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<th>UNICEF MTSP Focus Area</th>
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<th>Major Partners, Partnership Frameworks and Cooperation Programmes</th>
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<td>1. Young Child Survival and Development (FA1)</td>
<td>1.1 20% more families have access and use MCH and ECD services that are in compliance with international standards <strong>Baseline:</strong> 60% of families utilizing basic benefit package (BBP) of PHC/MCH services (2003). No recent data available. The BPP now includes prevention of MTCT of HIV, Vitamin A supplementation. 1.2 Anaemia rate reduced by 15% among women of reproductive age and children under-5; elimination of Vitamin A deficiency among children 6-59 months. <strong>Baseline (2006):</strong> Anaemia among reproductive age women: 45%; Among children 6-59 months: iron-deficiency anaemia: 36%; vitamin A deficiency: 57%</td>
<td>1.1.1 % of families with access to MCH, including ECD 1.1.2 No. of policies compliant to international standards developed and/or amended 1.2.1 % of reproductive age women receiving iron supplementation 1.2.2 Proportion of children 6-59 mos. fully covered with 2 doses of Vitamin A</td>
<td>Official MoH data, MICS 2014 Government/ Agency of Statistics data</td>
<td>Ministries of Health (MoH), Education &amp; Science (MoES), Information &amp; Communication (MoIC), WHO, IAOM, GAIN, WB Framework strategies and cooperation programmes: “Children of Kazakhstan” national programme; Health Reform</td>
<td>UNDAF expected outcome; the enjoyment of improved social, economic and health status of the population, in particular the vulnerable groups WFFC goal to: promote healthy lives MDGs to: eradicate extreme poverty and hunger, reduce child mortality and improve maternal health</td>
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<td>2. HIV/ AIDS and Children (FA3)</td>
<td>2.1 At least 90% of HIV positive pregnant women receive services for prevention of HIV transmission from mother to child. <strong>Baseline (2008):</strong> 88% of HIV-positive pregnant women received ARVs for PMTCT 2.2. Use of HIV prevention services by the most at risk adolescents (MARA) in exposed areas increased to 30%. <strong>Baseline:</strong> There are no available data on % of MARA using HIV prevention services. A study on MARA will be conducted in 2009.</td>
<td>2.1.1 Proportion of HIV-positive pregnant women receiving ARVs for PMTCT 2.1.2 Proportion of health facilities providing HIV prevention services for MARA</td>
<td>Reports of MoH MARA study to be carried out in 2009</td>
<td>MoH, Republican Centre AIDS</td>
<td>UNDAF expected outcome; the enjoyment of improved social, economic and health status of the population, in particular the vulnerable groups WFFC goal to: combat HIV/AIDS MDGs to: fight HIV/AIDS, malaria and other diseases</td>
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| 3. Child Protection from Violence, Exploitation and Abuse (FA4) | 3.1 Ratio between children in institutional care and children in alternative family/community-based care improved from 80/20 to 70/30; 20% less children live in formal care  
3.2 Increase of 20% in the number of juvenile offenders who are diverted to non-punitive care and prevention services  
Baseline: 30% of juvenile offenders are diverted to alternative forms of care/services (2008) | 3.1.1 Ratio of children in institutional care to children in alternative care  
3.1.2 Policy on alternative care, in line with international standards/good practices (Y/N)  
3.2.1 Non-punitive care and prevention services for juvenile offenders developed (Y/N) | Government/ Agency of Statistics data  
Framework strategies and cooperation programmes: “Children of Kazakhstan” national programme; Juvenile Justice System Concept, 2009-2011 | UNDAF expected outcome: enjoyment of improved social, economic and health status of the population, in particular the vulnerable groups  
WFFC goal to: protect against abuse, exploitation and violence  
Millennium Declaration, Section VI to: protect the Vulnerable |
| 4. Policy Advocacy and Partnerships for Children’s Rights (FA5) | 4.1 Human, financial and organisational resources are redirected towards plans and programmes that address gender and social disparities in the best interest of boys and girls  
Baseline: ‘Children of Kazakhstan’ national programme, sector strategies and budget allocations do not address gender and social disparities  
4.2 Children, adolescents, youth and women are actively participating in social and health service programmes and promoting their civic engagement to realize their rights  
Baseline: To be determined through a baseline study to be carried out in 2009. | 4.1.1 Budget analysis and monitoring system available and used to promote improved resource allocations for realization of children’s rights and gender equality  
4.2.1 National and sub-national mechanisms for engagement of children, adolescents, youth and women are established (Y/N) | Annual expenditure review reports and statistical year-books; Medium Term Expenditure Framework and progress reports; government reports on economic and social progress | Ministries of Economy & Budget (MoEB) and Finance (MoF), MoLSP, MoH, Agency for Public Administration, Agency for Statistics, Parliament, local governments.  
WB, EU, ADB, EBRD, USAID, UN agencies  
Framework strategies and cooperation programmes: EU, WB existing cooperation | UNDAF expected outcome: have state actors at all levels and civil society more capable of and accountable for ensuring the rights and needs of the population, particularly vulnerable groups  
WFFC: all goals  
MDG to: eradicate extreme poverty and hunger |