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Draft country programme document**

Armenia

Summary

The draft country programme document (CPD) for Armenia is presented to the Executive Board for discussion and comment. The draft CPD includes a proposed aggregate indicative budget of \$4,335,000 from regular resources, subject to the availability of funds, and \$11,018,000 in other resources, subject to the availability of specific-purpose contributions, for the period of 2021 to 2025.

* E/ICEF/2021/1.

** In accordance with Executive Board decision 2014/1, country programme documents (CPDs) are considered and approved in one session, on a no-objection basis. This draft CPD, and a costed evaluation plan, will be presented to the Executive Board for review from 17 November to 7 December 2020. The final CPD will be posted to the Executive Board web page in English six weeks in advance of the 2021 first regular session and in the other designated languages four weeks in advance.

Programme rationale

1. In 2018, Armenia reduced its poverty rate to 23.5 per cent, the lowest in a decade, and reached upper-middle-income status. However, the coronavirus disease 2019 (COVID-19) pandemic will reverse gains made in human development, inducing a 4 per cent negative growth in the country's gross domestic product (GDP) in 2020.¹ The Government is amplifying the democratic transformation launched by the peaceful Velvet Revolution in 2018 and accelerating reforms aimed at improving the well-being of the country's nearly 3 million people, including approximately 700,000 children.

2. These reforms facilitate the principles of equity and inclusion in the social change process and mobilize broad public action for child rights. The child rights architecture needs strengthening, including a monitoring system with regular reporting on the implementation of the Convention on the Rights of the Child.

3. In Armenia, 29.2 per cent of children live below the national poverty line,² and 61.6 per cent (75 per cent of children in rural areas and 52 per cent in urban areas) are deprived in two or more dimensions of multidimensional poverty. Yet family benefits reach only 12 per cent of the population.³ Ongoing social protection reforms require further action to eliminate inclusion and exclusion errors, improve the adequacy of benefit size and address insufficient public financing for social sectors.

4. The urgency of strengthening the social protection system and social service workforce while making other sectors more shock-responsive is underscored by the COVID-19 pandemic. The government recovery plan is expected to be released in 2020, following the initial stimulus packages for businesses and the allocation of relief funds for vulnerable populations. In addition to the consequences of the COVID-19 pandemic, the recurring escalation of the Nagorno Karabakh conflict further exacerbates these needs.

5. The COVID-19 pandemic has constrained the fiscal space for social sector reforms in Armenia. In 2018, 1.3 per cent and 2.0 per cent of GDP was allocated to health and education – 5 times lower than the average for countries in the Europe and Central Asia region for health, and 2.5 times lower for education. At 6.9 per cent of GDP, social protection expenditure is also below that of other countries in the region.

6. Gender discrimination in Armenia manifests in gender-biased sex selection⁴ in favour of boys; domestic violence affecting one quarter to two thirds of women; a gender pay gap of more than 30 per cent (despite the higher rate of women's enrolment in education); the heavy burden of unpaid care work; and the strong influence of patriarchal social expectations and behaviour models that disempower girls and women. The female labour participation rate (44 per cent) is visibly lower than that of males (58 per cent). Women are significantly underrepresented in decision-making and leadership positions in private and public sectors.

7. Global challenges, such as climate change, environmental degradation, pollution and access to clean, affordable energy impact children's well-being, their development and access to quality essential services. The country is prone to hazards, with natural disasters posing a particular threat to life and livelihoods. An estimated

¹ The Central Bank of Armenia, inflation report (Yerevan, 2020).

² Statistical Committee of the Republic of Armenia (ArmStat) and World Bank, *Social Snapshot and Poverty in Armenia: Statistical and Analytical Report* (Yerevan, 2019).

³ Ibid.

⁴ The sex ratio at birth in Armenia is 110/100 (Source: ArmStat, 2019). According to the World Health Organization, a natural sex ratio in human beings is considered 105–106/100.

72,562 children have blood lead levels above 5 µg/dL,⁵ impacting their cognitive development.

8. Inadequate data regarding the adolescent age group impedes the development of targeted social services and civic engagement opportunities. A high incidence of injuries is due to the lack of child and adolescent-friendly infrastructure and spaces, and accidents contribute to more than 45 per cent of deaths among children aged 1–18 years. Adolescent mental health is a growing concern: 21 per cent of children aged 11–15 years and 32 per cent of those aged 17 years reportedly have signs of depression while 6 per cent of children aged 11–15 years and 8 per cent those aged 17 years report thoughts of suicide.⁶ With 94 per cent internet penetration, cyberbullying and online abuse pose significant risks. Unemployment among youth aged 15–24 years is 33.6 per cent compared with 19 per cent for the rest of the population. Low market absorption is increasing due to the COVID-19 pandemic, fuelling informal employment among youth.

9. Infant mortality rates have halved over the last two decades to 7.1 deaths per 1,000 live births in 2018.⁷ Reduction in neonatal deaths (which account for 75 per cent of infant mortality) and post-neonatal mortality has stalled. The number of stillbirths (18.3 per 1,000 live births in 2018 compared with 15.3 in 2008) and the proportion of newborns with low birthweight (8.4 per cent in 2018 compared with 7.4 per cent in 2008) are increasing. Staff capacity and infrastructure (especially in the regions), along with underfunding of the health system, constrain the delivery of quality neonatal and paediatric services. Gaps in the knowledge and skills of parents/caregivers also undermine the continuum of nurturing care for newborns. Early identification of child disability and/or developmental delays is a problem due to lack of protocols and staff qualifications.

10. Less than 45 per cent of children in Armenia are exclusively breastfed in the first six months of their lives.⁸ The double burden of malnutrition is apparent in Armenia: approximately 9 per cent of children aged 0–5 years are stunted and 14 per cent are obese.⁹ School nutrition is a concern due to inadequate school policies and food marketing regulations.¹⁰ Based on self-reported data, 13 per cent of children aged 11–15 years are overweight, 2 per cent are obese and 16 per cent are underweight.¹¹

11. The national immunization programme is effective, reaching more than 90 per cent of children of appropriate age with vaccination.¹² However, growing “anti-vaccination” sentiment has resulted in a slight decrease in coverage and presents a risk in light of the COVID-19 pandemic.

12. Preschool education is not mandatory and takes place in a combination of public and private facilities. More than half of children aged 3–5 years attend preschools, less in rural areas than in urban areas.¹³ Insufficient budgetary and/or human resources

⁵ UNICEF and Pure Earth, *The Toxic Truth: Children’s Exposure to Lead Pollution Undermines a Generation of Future Potential* (New York, 2020).

⁶ Arabkir Medical Centre – Institute of Child and Adolescent Health, *Health Behaviour in School-aged Children of Armenia 2017/2018: National Study Results* (Yerevan, 2019).

⁷ ArmStat, *The Demographic Handbook of Armenia* (Yerevan, 2019).

⁸ Armenia Demographic and Health Survey (ADHS), 2015–16.

⁹ Ibid.

¹⁰ Onanian Centre for Health Services Research and Development, American University of Armenia, *Assessment of Nutrition Practices of Primary School-aged Children in Schools of Armenia* (Yerevan, 2018).

¹¹ *Health Behaviour in School-aged Children of Armenia 2017/2018*.

¹² WHO, *Armenia: WHO and UNICEF estimates of immunization coverage* (Geneva, 2020).

¹³ ArmStat, Integrated Living Conditions Survey, 2018.

for preschools at the local level is a fundamental constraint and impedes women's labour participation. Inclusive preschool education is limited to a few kindergartens in the capital.

13. Since 2017, 12 years of fee-free schooling has been compulsory in Armenia. Despite considerable investments in education reforms, 35 per cent of children do not achieve minimum proficiency at the end of primary school.¹⁴ Quality education remains a challenge; the education curriculum and pedagogy need revision to match the twenty-first century standards for foundational and transferable skills of school graduates.

14. The COVID-19 pandemic has highlighted inequalities in the education system; it has revealed disparities linked to poor water, sanitation and hygiene (WASH) conditions and lack of access to technology and the skills to facilitate distance learning. Approximately 77 per cent of observed schools have inadequate WASH facilities, while 52 per cent of rural schools lack basic WASH facilities, and 35 per cent of rural schools have restrooms outside the school building,¹⁵ impeding the safe return to school during and after the pandemic. Twenty-eight per cent of schools in remote, rural and border areas are non-compliant with seismic-resistant standards.

15. Since 2015, deinstitutionalization and childcare reform have reduced the number of children in state-run residential care and educational institutions by 70 per cent, to approximately 1,300 children in 2020. Most children were integrated into mainstream schools; however, capacity gaps, underfunding and lack of accessible community-based services for children with disabilities push parental preferences to "traditional" institutions, in pursuit of more specialized services for children with disabilities.¹⁶

16. Continuous efforts towards improving justice for children have successfully reduced the number of juveniles in detention. However, diversion, mediation and probation services need further strengthening as do child-friendly judicial processes and compliance of the criminal procedure legislation with the United Nations standards for child victims and witnesses.

17. Corporal punishment in Armenia is an accepted social norm, with 68.9 per cent of parents admitting to using some sort of violence to discipline children¹⁷ and 20 per cent of children self-reporting peer-to-peer violence.¹⁸ Underlying causes for such violence vary, from social norms justifying corporal punishment to lack of knowledge and capacities to effectively promote positive disciplining techniques in homes and educational institutions. Armenia joined the Global Partnership to End Violence Against Children in 2018 and has included actions towards ending violence against children in the National Strategy for Human Rights Protection (2020–2022) and action plan.

18. The Council on Sustainable Development Goals of the Republic of Armenia was established in 2015. Membership broadened in 2020 to include civil society organizations. To date, the Government has submitted two Voluntary National Reviews (in 2018 and 2020) on progress towards the Goals.

19. The evaluation of the United Nations Development Assistance Framework for Armenia, 2016–2020 recommended strengthening the formulation of results and monitoring and reporting to better measure impact. This is addressed in the United

¹⁴ World Bank, *Armenia: Learning Poverty Brief* (2019).

¹⁵ Human Rights Defender of Armenia, *Ad Hoc Public Report on Ensuring the Right of Access to Water and Sanitation in Preschools and Schools* (Yerevan, 2019).

¹⁶ Human Rights Watch, "When Will I Get to Go Home?", video, 22 February 2017.

¹⁷ ADHS 2015-16.

¹⁸ *Health Behaviour in School-aged Children of Armenia 2017/2018*.

Nations Sustainable Development Cooperation Framework (UNSDCF), 2021–2025. Based on a UNICEF evaluation of childcare reform in Armenia, the country programme will promote a comprehensive approach to the ongoing reorganization of residential care facilities, the establishment of specialized child and family support services at the local level and appropriate reforms within the mainstream education system. The evaluation recommended stronger cross-sectoral cooperation, commitment of state budgetary resources, establishment of quality standards and assurance mechanisms and special measures to retain a qualified workforce.

Programme priorities and partnerships

20. The Government and UNICEF share an overall vision of change: by 2025, all children in Armenia increasingly benefit from equitable enjoyment of their rights to survive, thrive, learn, be protected and participate – based on enhanced policies, services, resources and practices of duty-bearers, and in line with the country’s commitments to the Convention on the Rights of the Child and the Sustainable Development Goals.

21. Through strengthened partnerships, forming an integral part of the UNSDCF, 2021–2025 and aligned with Transformation Strategy of Armenia 2050, UNICEF, in partnership with the United Nations country team and the Resident Coordinator, will engage the Parliament, the Government, academic and research institutions, bilateral and multilateral development partners, civil society organizations and the private sector in the implementation of its country programme.

Social policy

22. The long-term vision of change is that, by 2025, children and families benefit from a progressively universal, inclusive and shock-responsive social protection system across the lifecycle, underpinned by equity-focused data and financing. This programme component will directly contribute to outcomes 2 and 7 of the UNSDCF and focus on: (a) strengthening national and local capacities for planning and implementing social protection policies and programmes; (b) fostering public and private investments and partnerships for children; (c) enhancing data systems and relevant capacities to inform equity-focused policies and monitor progress towards the Sustainable Development Goals; and (d) promoting gender equality in policies and practices.

23. UNICEF will contribute analytical, advocacy, technical and coordination resources for building an integrated, inclusive, child-sensitive and shock-responsive social protection system in Armenia. Defined and resourced in national policies and local programmes, cash and service-based components are expected to be mutually reinforcing. The aim is a social service workforce of appropriate profile and qualifications to ensure continuous contact with individuals or families vulnerable to poverty and other deprivations. The programme prioritizes addressing child poverty, both monetary and multidimensional. Underpinning this are cross-sectoral cooperation, strong administrative systems and adequate financing. It is critical to strengthen the ability of the system during and after the COVID-19 pandemic to effectively respond to shocks.

24. To support public investment in children’s rights, UNICEF will engage with the Government for planning and measurement of child-focused expenditures to identify needs and gaps and monitor spending in social sectors. In alignment with decentralization and community consolidation reforms in Armenia, UNICEF will enhance local capacities for child-sensitive planning and budgeting, with specific attention to resilience and risk management. UNICEF will systematically nurture partnerships with individuals, foundations, diaspora and the private sector and

encourage businesses to consider child-related areas as both an investment opportunity and a noble cause. Support to shaping the social responsibility agenda of businesses will align with Children's Rights and Business Principles. Programmes will empower girls and boys – and their caregivers and families – to voice their opinions and create a demand for child-friendly actions and policies.

25. In close cooperation with other United Nations agencies, UNICEF will continue to support the Statistical Committee of the Republic of Armenia, focusing on capturing social inequities through surveys and administrative data. Considering the discontinuation of the Demographic and Health Survey in Armenia, UNICEF's advocacy and technical assistance for implementing the multiple indicator cluster survey (MICS) will generate disaggregated data on children, women and families and will allow identification of deprivations. UNICEF will extend technical assistance to improve administrative data systems and evidence-policy linkages, including exploring innovative solutions.

26. Together with partners, UNICEF aims to ensure that the Government's social protection reforms are explicitly gender-sensitive and family-friendly and put girls and boys, especially the most marginalized, at the centre. UNICEF will proactively identify and promote positive gender socialization practices, contributing to greater equality between boys and girls and the eradication of gender discrimination. UNICEF will advocate for gender equality and non-discrimination dimensions in policies and services and promote them in individual behaviours and address gender-biased sex selection.

Health and nutrition

27. The long-term vision of change is that, by 2025, children and adolescents benefit from a universal, affordable, accessible and quality health system and adopt healthy lifestyle practices. This programme component directly contributes to outcome 2 of the UNSDCF and focuses on: (a) strengthening national capacities for equitable, preventive, promotive and curative health-care services; (b) addressing the double burden of malnutrition; and (c) enhancing the capacity of adolescents, parents, health professionals and influencers to promote healthy lifestyles and adolescent psychosocial well-being.

28. To strengthen national and local capacities for equitable, quality health-care services to children, UNICEF will support the Ministry of Health to revise and develop policies, clinical standards and protocols. The country programme will enhance knowledge and skills of health-care providers, focusing on quality assurance and performance monitoring – in line with the provisions of the Health System Strengthening National Strategy (2020–2025), Every Newborn Action Plan and the country's Child Injury and Trauma Prevention Strategy (2018–2023). Improving the quality of maternal, neonatal and paediatric health services will be central, with universal progressive home visiting complementing facility-based care. UNICEF will continue supporting the national immunization programme, via procurement services and communication interventions targeting vaccine hesitancy among parents and professionals. UNICEF will foster intersectoral mechanisms for early identification of disability and developmental delays; it will strengthen the information management system, policy framework and intersectoral mechanisms for prevention of child injuries and traumas.

29. UNICEF will address the double burden of malnutrition through its expertise in policy development, working to ensure that children and adolescents receive healthy and nutritious food at home and in schools. UNICEF will promote cross-sectoral policies and action plans alongside communication interventions; and improve quality of counselling by health-care providers.

30. Relying on modern communication, counselling and education techniques (targeting behaviours of parents, adolescents, health-care professionals and other influencers), the programme will promote healthy lifestyles to ensure nurturing, safe and supportive family and community environments for children and adolescents, focusing on childcare, immunization, early childhood development, mental health and psychosocial well-being.

31. Capitalizing on the advancements in multisectoral data collection and reporting systems, UNICEF will encourage harmonization of data flows under the Government's e-health initiative. All planned interventions will be adapted as necessary to the context of the COVID-19 pandemic.

Education and inclusion for all children

32. The long-term vision of change is that, by 2025, children and adolescents exercise their talents and skills and benefit from age-appropriate, lifelong learning and inclusive and quality education in an enabling and safe environment. This programme component will directly contribute to outcomes 3, 4, 5, and 8 of the UNSDCF and focus on: (a) strengthening capacities in education policy planning, financing and monitoring; (b) increasing inclusion of children with disabilities and other vulnerable groups, including those from border areas, into mainstream education system and society; (c) expanding quality and inclusive preschool education; (d) integrating resilience, environmental protection and climate change into laws, policies and budgets; and (e) promoting twenty-first century skills and lifelong learning approaches.

33. UNICEF will intensify its support to education policy planning, budgeting, curriculum update, implementation and monitoring, while stressing the value of evidence and robust data to identify inequities. Strengthened professional capacities in gender-sensitive, disability-inclusive and climate change-responsive planning are expected to result in improved education policies and classroom practices. The programme will assist in modernizing the system of teachers' pre- and in-service training, deployment, retention and incentives. The Education Management Information System will support tracking and reintegration of out-of-school children, especially children with disabilities and adolescents of high-school age. A comprehensive digital learning platform, identified as a necessity during the COVID-19 pandemic, will contribute to overcoming the existing "digital divide".

34. Within childcare reform, UNICEF will support coordinated efforts of education, health and social protection systems through developing professional capacities for a holistic system at the community level. UNICEF will promote inclusion of children with disabilities in mainstream kindergartens and schools, while "special education" institutions continue transforming into teaching and care resource centres. This will enable children with disabilities to grow, learn and transition to independent living in a caring and resourced family and social environment.

35. Guided by the country's new Law on Preschool Education, UNICEF will support the Ministry of Education, Science, Culture and Sport, the Ministry of Territorial Administration and Infrastructure and other partners at the national and local levels to expand opportunities for children aged 0–6 years to benefit from early childhood education (ECE), including a one-year pre-primary preparation. Tested cost-efficient ECE models will be scaled up, accompanied by further exploration of affordable budgeting scenarios. Plans include promoting childcare facilities and family-friendly arrangements in the workplace to facilitate women's participation in the workforce; revising and enhancing standards, tools and professional training programmes; and supporting communication interventions to encourage parents to demand and utilize quality ECE and childcare services.

36. UNICEF will assist in designing legislative, policy and programmatic frameworks for communities, with a focus on border communities, to adapt to climate change, combat environmental degradation and prevent harmful effects on children's health. Addressing country-specific evidence gaps will create momentum for consolidated action by the Government, including in cross-border and global policy debates and forums. Environmental projects offer natural space for civic engagement of adolescents to advocate for their future and right to live in a safe environment, and schools will serve as platforms for consolidated action.

37. By facilitating twenty-first century skills, emphasizing analytical and critical thinking and use of technology and innovation, adolescents will develop leadership and communication capacities, participate in civic engagement and social entrepreneurship and learn about future professional opportunities. UNICEF will promote participation of adolescent girls and boys, as well as adolescents with disabilities and other vulnerabilities.

Child rights system and child protection

38. The long-term vision of change is that, by 2025, the realization of child rights in Armenia is safeguarded by a strong child rights architecture, including a continuum of child protection services, justice for children and improved knowledge and skills of parents/caregivers. This programme component contributes to outcomes 2, 6 and 8 of the UNSDCF and focuses on: (a) strengthening child rights monitoring and coordination mechanisms; (b) enhancing systems and capacities to ensure comprehensive protection and justice for children; and (c) improving knowledge and skills of parents/caregivers and influencers to secure children's well-being free from violence in the family.

39. UNICEF aims to strengthen the country's child rights architecture by promoting a child rights monitoring system with clearly defined roles and accountabilities, stronger capacities for equity-focused data analysis and dissemination, effective mechanisms to infuse evidence into decision-making processes, connectivity to results-based programming and budgeting and to ensure the voice of children, adolescents, families and communities and keeps duty-bearers accountable. This will build on the partnership with the Human Rights Defender of Armenia and align with the child rights chapter in the National Strategy for Human Rights Protection (2020–2022).

40. It is imperative to further strengthen child protection and justice systems in Armenia to avoid abandonment of children born with disabilities and unnecessary separation of children from families, and to ensure prevention and response to violence against children and access to justice for all children. UNICEF will support development of policies to clarify accountabilities of key actors and define mechanisms for collaboration between social welfare, justice, education and health sectors to promote an integrated and coordinated social service. UNICEF will continue advocating for reallocation of resources from residential to alternative family-based care, while assisting partners to define optimal intersectoral mechanisms.

41. UNICEF will continue to support social service workforce strengthening and develop capacities for delivering specialized support services to children and families in need of professional (medical, psychological, rehabilitative, referral, counselling, etc.) assistance and/or follow up. The priority will be extending services to the local level with a special focus on emergency situations. To complement the child-specific provisions in the draft criminal law and criminal procedure code, UNICEF will support the development of policies to better protect child offenders, victims and

witnesses. This will align with international standards and be based on country-specific evidence ensuring child-friendly practices are applied in the justice system.

42. UNICEF will strengthen the knowledge and skills of parents and caregivers to provide an environment free from violence and abuse. This is conducive to comprehensive development of children in family environments. The accession of Armenia to the Global Partnership to End Violence Against Children signifies a strong political commitment which UNICEF will assist in converting into results, and support professional capacity-building, positive parenting education and communication initiatives with a goal of eliminating adverse childhood experiences, including violence against children, in both real and virtual spaces. UNICEF will promote direct access for children to share their concerns or complaints with the office of the Human Rights Defender of Armenia. Adolescent participation and empowerment as well as development of targeted policies and services will support the psychosocial well-being of children and adolescents.

Summary budget table

<i>Programme component</i>	<i>(In thousands of United States dollars)</i>		
	<i>Regular resources</i>	<i>Other resources</i>	<i>Total</i>
Social policy	1 103	1 969	3 072
Health and nutrition	683	2 009	2 692
Education and inclusion for all children	676	3 307	3 983
Child rights system and child protection	676	1 919	2 595
Programme effectiveness	1 197	1 814	3 011
Total	4 335	11 018	15 353

Programme and risk management

43. This country programme outlines UNICEF contributions to national results and serves as the primary unit of accountability to the Executive Board for results alignment and resources assigned to the programme at the country level. Accountabilities of managers at the country, regional and headquarters levels with respect to country programmes are prescribed in the organization's programme and operations policies and procedures. UNICEF will execute the programme under the overall coordination of the Ministry of Foreign Affairs. Joint UNSDCF and UNICEF-specific programme governance mechanisms and processes will assess progress of interventions, identify possible risks and define appropriate mitigation measures.

44. Armenia is a mountainous country, prone to seismic risks, droughts and floods. Risk reduction and preparedness are guided by the Disaster Risk Management National Strategy 2017–2030. UNICEF is part of the United Nations Disaster Management Team, the mechanism for emergency preparedness and response coordination in cooperation with the Ministry of Emergency Situations.

45. The COVID-19 pandemic aggravates other major risks to successful implementation of the country programme, such as: (a) limited financial resources to support social sector reforms and take innovations to scale; (b) insufficient policy planning and coordination capacity; (c) deficit of professional cadres for service delivery, especially in remote areas; and (d) fragmentation of efforts by development partners, which undermines the quality and sustainability of achieved results.

46. The escalation of the Nagorno Karabakh conflict is exacerbating the socio-economic consequences of the COVID-19 pandemic and creating new needs and priorities impacting children. Adaptive programming approaches will be put in place to adjust the agency's programmes once the impact is better known, based on an agreed prioritization with the Government of Armenia, according to the established procedures. A joint review to elaborate these adjustments will be held at the earliest possibility in consultation with Government.

47. To mitigate the risks, UNICEF will: (a) advocate and provide technical assistance for increasing the effectiveness and efficiency of expenditure for children and women, while actively leveraging domestic, regional and global resources; (b) explore innovative ways to build national capacities in policy design and intersectoral coordination; (c) prioritize support to long-term planning for human resources and respond to accessibility and equity gaps in service provision; and (d) use the convening power of the United Nations to promote greater coherence of action by stakeholders, based on robust data, result-based plans and sound theories of change.

Monitoring and evaluation

48. Alongside the United Nations country team and Resident Coordinator, UNICEF will advocate for and support incremental nationalization by Armenia of the Sustainable Development Goals. UNICEF will use the Government's upcoming reporting on implementation of the Convention on the Rights of the Child as a strategic moment to rally stakeholders for the fulfilment of rights of the most marginalized children.

49. The country programme will be operationalized through the preparation of rolling multi-year workplans and budgets for the UNSDCF and UNICEF country programme collaborative outputs. In conjunction with UNSDCF annual reviews with the Government, UNICEF will monitor progress to verify achievements, analyse implementation and constraints and identify actions to improve programme effectiveness and strategic relevance. Joint monitoring visits with implementing and government partners will contribute to assessing progress on results, using standard performance indicators from the global list wherever relevant. Plans will be adjusted based on review findings, evaluations and changes in the situation of children and government priorities and reported on annually.

50. UNICEF will conduct evaluations in the areas of adolescent participation and child protection, along with a comprehensive country programme evaluation to document lessons and inform national policies and UNICEF programming. Joint evaluations or extensive involvement of partners will ensure national ownership and use of evidence. Analysis of the effects of the COVID-19 pandemic and other crises on children and their families will be included in the scope of evaluations to inform adaptive programme management decisions.

Annex

Results and resources framework

Armenia – UNICEF country programme of cooperation, 2021–2025

Convention on the Rights of the Child: Articles 2–6, 9, 12–21, 23–37, 40–42

National priorities: Transformation Strategy of Armenia 2050, Programme of the Government of the Republic of Armenia (2019–2023)

Sustainable Development Goals: 1–17

Draft United Nations Sustainable Development Cooperation Framework outcomes involving UNICEF:

1. People benefit from a universal, affordable, accessible and quality health system, while adopting healthy lifestyle practices
2. People benefit from a progressively universal, inclusive and shock-responsive social protection system across the lifecycle
3. People exercise their talents and skills, benefitting from age-appropriate, life-long learning and inclusive and quality education in an enabling and safe environment

UNICEF will also contribute to UNSDCF outcomes 5 (ecosystems, climate change and resilience), 6 (governance and human rights), 7 (policies, data and financing aligned with Sustainable Development Goals) and 8 (gender equality)

Related UNICEF Strategic Plan, 2018–2021 Goal Areas: 1–5

<i>UNICEF outcomes</i>	<i>Key progress indicators, baselines (B) and targets (T)</i>	<i>Means of verification</i>	<i>Indicative country programme outputs</i>	<i>Major partners, partnership frameworks</i>	<i>Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)</i>		
					<i>RR</i>	<i>OR</i>	<i>Total</i>
1. Children and families benefit from a progressively universal, inclusive and shock-responsive social protection system across the lifecycle, underpinned by	Proportion of children living in poverty according to (a) national monetary poverty line and (b) national multidimensional poverty line B: (a) 29.2% (2018); (b) 24.9% (2018) T: (a) 25%; (b) 20%	Integrated Living Conditions Survey, multiple indicator cluster survey (MICS)	1.1. National and local authorities are equipped with evidence and capacities to design, coordinate and implement integrated, inclusive and shock-responsive social protection policies and programmes. 1.2. Capacities of key stakeholders at national and	Ministries of Labour and Social Affairs (MLSA); Education, Science, Culture and Sport (MESCS); Health (MH); Territorial Administration	1 103	1 969	3 072

UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
					RR	OR	Total
equity-focused data and financing.	Share of education, health and/or social protection in public spending B: 8.4% education; 5.5% health; 28.8% social protection T: 9.7% education; 6.1% health; 28.8% social protection [UNSDCF outcomes 1–3 indicators, Sustainable Development Goal 1.a.2]	Government reports	local levels are strengthened to routinely measure, mobilize and influence public and private investments in and partnerships for resilient and sustainable results for families and children. 1.3. National capacities and data systems are enhanced to systematically collect, analyse and use disaggregated equity-focused data for policy development, national planning and reporting on the situation of children and progress on Sustainable Development Goals. 1.4. Positive gender socialization processes and practices are advanced for greater equality between boys and girls and are reinforced by gender equality and family-friendly policies.	and Infrastructure (MTAI) Statistical Committee of the Republic of Armenia (ArmStat), subnational authorities Bilateral and multilateral agencies, academia, civil society organizations (CSOs)			
	Sex ratio at birth (m/f) B: 110/100 (2019) T: 107/100	ArmStat reports					
2. Children and adolescents benefit from a universal, affordable, accessible and quality health system, while adopting healthy lifestyle practices.	Neonatal mortality rate B: 5% (2018) T: 4% [UNSDCF outcome 1 indicator, Sustainable Development Goal 3.2.2]	ArmStat reports, Admin	1.5. National and local capacities are strengthened for equitable provision of preventive, promotive and curative health-care services for children, especially for the most disadvantaged. 1.6. National and local capacities are enhanced to provide more coordinated, intersectoral, proactive and responsive services to address the double burden of	MH; MTAI; MLSA ArmStat, subnational authorities, Human Rights Defender of Armenia (HRDO)	683	2 009	2 692
	Proportion of districts with DTP3 vaccination coverage of at least 95% B: 40% (2019) T: 100%	MH, MICS					

UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
					RR	OR	Total
	<p>Percentage of children under 5 years of age who are stunted</p> <p>B: 9% (2015) T: 7%</p> <p><i>[Sustainable Development Goal 2.2.1]</i></p>	Child Nutrition Surveillance System, DHS, MICS	<p>malnutrition across the lifecycle, focusing on disparity reduction.</p> <p>1.7. Adolescents, parents, health professionals and other influencers have knowledge, tools and institutional support to promote healthy lifestyles and adolescent psychological well-being.</p>	Bilateral and multilateral agencies, academia, CSOs			
	<p>Percentage of children under 5 years of age who are overweight</p> <p>B: 14% (2015) T: 11%</p> <p><i>[part of Sustainable Development Goal 2.2.2]</i></p>	Administrative data, DHS, MICS					
3. Children and adolescents exercise their talents and skills, benefitting from age-appropriate, lifelong learning and inclusive and quality education, in an enabling and safe environment.	<p>Number of lower-secondary-school age children out of school disaggregated by gender, geographical location and income quintiles</p> <p>B: 11,800 (2016) T: 6,000</p>	Education Management Information System (EMIS)	<p>1.8. National systems and capacities of officials and other stakeholders are strengthened to develop evidence-based policies, plans and budgets, ensuring inclusive and equitable education outcomes for all children.</p> <p>1.9. Affordable and quality cross-sectoral social policies, schemes and services for children with disabilities and their families are strengthened and support their development, a quality education and transition to independent living.</p> <p>1.10. Policies, financing and infrastructure are improved, and capacities are</p>	<p>MESCS; MLSA; MH; MTAL; Ministry of Environment; Ministry of Emergency Situations</p> <p>Other state agencies</p> <p>Bilateral and multilateral agencies, academia, professional associations, CSOs</p>	676	3 307	3 983
	<p>Gross enrolment ratio in pre-primary education disaggregated by gender, geographical location and income quintiles</p> <p>B: 38% (2018) T: 60%</p> <p><i>[UNSDCF output 3.1 indicator, proxy Sustainable Development Goal 4.2.2]</i></p>	EMIS					

UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
					RR	OR	Total
	<p>Number of small-size rural schools benefitting from Government's Safer School Budget Programme</p> <p>B: 22 (2019) T: 150</p>	Government reports	<p>strengthened ensuring all young children, including from border areas, have access to quality and inclusive preschool education.</p> <p>1.11. Resilience, environmental protection and climate change are integrated into laws, policies, plans and budgets.</p> <p>1.12. Adolescents have improved twenty-first century skills enabling them to participate in decision-making, become social entrepreneurs and support their transition to employment.</p>				
	<p>Percentage of schools that include adolescent engagement and project-based learning in their development plans</p> <p>B: 0.8% (2020) T: 50%</p>	EMIS					
4. Child rights realization is safeguarded by a strong child rights architecture, including a continuum of child protection services, justice for children and improved knowledge and skills of parents/caregivers.	<p>Level of establishment of permanent national child rights coordinating mechanism</p> <p>B: Initiating (Score 2) (2020) T: Established (Score 3)</p>	National report, Committee on the Rights of the Child concluding observations	<p>1.13. Child rights coordination system is strengthened with clear roles, responsibilities and improved capacities for child rights monitoring ensuring the best interest of the child.</p> <p>1.14. The child protection and justice systems are strengthened with clear roles, responsibilities and improved capacities, including for prevention of unnecessary separation of children from families and violence against children.</p> <p>1.15. Parents/caregivers and influencers have improved knowledge and skills to ensure children's well-being in the family and prevent violence against children.</p>	<p>MLSA; Ministry of Justice (MJ); MTAI; MESCS; MH</p> <p>HRDO, judiciary, Investigative Committee, police</p> <p>Bilateral and multilateral agencies, academia, professional associations, CSOs</p>	676	1 919	2 595
	<p>Children aged 0–17 years living in residential care</p> <p>B: 1,269 (2018) T: 800</p>	MLSA, MESCS, ArmStat					
	<p>Percentage of girls and boys who are in contact with justice and administrative bodies who benefit from interventions to improve children's access to justice</p> <p>B: 0 (2020) T: 50%</p>	MJ					

<i>UNICEF outcomes</i>	<i>Key progress indicators, baselines (B) and targets (T)</i>	<i>Means of verification</i>	<i>Indicative country programme outputs</i>	<i>Major partners, partnership frameworks</i>	<i>Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)</i>		
					<i>RR</i>	<i>OR</i>	<i>Total</i>
	Proportion of children aged 1–17 years who experienced any physical punishment and/or psychological aggression by caregivers in the past month, by sex B: 68.9% (M: 70.8; F: 68.9) (2015) T: 50% <i>[Sustainable Development Goal 16.2.1]</i>	DHS, MICS					
5. Enhanced programme effectiveness.					1 197	1 814	3 011
Total resources					4 335	11 018	15 353