

Mozambique

Country programme document 2012-2015

The draft country programme document for Mozambique (E/ICEF/2011/P/L.37) 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 (<i>millions, under 18 years</i>)	11.6
U5MR (<i>per 1,000 live births</i>)	142
Underweight (<i>%, moderate and severe, 2008</i>)	18
(<i>%, urban/rural, poorest/richest</i>)	14/20; 24/8
Maternal mortality ratio (<i>per 100,000 live births</i>)	550 ^a
Primary school attendance (<i>% net, male/female, 2008</i>)	82/77 ^b
Survival rate to last primary grade (<i>%, 2007</i>)	44
Use of improved drinking water sources (<i>%, 2008</i>)	47
Use of improved sanitation facilities (<i>%, 2008</i>)	17
Adult HIV prevalence rate (<i>%</i>)	11.5
Child labour (<i>%, 5-14 years old, 2008</i>)	22
Birth registration (<i>%, under 5 years, 2008</i>)	31
(<i>%, male/female, urban/rural, poorest/richest</i>)	31/31, 39/28, 20/48
GNI per capita (<i>US\$</i>)	440
One-year-olds immunized with DPT3 (<i>%</i>)	76
One-year-olds immunized against measles (<i>%</i>)	77

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

^a 410 deaths per 100,000 live births is the estimate developed in the Third General Population and Housing Census, 2007.

^b Survey data.

Summary of the situation of children and women

1. Seventy per cent of Mozambique's 22.4 million people live in rural areas and over 50 per cent are under 18 years of age.¹ Poverty levels have remained unchanged since 2003, at approximately 54 per cent; however, there has also been a 26 per cent increase in consumption-based poverty rates since 2003.² Economic growth, which averaged 7.5 per cent per year during 2005-2010, has not been equitable, and economic and social disparities have increased. Natural disasters and disease, low agricultural productivity and population growth have contributed to persistence of poverty.

2. The UNICEF country programme 2012-2015 is part of the United Nations system's overall initiative "Delivering as One" to the Government of Mozambique in the final stretch of the Millennium Development Goals timeframe of 2015. The Government's 2010 progress report on the Millennium Development Goals estimated that Mozambique is likely to achieve four of the 21 targets — universal primary education, child mortality, HIV/AIDS, malaria and other diseases and global partnerships — with potential to reach nine others. However, high national averages hide persisting disparities, particularly those affecting children. For

¹ National Statistics Institute (INE), 2010.

² *Poverty and Well-being in Mozambique: Third National Poverty Assessment* (2008 figures). Ministry of Planning and Development, 2010.

example, Zambézia province has the highest under-five mortality rate in the country: 206 per 1,000 live births, compared to the national average of 152 per 1,000 live births.

3. The likelihood of reaching the Millennium Development Goal for maternal mortality is low, despite an increase in deliveries attended by skilled health personnel — from 48 per cent in 2003 to 55 per cent in 2008. The maternal mortality ratio is 500 deaths per 100,000 live births. Pregnancy-related causes account for 37 per cent of deaths of women in the 15- 24 age group; 41 per cent of women in the 15-19 age group had at least one child in 2008; and 52 per cent are married before the age of 18 and 17 per cent before the age of 15. Women experience lower social and economic status than men, and suffer higher illiteracy rates and poorer health, especially in rural areas, where 87 per cent of women are employed in the informal sector. Some 36 per cent of women believe that the use of violence by their husbands is justifiable.³

4. On the positive side, Mozambique has approved a national Children's Act, a Juvenile Justice Act, a Trafficking Act and a Domestic Violence Act. With the formation of the National Council for Children, standardized procedures for victims of violence and minimum standards for vulnerable children have been established. The National Plan of Action on Birth Registration was adopted in 2006; approximately 4.2 million children under the age of 18 are now registered.

5. Despite a decline in the child mortality rate, the Millennium Development Goal is unlikely to be met, without accelerated progress, particularly in rural areas. Some 141 out of 1,000 children die before their fifth birthday,⁴ one third of them from malaria. Diarrhoeal diseases, including cholera, cause nearly 10 per cent of child deaths. Only 47 per cent of households have access to safe drinking water, with major disparities between provinces, and rural and urban households. Only 17 per cent of households have access to improved sanitation facilities.⁵ Stunting remains at 44 per cent, severely affecting child well-being and development.

6. HIV is also among the highest causes of child deaths and for children's increased vulnerability to poverty and deprivation.⁶ Adolescent girls and young women are three times more likely than their male counterparts to be affected by the pandemic.⁷ According to the first national survey on HIV/AIDS in 2009, prevalence is 11.5 per cent for men, and 13.1 per cent for women, with significant geographical variations and disparities by sex and age. There are an estimated 1.8 million orphans in Mozambique, 510,000 of them orphaned due to AIDS.⁸

³ Mozambique multiple indicators cluster survey (MICS), 2008.

⁴ MICS 2008.

⁵ *Mozambique Joint Monitoring Programme Report — Progress Update 2010*. This report uses multiple sources of data, including the MICS 2008, in its calculations. According to MICS 2008, these values are slightly different, with 43 per cent of households having access to safe drinking water and 19 per cent of households with access to improved sanitation facilities.

⁶ Information based on the Bristol indicators measurement of poverty. PARPA II Impact Evaluation Report, Maputo, 2009.

⁷ Progress Report (2008-2009) to the United Nations General Assembly Special Session, Republic of Mozambique and National AIDS Council, 2010.

⁸ *Demographic Impact of HIV/AIDS in Mozambique. Update — Epidemiology Surveillance Round 2008*, National Institute of Statistics, Maputo, 2009.

7. Less than 50 per cent of children in Mozambique complete primary education and 44 per cent of children in primary schools are over-age. Progress in enrolment masks challenges in the quality of education, and declining learner achievement. Only 42.8 per cent of children transition to secondary education. Early childhood development programmes cover only 4 per cent of children under 6. A 2008 Ministry of Education survey revealed that 70 per cent of girls in school believe that teachers use sexual intercourse as a condition for promotion between grades and 50 per cent of girls said that both teachers and boys in their peer group abuse them sexually.

8. Water, sanitation and hygiene continue to be major priorities for the Government and its development partners. Recent initiatives include the establishment of the Common Fund for and sector-wide approach (SWAp) to rural water supply and sanitation, operationalization of a legal and management framework for urban water supply and sanitation, and establishment of a legal framework for participation of private sector implementing partners. Despite these initiatives, the country may not meet the Goals targets for water and sanitation and the national target of universal coverage by 2025.

9. Exacerbating all of these realities is the ongoing spectre of natural disasters, which can tip vulnerable families into desperate need. Mozambique experiences regular patterns of flooding and cyclones, as well as drought, which impacts rain-fed agriculture and overall food security.

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

Key results achieved

10. In collaboration with other United Nations agencies, UNICEF leverages evidence into action for children by providing support through child statistics and budget analyses to the Government, Parliament and civil society for the development of transparent and evidence-oriented budgets and policies, focusing on the most vulnerable. Tools, such as reader-friendly budget briefs, trigger public debate on the situation of children and public investment in social sectors. UNICEF will continue this work in the new programme cycle, using budget training at the provincial level as an entry point for further capacity building in child-centred planning and programming, and for developing rights-based tools to monitor results for the most vulnerable children and to advocate for policy change.

11. Progress has been made in applying lessons learned from local-level successes to national policy dialogue and change. The Community Approaches to Sanitation, introduced in 2008 within the One Million Initiative, is a partnership among UNICEF and the Governments of Mozambique and the Netherlands, aimed at providing access to safe water and sanitation to one million people by 2013. As of 2010, 466 villages have been declared open defecation free and 650,000 people had gained access to safe sanitation. Good practices drawn from this experience were a key input in the development of the SWAp to rural water supply and sanitation.

12. The child-friendly schools (CFS) initiative is a multisectoral, area-based package that aims to improve the quality of education in primary schools. This model, based on low enrolment and completion rates and low gender parity, was

implemented in seven districts, starting with one district in 2006-07 and has now reached nearly 400,000 children and 750 schools. At least 90 per cent of all children in targeted districts are enrolled in primary schools and 60 per cent complete primary education (national average is 45 per cent). Over 90,000 orphaned children are enrolled in schools, and dropout rates have decreased by 2.3 per cent for girls since 2009. In addition, 360 schools received improved water and sanitation; 275 classrooms were constructed or refurbished; over 133,000 children in grades 1-2 were immunized against tetanus and nearly a million children were dewormed. Furthermore, the CFS initiative has resulted in the mainstreaming of lessons learned in multi-sectoral planning and programming into national education policy; the integration of life skills and prevention of HIV and violence in school and community planning; and the promotion of multi-sectoral coordination at decentralized levels to ensure that schools provide quality environments for children.

13. The 2007-2011 programme was also successful in promoting multi-partner, multi-level strategies in areas such as prevention of HIV/AIDS and violence, within wider United Nations and partner collaboration. The application of multiple strategies and advocacy has moved one of the lowest birth registration rates in the region to the current coverage of 40 per cent of all children.

Lessons learned

14. The 2010 United Nations Child Poverty Study and the 2010 National Consumption Poverty Survey⁹ highlighted the significant geographical disparities in access to services for children and their families, between rural and urban areas, and among provinces. In an effort to address this, the new country programme will take a three-tiered geographical approach: continue support for decentralized programming through strengthening of services and capacity development at the district level; continue support to planning and budgeting in seven provinces, with particular focus on the two provinces with the greatest equity gaps, while at the same time working with partners at the national level on wider policy and planning initiatives for children; and focus nationally on social protection, for the development of long-term and viable safety nets for the poorest children and their families.

15. The 2007-2011 programme initiatives led to positive results through innovation in partnerships. With United Nations partners, UNICEF convenes cross-sectoral participation and coordinates links among the Government, the civil society, the media and the private sector. In particular, powerful partnerships have developed with the Civil Society Forum on Child Rights, and the Civil Society Budget Monitoring Forum. In addition, the United Nations in Mozambique has taken on a new role in SWAps, providing resources through common funds and consistently reporting its financial resources on the State Budget and national execution reports, according to the principles of the Paris Declaration on Aid Effectiveness and Accra Agenda for Action. This success will form the basis for partnership growth in the new programme.

16. Positive results achieved through intersectoral and multi-organizational collaboration in the face of emergencies have proven the value of partnerships and

⁹ Family Budget Survey (Inquérito de Orçamento Familiar — IOF), 2010.

of strengthening systems for the prevention and mitigation of emergencies. Building on this experience, the new programme, under Government leadership, will take a collaborative approach and longer-term focus on disaster risk reduction.

17. The 2010 evaluation of capacity development initiatives highlighted the need for the development of a more cohesive strategy for capacity development. The current programme cycle focused on building capacity in logistics and supply chains in the health sector at the national level, and building capacity in planning, monitoring and supervising civil construction works at the district level. In the new cycle, the focus will be on a more holistic and sustainable strategy for institutional development; capacity building at the provincial district levels; and collaboration with high-level training institutions to prepare professionals in key areas of child development.

18. There is a need to strengthen the work of the United Nations and its partners in cross-cutting programme areas, such as early childhood development, participation of adolescents and achievement of gender equity. In order to avoid marginalization of these priorities and ensure their integration into the wider joint programming within “Delivering as One”, efforts will be made to establish and strengthen cross-sectoral task teams, similar to the very effective HIV and AIDS working group and United Nations collaboration in areas of gender and violence prevention that functioned during the current programme cycle.

The country programme, 2012-2015

Summary budget table

(In thousands of United States dollars)

<i>Programme</i>	<i>Regular resources</i>	<i>Other resources</i>	<i>Total</i>
Child health and nutrition	14 800	45 200	60 000
Water, sanitation and hygiene	10 000	38 000	48 000
Basic education	10 800	27 000	37 800
Child protection	8 000	27 800	35 800
Communication, advocacy, participation and partnerships	7 800	16 200	24 000
Social policy, planning, information and monitoring	6 000	3 800	9 800
Cross-sectoral costs	6 636	6 000	12 636
Total	64 036	164 000	228 036

Preparation process

19. Mozambique is a pilot country for Delivering as One. The proposed programme is part of the United Nations Development Assistance Framework (UNDAF) 2012-2015, which was developed with the Government of Mozambique, in dialogue with civil society. It is aligned with the National Poverty Reduction Strategy 2010-2014, the Millennium Development Goals, and United Nations conventions, including the Convention on the Rights of the Child and the

Convention on the Elimination of All Forms of Discrimination against Women. The overall goal of UNDAF is reduction of poverty and disparities to improve the lives of the most disadvantaged people in the country. The 21 organizations of the United Nations system in Mozambique have developed a strategic outcome level UNDAF and a detailed UNDAF Action Plan, with an accompanying joint monitoring and evaluation framework, to guide United Nations delivery in the country.¹⁰ It should be noted that, although a decision was taken not to develop a common CPD document, the UNDAF Action Plan replaces individual agency action plans, and will serve as a strong joint framework for programming.

20. Under the leadership of the Ministry of Foreign Affairs and Co-operation (MINEC), the country programme was developed through consultations. Another key feature permeating the UNDAF planning process was joint thinking on culture, gender and human rights, developed collaboratively, with key leadership from UNFPA, UNESCO and UNIFEM and with UNICEF support in the area of programming for human rights. Civil society partners have been instrumental in bringing the observations of the Committee on the Rights of the Child to the fore of public discussion, under the leadership of the Civil Society Forum on Child Rights.

Programme and component results and strategies

21. The main goal of the country programme is to leverage evidence and catalyse action to reduce disparities and transform children's lives, and accelerate the equitable achievement of the Millennium Development Goals. UNICEF will work towards the achievement of 12 programme component results aligned with UNDAF's eight outcomes.

22. UNICEF programming will focus on equity and rights fulfilment for the most marginalized and vulnerable children, with a cross-cutting focus on capacity development of duty bearers to create and sustain change. Support will be given to prioritization of children in policies, planning and budgets; strengthening of sustainable service delivery at the subnational level; and community involvement in development, including the participation of children, supported by advocacy for on-going sectoral decentralization throughout the country. There will be a programme-wide focus on evidence-based advocacy for child rights and support for the use of solid data and analysis in policy decisions and national planning. In line with the revised Core Commitments for Children in Humanitarian Action, UNICEF will take a distinctive rights-based approach to disaster risk reduction, working with children and youths to increase community resilience and strengthen disaster management capacities. The programme will also have a strong focus on gender, environmental sustainability and the impact of climate change.

23. HIV and AIDS programming will continue to be mainstreamed in each component. Under the leadership of a multisectoral HIV and AIDS working group, which, in turn, feeds into the United Nations joint team on HIV and AIDS, cross-sectoral action is organized around the four Ps: preventing mother-to-child transmission of HIV, providing paediatric treatment, preventing infection among adolescents and young people, and protecting and supporting children affected by AIDS.

¹⁰ The total number of agencies with contributions in the UNDAF is 21 (10 resident and 11 non-resident).

Relationship to national priorities and the UNDAF

24. The UNDAF has been developed in line with the Government's Five Year Plan (2010-2014) and its corresponding operational strategy, the Plan for the Reduction of Poverty 2010-2014. The country programme will contribute to the achievement of national development goals within eight UNDAF outcomes, which cover three broad areas: governance, social disparities, and economic disparities. Programme results will reflect the logic of the three-pronged rights-based strategy developed in UNDAF to support: national and decentralized capacities for rights delivery; populations ready to demand and access services; and a national framework of legislation and policies to support these actions. The programme will also support the new, cross-sectoral National Plan of Action for Children, coordinated under the National Council for Children.

Relationship to international priorities

25. The country programme is organized sectorally, in line with government programming, with emphasis on the focus areas of the medium-term strategic plan. It also took into consideration the goals of the *World Fit for Children* and the Declaration of Commitment of the General Assembly Special Session on HIV/AIDS, and the accountabilities of UNICEF in the new Joint United Nations Programme on HIV/AIDS Division of Labour. UNICEF is co-convenor of the UN joint programme, "Enhancing social protection for people affected by HIV", and chairs the United Nations team on the AIDS working group on mitigation.

26. An emerging focus on climate change and its impact will guide programme planning and implementation. Discussion of climate change is nascent in Mozambique, but UNICEF will step forward to take leadership in this area, advocating for the rights of the most vulnerable in planning for results and resources towards building adaptive capacity to make their lives safer and their communities more resilient to climate change and natural hazards.

Programme components

27. **Child health and nutrition.** This programme component will prioritize child survival in line with the Government's 2009-2015 Integrated Plan for the Achievement of the Millennium Development Goals on child mortality and maternal health, with emphasis on: policy and planning, child health, nutrition (particularly the reduction of stunting), and HIV (particularly the elimination of paediatric AIDS). United Nations agencies will pursue health results jointly through the United Nations Social Sector Development Results Group.

28. *Expected results:* (a) national policies, operational plans and adequate resource allocations are in place to improve the health system's performance; and (b) vulnerable children and their families have access to, and make use of, quality promotive, preventive and curative health, nutrition and HIV services. Regular resources will support technical assistance to Government counterparts for delivery of essential services to the most vulnerable populations. Other resources will be sought to expand programme outreach and respond to emergencies, in collaboration with the wider United Nations system.

29. UNICEF and its United Nations partner agencies will collaborate with the Ministry of Health and the health directorates of selected provinces in the

preparation and implementation of their respective plans. It will remain an active member of the SWAp to health by providing technical and financial assistance. UNICEF will also be part of the United Nations joint programmes on health and nutrition and on HIV/AIDS, and work with non-governmental organizations (NGOs) for service delivery in hard-to-reach areas and for piloting innovative approaches.

30. Partners will include the Ministry of Health, the Ministry Education, the Ministry of Women and Social Action, the Ministry of Industry and Commerce, the Food and Nutritional Security Technical Secretariat and the National AIDS Council. Bilateral and multilateral partners will include the Canadian International Development Agency (CIDA), the United Kingdom Department for International Development (DFID), Irish AID, the Danish International Development Agency (DANIDA), the Netherlands, Switzerland, the European Union, the World Bank and the Global Fund to Fight AIDS, Tuberculosis and Malaria. United Nations partners will include the Food and Agriculture Organization of the United Nations, the United Nations Population Fund (UNFPA), the World Food Programme (WFP) and the World Health Organization (WHO). Other partners include international and national NGOs, civil society, academic/training institutions and the private sector.

31. **Water, sanitation and hygiene.** This component will support the Government in strategic coordination; reinforcement of data management systems; strategic studies and knowledge management for equity-focused policy development; and decentralized implementation to ensure increased access to, and use of, safe and sustainable water, sanitation and hygiene (WASH) services by vulnerable groups. UNICEF will support scaling up of rural water supply and sanitation, with specific technical support to Tete, Manica, Sofala and Zambézia provinces, and infrastructure service delivery in schools, capitalizing on lessons learned and good practices of WASH programmes funded by other development partners, including the Japan International Cooperation Agency.

32. *Expected results:* (a) capacities and alliances for strategic coordination are strengthened and equity and disaster risk reduction-focused policies and systems developed for sustainable WASH service delivery; and (b) vulnerable populations in rural and peri-urban areas have improved access to, and use of, safe and sustainable WASH services. Specific attention will be paid to vulnerable groups and to those living in remote rural areas and neglected peri-urban areas, and to strengthening the capacities of the Government and WASH partners at national and subnational levels for emergency preparedness, coordination and response.

33. Partners will include the Ministry of Public Works, through the National Water Directorate, and the provincial directorates of Public Works and Housing; the Ministry of State Administration through the district governments and municipalities; the Ministry of Health; the Ministry of Education; United Nations agencies; civil society; the private sector; and academic/training institutions. Bilateral and multilateral partners include: the Netherlands, the Swiss Development Co-operation, DFID, CIDA, the Japanese International Cooperation Agency, the Austrian Development Cooperation, the Millennium Challenge Corporation, the World Bank, the African Development Bank and the Islamic Development Bank.

34. **Basic education.** This component will promote the quality of primary education; age-appropriate school entry; and school retention, with improved learning levels and transition to secondary education. The development of strategies for out-of-school children and for early childhood development will be emphasized,

as will support to intersectoral collaboration, in line with the Strategic Plan for the Education Sector, 2012-2016. Results will be sought through the United Nations Social Sector Development Results Group, supporting joint contribution to knowledge, equity and quality through the SWAp, promoting strategic partnerships, harmonization and efficient utilization of human and material resources. Focus will be on early learning; school quality; teacher development; development of children's life skills (for prevention of HIV/AIDS, violence and sexual abuse) and promotion of disaster risk reduction; equitable access to education; institutional capacity development; and the mainstreaming of lessons learned from child-friendly schools into national policy dialogue and planning. United Nations partners will support evidence-based programming, through multisectoral, gender-sensitive, safe, healthy and quality learning environments; capacity development; community-based care for young child development; provision of school and teacher development materials; and construction of schools and water and sanitation facilities. Cross-cutting focus will be on the prevention of HIV and AIDS in young people (both in and out of school), and the prevention of violence against girls.

35. *Expected results include:* (a) policies and standards on school and learner quality and teacher education are developed, mainstreamed into the national education system and results focusing on equity are monitored; and (b) the Government applies a rights-based, multi-sectoral approach to enable at least 70 per cent of children to complete a quality basic education in selected districts, with focus on vulnerable communities and girls.

36. Partners will include the Ministry of Education, training institutions, educational administrations at decentralized levels and civil society organizations. Potential areas of common interest and opportunities for synergy with United Nations agencies (WFP, UNFPA, WHO and UNESCO) and sector partners (in the SWAp) have been identified and will contribute to coordinated programming and harmonized strategies. Internal coordination between programmes will be strengthened further through the Child-friendly Schools Working Group for inter-ministerial coordination in the implementation of the multisectoral approach and to strengthen social action strategies for out-of-school children, especially girls. Regular resources will be used for sector-pooled funds and policy support while other resources will support implementation of evidence-based strategies in targeted areas.

37. **Child protection.** This component will support joint United Nations and Government efforts to: ensure that all children are free from violence, abuse, exploitation and neglect; coordinate a systematic response to child protection, including provision of quality services; and work for social change at the community level. It will also support civil society to complement Government-led programmes. Social protection programmes are supported through a strong joint United Nations team, and will be linked to disaster risk reduction and response and contribute to the prevention and mitigation of the impact of HIV/AIDS and chronic poverty; and improve the resilience and livelihoods of poor households and promote access to services. Other resources will be used to support a national system for child protection and a scaled up response to prevention of violence and abuse; and programmes for the most marginalized households, complemented by additional services in psychosocial support, alternative care and legal protection.

38. *Expected results:* (a) child protection policies, legal framework and systems are strengthened to create a coordinated multi-sectoral protective environment for all children, through social change; and (b) social protection programmes and systems respond effectively to the rights of the poorest and the most vulnerable children and their families, complemented by quality social welfare services.

39. Partners will include the Ministries of Women and Social Action, Justice, Interior, Health, Education), civil society, development partners, academia, the private sector and the media, as well as United Nations agencies, particularly ILO and WFP, the World Bank and the International Monetary Fund. Bilateral partners include the Swedish International Development Cooperation Agency, DFID and the Royal Netherlands Embassy. In the area of social protection, there is a social action working group — a donor and government forum that is developing a comprehensive programme and working towards the formation of a SWAp.

40. **Communication, advocacy, participation and partnerships.** This component aims to strengthen the ability of duty bearers and recipients to make informed decisions, demand services and take key actions related to their own well-being, in line with the UNDAF governance area commitments and results. Employing a mix of communication for development, advocacy and public awareness strategies, media capacity building, high-visibility events and strategic use of evidence, the programme will promote the meaningful participation of children and young people with an imperative to reduce violence and sexual abuse and the impact of HIV and AIDS on adolescent girls. Civil society and the private sector will be engaged as key allies in child-friendly development, with particular attention to the social spaces that exist for children at the local level.

41. *Expected results:* (a) children, young people, civil society, private sector representatives and duty bearers participate in the formulation and monitoring of a transparent and equitable national development agenda; and (b) children, young people, women and their duty bearers in targeted districts and emergency-prone areas adopt, sustain, and promote behaviours, attitudes and practices, to improve the well-being of people, especially to reduce girls' vulnerability to HIV.

42. The main partners will be the Government Information Office (within the Prime Minister's Office), the National Youth Council, the National AIDS Council, national television and radio stations, the Forum of Community Radio Stations, the Media Institute of Southern Africa, the Eduardo Mondlane University, civil society and the private sector.

43. **Social policy, planning, information and monitoring.** In this component, the United Nations, in partnership with the Ministry of Planning and Development, the Ministry of Finance, the National Institute of Statistics, and the Parliament, will focus on policy review, monitoring and evaluation; availability and use of strategic information on the situation of children; and the establishment of monitoring mechanisms for child poverty. The strengthening of routine monitoring systems and the use and dissemination of the Social, Demographic and Economic Statistics — the national DevInfo database — will be linked to capacity development of civil society and local government for improved planning, monitoring and evaluation.

44. *Expected result:* evidence-based advocacy and innovative partnerships to strengthen a national agenda for increased resource levels for pro-poor, pro-child growth and strategic planning.

45. Strategic alliances with United Nations agencies, the IMF and the World Bank will support the Government's increased commitment to address poverty and vulnerability through social protection. Other partners will include the National Statistics School, sectoral line ministries, donor groups on budget and poverty analyses, the National Statistics Common Fund and civil society.

46. **Cross-sectoral costs.** Programme management and operations support will promote effective and efficient systems, robust information and communication technology systems, innovative advocacy initiatives in support of UNICEF priorities, and support programme planning and monitoring, logistics and joint operational support in the context of "Delivering as One". Cross-sectoral costs account for 10 per cent of planned regular resources and 4 per cent of other resources. This is consistent with the previous programme period.

Major partnerships

47. The country programme will be managed under the leadership of the Ministry of Foreign Affairs and Co-operation, as co-coordinator of the UNDAF Steering Committee. Collaboration with the IMF and the World Bank and cooperating partners will continue to grow, as will partnerships with civil society and key civil society forums, the media, universities, traditional leaders, children and young people and their families. UNICEF is active in SWAps to education, health, and water and sanitation, and is a non-contributory member of the National Statistics Common Fund and the HIV Partners Forum.

Monitoring, evaluation and programme management

48. UNDAF outcomes and outputs will be monitored through a joint monitoring and evaluation framework, using joint review mechanisms, including a comprehensive annual review process with Government partners, under the leadership of the Ministry of Foreign Affairs and Co-operation. Development results groups, chaired by United Nations heads of agencies and Government partners, will serve as the mechanism for co-ordination and monitoring of United Nations interventions, with a comprehensive UNDAF database derived from DevInfo as a key tool¹¹. Qualitative data will be gathered periodically through field visits and evaluations, which, wherever possible, will be planned jointly by United Nations agencies and partners.

49. A comprehensive process of analysis will begin at the outset of programme implementation, and lead into a UNICEF midterm review in 2013, which, in turn, will lead into an UNDAF evaluation in 2014. Earlier in the programme, a key focus will be on the development of equity-based monitoring tools to verify results on the evolving situation of the most vulnerable children and their families. Indicators will correspond to the most readily available data on children, including the 2008 MICS and the 2011 Demographic and Health Survey. Cross-sectoral considerations will be managed through strategic working groups on equity and human rights; capacity development; advocacy and partnerships; and HIV and AIDS. UNICEF has a key role in the implementation of the Delivering as One Harmonized Approach to Cash Transfers. Efforts will be made to ensure that programme delivery is supported by

¹¹ The UNDAF database is a tool for joint monitoring of progress against UNDAF indicators, using national and programme-related data to assess results achievement throughout the UNDAF period.

efficient and effective programme management and operations. Robust information and communication technology systems and innovative advocacy initiatives focusing on UNICEF priorities will be promoted and support provided to programme planning and monitoring, logistics and joint operations in the context of “Delivering as One”.
