The draft country programme document for Kyrgyzstan (E/ICEF/2011/P/L.2) was presented to the Executive Board for discussion and comments at its 2011 annual session (20-23 June 2011).

The document was subsequently revised, and this final version was approved at the 2011 second regular session of the Executive Board on 15 September 2011.
Basic data
(2009, unless otherwise stated)

<table>
<thead>
<tr>
<th>indicator</th>
<th>figure(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child population (millions, under 18 years)</td>
<td>2</td>
</tr>
<tr>
<td>U5MR (per 1,000 live births)</td>
<td>37</td>
</tr>
<tr>
<td>Underweight (% moderate and severe, 2005-2006)</td>
<td>2^a</td>
</tr>
<tr>
<td>(% urban/rural, poorest/richest)</td>
<td>2/2, 2/2</td>
</tr>
<tr>
<td>Maternal mortality ratio (per 100,000 live births, 2008)</td>
<td>55^b</td>
</tr>
<tr>
<td>Primary school attendance (% net, male/female, 2006)</td>
<td>91/93^c</td>
</tr>
<tr>
<td>Survival rate to last primary grade (% 2007)</td>
<td>98</td>
</tr>
<tr>
<td>Use of improved drinking water sources (%) 2008</td>
<td>90</td>
</tr>
<tr>
<td>Use of improved sanitation facilities (%) 2008</td>
<td>93</td>
</tr>
<tr>
<td>Adult HIV prevalence rate (%)</td>
<td>0.3^d</td>
</tr>
<tr>
<td>Child labour (%) children 5-14 years old, 2006</td>
<td>4</td>
</tr>
<tr>
<td>Birth registration (% under 5 years)</td>
<td>94</td>
</tr>
<tr>
<td>(% male/female, urban/rural, poorest/richest)</td>
<td>95/94, 96/93, 94/95</td>
</tr>
<tr>
<td>GNI per capita (US$)</td>
<td>870</td>
</tr>
<tr>
<td>One-year-olds immunized with DPT3 (%)</td>
<td>95</td>
</tr>
<tr>
<td>One-year-olds immunized with measles (%)</td>
<td>99</td>
</tr>
</tbody>
</table>

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1 More comprehensive country data on children and women can be found at www.childinfo.org.
2 Stunting (moderate and severe, 2006) = 18 per cent.
3 81 deaths per 100,000 live births is the 2008 estimate developed by the Maternal 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 www.childinfo.org/maternal_mortality.html.
4 Survey data.
5 The estimated number of women (aged 15+) living with HIV (2009 estimate) is 28,000. The
   estimated number of children (aged 0-17) orphaned due to all causes (2009 estimate) is
   140,000.

Summary of the situation of children and women

1. Kyrgyzstan remains the second poorest country in the Central and Eastern
   Europe and the Commonwealth of Independent States region. Despite significant
   decreases in poverty between 2003 and 2008 — overall poverty declined from 64 to
   31.7 per cent and extreme poverty from 28 to 6.1 per cent — one in five children is
   still poor, and three quarters of child poverty occurs in rural areas. Recent declines
   in poverty levels resulted largely from massive migration from poverty-stricken
   rural areas to cities and to the Russian Federation and Kazakhstan. In 2008,
   Kyrgyzstan was the fourth most remittance-dependent country in the world.1

2. The effects of the global economic crisis in 2009 (including sharp reductions
   in exports, and a 15 per cent fall in remittances), as well as the instability of 2010,
   will have lasting impacts on vulnerable groups, including women and children. By
   mid-2010 the budget deficit had risen above 10 per cent, and national debt was
   growing. These major economic and financial challenges are likely to reduce social
   spending and delay important reforms in key sectors.

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1 International Monetary Fund.
3. In June 2010, violent inter-ethnic clashes in southern Kyrgyzstan resulted in at least 415 deaths and large-scale property destruction. Approximately 400,000 children were affected. Many fled their homes, while others suffered psychological damage and interruption of schooling. The conflict, which followed the violent overthrow of the former president in April 2010, continues the recent series of shocks that threaten to reverse positive trends in social spending and poverty reduction.

4. Despite recent progress in service provision, 38 children out of 1,000 die before reaching the age of 5. Maternal mortality is still unacceptably high, at 69.1 deaths per 100,000 live births, indicating inadequate quality of care for women during pregnancy, labour, delivery and the post-partum period. Seventy per cent of maternal deaths are preventable. Maternal mortality is 1.5 to 2 times higher in district hospitals and remote mountainous areas. Staff shortages, limited specialized assistance and poor access are the main reasons for these deaths. Underlying reasons for high maternal and infant mortality include the poor nutrition of mothers, late access to antenatal care during pregnancy and chronic poverty.

5. HIV and AIDS is another area of concern. Newly registered cases have increased by 25 per cent annually over the last decade, making it unlikely that the country will meet the target for Millennium Development Goal 6. Rates of narcotics dependency and HIV infection are high in the city of Osh, which is located along major drug-trafficking routes. In recent years, over 100 young children were infected with HIV in medical facilities in Osh. Women and children diagnosed with HIV suffer wide-ranging stigma and discrimination.

6. Young children suffer from stunting, low birth weight and micronutrient deficiencies. Over 4.5 per cent of children nationwide are underweight, more than 1.5 times higher than the Millennium Development Goal 1 target. Malnutrition is an underlying cause of 60 per cent of deaths among children under 5. Undernutrition constitutes 22 per cent of all under-five deaths, approximately 1,547 deaths annually, including neonatal deaths. Iodine deficiency is widespread.

7. The burden of parasitic worms is 50 per cent or more among the general population and 75 per cent among school-aged children. Causes include limited access to safe drinking water, inadequate sanitation facilities and poor hygiene practices. According to the 2006 Multiple Indicator Cluster Survey, 11.8 per cent of the population had no access to clean drinking water, and access was poorer in remote and mountainous areas. No district hospital had access to hot running water.

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8. Although Kyrgyzstan is close to achieving Millennium Development Goal 2 (universal primary education for both boys and girls), the net enrolment ratio was 84 per cent in 2007. Despite substantial public expenditure on education, learning achievements are of great concern. Testing under the 2009 Programme for International Student Achievement (PISA) ranked Kyrgyzstan last out of 65 countries. It showed no improvement from 2006, when the country was last out of 57 countries. Teacher quality is one of the main factors affecting the quality of education. A UNICEF-supported study in 2009 involving the Ministries of Health and of Education and Science revealed a 23 per cent shortage of trained teachers nationwide. Only 12 per cent of children in the age cohort attend preschool. This is because coverage remains limited around the country, despite recent government and donor efforts to promote community-based kindergartens. Rural and southern Kyrgyzstan have particularly low preschool attendance rates.

9. Eleven thousand children live in 120 residential institutions in Kyrgyzstan. Only 2.4 per cent are orphans; many were abandoned because of poverty. In southern Kyrgyzstan, the number of children in institutions has risen by 10 per cent since the June 2010 violence. Problems in institutions include poor record-keeping, underutilized staff, psychological violence and limited educational opportunities. Little is done at community level to prevent institutionalization.

10. Lack of access to birth registration for children who are without homes, stateless or who come from unregistered migrant families leaves many children without proper identification, hindering their access to social services. Violence and abuse against children are widespread within families, with 72.7 per cent of children reporting abuse and neglect.

Key results and lessons learned from previous collaboration 2005-2011

Key results achieved

11. As part of the Ministry of Health programme to improve mother and child nutrition, a UNICEF-supported project provides Gulazyk (Sprinkles micronutrient powder) to reduce iron-deficiency anaemia. Sprinkles was given to 24,500 children aged 6 to 24 months in Talas province, which is around 10 per cent of this age group in the country. Anaemia rates fell by 25 per cent. The project also promoted the dissemination of key messages on early childhood development in support of the cognitive development of young children. Based on this unprecedented success,

11 Nurjan Musaeva, Children in State Care: Tendencies and problems, presentation made on 24 January 2011, Bishkek.
12 According to figures of the Office of the United Nations High Commissioner for Refugees, there were 24,615 stateless persons in Kyrgyzstan in January 2010. Of these, the majority were ethnic Kyrgyz, but a significant proportion were ethnic Uzbeks from Uzbekistan who had entered into unregistered marriages in Kyrgyzstan.
funding has been secured to scale up this project across the country. The project has been implemented in close partnership with the Swiss Red Cross, United States Centers for Disease Control and Prevention, and the Ministry of Health.

12. An additional 6,000 children are benefiting from social assistance as a result of the new Law on State Social Benefits. This law was developed and implemented with UNICEF support in close collaboration with the European Union (EU) and the World Bank. New eligibility criteria created by the law allowed 3,600 more families to receive benefits, an increase of 22 per cent.

13. A new Law on Preschool Education was adopted in 2009, representing a major step forward for a compulsory-school readiness programme and universal access to learning opportunities for preschool-age children. The law recognizes community-based kindergartens as viable alternatives to the full day-care system, following the success of the model piloted by UNICEF in one province.

14. To address the alarming increase of HIV among women and children, the Ministry of Health has initiated the development of the first-ever national programme for prevention of mother-to-child transmission (PMTCT) and paediatric AIDS, and modelled its integration into general medical services. This is recognized as global good practice and is now being scaled up. Currently, all children infected with HIV benefit from improved paediatric AIDS treatment and monitoring, and 54 per cent of HIV-positive pregnant women received antiretroviral medication to prevent mother-to-child transmission in 2009. UNICEF supported the development and implementation of the strategy, especially through technical expertise and the sharing of global experience and knowledge.

15. The rapid response of UNICEF to the humanitarian needs in the south following the 2010 violence contributed to the restoration of health services and ensured widespread access to school, safe water and sanitation. Child-friendly spaces were established, providing psychosocial support to around 6,000 children. UNICEF led the “Welcome to School” campaign in 277 schools, revised the curriculum to introduce peace education, and continues to provide “safe movement” to and from school for children at risk of violence.

Lessons learned

16. The World Bank global evaluation conducted in five countries in 2009 highlighted the Kyrgyzstan experience in implementing a sector-wide approach (SWAp) in the health sector as being among the most successful worldwide. The SWAp 2010 Joint Annual Review highlighted the strategic role of UNICEF in the process, especially through the integration of maternal and child health as a priority in sector reform; successful advocacy for allocation of funds to maternal and child health; the training of over 75 per cent of maternity staff on effective perinatal and neonatal care and resuscitation; and equipping 62 maternity wards with basic lifesaving equipment. Experiences from implementing the health SWAp will be applied to the planned SWAp in education.

17. A 2009 study by the Ministry of Education and Science, supported by UNICEF, the World Bank and the Aga Khan Foundation, showed that high rates of teacher turnover and the quality of education require close monitoring to make community-based kindergartens more sustainable. The study revealed that about 4 per cent of school-age children (approximately 35,000) are not attending school or
not attending regularly, and 30,000 leave school after basic elementary education. The results of the 2009 PISA confirmed the decline in learning achievement. This raises concerns about the effectiveness of government policies and donor support. UNICEF will support implementation of the Education Strategy 2012-2020. The strategy aims to improve the quality of education and management of financial and human resources, in coordination with other donors and partners.

18. The inter-ethnic clashes of June 2010 and subsequent inter-agency rapid needs assessments (on health and nutrition, education, child protection and water and sanitation) revealed a number of pressing issues. These included a shortage of appropriate child care facilities; weakened education, child and social protection systems; and poor water, sanitation and hygiene facilities in schools and health centres. While the immediate humanitarian response to the events was effective, new information led to further research in peacebuilding and the role of adolescents. It points to the need for an increased, long-term presence of UNICEF at the local level in the south to consolidate achievements and ensure that these issues are properly addressed for lasting results. Emergency interventions will be mainstreamed and consolidated to address outstanding needs, including in the areas of peacebuilding, conflict prevention and disaster risk reduction.

The country programme, 2012-2016

Summary budget table
(In thousands of United States dollars)

<table>
<thead>
<tr>
<th>Programme</th>
<th>Regular resources</th>
<th>Other resources</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Equitable, quality and responsive systems for children</td>
<td>1 450</td>
<td>5 844</td>
<td>7 294</td>
</tr>
<tr>
<td>Increased access to quality social services</td>
<td>1 313</td>
<td>9 506</td>
<td>10 819</td>
</tr>
<tr>
<td>Adolescent and youth civic engagement and partnerships</td>
<td>471</td>
<td>4 985</td>
<td>5 456</td>
</tr>
<tr>
<td>for child rights</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cross-sectoral costs</td>
<td>1 366</td>
<td>4 665</td>
<td>6 031</td>
</tr>
<tr>
<td>Total</td>
<td><strong>4 600</strong></td>
<td><strong>25 000</strong></td>
<td><strong>29 600</strong></td>
</tr>
</tbody>
</table>

Preparation process

19. Programme preparation was based on the 2008 midterm review, the 2012-2015 midterm programme of the Government of the Kyrgyz Republic, and the 2010 United Nations country analysis report, complemented by the 2010 UNICEF Situation Analysis. The process was managed in parallel with preparation of the United Nations Development Assistance Framework (UNDAF) and is fully in line with its outcomes. The CPD is also informed by the 2009 United Nations country team Gender Mainstreaming Strategy and the concluding observations of the 2010 Universal Periodic Review.

20. The country team decision to proceed with UNDAF and CPD preparation was taken after consultations with the President of Kyrgyzstan. UNICEF held several planning meetings with line ministries and non-governmental organization (NGO)
partners and donors, ensuring that the CPD complements other initiatives and partnerships to support government priorities.

Programme component results and strategies

21. The overall goal is to support government and civil society efforts to increase equity and the social inclusion of children who need protection, who live in poverty and who are at risk of ethnic violence, so that they can exercise their rights. The proposed programme of cooperation addresses the three key development challenges for the realization of child rights in Kyrgyzstan: poverty, social exclusion and vulnerability, and chronic system weaknesses.

22. The key results of the programme by end of 2016 are: (a) at national level, more children and women have increased access to quality response services, including social benefits; (b) Kyrgyzstan makes significant progress in implementing key components of international treaties, including the Convention on the Rights of the Child; (c) with a focus on the most vulnerable groups in specific targeted areas, more women, girls and boys have access to and use a continuum of integrated social services, including sanitation services; and (d) an alliance consisting of the Government, NGOs and communities contributes to increasing the civic engagement of youth and partnerships for child rights.

23. The programme will contribute to (a) an increase in the number of women and children from poor and vulnerable families who have access to priority lifesaving health services, including those of nutrition; (b) effective implementation and monitoring of local plans for children by municipalities in the selected areas; (c) an increase in the proportion of children benefiting from preschool services in the targeted municipalities; and (d) a decrease in the number of boys and girls living in institutions per 100,000 child population. These results will be achieved by supporting national and local authorities in the selected areas to facilitate a secure enabling environment for the active civic engagement of youth and adolescents for economic development, peacebuilding and social inclusion.

24. The programme will use a range of strategies, including advocacy for children, building institutional capacities and use of evidence-based data to inform policy. Capacity for modelling and scaling up cost-effective interventions will be developed to support the Government and civil society in efforts to improve equity and inclusion for all boys and girls. The programme will prioritize partnerships, including with United Nations agencies, to create synergies and leverage additional resources for children, and ensure that child rights and gender concerns are effectively addressed.

25. Efforts in support of gender mainstreaming will include development of disaggregated data, analyses and monitoring. The programme will also address the challenges of domestic violence and early marriage.

26. Support to ensure effective coordination mechanisms and contingency plans for emergency preparedness and response will be provided through disaster risk reduction strategies targeting schools.

Relationship to national priorities and the UNDAF

27. The country programme has been developed in line with national priorities in the health SWAp, National Education Strategy 2012-2020, and Multi-Agency
National Action Plan for Child Protection. These priorities have guided the new UNDAF, for which UNICEF leads the Social Inclusion and Equity pillar. The programme focuses on increasing access to quality social services for vulnerable groups. UNICEF will also contribute to the UNDAF pillar on Peace, Cohesion, Effective Democratic Governance and Human Rights in the areas of peacebuilding, strengthening independent institutions and enabling the participation and engagement of civil society, adolescents and youth; and to Inclusive and Sustainable Growth for Poverty Reduction and Disaster Risk Management for child poverty reduction analysis and disaster risk reduction.

Relationship to international priorities

28. The programme is fully embedded in the Millennium Declaration, Millennium Development Goals and UNICEF medium-term strategic plan, 2006-2013. It also responds to the Convention on the Rights of the Child, Convention on the Elimination of All Forms of Discrimination against Women and the Universal Periodic Review recommendations. The programme will support national authorities to work towards their Millennium Development Goal targets, particularly those on decreasing child and maternal morbidity and mortality.

Programme components

29. The programme comprises three components: (a) equitable, quality and responsive systems for children; (b) increased access to quality social services; and (c) adolescent and youth civic engagement and partnerships for child rights. The first two components will support national systems and local partners, respectively, to ensure that reforms at the central level are effectively translated into increased access to quality social services by the most vulnerable and marginalized women, girls and boys. The third component will contribute to creating an enabling environment for the realization of the rights of adolescents and children.

30. Equitable, quality and responsive systems for children. As noted above, while State funding for the social sector has improved in recent years, social and child protection systems remain weak and fragmented. Many vulnerable girls and boys are excluded from adequate prevention and protection services. According to a recent survey, 60 per cent of extremely poor people are excluded from social assistance benefits.\(^\text{14}\) This component will therefore support policy development, standards, normative frameworks and budget formulation to improve the quality of social services and bring them in line with international standards and norms.

31. Within health, the programme will ensure that more women and children from poor and vulnerable families have access to quality, priority lifesaving health services, including those for nutrition. The programme will continue to support the Government in sector reform within the SWAp, in coordination with development partners. UNICEF will advocate at the policy level to increase the focus on vulnerable and hard-to-reach people and to ensure that State guarantees are met fully and equitably. Support will also be provided to develop the capacity of the Ministry of Health to manage mother and child health services, ensuring that priority lifesaving health services and improved monitoring and evaluation systems

\(^{14}\) Assessment of Effectiveness of Cash Transfers to Families and Children in the Kyrgyz Republic, 2008, implemented by the Center for Social and Economic Research, commissioned by UNICEF.
are in place. The programme will also continue to support the integration of PMTCT and paediatric AIDS issues into maternal and child health services. With the Joint United Nations Programme on HIV/AIDS (UNAIDS), the programme will support national policies to increase access of women and children to effective diagnostic, preventive and treatment interventions for HIV. The management of the immunization system will be strengthened to provide safe immunization services for all children. Collaboration will be enhanced with the World Health Organization, United Nations Population Fund, World Bank and United States Agency for International Development.

32. Anaemia and other micronutrient deficiencies among women and children will be addressed through the development, implementation and monitoring of a National Nutrition Strategy and enforcement of the law on flour fortification. The integrated approach initiated in one province, which combines the distribution of Sprinkles micronutrient powder to children with appropriate food practices and promotion of early childhood development, will be strengthened and scaled up nationwide.

33. In education, the programme will ensure that more boys and girls have access to quality and sustainable preschool and basic education. Within the framework of the Ministry of Education and Science strategy for 2012-2020, policy advice for system reform will be provided, focusing on quality improvement, better preparation for school, and reduction in dropout rates. The programme will focus on improving education by emphasizing the quality and availability of teachers and supporting reform regarding their status and working conditions. Legislation will be supported to ensure equitable and expanded access to quality preschool education. To improve the capacity of the Ministry to collect, analyse and use education data, particularly on out-of-school children, technical assistance will be provided to set up a reliable and independent education management information system, including for preschool education. It will be developed in close collaboration with the EU and other donors. The ongoing strategic partnership with key development partners will be strengthened to leverage resources to improve equity in access to a high-quality learning environment.

34. Ongoing collaboration will be enhanced with partners supporting education quality, and particularly with those promoting per capita education financing and school network rationalization. These partners include in particular the World Bank, United States Agency for International Development and EU. The programme will also assist in preparing and using quality assurance and monitoring frameworks for early education, including the application of Early Learning Development Standards. Peace education and disaster risk reduction will be promoted in the curriculum.

35. Regarding child protection, the expected result is that national and local authorities respond effectively to cases of violence and abuse, ensure rights to birth registration and prevent separation of children from their families. Reform of the child welfare system will be supported through policy and legislation to provide prevention and protection services through a well-functioning referral and response mechanism. A legal framework integrating child protection and social protection systems will be developed, along with State policy tools. These will include standards for child-sensitive, equitable social services, including prevention of child abandonment and gender-based violence. The programme will continue working to introduce a juvenile justice system in line with international standards.
36. In the area of social policy, the programme will increase access of poor and vulnerable families to equitable social benefits and effective prevention and response policies, programmes and services. UNICEF, along with the EU, World Bank and German Agency for Technical Cooperation, will be part of the Government’s initiative to elaborate a child-sensitive Social Protection Reform Strategy, 2011-2013, linked to employment and human development programmes. The strategy aims at reducing child poverty by reforming the design of the cash transfer system to provide categorical benefits to children. For this, key social and economic policy decision makers will use a regularly updated child poverty profile, child well-being index and poverty rates. UNICEF will enhance the capacity of decision makers in policy formulation and monitoring and analysis of public expenditures as a way of identifying “fiscal space” for progressive reforms.

37. **Increased access to quality social services.** Priority will be given to addressing inequities among poor children and women living in 23 poor urban, rural and remote municipalities. The goal is to increase access to quality basic services, including health, education, social and child protection, water and sanitation, and youth services.

38. The programme will ensure that selected municipalities coordinate implementation and monitoring of local plans for children and translate national policies and laws into concrete outcomes for children and women. Innovative approaches and cost-effective field interventions will be promoted for further scaling up in coordination with the national Government. Capacity development will enable district and local authorities to design and implement a continuum of integrated social services for the most excluded children, adolescents and women and to close gaps in access to and use of quality services.

39. With a focus on the most vulnerable groups, the programme will aim to ensure an increase of at least 25 per cent of women and children using priority lifesaving health services in the selected municipalities. Local authorities and communities will be supported to actively promote maternal and child health home-visiting services and outreach programmes to address child and maternal mortality. The network of healthy lifestyle centres working closely with village health committees will be strengthened to achieve sustainable outcomes. Water-borne and sanitation-related diseases will be addressed by increasing access to safe water and adequate sanitation in schools and primary health care centres and by promoting behaviour change among schoolchildren, women and families, including the adoption of good hygiene practices.

40. The programme will seek to raise by least 30 per cent the number of children benefiting from preschool services in targeted municipalities. It will promote community-based kindergarten models, including by strengthening capacities of local authorities and communities to open and sustain community-based kindergartens.

41. In cooperation with civil society organizations, local authorities will be supported to increase demand for quality social services for women and children, including by protecting children at risk of being separated from their families and placed in institutions. Communication for development will be used as a cross-cutting strategy to promote positive social and behavioural outcomes among communities, including those on improved parenting, inclusive peace and tolerance.

42. In 13 targeted municipalities in the south, local authorities and communities will be supported to promote safe and tolerant schools through a peace education
programme. Youth services will create opportunities for young people from different ethnic communities to gather and interact. The aim will be to empower youth to participate in peacebuilding, reconciliation and conflict prevention and decision-making, and to provide them with skills and opportunities to better their lives. Successful initiatives will be promoted for further scale-up.

43. In view of the frequency of natural disasters, the capacity of local authorities will be strengthened for emergency preparedness and response and in disaster risk reduction.

44. **Adolescent and youth civic engagement and partnerships for child rights.** Based upon the specific situation of adolescents and youth and the role they played in the 2010 events, the programme will support the development of national capacities to promote civic engagement and participation of adolescents in activities promoting social cohesion, peacebuilding and reconciliation, while increasing their access to social services and opportunities.

45. This will be achieved by ensuring that national and local authorities in the targeted areas facilitate a secure enabling environment for the active civic engagement of youth. The Ministry of Youth and youth organizations will be supported to improve planning, implementation and coordination of youth services and to strengthen the participation of youth in decision-making processes affecting their lives. Youth leaders and volunteers will be mobilized to engage with vulnerable youth in poor and rural areas. Continued advocacy with decision makers and policymakers will be pursued through visits between youth and decision makers, promotion of inter-generational dialogue and collaboration with community-based and faith-based organizations.

46. The programme will ensure that alliances for children are formed that include the Government, Parliament, the private sector, civil society and the media to support programme results. This includes increasing access for children to quality social services and leveraging resources for children. Innovative approaches with the media will be pursued to give opportunities for children and young people to voice their opinions. A particular emphasis will be given to increasing equitable access to information, especially for disadvantaged and deprived groups. Collaboration with national and local television and radio will be sought to increase broadcast time and organize special programmes for youth, especially in multi-ethnic communities. Partnerships will be facilitated with the use of Internet resources and social media, as well as through community-based networking.

47. Finally, the programme will enhance national capacity in monitoring and evaluation to inform evidence-based policymaking and budgeting around adolescent and child issues, including child poverty. This component will support the production of annual disaggregated data, including on gender equality. The existing Office of the Ombudsman of the Kyrgyz Republic, a children’s ombudsman institution, will monitor the situation of children and produce accurate and timely reports on child rights. The child well-being index will help to track the situation of children and adolescents and provide important information to help monitor progress towards the Millennium Development Goals.
Cross-sectoral costs
48. Cross-sectoral costs cover salaries of cross-cutting staff, travel, training and equipment, as well as additional operational support to country office management and administration.

Major partnerships
49. The programme will work with key counterpart ministries, including the Ministries of Health; Education and Science; Social Protection; Youth; Labour, Employment and Migration; Emergency Situations; Justice; Economic Regulation; and Agriculture. Other national partners include the Supreme Court, National Statistical Committee and Public Television and Radio Corporation. Activities at municipal level will be coordinated through local governments, State Agency of Local Self-Government, line ministries and local NGOs. The programme will also collaborate with parliamentary social committees on children’s and adolescents’ issues, including on budgetary allocations. UNICEF will collaborate with local and international research institutions to support knowledge generation and with media and universities to implement a child rights syllabus for journalists.

50. UNICEF is partnering with the EU in the social protection and education sectors. In education, UNICEF is working closely with the World Bank, including to implement grants under the Education for All Fast Track Initiative. Finally, UNICEF will continue to be an active member of the United Nations country team and the Humanitarian Country Team and a participant in key activities involving the United Nations. UNICEF will collaborate on the EU Good Governance and Social Justice co-funded project, which involves UNICEF; the United Nations Development Programme; United Nations Educational, Scientific and Cultural Organization; and the United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women).

Monitoring, evaluation and programme management
51. Implementation of the current cooperation arrangement will be monitored through joint annual reviews as well as a midterm review of progress in 2014. An evaluation of the UNICEF response to the 2010 emergency and lessons learned will be conducted. The following key indicators disaggregated by geographic location, sex and socio-economic conditions will be monitored: preschool attendance and school dropout rates; quality of education; mother and child health; adoption and implementation of normative frameworks in social protection and child protection, including juvenile justice; and capacities and conditions for evidence-based planning, policy development and budgeting.

52. A situation analysis will be developed in 2015 using new data generated by the Demographic and Health Survey, Multiple Indicator Cluster Survey and other surveys. The programme will continue supporting national DevInfo and TransMONEE to improve monitoring and the production and dissemination of the child well-being index, which will be reviewed to improve its focus on equity. A secondary data analysis of the status of children and those living in poverty will be undertaken on the basis of the household survey data.