 3 (Promote gender equality and empower women), the ratio of females to males in primary school is 94.2 per cent, dropping to 76.9 per cent at secondary level. Although more alternatives are being offered to out-of-school children and adolescents, girls represent barely 25 per cent of students in such programmes. High rates of women's illiteracy persist, with rates for young women nearly double those for young men. The lack of quality schooling is exacerbated by a curriculum unable to prepare youth

³ United Nations Development Action Framework for Iraq, 2011-14

⁴ Ministry of Health, GoI, reports that exclusive breastfeeding rates have increased from 25 percent (MICS3, 2006) to 42 percent in 2009.

for the labour market, which shows an unemployment rate of 30 per cent among youth aged 15-24. A formal education sector policy is only now being developed.

6. The under-five mortality rate stands at 44 per 1,000 live births, while the maternal mortality ratio, at 84 per 100,000 live births, is double that of Iraq's neighbours⁵ The situation regarding the high numbers of acute respiratory infections and diarrhoeal diseases among children is worsened by pervasive low birth weight and inadequate newborn care and infant/young child feeding practices. Routine immunization services have deteriorated as violence has restricted vaccination teams from reaching the population. In 2008, a drop in measles coverage, to less than 80 per cent in 45 out of 114 districts, contributed to more than 38,000 cases of measles and nearly 200 deaths. Although considerable challenges remain in meeting Goal 4 (Reduce child mortality) and Goal 5 (Improve maternal health), significant progress is still possible. Comprehensive efforts are combining national policy reform efforts with specific area-based interventions at governorate level, focused on pockets of acute child vulnerability and increased targeted investments in maternal, newborn and child health.

7. The Government of Iraq reports that sufficient progress on Goal 6 (Combat HIV/AIDS, malaria and other diseases) had been achieved by October 2009,⁶ primarily relating to combating tuberculosis and malaria. Although the number of registered HIV cases remains very low, with a prevalence rate, which is significantly less than 1 per cent,⁷ associated vulnerability factors are rising and require urgent policy priority. Cases of cholera have also dropped substantially since 2007.

8. Achievement of Goal 7 (Ensure environmental sustainability) relating to safe water is off track. Iraq faces an acute water crisis, largely because of the lack of a Constitutional and legislative framework in this area and weak delivery capacity. Major water pipe networks leak or rupture frequently, and the resulting mix of sewage with drinking water places large parts of the population at risk. Most sewage is released raw into waterways, and waste collection is rare. Rural-urban disparities are wide, and nearly half of water users and a quarter of sanitation users report unreliable services. Sustainable resource management remains a key challenge.

9. Iraq also faces a severely weakened protective environment. The acute risks for children and women threaten the State's commitments under the Millennium Declaration. The social protection system requires strengthening to become more proactive and rights-based. Insufficient data constrain evidence-based planning, as do the outmoded knowledge and skills of professionals. Gaps exist in child-friendly and gender-sensitive protection laws, and enforcement remains poor. Although precise data are lacking, significant numbers of children and adolescents are exposed to extreme levels of violence, exploitation and abuse, and patterns of gender-based violence are emerging. Investigation of crimes against women is hampered by a lack of skills, training and awareness. The juvenile justice system does not conform to international norms and requires urgent reform.

10. The treatment of children with disabilities represents an increasing concern and points to an overreliance on institutionalization. The high percentage of child

5 As mentioned on page 1, GoI suggests that these figures are likely to be better now.

6 Central Organization for Statistics and Information Technology presentation to United Nations partners, October 2009.

7 Ibid. "People living with HIV 15-49 years old, 2006".

labour among children 5-14 years old, estimated at 11 per cent, violates the commitments of Iraq under international conventions.

11. Despite some progress made, virtually all concluding observations of the Committee on the Rights of the child, made in 1998 on the State party report, are still outstanding. These include expressions of concern about the need for strengthened law enforcement; insufficient coordination among entities working for children; absence of an independent mechanism to address child rights violations; insufficient disaggregated data, child budgetary resources and awareness of principles of the Convention on the Rights of the Child; inadequate measures to ensure school enrolment of girls, especially in rural areas; improper investigation of cases of abuse and ill-treatment; poor services for children with disabilities; pervasive child labour and the phenomenon of children who live or work on the street; and a juvenile justice system non-aligned to international standards.

12. On the positive side, the Government has decided to prepare a second State party report to establish a baseline for monitoring the Convention. Iraq also ratified both Optional Protocols to the Convention in September 2007. No measures are yet in place to implement relevant provisions. Concerns raised in many observations of the Committee on the Elimination of Discrimination against Women from 2000 likewise remain outstanding. These concerns include violence against women, high illiteracy rates and poor overall health among women.

Key results and lessons learned from previous cooperation, 2007-2010

Key results achieved

13. Building on the recommendations of the midterm review, held in 2008, the programme has shifted its focus to address important social policy and institutional capacity gaps through evidence-based research and analysis in the context of the Convention on the Rights of the Child, the Convention on the Elimination of All Forms of Discrimination against Women (hereafter referred to as ‘the Conventions’) and the Millennium Development Goals. Simultaneously, service delivery elements have been scaled down. UNICEF has initiated dialogue to take the lead in rebuilding the basic education sector and has assumed an advisory role with partners on implementation of the Convention on the Rights of the Child. This is consistent with the National Development Plan, 2010-2014, and its predecessor the National Development Strategy; the United Nations Development Assistance Framework (UNDAF), 2011-2014; and commitments under the two Conventions and *A World Fit for Children*.

14. Iraq-UNICEF collaboration has centred on five programmes: survival, growth and early development; quality learning and development; water, environmental sanitation and hygiene; child protection and participation; and planning, advocacy, communication, knowledge and strategic interventions (PACKS), which adjusted the policy, advocacy, partnerships and communication programme to better respond to changing national contexts. All programmes have initiated stand-alone components on strengthening national policies and systems. Child protection and PACKS underwent substantive changes to reflect strengthened UNICEF knowledge management and support for evidence-based advocacy.

15. At the policy level, key results have included (a) development of a framework for a National Education Strategy and capacity development of key Education/Higher Education Ministry staff in strategic education planning, in

partnership with the World Bank and the United Nations Educational, Scientific and Cultural Organization; initiation of development of a National Water and Sanitation Policy; and implementation of a national strategic plan for infant and young child feeding. Other key results include (a) strengthening the knowledge base through the launch of the IraqInfo database and completion of a Situation Analysis for Iraq; (b) providing over 1.5 million people with improved access to safe water and improved sanitation; (c) giving nearly 50,000 boys and girls in six governorates access to psychosocial care at school by over 1,500 trained teachers; (d) reaching over 90 per cent of under-five children through immunization campaigns targeting measles, mumps and rubella and polio, and improving access to primary health care through rehabilitation of facilities; and (e) leading the establishment of a mechanism for monitoring and reporting on grave child rights violations, based on Security Council resolution 1612 (2005). Assessment and response capacity in every governorate was strengthened through partnerships with international non-governmental organizations.

Lessons learned

16. Iraq has the attributes of a middle-income country but faces serious post-conflict challenges. The continuing insecurity in the capital and flashpoints affect children and their caregivers and constrain UNICEF operational capacities. An important lesson highlighted in the midterm review is that opportunities for achievement of the Millennium Development Goals across the 18 governorates vary widely. It is increasingly clear that achievement of the Goals is possible only if programme management is decentralized and support systems evolve, with targeted governorate-based programming complemented by proportionate budgetary allocations for children. It would be necessary to work with a broader array of partners than ever before. The area-based approach — employed since 2008 — is a useful foundation upon which to build downstream programming. Use of Communication for Development (C4D) to change attitudes and behaviour patterns must be further developed.

17. A shift towards upstream policy support and higher-impact capacity development has been crucial to supporting the updating of policies and systems. This has addressed the pressing human resource needs of Iraq and has strengthened knowledge-focused programming through support to implementing laws, the Conventions and action plans, and assessment of skills needed. A generic planning role has been re-engineered under PACKS to include specific responsibilities, including (a) overseeing the development and monitoring of the CPD, country programme action plan and annual work plan, and (b) managing studies and evaluations to feed into future programmes.

18. A final key management lesson involves an understanding that a sophisticated development programme cannot be delivered remotely, as the previous programme was from Jordan, although the previous country programme demonstrated efficiency and speed despite volatile field conditions. With the return to Iraq in mid-2009, the presence of senior international staff in Baghdad has proven crucial in re-establishing UNICEF credibility at the highest levels and in leveraging support for programmes, even as access outside the International Zone in Baghdad is a constraint. UNICEF must remain vigilant to the significant constraints posed by ever-changing operational conditions. Strengthening field capacity should be continued, building on innovative contracting and monitoring procedures that minimize staff exposure to risk.

The country programme, 2011-2014

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>
Quality Learning and Development	794	75 000	75 794
Survival and Growth	794	30 000	30 794
Water, Sanitation and Hygiene (WASH)	873	30 000	30 873
Child Protection	555	24 000	24 555
Planning, Advocacy, Communication, Knowledge and Strategic Interventions (PACKS)	2 936	18 000	20 936
Cross-sectoral costs	1 984	23 000	24 984
Total	7 936	200 000	207 936

Preparation process

19. The Iraq National Development Plan and emerging national priorities have provided guidance for the country programme, as have the Poverty Reduction Strategy (PRS) and the UNICEF medium-term strategic plan (MTSP). Sectoral annual reviews with counterparts in November and December 2009 further assisted in refining the design. Consultations at a January 2010 joint strategy meeting in Baghdad with key Government counterparts, led by the Ministry of Planning and Development Cooperation, resulted in valuable sector-specific inputs.

20. This CPD has been closely aligned with the UNDAF, 2011-2014, which involved wide-ranging consultations with the Government and civil society partners. UNDAF outcomes have served as the basis for UNICEF programme component results because Iraq has not reported on the Conventions for many years, and the recommendations could not be fully utilized.

Goals, key results and strategies

21. The main goal is to ensure that children are at the centre of the development agenda in Iraq, with their full potential realized through a pro-child policy approach ensuring integrated and harmonized services for children in areas such as child protection, participation, well-being and development, guided by the Convention on the Rights of the Child and its Protocols, the Millennium Development Goals and the Millennium Declaration.

22. UNICEF will focus support on development of a National Policy for Children, helping to ensure institutional working mechanisms, government budget commitments for children and adolescents and strengthening of evidence-gathering and analysis. Given the 2015 deadline for the Millennium Development Goals, the country programme will focus its overarching programmatic chapeau on achieving the Goals, while making the delivery structure geographically focused. This should contribute not only to progress on all Goals but also to Articles 2, 6, 12, 24, 26, 27, 28, 29, 39 and 40 of the Convention on the Rights of the Child and to targets of the Convention on the Elimination of All Forms of Discrimination against Women.

23. UNICEF will strengthen its work at three levels, as identified in the midterm review: (a) *national*⁸ through support to policies and legislation benefiting children and women; (b) *nationwide*, incorporating key responses that affect children across Iraq; and (c) *area-based*, concentrating on integrated, multi-sectoral investments in targeted communities. This approach responds to strong Government requests for upstream work and recognizes that Iraq is increasingly trying to take control of its day-to-day direct service provision needs. Expanded capacity development includes reforming systems, focusing on the rights of children and women. Piloting of models at the local level will aim to promote child-centred structures and investments to reduce disparities.

24. UNICEF will forge a more proactive role as the convener of, and catalyst for, all stakeholders working for children and women, exploring opportunities to add value. This approach will encourage enhanced use of an expanded evidence base and analysis on child-related issues, strengthening relevant information management systems. Broad partnerships that facilitate access to expertise and innovative knowledge and technology for children and women will drive progress through advocacy and participatory processes. These partnerships are expected to encompass oil and telecommunications entities, universities, and arts and sports organizations. UNICEF will also engage global partnerships to expand opportunities that promote the rights of children and women. Coordination and collaboration among sectoral programmes will be enhanced to mainstream cross-cutting issues.

25. Ongoing insecurity has compounded chronic vulnerabilities. UNICEF will contribute to strengthening emergency preparedness and response systems. Even though improvements are evident in the humanitarian landscape, UNICEF will maintain response capacity to sudden-onset and emerging crises, including disease outbreaks, mass casualty attacks, natural disasters and displacements. Humanitarian action will continue to shift away from direct assistance to individuals towards the creation and implementation of durable solutions, with a robust bridge to recovery and development programming. Area-based responses will be implemented at governorate or district level, aiming to identify durable solutions for some 4.5 million Iraqis. These will be implemented in partnership with a range of stakeholders identified locally, with the active encouragement of participation from civil society. Counterparts will play principal roles. NGO partners will be engaged in accordance with their technical competencies and presence. Areas of technical support for disaster risk management will focus on strengthening national institutions to build resilience to hazards; developing and strengthening disaster risk assessment and early warning systems; enhancing the use of knowledge and innovation; and reducing development risk factors.

26. Finally, this process aims to identify which Millennium Development Goals are achievable and where, and which major investments will be required from stakeholders. A “band” of geographic areas with similar challenges will be selected based on (a) Goals indicators; (b) expected contribution to national peacebuilding and stability; and (c) integration with other United Nations interventions. Key sectoral results will be better sequenced and disciplined, initially year by year, and will serve as the basis for expected intermediate results. This vision encompasses the aim of working with Iraq as a middle-income country by 2014.

⁸ Because the Constitution recognizes the authority of the Kurdistan Regional Government in the north of Iraq, the CPD uses the nomenclature “national” and “nationwide.”

Relationship to national priorities and the UNDAF

27. The country programme will contribute to national development goals through (a) the incorporation of provisions of the Conventions in the Constitution and related policies, legislation and strengthening of monitoring mechanisms; (b) integrated Government systems development regarding education, health and nutrition, water, sanitation, and child protection; (c) enhanced quality of and access to health and nutrition services; (d) increased enrolment, retention and completion rates and reduced gender disparities in improved quality basic education; (e) increased access to safe water and improved sanitation, with enhancement of personal hygiene practices; (f) development of a sustainable peaceful environment for children who are vulnerable to violence, abuse, exploitation and neglect, in line with international standards. Underpinning all is the provision for opportunities for the participation of children and young people in decision-making.

28. The country programme thus reflects the vision and “integrated footprint” of the United Nations that have informed the five priority areas of the UNDAF. It contributes particularly to UNDAF outcomes 1, 2, 3, 4 and 5 through support to (a) improved governance, including the protection of human rights; (b) inclusive, equitable and sustainable economic growth; (c) environmental management and compliance with international environmental treaties and obligations; (d) increased access to quality essential services; and (e) investment in human capital and empowerment of women, youth and children.

29. The country programme likewise is congruent with PRS outcomes and targets through support for improved health standards for the poor, increased enrolment in basic education, a better living environment for the poor, pro-poor and child-sensitive social protection, as well as increased gender equity.

Relationship to international priorities

30. The Convention on the Rights of the Child remains the beacon for the country programme. Through increased emphasis on partnerships, the country programme structure supports donor harmonization efforts in line with the Paris Declaration on Aid Effectiveness. It has been guided by the Millennium Declaration and its rights-based commitments, all eight Millennium Development Goals, and the Declaration and Plan of Action of *A World Fit for Children*. The Convention on the Elimination of All Forms of Discrimination against Women will guide gender-related issues. In addition, all five priority areas of the MTSP, as well as the UNICEF Core Commitments for Children in Emergencies, are reflected fully in the expected results, including raising the quality of specific services and addressing common issues of effective governance.

Programme components

31. Four major programme components — Survival and Growth; Water, Sanitation and Hygiene; Quality Learning and Development; and Child Protection — will build on the work of the previous country programme, with major strategic adjustments noted above. Each component will have a maximum of two programme component results, emphasizing child-friendly policies and improved access to quality services, while incorporating principles of disaster risk reduction and emergency preparedness. PACKS will serve as a cross-cutting service creating an enabling

environment for robust knowledge management and evidence-based advocacy as well as promoting community-level healthy lifestyle practices.

32. **Survival and Growth.** The programme will invest in two major programme component results: strengthening the capacity of the Government of Iraq to establish an accountable policy framework, and supporting implementation mechanisms for the delivery of quality basic services. The priority will be to support national, governorate and primary health care providers and civil society to better formulate, monitor and evaluate evidence-based, child-friendly and gender-sensitive health and nutrition policies and systems.

33. The second result will be achieved through support to the Government to improve access to and utilization of quality primary health care services for women and children. Efforts will focus on supporting the Ministry of Health to ensure that children and women have equitable access to quality maternal, newborn and nutrition services, including primary prevention of HIV in women in maternal and child health settings, voluntary counselling and testing, and prevention of mother-to-child transmission of HIV/AIDS. Specific nutrition interventions to address stunting, anaemia and other priority issues will include iron, folic acid and iodine supplementation; salt iodization and wheat flour fortification; and targeted growth monitoring. Emphasis will be placed on addressing subnational disparities to achieve Millennium Development Goals. Child injuries as a major killer of children aged 1-17 years also will also be addressed. Acceleration of immunization services through a Reach Every District approach will be supported, as well as the introduction of new vaccines to reduce major childhood killer diseases. Partnerships will be established with local universities, leading global public health institutions, the private sector, and non-governmental organizations for operational research, programme monitoring and development of new strategies.

34. **Water, Sanitation and Hygiene.** The programme will contribute to improving access to safe water and sanitation services. The focus will be on attainment of related Millennium Development Goals through enabling authorities and civil society to better formulate, monitor and evaluate evidence-based, child-friendly and gender-sensitive water and sanitation policies and systems. Development of a national Water and Sanitation Policy will be a priority. A second priority will be to ensure that a total of 2 million people in vulnerable communities benefit from new or improved access to sustainable safe water, sanitation and waste services. Increased emphasis will be placed on governorate-level programming and capacity-building. A functional cost-sharing mechanism with stakeholders will be supported, promoting linkages among Government, academic and research institutes to strengthen water governance. The programme will pilot initiatives to demonstrate appropriate technologies and environmentally friendly approaches; strengthen community participation and the involvement of women and youth; and introduce the WASH -in-schools programme. Traditional infrastructure rehabilitation would be reduced.

35. **Quality Learning and Development.** The programme will contribute to ensuring that the Government of Iraq enables more women and children to have improved access to and utilization of quality education. More specifically, 98 per cent of children in selected governorates, with an emphasis on girls, will have access to quality primary education that is inclusive and life skills-based. This programme will also contribute to the development of evidence-based, gender-

sensitive policies and systems at national and governorate levels that support the right of all children to access quality basic education. Child-friendly school models will be scaled up and community-based engagement expanded. Particularly critical will be support to development of governorate-level advocacy plans for education, along with increased empowerment and involvement of community leaders and families. Partnerships will be expanded with universities to strengthen teacher professional development, as well as with the private sector to increase investments in school construction/ rehabilitation.

36. **Child Protection.** The programme, under its first programme component result, will accelerate a move towards strengthening child protection systems in Iraq, simultaneously enabling the State to develop and implement policies and programmes for the protection of boys and girls in line with international conventions, the Iraqi Constitution and legislation. The second programme component result will focus on ensuring that the Iraqi State has institutionalized justice for children and preventive and protective mechanisms to combat child rights violations, including gender-based violence. The programme will promote restorative juvenile justice and enhanced mechanisms for data collection as means to strengthen State reporting on the Convention on the Rights of the Child. Professional development of those who work in child protection will be undertaken in collaboration with universities. Information on HIV prevention will be disseminated to out-of-school children and adolescents, and scaling up of protection services will focus on areas such as community-based psychosocial support linked to the programmes in quality learning and development and in survival, growth and early development.

37. **PACKS.** This programme component comprises strategic communication and partnerships, including C4D; programme planning, monitoring and evaluation; and programme implementation, coordination, and emergency response. The latter is being mainstreamed into all sections and will be strengthened with the addition of a dedicated coordinator. The first PACKS result will contribute to more efficient, accountable and participatory governance at national and subnational levels. Governorate and national authorities and civil society will be capacitated to better formulate governorate-level Child Development Plans that serve as entry points for social policies for children. This is expected to lead to the piloting of Child-Friendly Cities as a key component of area-based programming and to the launch of an 'Iraq Fit for Children' movement, encompassing duty-bearers, communities and families, including children themselves. A key goal is the mainstreaming of the practical participation of youth in services, governance and legislative institutions at national and subnational levels.

38. The second result will target vulnerable Iraqis with strategic gender-sensitive research-to-policy initiatives, including means-tested social transfers. Emphasis will be placed on research and advocacy for increased gender-sensitive and child-friendly social budgeting at all levels. IraqInfo, the Multiple Indicator Cluster Survey 4 (MICS 4), and other components of national data systems will be strengthened to create a robust child-centred knowledge bank to aid evidence-based decision-making, planning, monitoring and evaluation. Innovative partnerships will be pursued to mobilize resources and advocate for children's rights. In particular, PACKS will undertake a strategic shift towards measured the visibility of UNICEF within security constraints.

39. **Cross-sectoral costs** cover staffing, information and communication technology, security and logistics.

Major partnerships

40. Public-private partnerships centred on the use of new technologies to support results for children will be critical. Strategic alliances with academia, civil society and corporations will expand and strengthen the knowledge base and widen reach. Partnerships will be strengthened with United Nations funds, programmes and agencies; the World Bank and other international financial institutions; donors; regional organizations such as the League of Arab States; governorate councils; civil society organizations; media; and children and young people. UNICEF will facilitate the “twinning” of cities in support of Child-Friendly Cities, as well as similar twinning between academic institutions to further child-relevant research.

Monitoring, evaluation and programme management

41. The Ministry of Planning and Development Cooperation is the major partner and coordinator of the country programme planning and approval process. Line ministries and departments are responsible for implementation and management of programmes. At the subnational level, governorate and district administrations, along with relevant departments, will assume responsibility for the partnership at the local level. Annual work plans for each programme component result will be monitored through quarterly and annual reviews and feed into national and UNDAF reviews. To this end, UNICEF field presence across Iraq will be strengthened to allow for more effective and expanded interaction with governorates and at national level.

42. A major expansion in data collection and utilization, including through MICS 4, a national census, youth surveys and the IraqInfo system, will guide upstream policy work as well as enhance reporting on progress towards Millennium Development Goals. Studies and evaluations will be shared with relevant stakeholders. Data-gathering activities for each programme component result will be consolidated in the Integrated Monitoring and Evaluation Plan, linked to the UNDAF monitoring framework and incorporating key indicators. UNICEF will be an active participant in these endeavours.