

**EVALUATION  
REPORT**

**COUNTRY PROGRAMME  
EVALUATION  
GOVERNMENT OF THE  
TRANSITIONAL ISLAMIC STATE  
OF AFGHANISTAN / UNICEF  
(2003-2005)**



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**Country Programme Evaluation Government of the Transitional Islamic State of Afghanistan / UNICEF (2003-2005)**

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The evaluation of the Programme of Cooperation between the Government of the Transitional Islamic State of Afghanistan and UNICEF was conducted by a mixed team of international and national consultants and staff of the Evaluation Office at New York Headquarters: Lucien Back (team leader, Senior Programme Officer Evaluation Office at UNICEF Headquarters), Nouchine Yavari d'Hellencourt (consultant), Dr. Abdul Haque Waheed, Project Officer Health & Nutrition Section in UNICEF Afghanistan County Office and Senior Advisor to the Ministry of Public Health) and Joaquin Gonzalez-Aleman (Project Officer Evaluation Office at UNICEF Headquarters). The exercise has also benefited from support from Regional Office for South Asia (ROSA).

The purpose of the report is to facilitate the exchange of knowledge among UNICEF personnel and its partners. The content of this report does not necessarily reflect UNICEF's official position.

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## **PREFACE**

The Country Programme of Cooperation (CPC) between the Government of the Transitional Islamic State of Afghanistan and UNICEF covers the period 2003-2005. The UNICEF Country Office in Kabul, in consultation with the Government of Afghanistan, requested that the strategy development for the next CPC 2006-2008 be supported by a Country Programme Evaluation (CPE). The CPE has been implemented in a fast-track mode, as it was to feed into the preparation of the draft Country Programme Document (CPD), which had to be completed by the end of the first quarter of 2005.

This is the first CPE ever to be conducted in a transition country, coinciding with the recently initiated efforts by UNICEF to define an agenda to operate effectively in transition situations. Recommendations stress the need to shift from direct implementation of programmes and projects by UNICEF to a more developmental programme approach. Challenges are now related to capacity building and building partnerships with other agencies, all of which is to have management implications that may involve a greater transfer of the responsibility for implementation to the Government and / or a transfer of certain responsibilities from UNICEF staff at the central level to UNICEF staff in field locations.

The evaluation was conducted by a mixed team of international and national consultants and staff of the Evaluation Office at New York Headquarters: Lucien Back (team leader, Senior Programme Officer Evaluation Office at UNICEF Headquarters), Nouchine Yavari d'Hellencourt (consultant), Dr. Abdul Haque Waheed, Project Officer Health & Nutrition Section in UNICEF Afghanistan Country Office and Senior Advisor to the Ministry of Public Health) and Joaquin Gonzalez-Aleman (Project Officer Evaluation Office at UNICEF Headquarters). The exercise has also benefited from support from Regional Office for South Asia (ROSA).

The CPE Afghanistan is a pilot case as part of the UK Department for International Development (DFID) funded Project for CPE Methodology and Guidance Development, which is being implemented by the Evaluation Office at New York Headquarters.

As such, the evaluation is of interest in the broader context of efforts to strengthen the evaluation function in UNICEF and as a contribution of the Evaluation Office to the recently initiated development of a future transition strategy and objectives as articulated in the new 2006-2009 Medium Term Strategic Plan (MTSP). The evaluation would not have been possible without the valuable insights and generous sharing of information. I would hereby like to express my gratitude and appreciation to all those who have contributed to this evaluation. Special thanks are due to the Government of Afghanistan, the UNICEF Country Office in Kabul and the evaluation team.

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## LIST OF ACRONYMS

ACO	Afghanistan Country Office
ADF	Afghanistan Development Forum
AIHRC	Afghan Independent Human Rights Commission
ANBP	Afghanistan's New Beginnings Programme
ARV	Anti Retro Virals
BBC	British Broadcasting Corporation
BHC	Basic Health Centre
BPHS	Basic Package of Health Services
CBO	Community-Based Organisation
CCC	Core Corporate Commitments / Core Commitments for Children
CDC	Centre for Disease Control
CEDAW	Convention on the Elimination of All Forms of Discrimination against Women
CHC	Comprehensive Health Centre
CPAP	Country Programme Action Plan
CPD	Country Programme Document
CPE	Country Programme Evaluation
CPC	Country Programme of Cooperation
CPR	Country Programme Recommendation
CRC	Convention on the Rights of the Child
DDR	Disarmament, Demobilisation and Reintegration
DFID	Department for International Development (UK)
ECD	Early Childhood Development
EMIS	Education Management Information System
EmOC	Emergency Obstetric Care
EOR	Emergency Other Resources
EPHS	Essential Package of Hospital services
EPI	Expanded Program on Immunization
EPR	Emergency Preparedness and Response
FLS	Financial and Logistics System
GAIN	Greening Afghanistan Initiative (GAIN)
GS	General Service
HIV/AIDS	Human Immunodeficiency Virus / Acquired Immune Deficiency Syndrome
HRBAP	Human Rights Based Approach to Programming
ICRC	International Committee of the Red Cross
IDD	Iodine Deficiency Disorder
IDPs	Internally Displaced Persons
IDU	Injection Drug User
IMCI	Integrated Management of Childhood Illnesses
IMERP	Integrated Monitoring, Evaluation and Research Plan
IMR	Infant Mortality Rate
IOM	International Organization for Migration
IP	International Professionals
IQ	Intelligence Quotient
ISAF	International Security Assistance Force
ITAP	Immediate and Transitional Assistance Programme
JICA	Japan International Cooperation Agency

KAP	Knowledge, Attitude and Practice
MCH	Maternal and Child Health
MDGs	Millennium Development Goals
MICS	Multiple Indicator Cluster Survey
MNTE	Maternal Neonatal Tetanus Elimination
MoE	Ministry of Education
MoPH	Ministry of Public Health
MMR	Maternal Mortality Rate
MPO	Master Plan of Operations
MRE	Mine Risk Education
MRRD	Ministry of Rural Rehabilitation and Development
MTR	Mid-Term Review
MTSP	Medium Term Strategic Plan
NDF	National Development Framework
NDS	National Development Strategy
NGO	Non-Governmental Organisation
NIDs	National Immunization Days
NO	National Officer
NRVA	National Risk and Vulnerability Assessment
NYHQ	New York Headquarters
OECD/DAC	Organisation for Economic Co-operation and Development / Development Assistance Committee
OHCHR	Office of the High Commissioner for Human Rights
OR	Other Resources
PINF	People In Need Foundation
PNO	Provincial Nutrition Officer
PPPM	Programme Policy and Procedure Manual
PRR	Priority Reform Re-structuring Reform
PRSP	Poverty Reduction Strategy Paper
PTA	Parent-Teacher Association
RBM	Results-Based Management
ROR	Regular Other Resources
ROSA	Regional Office for South Asia
RR	Regular Resources
SIA	Supplementary Immunization Activities
SMART	Specific, Measurable, Achievable, Relevant and Time-bound
TAPA	Transitional Assistance Programme for Afghanistan
TFT	Temporary Fixed Term
U5MR	Under-5 Mortality Rate
UNAMA	United Nations Assistance Mission in Afghanistan
UNCT	United Nations Country Team
UNDAF	United Nations Development Assistance Framework
UNDP	United Nations Development Programme
UNESCO	United Nations Educational, Science and Cultural Organisation
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNMAP	United Nations Mine Action Programme for Afghanistan
UNODC	Office for Drug Control and Crime Prevention
USI	Universal Salt Iodization

UXO	Unexploded Ordnance
WES	Water, Environment and Sanitation
WFP	World Food Programme
WHO	World Health Organization
WSHP	Water, Sanitation and Hygiene Promotion Programme



# EXECUTIVE SUMMARY

## Purpose and context of the evaluation

The current Country Programme of Cooperation (CPC) between the Government of the Transitional Islamic State of Afghanistan (hereafter referred to as Government of Afghanistan) and UNICEF covers the period 2003-2005.

A Mid-Term Review (MTR) was completed in November 2004. The rapidly changing environment, with a newly elected cabinet in place after the presidential elections of October, and also the need for a strategic re-adjustment of the CPC were the main rationale to conduct a CPE after the MTR. The UNICEF Country Office in Kabul, in consultation with the Government of Afghanistan, requested that the strategy development for the next CPC 2006-2008 be supported by a Country Programme Evaluation (CPE).

The CPE provides an in-depth assessment of the relevance and appropriateness of the CPC as well as of the role, design and focus of UNICEF support to the realisation of children's rights. The CPE also addresses dimensions of sustainability and connectedness of supported initiatives in a context of considerable security concerns and high political volatility.

In addition, the CPE assesses progress made with the introduction of the Human Rights Based Approach to Programming (HRBAP) and Results-Based Management (RBM) in a CPC operating in an unstable context. It also addresses the CPC's alignment with and contribution to UNICEF's organizational priorities and strategies defined in the Medium Term Strategic Plan (MTSP) as well as in relation to Core Corporate Commitments / Core Commitments for Children (CCCs) and the Goals until 2015 (Millennium Declaration, Millennium Development Goals and World Fit for Children).

The CPE focuses on the four main objectives of the current CPC, which address challenges related to 1) child and maternal mortality and morbidity; 2) malnutrition and micronutrient deficiency disorders; 3) improved school enrolment with a special focus on girls' education; and 4) protection of children affected by war. The CPE builds on the MTR report concerning progress made with the fifth objective related to the aversion of widespread humanitarian crises through improved preparedness and response.

The CPE has been implemented in a fast-track mode, as it was to feed into the preparation of the draft Country Programme Document (CPD), which had to be completed by the end of the first quarter of 2005. The next CPC cycle will be harmonized among United Nations Development Assistance Framework (UNDAF) partners and coincide with the programme cycle of the interim Poverty Reduction Strategy between the Government of Afghanistan and the World Bank (2006-2008).

The exercise has benefited from support from the Evaluation Office at New York Headquarters (NYHQ) and the Regional Office for South Asia (ROSA). The CPE Afghanistan is a pilot case as part of the UK Department for International Development (DFID) funded Project for CPE Methodology and Guidance Development, which is being implemented by the Evaluation Office at NYHQ.

## **An overview of the situation of children's rights**

The Report of the MTR of 2004 contains an update concerning the situation of children and women in Afghanistan, which is largely based on the Multi-Indicator Cluster Survey (MICS) of 2003<sup>1</sup>. Afghanistan emerged from an acute emergency as recently as in 2002. Although the past two years have been characterized by relative peace and stability, most families still struggle to ensure their survival, their security and access to basic social services and employment. The report emphasises the resilience of the Afghan people. However, basic social indicators still reflect a dramatic level of poverty and deprivation:

- a) The Infant Mortality Rate (IMR) currently stands at the 115-140 per 1,000 live births and the Under-5 Mortality Rate (U5MR) is in the 172-210 range<sup>2</sup>. Major causes of child morbidity and mortality are measles, diarrhoea, acute respiratory infection, and malaria and micro-nutrient deficiencies. Neonatal tetanus is also a major cause of child deaths. Maternal mortality rates (MMR) are also among the highest in the world and stand at 1,600 per 100,000 live births (*The State of the World's Children* adjustment 1,900). Nine in ten rural women deliver their babies at home without skilled birth assistance and without proper referral services to save lives through essential and obstetric care.
- b) Access to safe drinking water is not available to 69 percent of the rural population and 39 percent of the urban population, while 75 percent of Afghans have no access to safe sanitation facilities. Diarrhoea is found to be prevalent in about 30 percent of all children aged under-5 and 36 out of 1,000 children will die of diarrhoea before the age of five.
- c) Net enrolment rates have increased significantly between 2002 and 2003, especially for girls. In 2003, two-thirds of boys and four out of ten girls aged 7-12 had been enrolled in education. But 45 percent of all children had not been in school. In several provinces, there was a major gender disparity with more than 80 percent of girls of this age group not being in school.
- d) An estimated 8,000 minors were reported to be associated with fighting forces. Child labour was prevalent with 28 percent of boys and 34 percent of girls aged 7-14 being involved. Other forms of abuse and exploitation were also wide-spread (corporal punishment and child trafficking).

The World Bank report emphasizes that Afghanistan has to face major challenges related to the continuing insecurity, weak rule of law, and narcotics. The spread of opium production during the last two years now accounts for about a third of the Afghan economy and three quarters of global illicit opium production. Afghanistan needs to enter a virtuous circle of improving security, state capacity building, revenue mobilisation, formal private sector development and sensible and coordinated actions against drugs.

### **Recent political developments**

Since 2001, Afghanistan has made significant progress on the road to peace, democracy and a stable government. After the fall of the Taliban, UN-chaired peace talks in Germany resulted in the establishment of a six-month Afghan Interim Administration, which oversaw the organization

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<sup>1</sup> The MICS data of 2003 are currently being reviewed by the Afghanistan Country Office. The results have not yet been published.

<sup>2</sup> The State of the World's Children 2005 reports IMR at 165 and U5MR at 257 for 2003.

of a traditional assembly (Loya Jirga) in June 2002 electing Hamid Karzai as president. Presidential elections were held in October 2004 and confirmed Hamid Karzai as President. Since then a new government has been installed. Parliamentary, provincial and district elections are scheduled to take place in September 2005.

On 24 March 2005, the Security Council extended the mandate of the United Nations Assistance Mission in Afghanistan (UNAMA) for an additional 12 months, stressing the central and impartial role that the United Nations continues to play in promoting peace and stability in Afghanistan. UNAMA will continue to provide necessary support to facilitate timely elections with the broadest possible; to support the ongoing effort to establish a fair and transparent justice system; and to pursue the disarmament, demobilization and reintegration process. With the assistance of the international community, the Government of Afghanistan continues to address the threat to the security and stability of Afghanistan posed by Al-Qaeda, the Taliban and other extremist groups, counters factional violence among militia forces and fights against criminal activities, particular those involving the drug trade.

## **Objectives, strategy and structure of the Country Programme**

The 2003-2005 Master Plan of Operations (MPO) signed by the Government of Afghanistan and UNICEF emphasized that the CPC would support and strengthen Afghanistan's commitment and capacities towards the progressive realisation of the rights of children to survival, development, protection and participation, as set out under the Convention on the Rights of the Child (CRC) and the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW). In doing so, it would contribute to the achievement of Afghanistan's National Development Framework (NDF).

In order to achieve this goal, the Programme sought to support, by the end of 2005, national efforts to (i) reduce infant and under-five child mortality; (ii) improve maternal health and reduce maternal mortality; (iii) reduce infant, young child and maternal malnutrition; (iv) strengthen capacities to promote, protect and fulfil children's right to education and expand opportunities to ensure they reach their full potential; (v) provide children with the skills, knowledge and confidence to manage life's challenges and fully participate in Afghanistan's development; (vi) strengthen capacities to reduce vulnerability and ensure special protection and care measures for children at risk and living in difficult circumstances; (vii) avert widespread humanitarian crises through improved preparedness and rapid response.

The strategy of the 2003-2005 Programme of Cooperation was guided by the principles of universal realisation of children and women's rights. It built upon the World Summit for Children (WSC), within the context of the CRC and CEDAW. It drew on the strategies of the Government's NDF, the analysis of the situation of the children and women of Afghanistan, UNICEF organisational priorities as per the MTSP for 2002-2005, and current strategies of the World Bank and major donors for Afghanistan with regard to disparity and poverty reduction through improving access to basic social services.

The CPC would abide by the four key human rights principles (universality, indivisibility, participation and accountability). Five mutually reinforcing strategies would be used throughout the programme. At the national level, the programme aimed to create an enabling environment through (i) policy development and (ii) advocacy, both focusing on raising the profile of children and women rights in the public arena. At sub-national level, the programme was to support (iii) capacity building for quality and sustainable service delivery – emphasising planning,

management and implementation, as well as material support, and (iv) capacity development at community level to empower families and communities with knowledge and skills to protect and fulfil children and women's rights. The final strategy to (v) undertake research, monitoring and communication, was to support the programme at all levels.

Taking into account the issues highlighted in the Situation Analysis and UNICEF's comparative advantage, and in order to maximise impact, promote intersectoral linkages and benefit from synergism, the programme focused all actions on four cross-sectoral and mutually reinforcing overarching programme priorities, which were: (i) the Promotion of Girls' Education; (ii) Early Childhood Care and Development; (iii) Immunisation Plus (v) improved protection of children against violence, abuse and discrimination.

## **Findings and conclusions**

### **Finding 1: Relevance and appropriateness of objectives related to child and maternal mortality and morbidity**

Child and maternal mortality and morbidity are still very high in Afghanistan due to poor health, nutrition and water and environmental sanitation. The present level of public and private services justifies considerable support. For the UNICEF supported CPC it therefore remains highly relevant and appropriate to address child and maternal survival objectives in support of national efforts and in coordination with other forms of external aid.

### **Finding 2: Focus of the Health and Nutrition and the Water and Environmental Sanitation (WES) Programmes**

The CPC has played a pioneering role and focused on the provision of service delivery and infrastructure at a time when major needs existed in the areas of health, nutrition, water and environmental sanitation. The promotion of good health, nutrition and hygiene behaviours at the family and community levels was a lesser priority.

### **Finding 3: Design of the Health and Nutrition and the WES Programmes**

Programme objectives were relevant, but they were not specific, measurable, achievable and time-bound (SMART) and there were no explicit references in the formulation of the objectives to expected institutional and behavioural changes (outcomes).

### **Finding 4: Strengths and weaknesses in the implementation of Health and Nutrition and WES programmes**

The CPC has contributed to a very significant increase in coverage both in health and nutrition and in WES. This is no mean achievement in a country, which is emerging from long years of civil strife, little attention to social development between 1994 and 2001 as well as an acute emergency that happened as recently as in 2001-2002. The aim to achieve large-scale coverage in a short time may have crowded out concerns for a more systematic management of programmes (e.g. routine immunization) and quality of provided infrastructure and services (e.g. in WES).

### **Finding 5: Challenges to the sustainability and connectedness of results**

There is a significant concern regarding sustainability of the results of both the health and nutrition and WES programmes due to the decline of interest among donors, decreasing funding as a consequence, lack of funding from government side, limited management capacities of counterparts, frequent turn over of senior/mid level technical staff in different services and low motivation of government staff (especially at the service delivery level) Existing resources (e.g. female health workers) are not always used in an optimal fashion and vertical programmes (e.g. Extended Programme of Immunisation - EPI and nutrition) are insufficiently linked. A particular concern is also the low level of health and hygiene awareness among caregivers of children, their limited demand for adequate services and the low level of their involvement in the management of health and WES infrastructure and services. Challenges related to sustainability may in part be addressed by close connectedness to and coordination with the new Basic Package of Health Services (BPHS) programme, which benefits from considerable external support.

### **Finding 6: Relevance and appropriateness of the Basic Education Programme**

The Basic Education Programme and especially its core “Back-to-School Project” were highly relevant and appropriate given the low levels of school enrolment that prevail in Afghanistan and also the high level of illiteracy that exists especially among girls and women. The emphasis on girls’ education was fully justified, as girls and women have long been denied the realization of their basic human right to education.

### **Finding 7: Focus of the Basic Education Programme**

The core of the Basic Education Programme has been the Back-to-School campaign with a strong focus on increasing access to education especially for girls. The emphasis was on formal primary education, especially the initial grades and relatively less attention to non-formal education for children above 10 years old who either dropped out of primary school very soon or who had never been to school (accelerated / “second-chance” learning as well as adult literacy). Attempts to improve the quality of education through teacher training and curriculum development have not stemmed dropouts, which are apparently rather high.

### **Finding 8: Design of the Basic Education Programme**

The design of the programme took into account human rights (especially those of girls and women), but the programme cannot be said to be fully compliant with guidance concerning rights-based and results-oriented programming.

### **Finding 9: Strengths in the implementation of the Basic Education Programme**

The greatest achievement of the programme has been the spectacular enrolment of 4.4 million children, of which 400,000 girls. This means a tenfold increase of enrolment rates for girls. Significant achievements were also made with regards to the quality of education, e.g. through curriculum development and teachers’ training, and in the areas of information and policy systems.

### **Finding 10: Weaknesses and challenges in the implementation of the Basic Education Programme**

Quantitative achievements remain fragile, as dropout rates are high and underlying factors explaining abandonment and retention are as yet not well understood. Civil society still shows a relatively limited interest for education, especially for girls. School environments still have a long way to go to become child-friendly. There is also a need to include basic life-skills in curricula. While gender disparities have been addressed to the greatest possible extent, there has been less attention for other disparities (e.g. between regions, locations, social groups).

### **Finding 11: Sustainability and connectedness required for Basic Education**

The sustainability of the education system will depend on external financial and institutional support for some years to come. It is important that external aid is well integrated in national policies and strategies and well coordinated. As or even more important are the social mobilization of civil society (families and communities) and the commitment of education staff. The current CPC has addressed both these dimensions a certain extent. However, UNICEF support is presently engaged in a transition process from a pioneering role in the aftermath of an acute emergency situation to an equally challenging role of contributor to an increasingly complex and ambitious development process.

### **Finding 12: Relevance and appropriateness of the Child Protection Programme**

As a result of two decades of war and destruction, traditional networks to ensure the realization of children's rights have been eroded. Many children are now the victims of violence, abuse and exploitation. Under these circumstances it was relevant and appropriate for the current CPC to create a programme for children in need of special protection in addition to the other sectoral programmes that contribute to the protection and promotion of children's rights.

### **Finding 13: Focus and design of the Child Protection Programme**

The Child Protection Programme has been strongly geared towards cooperation with existing national partners and their capacity building. Faced with a wide range of issues related to violence, abuse and exploitation, the Programme was relatively well focused on the rights of children affected by war, as they were most at risk. There has also been an adequate focus on gathering and analysis of information as well as on policy advice. Like in other programmes, there have not yet been results matrices, but the MTR reports on results at the outcome level, i.e. institutional and behavioural changes induced by the Programme.

### **Finding 14: Strengths and achievements in implementation of the Child Protection Programme**

The CPC has been successful working with and building capacity in the Ministries of Labour and Social Welfare, Justice and Interior. A good start was made to provide reliable information and analysis to the Government and non-governmental partners concerning child protection issues, which in turn laid the groundwork for a strategic vision of the sector. There were also more efforts than in other Programmes of the CPC to strengthen the community level.

### **Finding 15: Weaknesses and challenges in implementation of the Child Protection Programme**

Coordination and cooperation between the Child Protection Programme and other programmes of the CPC, e.g. Health and Nutrition and Basic Education, as well as with the cross-cutting programme of Information and Communication has not been strong. More cooperation and integration of the various Programmes could have had a beneficial effect on coordination among national partners. The focus of the Programme on children affected by war also resulted that many other protection issues were not yet addressed, especially those with a gender dimension.

### **Finding 16: Challenges for sustainability and connectedness of the Child Protection Programme**

Children in need of special protection require a long-term engagement both of the State and within civil society (non-governmental organisations - NGOs, communities etc.). The ultimate measure of the sustainability of interventions of the State is that regulatory frameworks are enforced and that the care practices of State institutions are adequate. At the same time, vulnerable children are also the responsibility of families and communities. Sustainability at this level will depend on the restoration and initiation of networks that monitor all forms of neglect, violence, abuse and exploitation and develop measures to counter them. The current CPC has started to build capacities at both levels, but it is still too early to expect outcomes to be sustainable.

## **Strategic directions and recommendations**

### **Recommendation 1: Long-term vision concerning the reduction of child and maternal mortality and morbidity**

In cooperation with other UN partners, UNICEF should support the Government in further developing an integrated and long-term vision concerning the reduction of child and maternal mortality and morbidity and address both factors where immediate results can be achieved (e.g. immunizations and improved caring practices of infants and young children and hygiene) and factors that require a longer-term strategy (e.g. relevant aspects of education).

### **Recommendation 2: Integration in and coordination with Basic Package of Health Services (BPHS Programme) and other major national programmes**

The new CPC should to the greatest extent possible be integrated in and coordinated with the five national priority programmes in health and nutrition, including Basic Package of Health Services (BPHS) and Essential Package of Hospital Services (EPHS). These programmes are geared towards national capacity building and supported by major external aid agencies. During the preparation of the new CPC it will be necessary to determine how UNICEF supported projects could contribute to ensuring effective integration with the national priority programmes (e.g. aspects of the Maternal and Child Health - MCH project, such as Emergency Obstetric Care - EmOC, building capacities for routine immunization, Iron Deficiency Anaemia – IDA reduction, Integrated Management of Childhood Illnesses - IMCI). It is also necessary to assess which quick impact projects can be efficiently coordinated with such integration efforts (e.g. Polio Eradication Initiatives, Measles Mortality Reduction - MMR campaigns, Supplementary Immunization Activities – SIA, Universal Salt Iodization - USI).

### **Recommendation 3: CPC programme components requiring continuing national coverage and those requiring high-quality model interventions to feed into advocacy**

Given the fact that it will still take some time, before there are adequate systemic national health, nutrition and WES capacities, the UNICEF supported CPC should continue major interventions initiated under the current CPC (2003-2005), e.g. policy and strategy advice in these areas to the Government, Polio Eradication, Supplementary Immunization Activities (e.g. Maternal Neonatal Tetanus Elimination - MNTE), EmOC support to hospitals run by government, Universal Salt Iodization and dissemination of experiences at the national level (including WES). There should, however, be a greater emphasis on the quality of interventions and pilot experiences on a more limited scale (e.g. for water supply and sanitation) with the potential of feeding workable and high-quality solutions into national policy development.

### **Recommendation 4: Promotion of good health and nutrition behaviours as well as of better water use and management and adequate hygiene**

The next CPC should give more attention to the promotion of good health and nutrition behaviours, improved water use and management, hygiene education, empowerment of stakeholders (rights-holders and duty-bearers), and community involvement in design and operation and maintenance of infrastructure (e.g. in WES). There is a need for a better understanding of traditional practices and factors that prevent people from adopting more appropriate behaviour. Programme communication needs to be enhanced and national capacities should be developed in this regard, e.g. through the government and religious leaders. UNICEF should continue to take the lead in technical support to the Ministry of Public Health (MoPH) and other partners to ensure effective integration of national priority programmes at beneficiary level, and to ensure the implementation of public nutrition policies and guidelines at service delivery level through BPHS and EPHS. UNICEF should continue to support government and encourage private sector for food fortification (especially USI) until Iodine Deficiency Disorder (IDD) is eliminated and other food fortification policy and practice is widely adapted.

### **Recommendation 5: More horizontal integration of vertical programmes**

There is a need to enhance integration among vertical components of the Health, Nutrition and WES Programmes and among different sectoral programmes of the CPC as well as enhance programmatic cooperation UNDAF partners with a potential for positive effects on inter-departmental cooperation within the Government.

### **Recommendation 6: Management implications of the shift to a more developmental programme approach**

The shift from direct implementation of programmes and projects by UNICEF to a more developmental programme approach with challenges related to capacity building and building partnerships with other agencies will have management implications that may involve a greater transfer of the responsibility for implementation to the Government and / or a transfer of certain responsibilities from UNICEF staff at the central level to UNICEF staff in field locations.

### **Recommendation 7: Links with MDG, National Development Goals and UNDAF objectives**

The National Development Goals and the UNDAF objective related to basic education entail two important shifts in emphasis for the next CPC, which are also in line with UNICEF's next

Medium Term Strategic Plan (MTSP 2006-2009): (i) while maintaining goals and objectives related to access to education, there should henceforth be more attention for the quality of education resulting in improved retention and completion of schooling; (ii) rather than only aim at gender parity (equal numbers of boys and girls in school), there should be attention for gender equality, i.e. social relations between men and women that need to be transformed to overcome the systematic discrimination of women and their subordinate position in society.

### **Recommendation 8: “Back-to-School” and “Stay-in School”**

The next CPC should support the Government not only in maintaining and increasing enrolment rates of children into primary education, but increasingly also in promoting retention and completion in primary education. A new slogan could be “Stay-in-School”. This will first of all require a better understanding of factors that are at play in the decision-making of parents and children to continue schooling until completion or to abandon schooling. Studies and surveys should be gender-specific. A good causality analysis would allow for more targeted programming addressing the immediate and underlying causes of non-attendance and non-completion. This would also contribute to a better understanding of the notion of quality of education that should become more culturally appropriate.

### **Recommendation 9: Towards gender equality and quality of education**

An important contribution to the quality of education is adequate attention for gender equality. It is not enough to have equal numbers of girls and boys in schools, curriculum development, teachers’ training and promotion of community involvement in education should convey messages that overcome gender stereotypes. Activities should not only aim at the empowerment of girls and women, but also very specifically at the education of boys of men to protect and promote girls’ and women’s rights. A gender-sensitive education may be expected to improve overall quality of education.

### **Recommendation 10: Improving the infrastructure of education and the supply situation**

Given the interest of major donors in the education sector, it may be expected that the Ministries of Education (MoE) and of Rural Reconstruction and Development (MRRD) will receive support to gradually achieve coverage in terms of school infrastructure. Rather than maintain a focus on coverage of needs in terms of infrastructure, the next CPC should focus on high quality and low-cost solutions both for school buildings and for school water supply and sanitation. UNICEF could play a role in designing and implementing experimental demonstration projects for primary schools (including school water supply and sanitation) on a limited scale resulting in workable solutions that could be replicated in other locations or mainstreamed in national policies and strategies. There is need for evidence-based advocacy both with the Government and with major external aid agencies. Key criteria for the selection of pilot sites should be (i) environmental and physical site characteristics; (ii) social, economic, cultural and political factors (potential for community involvement, exclusion in terms of specific groups or isolated areas); (iii) partnership with different external aid agencies (iv) convergence with other UNICEF supported programmes (e.g. in Health and Nutrition, Child Protection).

### **Recommendation 11: Community-based village schools**

Village schools have the potential of being interesting experiences as a means to enhance the enrolment especially of girls into primary education and to stimulate community involvement in education in general. Large-scale implementation of this approach seems not to be warranted.

But pilot experiences should be pursued where there have been traditional initiatives to educate girls in villages (home-based education) and where there is a demand from families and communities. The pilot experiences may result in evidence-based advocacy at the national level.

### **Recommendation 12: Accelerated learning (second chance primary education) and functional literacy**

Given the importance to reach children and young adults who are too old to be enrolled in regular primary education, the Government should increase opportunities for non-formal education (accelerated learning / second chance primary education) as well as for functional literacy. On the basis of its existing experiences in this area, the next UNICEF supported CPC should design and implement experimental demonstration projects for this type of non-formal education on a limited scale resulting in workable solutions that could be replicated in other locations or mainstreamed in national policies and strategies with the support of other external aid agencies.

### **Recommendation 13: Strengthening of human resources for education**

There is an urgent and growing need to provide training to teachers, which can only be responded to with substantial external support. The UNICEF supported CPC should remain involved in teachers' training, especially as far as elements are concerned that make schools more child-friendly. At the same time, the CPC should contribute to a flexible approach in identifying and training non-formal teachers.

### **Recommendation 14: Strengthening of partnerships with Government and other stakeholders**

It is important to consolidate relationships with the new MoE and to remain involved at the policy level in partnership with other external aid mechanisms. UNICEF's strengths would be based on its extensive field experience and its potential to provide evidence-based advocacy with use of demonstration projects. The simultaneous involvement in implementation and at the policy level may create managerial challenges for UNICEF staff.

### **Recommendation 15: Development of a social observatory function**

The research agenda should be closely linked with advocacy to curb all forms of abuse, neglect, exploitation and violence against both girls and boys. The combination of systematic research with advocacy and social communication actually constitutes a "social observatory function", which should eventually be built with national partners, e.g. more or less specialized NGOs. The Child Protection component of the forthcoming CPC should build such a function that could provisionally be lodged within the UNICEF Office. The advocacy part of this function would involve the use of media (radio and television) as well as other communication channels (e.g. Mosques) to inform the population and to raise the public knowledge of the law and strengthen protection networks in communities. The social observatory function could also raise national and external financial resources to better protect vulnerable children.

### **Recommendation 16: Capacity building with governmental and non-governmental partners**

The emphasis of UNICEF's support to children in need of special protection should be on capacity-building of governmental and non-governmental partners. This includes the creation of adequate legislation and the strengthening of law enforcement. Those dealing with children in schools and other institutions need to be sensitized to and trained in adequate care practices. This entails a strong cooperation with other sectors, e.g. health and education. Traditional networks at the level of families and communities that protect children from all forms of abuse and violence and exploitation need to be revitalised.

### **Recommendation 17: Strengthening of Core Commitments for Children (CCCs) and Human Rights Based Approach to Programming (HRBAP) in the next CPC**

Whereas the CPC has largely complied with and even gone beyond the CCC of 2000, there have been some shortcomings, as far as the HRBAP is concerned. Respect of human rights principles is a necessary, but not a sufficient condition for programme strategies to be recognized as a full-fledged HRBAP. There is not enough evidence in the various sectoral programmes that the immediate, under-lying and structural causes of the non-realisation of human rights are sufficiently understood and monitored and that appropriate strategies especially to strengthen the capacities of rights-holders have been formulated. Efforts to strengthen capacities of duty-bearers at the central and provincial levels have by contrast been significant. The next CPC should fully take into account the CCC of 2004 as well as recommendations concerning HRBAP as laid down in the Stamford Consensus Document and the Quito Outcome Document (both of 2003). The CPC should establish an active relationship with national efforts that aim to enhance the human rights environment in Afghanistan, especially the Afghan Independent Human Rights Commission (AIHRC) already supported by UNAMA, Office of the High Commissioner for Human Rights (OHCHR) and United Nations Development Programme (UNDP).

### **Recommendation 18: Contributing to the realization of the Millennium Development Goals (MDGs) related to gender equality**

Although the CPC 2003-2005 has placed a strong emphasis on child and maternal mortality as well as on girls' education, there has not been a proper analysis of the situation of girls and women in Afghan society and their relations with boys and men nor has there been an attempt to address the systematic violation of basic human rights of girls and women rooted in traditional values, beliefs and customs. There is a need to gain a more in-depth understanding of the discrimination of girls and women in Afghan society and the structural and under-lying causes that explain why girls and women remain deprived of the realisation of their human rights. The next CPC should support the Government of Afghanistan and civil society to design and implement strategies that empower girls and women and that involve boys and men in this process. The CPC should thereby make a clear contribution to MDG 3 aiming at the progressive realization of gender equality.

### **Recommendation 19: Follow a results-based approach**

The design of the next CPC should follow a results-based approach and develop clear results matrices / logframes that demonstrate vertical and horizontal relationships between strategic goals (related to MDGs) and outcomes and outputs. Objectives and qualitative and quantitative indicators should to the largest possible extent be SMART. Goals and objectives need to

address the issues that are identified in causal analyses. It is understood that the results framework will be part of the Country Programme Action Plan (CPAP) for the next CPC and relate to the UNDAF outcome document.

**Recommendation 20: Towards evidence-based advocacy as part of wider partnerships**

The UNICEF supported CPC needs to evolve from a role in nation-wide implementation of basic social service projects to that of advocate for the realization of children's and women's rights with the aim of leveraging national and external resources required to progressively realize the provisions of the Millennium Declaration and the MDGs in Afghanistan. Advocacy needs to be evidence-based. The CPC should hence focus on low-cost and highly effective workable solutions to realize children's rights at the local and regional levels that can eventually be replicated in other locations and / or mainstreamed in the wider development context. The CPC should consider to geographically focus on convergence areas, in which all dimensions of children's rights can be addressed in an integrated manner. The CPC should understand itself as part of wider partnerships with evidence-based advocacy for children's rights as its core mission.

# RESUME ANALYTIQUE

## Contexte et objectif de l'évaluation

Le programme de coopération (PC) en cours entre le gouvernement transitoire de l'Etat islamique d'Afghanistan (ci-après nommé « gouvernement de l'Afghanistan ») et l'UNICEF couvre la période allant de 2003 à 2005.

Une Revue à mi-parcours (RMP) a été achevée en novembre 2004. Un environnement très changeant (un nouveau gouvernement élu ayant été mis en place après les élections présidentielles d'octobre) ainsi que le besoin de réajuster le programme de coopération ont fourni la raison principale d'une Evaluation de programme de coopération (EPC) organisée après la RMP. Le bureau de l'UNICEF à Kaboul, en consultation avec le gouvernement de l'Afghanistan, a demandé que l'élaboration de stratégie pour le PC suivant (2006-2008) soit appuyé par une EPC.

L'EPC fait un bilan approfondi de la pertinence et de l'opportunité du PC ainsi que du rôle, de la conception et du centrage de l'aide apportée par l'UNICEF à la réalisation des droits de l'enfant. Le PC aborde également les dimensions de la durabilité et de l'interdépendance, dans un contexte où les initiatives recevant le soutien de l'UNICEF connaissent des problèmes de sécurité considérables et un degré élevé d'instabilité politique.

De plus, l'EPC fait le bilan des progrès réalisés avec l'introduction de l'approche de la programmation fondée sur les droits humains (l' « approche-droits ») et la gestion axée sur les résultats (GAR) dans un PC au contexte instable. Elle traite aussi de l'alignement du PC sur les priorités organisationnelles et les stratégies de l'UNICEF définies dans le Plan stratégique à moyen terme et sur sa contribution à ces priorités, en relation avec les Engagements institutionnels essentiels et engagements essentiels pour les enfants dans toute intervention d'urgence (CCC) , ainsi qu'avec les objectifs à réaliser d'ici à 2015 (Déclaration du Millénaire, Objectifs du Millénaire pour le Développement et Un Monde Digne des Enfants).

Le PC se concentre sur les quatre objectifs principaux du PC actuel, qui traite des problèmes liés : 1) à la mortalité et la morbidité de l'enfant et de la mère ; 2) à la malnutrition et aux troubles de la santé dus aux carences en micronutriments ; 3) à l'amélioration des inscriptions scolaires en mettant l'accent sur l'éducation des filles ; 4) à la protection des enfants touchés par la guerre. Le PC s'inspire du rapport de la RMP évoquant les progrès réalisés pour atteindre le cinquième objectif, qui traite de la façon d'éviter les crises humanitaires généralisées par l'amélioration de l'état de préparation et de réaction à ces crises.

Le PC a été exécuté sur un mode accéléré car il devait servir à alimenter le projet de document de programme de pays, qui lui-même devait être terminé avant la fin du premier trimestre 2005. Le cycle suivant du PC sera harmonisé entre partenaires du Plan-cadre des Nations Unies pour l'aide au développement et coïncidera avec le cycle de programmation de la Stratégie intérimaire de réduction de la pauvreté conclue entre le gouvernement de l'Afghanistan et la Banque mondiale (2006-2008).

Cet exercice a bénéficié du soutien du Bureau de l'évaluation au Siège de New York et du Bureau régional pour l'Asie du Sud. Le PC Afghanistan est un cas pilote au titre du Projet pour l'élaboration de méthodologie et de consignes pour les PC, financé par le DFID du Royaume-Uni, dont le Bureau de l'évaluation au Siège est chargé de l'exécution.

## Vue générale de la situation des droits des enfants

Le rapport de la RMP de 2004 comprend un tour d'horizon sur la situation des enfants et des femmes en Afghanistan, largement fondé sur l'Enquête en grappe à indicateur multiple de 2003<sup>3</sup>. L'Afghanistan a émergé d'une urgence aiguë aussi récemment qu'en 2002. Bien que les deux dernières années aient été caractérisées par une paix et une stabilité relatives, la plupart des familles sont encore en train de lutter pour assurer leur survie, leur sécurité et leur accès à des services sociaux et à des emplois de base. Le rapport souligne la capacité de récupération du peuple afghan. Toutefois, les indicateurs sociaux de base reflètent encore un niveau dramatique de pauvreté et de privation :

- a) Le taux de mortalité infantile se situe actuellement entre 115 et 140 pour 1 000 naissances vivantes, et le taux de mortalité des moins de 5 ans entre 172 et 210<sup>4</sup>. Les causes principales de morbidité et de mortalité juvéniles sont la rougeole, les diarrhées et les carences en micronutriments. Le tétanos néo-natal est lui aussi une cause importante de décès chez les enfants. Les taux de mortalité maternelle comptent également parmi les plus élevés du monde avec 1 600 pour 100 000 naissances vivantes (réajusté à 1 900 dans *La situation des enfants dans le monde*). Neuf femmes sur 10 des milieux ruraux mettent leurs enfants au monde chez elles, sans aide à l'accouchement spécialisée et sans les services d'aiguillage qui conviennent pour sauver des vies par des traitements de base et des soins obstétricaux.
- b) L'accès à l'eau potable n'est pas offert à 69 pour cent de la population rurale et 30 pour cent de la population urbaine, alors que 75 pour cent des Afghans n'ont pas accès à des installations d'assainissement qui présentent toutes les conditions de sécurité. Les diarrhées ont été trouvées prévalentes chez environ 30 pour cent de tous les enfants de moins de 5 ans, et 36 enfants de moins de 5 ans sur 1 000 mourront de diarrhée avant l'âge de cinq ans.
- c) Les taux nets d'inscription scolaire ont augmenté de façon significative entre 2002 et 2003, surtout chez les filles. En 2003, deux tiers des garçons et quatre filles sur dix dans la tranche d'âge de 7 à 12 ans s'étaient inscrits, mais 45 pour cent de tous les enfants n'étaient pas allés à l'école. Une grande disparité entre les sexes existait dans plusieurs provinces, avec plus de 80 pour cent des filles de ce groupe d'âge qui n'étaient pas scolarisées.
- d) On a estimé que 8 000 mineurs étaient associés aux forces combattantes. Le taux de prévalence du travail forcé des enfants était de 28 pour cent chez les garçons et 34 pour cent chez les filles de 7 à 14 ans. D'autres formes d'abus et d'exploitation étaient également généralisées (châtiments corporels, traite des enfants).

Le rapport de la Banque mondiale souligne que l'Afghanistan doit faire face à des difficultés majeures liées à l'insécurité permanente, la faiblesse de l'état de droit et les stupéfiants. La production d'opium, qui s'est développée ces deux dernières années, représente actuellement le tiers du volume de l'économie afghane et les trois quarts de la production illégale d'opium dans le monde. L'Afghanistan doit entrer dans un cercle vertueux d'amélioration de la sécurité,

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<sup>3</sup> Les données de l'Enquête en grappe à indicateur multiple de 2003 sont actuellement en cours d'examen au Bureau national. Les résultats n'en ont pas encore été publiés.

<sup>4</sup> L'édition 2003 de *La situation des enfants dans le monde* fait état d'un taux de mortalité infantile de 165 et d'un taux de mortalité des moins de 5 ans de 257.

de développement des capacités de l'Etat, de mobilisation des revenus, de développement du secteur privé formel et de prise de mesures sensées et coordonnées de lutte contre la drogue.

### **Développements politiques récents**

Depuis 2001, l'Afghanistan a réalisé des progrès significatifs sur le chemin de la paix, de la démocratie et de la stabilité du gouvernement. Après la chute des Talibans, Les négociations pour la paix dirigées en Allemagne par les Nations Unies se sont soldées par la mise en place d'une administration afghane intérimaire qui a veillé à l'organisation d'une assemblée traditionnelle (Loya Jirga) en juin 2002, où M. Hamid Karzai a été élu président. Les élections présidentielles se sont tenues en octobre 2004, et ont confirmé le choix de M. Hamid Karzai comme président. Depuis lors, un nouveau gouvernement a été mis en place. L'organisation d'élections parlementaires, provinciales et de district a été fixée pour septembre 2005.

Le 24 mars 2005, le Conseil de sécurité a prolongé le mandat de la Mission d'assistance des Nations Unies en Afghanistan ( « UNAMA ») de 12 mois supplémentaires, soulignant le rôle central et impartial que les Nations Unies continuaient à jouer dans le développement de la paix et de la stabilité en Afghanistan. L'UNAMA continuera à fournir le soutien nécessaire pour faciliter en temps utile l'organisation d'élections les plus larges possibles, soutenir l'effort en cours pour mettre en place un système juridique juste et transparent, et poursuivre le processus de désarmement, de démobilisation et de réintégration. Avec l'aide de la communauté internationale, le gouvernement de l'Afghanistan continue à gérer la menace qu'Al-Qaeda, les Talibans et d'autres groupes extrémistes font peser sur la sécurité et la stabilité de l'Afghanistan, réagit à la violence entre milices de différentes factions, et lutte contre les activités criminelles, en particulier celles où le trafic de drogue est en jeu.

### **Objectifs, stratégie et structure du programme de coopération**

Le Plan-cadre des Opérations de 2003-2005 signé par le gouvernement de l'Afghanistan et par l'UNICEF soulignait que le programme de coopération soutiendrait et renforcerait l'engagement et les capacités de l'Afghanistan dans le secteur de la réalisation progressive du droit des enfants à la survie, au développement, à la protection et à la participation tel qu'énoncé dans la Convention relative aux droits de l'enfant (CDE) et la Convention sur l'élimination de toutes les formes de discrimination à l'égard des femmes (CEDAW). Ce faisant, il contribuerait à réaliser le Cadre de développement national de l'Afghanistan.

Afin d'y parvenir, le programme visait à soutenir jusqu'à la fin de 2005 les efforts déployés au niveau national (i) pour réduire la mortalité des nouveau-nés et des enfants de moins de 5 ans ; (ii) pour améliorer la santé maternelle et réduire la mortalité maternelle ; (iii) pour réduire la malnutrition des nouveau-nés, des jeunes enfants et des mères ; (iv) pour renforcer les capacités de promotion, de protection et de réalisation du droit des enfants à l'éducation et développer les possibilités qui leur sont offertes de manière à s'assurer qu'ils atteignent leur plein potentiel ; (v) pour fournir aux enfants les compétences, les connaissances et la confiance nécessaires pour faire face aux difficultés de l'existence et participer pleinement au développement de l'Afghanistan ; (vi) pour renforcer les capacités afin de réduire la vulnérabilité des enfants et s'assurer que les enfants exposés aux dangers et vivant dans des conditions difficiles bénéficient d'une protection spéciale et de mesures bienveillantes ; (vii) pour éviter les crises humanitaires généralisées en améliorant l'état de préparation et la rapidité de réaction à ces crises.

La stratégie du programme de coopération 2003-2005 était guidée par les principes de la réalisation universelle des droits des enfants et des femmes. Elle s'inspirait du Sommet mondial pour les enfants, dans le contexte de la CDE et de la CEDAW. Elle puisait dans les stratégies gouvernementales du Cadre national de développement, l'Analyse de la situation des enfants et des femmes de l'Afghanistan, les Priorités organisationnelles de l'UNICEF en regard du Plan stratégique à moyen terme 2002-2005, et les stratégies actuelles de la Banque mondiale et des bailleurs de fonds principaux pour l'Afghanistan vis-à-vis de la réduction des disparités et de la pauvreté par l'amélioration de l'accès aux services sociaux de base.

Le PC répondrait aux quatre principes fondamentaux des droits humains : universalité, indivisibilité, participation et responsabilisation. Cinq stratégies se renforçant mutuellement seraient utilisées dans l'ensemble du programme. Au niveau national, le programme visait à créer un environnement habilitant (i) par l'élaboration des politiques et (ii) par le plaidoyer, tous deux mettant l'accent sur la nécessité de rehausser le profil des droits des enfants et des femmes aux yeux du public. Au niveau sub-national, le programme devait soutenir (iii) le développement de la capacité à livrer des services de qualité et durables en mettant l'accent sur la planification, la gestion et la mise en œuvre ainsi que sur le soutien matériel (iv) le développement des capacités au niveau communautaire afin de doter les familles et les communautés des connaissances et des compétences nécessaires pour protéger et réaliser les droits des enfants et des femmes. La stratégie finale consistant à (v) développer la recherche, le suivi et les communications était destinée à soutenir le programme à tous les niveaux.

Prenant en compte les problèmes soulignés dans l'analyse de situation et les avantages comparés de l'UNICEF et dans le but d'optimiser l'impact obtenu, de promouvoir l'établissement de liens intersectoriels et de bénéficier de la création d'une synergie, le programme centrait toutes ses mesures sur quatre priorités absolues de programmation qui étaient de nature intersectorielle et se renforçaient mutuellement : (i) la promotion de l'éducation des filles; (ii) les soins et le développement de la petite enfance ; (iii) Immunisation Plus (iv) l'amélioration de la protection des enfants contre la violence, les abus et la discrimination.

## **Constats et conclusions**

### **Constat 1 : pertinence et opportunité des objectifs liés à la mortalité et à la morbidité de la mère et de l'enfant**

La mortalité et la morbidité de la mère et de l'enfant sont toujours très élevées en Afghanistan en raison de mauvaises conditions de santé, de nutrition et d'eau et d'assainissement de l'environnement. Le niveau actuel des services publics et privés justifie un soutien considérable. Pour le PC recevant l'aide de l'UNICEF, il demeure donc extrêmement pertinent et opportun d'aborder les objectifs de la survie de l'enfant et de la mère en soutien des efforts déployés au niveau national et en coordination avec d'autres formes d'aide extérieure.

### **Constat 2 : centrage des programmes de santé/nutrition et d'eau et assainissement de l'environnement**

Le PC a joué un rôle précurseur en se concentrant sur la prestation de services et sur l'infrastructure à un moment où des besoins cruciaux existaient dans les secteurs de la santé, de la nutrition, de l'eau et de l'assainissement de l'environnement. La promotion de bons comportements dans la santé personnelle, la nutrition et l'hygiène aux niveaux communautaire et familial a été une priorité de second plan.

### **Constat 3 : conception des programmes sur la santé, la nutrition et d'eau et l'assainissement de l'environnement**

Les objectifs des programmes étaient applicables, mais ils n'étaient pas spécifiques, mesurables, réalisables et en temps limité (« SMART »), et il n'y avait pas de références explicites dans la formulation des objectifs aux changements institutionnels et comportementaux attendus (effets).

### **Constat 4 : forces et faiblesses de la mise en œuvre de programmes de santé/nutrition et d'eau et assainissement de l'environnement**

Le PC a contribué à un accroissement très significatif de la couverture réalisée, à la fois dans le secteur de la santé/nutrition et dans celui de l'eau et l'assainissement de l'environnement. Ce n'est pas à négliger dans un pays qui émerge de longues années de dissensions civiles, sans que soit accordé beaucoup d'attention au développement social entre 1994 et 2001, et avec à la clé une urgence aiguë aussi récemment qu'en 2001-2002. L'objectif de parvenir à une couverture à grande échelle en un court laps de temps peut avoir voilé un souci de gestion plus systématique des programmes (par ex. l'immunisation systématique) et de qualité de l'infrastructure et des services (par ex. eau et assainissement de l'environnement).

### **Constat 5 : problèmes relatifs à la durabilité et à l'interdépendance des résultats**

Une préoccupation significative s'est fait jour quant à la durabilité des résultats, tant dans les programmes de santé/nutrition que dans ceux de l'eau et l'assainissement de l'environnement, en raison du déclin de l'intérêt démontré par les bailleurs de fonds qui s'est soldé par une diminution du financement, une absence de financement du côté du gouvernement, des capacités de gestion limitées chez les homologues, une rotation fréquente du personnel technique de niveau élevé ou moyen dans les différents services et une motivation faible du personnel du secteur public, spécialement au niveau de la prestation des services. Les ressources existantes (par ex. les travailleuses de la santé) ne sont pas toujours utilisées de la meilleure façon et les programmes verticaux (par ex. Programme élargi de vaccination – PEV – et nutrition) sont insuffisamment reliés entre eux. Un souci particulier est aussi le peu de conscience qu'ont les gardiens d'enfants des questions de santé et d'hygiène, leur demande limitée de services appropriés et leur faible participation à la gestion de la santé et à l'infrastructure et aux services d'eau et assainissement de l'environnement. Les problèmes liés à la durabilité peuvent être partiellement traités par une meilleure connexion entre les interventions d'urgence et celles de développement et une coordination étroites avec le nouveau Programme de services de santé de base, qui bénéficie d'un soutien extérieur considérable.

### **Constat 6 : pertinence et opportunité du programme d'éducation de base**

Le programme d'éducation de base, et surtout le « Projet de Retour à l'école » qui en constituait le noyau, étaient hautement pertinents et opportuns compte tenu de la faiblesse des taux d'inscription scolaires qui prévaut en Afghanistan, et aussi du niveau élevé d'analphabétisme que connaît le pays, spécialement chez les filles et les femmes. L'accent mis sur l'éducation des filles était pleinement justifié, car les filles et les femmes se voient refuser depuis longtemps la réalisation de leur droit fondamental à l'éducation.

### **Constat 7 : accent sur le programme d'éducation de base**

Le noyau du programme d'éducation de base est la campagne de « Retour à l'école », où l'accent est fortement mis sur un accès à l'éducation amélioré, surtout pour les filles. Une priorité était donnée à l'instruction primaire formelle, surtout dans les classes élémentaires, avec relativement peu d'attention accordée à l'éducation informelle des enfants de plus de 10 ans qui avaient abandonné l'école très tôt ou n'y étaient jamais allés (apprentissage accéléré ou « de deuxième chance » et alphabétisation des adultes). Les tentatives d'amélioration de la qualité de l'éducation par la formation des enseignants et l'élaboration de programmes scolaires n'ont pas endigué le flot des abandons scolaires, qui est apparemment assez élevé.

### **Constat 8 : conception du programme d'éducation de base**

La conception du programme a pris en compte les droits humains (surtout ceux des filles et des femmes), mais on ne peut pas dire que le programme obéisse pleinement aux consignes relatives à une programmation axée sur les droits et sur les résultats.

### **Constat 9 : points forts de la mise en œuvre du programme d'éducation de base**

La plus grande réalisation de ce programme a été l'inscription spectaculaire de 4,4 millions d'enfants, dont 400 000 filles. Cela signifie un décuplement des inscriptions de filles. Des succès notables ont également été enregistrés dans la qualité de l'éducation, par ex. dans l'élaboration des programmes scolaires et la formation des enseignants, et dans les secteurs de l'information et des systèmes décisionnels.

### **Constat 10 : points faibles et difficultés de mise en œuvre du programme d'éducation de base**

Les succès quantitatifs demeurent fragiles, les taux d'abandon scolaire sont élevés et les facteurs sous-jacents qui expliquent l'abandon et la rétention ne sont pas encore très bien compris. La société civile montre encore un intérêt relativement limité pour l'éducation, et surtout chez les filles. Les environnements scolaires ont encore beaucoup de chemin à parcourir pour devenir conviviaux. Il est également nécessaire de faire figurer les connaissances pratiques élémentaires dans les programmes scolaires. Bien que les disparités sexospécifiques aient été abordées dans toute la mesure du possible, d'autres disparités n'ont pas fait l'objet de la même attention (par ex. entre régions, lieux, groupes sociaux).

### **Constat 11 : durabilité et connexion entre les interventions d'urgence et celles de développement requis pour l'éducation de base**

La durabilité du système scolaire dépendra de soutien financier externe et institutionnel qui sera accordé pour les quelques années à venir. Il est important que l'aide extérieure soit bien intégrée aux politiques et stratégies nationales et bien coordonnée. Tout aussi ou même plus importante est la mobilisation sociale de la société civile (familles et communautés) et l'engagement du personnel de l'éducation. Le PC actuel a dans une certaine mesure traité de ces deux dimensions. Toutefois, le soutien de l'UNICEF est actuellement engagé dans un processus de transition qui l'a fait passer d'un rôle précurseur au lendemain d'une situation d'urgence aiguë à un rôle tout aussi difficile de contributeur à un processus de développement de plus en plus complexe et ambitieux.

### **Constat 12 : pertinence et opportunité du programme de protection de l'enfance**

En résultat de deux décennies de guerre et de destruction, les réseaux traditionnels destinés à assurer la réalisation des droits des enfants ont été érodés. De nombreux enfants sont à présent victimes de violences, d'abus et d'exploitation. Dans ces circonstances, il était pertinent et opportun pour le PC actuel de créer un programme destiné aux enfants qui avaient besoin de protection spéciale, en plus des autres programmes sectoriels qui contribuent à la protection et la promotion des droits des enfants.

### **Constat 13 : centrage et conception du programme de protection de l'enfance**

Le programme de protection de l'enfance a été fortement tourné vers la coopération avec les partenaires nationaux existants et le développement de leurs capacités. Confronté à un vaste éventail de problèmes liés à la violence, aux abus et à l'exploitation, le programme était relativement bien centré sur les droits des enfants affectés par la guerre, car c'étaient ceux qui étaient le plus menacés. L'importance accordée à la collecte et l'analyse des informations et aux conseils décisionnels était elle aussi suffisante. Comme pour d'autres programmes, les matrices de résultats n'ont pas encore vu le jour, mais la RMP signale les résultats au niveau des effets, c'est-à-dire des changements institutionnels et comportementaux provoqués par le programme.

### **Constat 14 : points forts et succès dans la mise en œuvre du programme de protection de l'enfance**

C'est avec succès que le PC a travaillé avec les ministères du travail et du bien-être social, de la justice et de l'intérieur, dont il a réussi à développer les capacités. Un bon début s'est opéré pour fournir des informations et analyses fiables aux partenaires gouvernementaux et non gouvernementaux sur les questions de protection de l'enfance, qui ensuite a posé les jalons d'une vision stratégique de ce secteur. Davantage d'efforts ont également été déployés que dans d'autres programmes du PC pour renforcer le niveau communautaire.

### **Constat 15 : points faibles et difficultés de mise en œuvre du programme de protection de l'enfance**

La coordination et la coopération entre le programme de protection de l'enfance et d'autres programmes du PC (par ex. santé et nutrition et éducation de base) ainsi qu'avec le programme intersectoriel de l'information et des communications, n'ont pas été fortes. Davantage de coopération et d'intégration des divers programmes aurait pu avoir un effet bénéfique sur la coordination entre partenaires nationaux. Le centrage du programme sur les enfants affectés par la guerre a également eu pour résultat que d'autres problèmes de protection n'ont pas été abordés, dont ceux qui ont une dimension sexospécifique.

### **Constat 16 : difficultés de durabilité et de connexion entre les interventions d'urgence et celles de développement du programme de protection de l'enfance**

Les enfants qui ont besoin de protection spéciale requièrent un engagement à long terme, à la fois au niveau de l'Etat et au sein de la société civile (organisations non gouvernementales, communautés, etc.). La mesure ultime de la durabilité des interventions de l'Etat repose dans l'application des cadres de réglementation et l'applicabilité des pratiques de soins dispensées par les institutions de l'Etat. En même temps, les enfants vulnérables sont aussi la responsabilité des familles et des communautés. La durabilité à ce niveau dépendra de la

restauration et de l'initiation de réseaux qui suivent de près toutes les formes de négligence, d'abus et d'exploitation et qui mettent au point des mesures pour les combattre. Le PC en cours a commencé à développer les capacités aux deux niveaux, mais il est encore trop tôt pour s'attendre à ce que les réalisations en soient durables.

## **Orientations stratégiques et recommandations**

### **Recommandation 1 : vision à long terme de la réduction de la mortalité et de la morbidité de l'enfant et de la mère**

En coopération avec d'autres partenaires des Nations Unies, l'UNICEF devrait soutenir le gouvernement dans l'élaboration et le développement d'une vision intégrée et à long terme sur la réduction de la mortalité et de la morbidité de l'enfant et de la mère, et traiter des deux facteurs lorsque des résultats peuvent être obtenus immédiatement (par ex. vaccinations et amélioration des pratiques de soins aux enfants et aux jeunes enfants et amélioration de l'hygiène) et facteurs qui nécessitent une stratégie à plus long terme (par ex. aspects pertinents de l'éducation).

### **Recommandation 2 : intégration et coordination avec le programme des services de santé de base et autres programmes nationaux de premier plan**

Le nouveau PC devrait dans toute la mesure du possible être intégré aux cinq programmes nationaux prioritaires dans la santé et la nutrition et coordonné avec ces derniers, qui comprennent le Paquet de services de santé de base et le Paquet de services hospitaliers essentiels. Ces programmes sont axés sur le développement des capacités et soutenus par des organismes d'aide extérieure importants. Au cours de la préparation du nouveau PC, il sera nécessaire de déterminer comment les projets recevant l'aide de l'UNICEF pourraient contribuer à assurer une intégration efficace aux programmes nationaux prioritaires (par ex. aspects de la santé de la mère et de l'enfant tels que soins obstétricaux d'urgence, renforcement des capacités d'immunisation systématique, réduction de l'anémie causée par les carences en fer, prise en charge intégrée des maladies de l'enfant ou « PCIME »). Il est également nécessaire de déterminer quels projets à impact rapide peuvent être coordonnés de manière efficace avec ces efforts d'intégration (par ex. initiatives d'éradication de la polio, campagnes de réduction de la mortalité causée par la rougeole, activités d'immunisation supplémentaires, universalisation du sel iodé).

### **Recommandation 3 : composantes du PC qui requièrent une couverture nationale continue et celles qui requièrent des interventions modèles de haute qualité pour alimenter le plaidoyer**

Compte tenu du fait que l'acquisition de capacités systémiques nationales suffisantes dans les secteurs de la santé, de la nutrition et de l'eau et l'assainissement de l'environnement prendra encore un certain temps, le programme de coopération recevant l'aide de l'UNICEF devrait poursuivre les grandes interventions initiées sous le PC en cours (2002-2005), par ex. conseils de politique et de stratégie pertinents au gouvernement, éradication de la polio, activités d'immunisation supplémentaire (par ex. élimination du tétanos maternel néonatal), soutien aux hôpitaux d'Etat dans le secteur des soins obstétricaux d'urgence, universalisation du sel iodé et diffusion des expériences au niveau national (y compris pour l'eau et l'assainissement de l'environnement). Un accent plus important devrait toutefois être mis sur la qualité des interventions et des expériences pilotes à une échelle plus modeste (par ex. pour

l'approvisionnement d'eau et l'assainissement de l'environnement), présentant le potentiel d'alimenter l'élaboration des politiques nationales avec des solutions fiables et de haute qualité.

#### **Recommandation 4 : promotion des bons comportements dans la santé et la nutrition, et promotion d'une meilleure utilisation et gestion de l'eau, et d'une hygiène appropriée**

Le prochain PC devrait accorder une meilleure place à la promotion des bons comportements dans la santé et la nutrition, à une utilisation et une gestion de l'eau améliorées, à l'éducation sur l'hygiène, à l'habilitation des protagonistes (titulaires de droits et détenteurs d'obligations) et à une participation communautaire à la conception, au fonctionnement et à l'entretien de l'infrastructure (par ex. dans l'eau et l'assainissement de l'environnement). Le besoin existe d'une meilleure compréhension des pratiques et facteurs traditionnels empêchant les gens d'adopter un comportement plus approprié. La communication doit être améliorée pour le programme, et les capacités nationales devraient être développées à cet égard, par ex. par le biais du gouvernement et des dirigeants religieux. L'UNICEF devrait continuer à assumer son rôle de pointe dans le soutien technique apporté au Ministère de la santé publique et à d'autres partenaires pour assurer une intégration efficace des programmes nationaux prioritaires au niveau des bénéficiaires, et pour assurer également la mise en œuvre des politiques et des consignes publiques dans la nutrition au niveau de la prestation des services, par le biais du Paquet de services de soins de base et du Paquet de soins hospitaliers essentiels. L'UNICEF devrait continuer à soutenir le gouvernement et à encourager le secteur privé dans la voie de l'enrichissement des produits alimentaires (en particulier l'universalisation du sel iodé) jusqu'à ce que les troubles dus à la carence en iode aient été éliminés et que d'autres politiques et pratiques d'enrichissement des produits alimentaires aient été adoptées à grande échelle.

#### **Recommandation 5 : une intégration horizontale plus grande des programmes verticaux**

Le besoin se fait sentir d'améliorer l'intégration mutuelle des composantes verticales des programmes sur la santé, la nutrition et l'eau et l'assainissement de l'environnement et de divers programmes sectoriels du PC ; il conviendrait également d'améliorer la coopération dans la programmation avec les partenaires du Plan-cadre des Nations Unies pour l'aide au développement, ce qui aurait potentiellement des effets positifs sur la coopération inter-services au sein du gouvernement.

#### **Recommandation 6 : implications pour la gestion de la nouvelle orientation adoptant une démarche de programmation davantage orientée vers le développement**

Le passage par l'UNICEF de la mise en œuvre directe de programmes et projets à une démarche de programmation davantage orientée vers le développement, avec des problèmes liés au développement des capacités et des partenariats avec d'autres organismes, aura pour la gestion des implications qui pourront comporter un transfert plus important des responsabilités de mise en œuvre au gouvernement, ou, pour le personnel de l'UNICEF, un transfert de certaines responsabilités du niveau central aux opérations sur le terrain.

#### **Recommandation 7 : liens avec les OMD, les objectifs de développement nationaux et les objectifs du Plan-cadre des Nations Unies pour l'aide au développement**

Les objectifs de développement nationaux et ceux du Plan-cadre des Nations Unies pour l'aide au développement dans le secteur de l'éducation entraînent pour le prochain PC deux nouvelles orientations, qui sont également conformes au prochain Plan stratégique à moyen terme de l'UNICEF (2006-2009) : (i) tout en maintenant les buts et objectifs liés à l'accès à

l'éducation, une attention plus importante devrait dorénavant être accordée à la qualité de l'éducation, avec à la clé une meilleure rétention et un meilleur taux d'achèvement de la scolarité ; (ii) plutôt que de viser simplement à la parité des sexes (le même nombre de garçons et de filles dans les écoles), il faudrait faire une part plus belle à l'égalité des sexes, c'est-à-dire aux relations sociales entre hommes et femmes qui doivent être transformées pour surmonter la discrimination systématique des femmes et leur cantonnement à une position subalterne dans la société.

### **Recommandation 8 : « Retour à l'école » et « Rester à l'école »**

Le prochain PC devrait soutenir le gouvernement non seulement dans le maintien et l'accroissement des taux d'inscription à l'école primaire, mais aussi, de plus en plus, dans la promotion de la rétention et de l'achèvement des études primaires. Un nouveau slogan pourrait être : « Rester à l'école ». Ceci, tout d'abord, demandera une meilleure compréhension des facteurs en jeu dans la prise de décision des parents et des enfants pour mener la scolarisation à son terme ou pour l'abandonner. Les études et enquêtes devraient être sexospécifiques. Une bonne analyse de causalité permettrait une programmation plus ciblée traitant des causes immédiates et sous-jacentes de l'absentéisme à l'école et de l'inachèvement des études. Cela contribuerait aussi à une meilleure compréhension de la notion de qualité de l'éducation, qui devrait devenir culturellement plus pertinente.

### **Recommandation 9 : vers l'égalité des sexes et la qualité de l'éducation**

Une importante contribution à la qualité de l'éducation est de prêter l'attention qui convient à l'égalité des sexes. Il ne suffit pas d'avoir un nombre équivalent de garçons et de filles dans les écoles : l'élaboration des programmes, la formation des enseignants et la promotion de la participation communautaire à l'éducation devraient véhiculer des messages qui viennent à bout des stéréotypes sexospécifiques. Les activités ne devraient pas seulement viser à l'habilitation des filles et des femmes, mais aussi, de manière très spécifique, à l'éducation des garçons et des hommes en vue de la protection et de la promotion des droits des filles et des femmes. On peut s'attendre à ce qu'une éducation sensible aux questions sexospécifiques améliore la qualité de l'éducation en général.

### **Recommandation 10 : améliorer l'infrastructure de l'éducation et la situation de l'offre**

Compte tenu de l'intérêt accordé par les bailleurs de fonds principaux au secteur de l'éducation, on peut s'attendre à ce que les Ministères de l'éducation et de la Reconstruction et du développement rural reçoivent le soutien nécessaire pour en arriver petit à petit à une couverture de l'infrastructure scolaire. Plutôt que de continuer à insister sur une couverture des besoins dans le secteur des infrastructures, le prochain PC devrait se concentrer sur des solutions de haute qualité et à bas prix, à la fois pour les constructions scolaires et pour l'approvisionnement d'eau et l'assainissement de l'environnement dans les écoles. L'UNICEF pourrait jouer un rôle dans la conception et la mise en œuvre de projets de démonstration expérimentale pour les écoles primaires (y compris pour l'approvisionnement d'eau et l'assainissement de l'environnement) à une échelle plus modeste, se soldant par des solutions viables qui pourraient être reproduites à d'autres endroits ou intégrées aux politiques et stratégies nationales. Le besoin existe d'un plaidoyer argumenté, à la fois auprès du gouvernement et des principaux organismes d'aide extérieure. Les critères fondamentaux de sélection des sites pilotes devraient être : (i) les caractéristiques physiques et écologiques des sites en question ; (ii) les facteurs sociaux, économiques, culturels et politiques (potentiel d'une participation communautaire, exclusion de groupes spécifiques ou de régions isolées) ; (iii) les

partenariats avec divers organismes d'aide extérieure ; (iv) la convergence avec d'autres programmes recevant le soutien de l'UNICEF (par ex. dans la santé et la nutrition et la protection de l'enfance).

### **Recommandation 11 : écoles de villages à base communautaire**

Les écoles ont le potentiel de représenter des expériences intéressantes dans l'amélioration des inscriptions scolaires, et surtout celles des filles dans l'éducation primaire, et dans la stimulation de la participation communautaire en général. La mise en œuvre à grande échelle de cette approche ne semble pas s'imposer. Mais les expériences pilotes devraient être poursuivies dans les villages où se sont produites des initiatives traditionnelles pour éduquer les filles (éducation au foyer) et où il existe une demande émanant des familles et des communautés. Les expériences pilotes peuvent résulter en un plaidoyer argumenté au niveau national.

### **Recommandation 12 : apprentissage accéléré (seconde chance dans l'éducation primaire) et alphabétisme fonctionnel**

Compte tenu de l'importance de pouvoir toucher les enfants et les jeunes adultes qui sont trop âgés pour s'inscrire à des études primaires normales, le gouvernement devrait accroître les occasions d'éducation informelle (apprentissage accéléré / seconde chance dans l'éducation primaire) ainsi que l'alphabétisme fonctionnel. Sur la base de ses expériences existantes dans ce secteur, le prochain PC recevant l'aide de l'UNICEF devrait concevoir et exécuter des projets expérimentaux de démonstration de ce type d'éducation informelle à une échelle limitée aboutissant à des solutions viables qui pourraient être reproduites dans d'autres lieux ou intégrées aux politiques et stratégies nationales avec le soutien d'autres organismes d'aide extérieure.

### **Recommandation 13 : renforcement des ressources humaines pour l'éducation**

Il existe un besoin urgent et croissant de donner une formation aux enseignants, auquel on ne peut répondre qu'avec un soutien extérieur important. Le PC recevant l'aide de l'UNICEF devrait continuer à s'occuper de la formation des enseignants, surtout dans les secteurs qui rendraient les écoles plus conviviales. En même temps, le PC devrait contribuer à une méthode souple d'identification et de formation des enseignants du secteur informel.

### **Recommandation 14 : renforcement des partenariats avec le gouvernement et d'autres protagonistes**

Il est important de consolider les relations avec le nouveau Ministère de l'éducation et de demeurer engagé au niveau des politiques dans des partenariats avec d'autres mécanismes d'aide extérieure. Les points forts de l'UNICEF seraient basés sur son expérience extensive du terrain et le potentiel qui est le sien de fournir un plaidoyer argumenté tout en recourant à des projets de démonstration. Une implication simultanée au niveau de la mise en œuvre et à celui des politiques peut créer pour le personnel de l'UNICEF des difficultés de gestion.

### **Recommandation 15 : élaboration d'une fonction d'observatoire social**

Le programme de recherche devrait être étroitement lié au plaidoyer pour lutter contre toutes les formes d'abus, de négligence, d'exploitation et de violence à l'encontre des filles comme des garçons. La combinaison d'un travail de recherche systématique et de la communication sociale constitue en fait une « fonction d'observatoire social » qui devrait en fin de compte être développée avec les partenaires nationaux, par ex. des ONG plus ou moins spécialisées. La composante « protection de l'enfance » du PC qui s'annonce devrait mettre en place cette fonction, qui pourrait temporairement être hébergée au bureau de l'UNICEF. La partie « plaidoyer » de cette fonction impliquerait le recours aux médias (radio et télévision) ainsi que d'autres canaux de communication (par ex. les mosquées) pour informer la population et faire mieux connaître la loi au public tout en renforçant les réseaux de protection communautaires. La fonction d'observatoire social pourrait aussi permettre de collecter des ressources financières nationales et extérieures pour mieux protéger les enfants vulnérables.

### **Recommandation 16 : développement des capacités avec les partenaires gouvernementaux et non gouvernementaux**

Dans le soutien que l'UNICEF apporte aux enfants qui ont besoin de protection spéciale, l'accent devrait être mis sur le développement des capacités des partenaires gouvernementaux et non gouvernementaux. Cela comprend la création d'une législation appropriée et le renforcement de l'application des lois. Ceux qui s'occupent des enfants dans les écoles et d'autres institutions doivent être sensibilisés et formés aux pratiques qui conviennent. Cela entraîne une coopération forte avec d'autres secteurs, par ex. la santé et l'éducation. Les réseaux traditionnels au niveau des familles et des communautés qui protègent les enfants contre toutes les formes d'abus, de violence et d'exploitation doivent être revitalisés.

### **Recommandation 17 : renforcement des Engagements institutionnels pour les enfants et l'approche de la programmation fondés sur les droits humains (approche-droits) dans le prochain PC**

Bien que le PC se soit largement conformé aux EIE de 2000 et les ait même dépassés, certaines lacunes se sont fait jour dans l'approche-droits. Le respect des principes des droits humains est une condition nécessaire, mais pas suffisante pour que les stratégies de programmation soient reconnues comme relevant d'une approche-droits à part entière. Il n'y a pas suffisamment de preuves dans les divers programmes sectoriels que les causes immédiates, sous-jacentes et profondes de la non réalisation des droits fondamentaux sont suffisamment bien comprises et suivies, et que les stratégies appropriées, surtout pour renforcer les capacités des titulaires de droits, ont été formulées. Les efforts destinés à renforcer les capacités des détenteurs d'obligations aux niveaux central et provincial ont en revanche été significatifs. Le prochain PC devrait pleinement prendre en compte les EIE de 2004 ainsi que les recommandations sur l'approche-droits qui ont été énoncées dans le document du consensus de Stamford et dans celui qui clôturait la réunion de Quito (tous deux datant de 2003). Le PC devrait mettre en place une relation active avec les instances qui, au niveau national, multiplient les efforts pour améliorer les conditions des droits fondamentaux en Afghanistan, notamment la Commission indépendante afghane sur les droits humains, qui est déjà soutenue par UNAMA (la Mission d'assistance des Nations Unies en Afghanistan), le Haut Commissariat des Nations Unies aux droits de l'homme (HCDH) et le Programme des Nations Unies pour le développement (PNUD).

### **Recommandation 18 : contribuer à la réalisation des objectifs du Millénaire pour le développement (OMD) liés à l'égalité des sexes**

Bien que le PC de 2003-2005 ait fortement mis l'accent sur la mortalité de la mère et de l'enfant et sur l'éducation des filles, il n'y a pas eu de véritable analyse de la situation des filles et des femmes dans la société afghane et de leurs relations avec les garçons et les hommes, ni de tentative d'aborder la question des violations systématiques des droits fondamentaux des filles et des femmes enracinées dans les valeurs, croyances et coutumes traditionnelles. Il existe un besoin d'accéder à une compréhension plus approfondie de la discrimination des filles et des femmes dans la société afghane et des causes profondes et sous-jacentes qui expliquent pourquoi les filles et les femmes demeurent privées de la réalisation de leurs droits fondamentaux. Le prochain PC devrait soutenir le gouvernement de l'Afghanistan et la société civile dans la conception et l'application des stratégies habilitantes pour les femmes et les filles et qui appellent à la participation des garçons et des hommes à ce processus. Le PC devrait de ce fait apporter une contribution claire à l'OMD numéro 3 qui vise à la réalisation progressive de l'égalité des sexes.

### **Recommandation 19 : suivre une approche axée sur les résultats**

La conception du prochain PC devrait suivre une approche axée sur les résultats et élaborer des matrices de résultats et cadres logiques clairs pour démontrer les relations verticales et horizontales entre les objectifs stratégiques (liés aux OMD) et les effets et les produits obtenus. Les objectifs et indicateurs qualitatifs et quantitatifs devraient dans toute la mesure du possible être SMART. Les buts et objectifs doivent aborder les questions identifiées dans les analyses de causalité. Il est bien entendu que le cadre des résultats fera partie du Plan d'action de programme de pays pour le PC prochain et qu'il sera lié au document final du Plan-cadre des Nations Unies pour l'aide au développement.

### **Recommandation 20 : vers un plaidoyer argumenté intégré à des partenariats plus larges**

Le PC recevant l'aide de l'UNICEF doit passer d'un rôle de mise en œuvre de projets de services sociaux de base au niveau national à celui de plaidoyer pour la réalisation des droits des enfants et des femmes, avec pour objectif de se procurer les ressources nationales et extérieures nécessaires pour réaliser progressivement les clauses de la Déclaration du Millénaire et des OMD en Afghanistan. Le plaidoyer doit être bien argumenté. Le PC devrait par conséquent se concentrer sur des solutions viables à bas prix et à haute efficacité pour réaliser les droits des enfants aux niveaux local et régional, et que l'on pourrait reproduire dans d'autres lieux ou intégrer au cadre plus général du développement. Le PC devrait envisager de se centrer géographiquement sur des zones de convergence dans lesquelles toutes les dimensions des droits des enfants peuvent être traitées de façon intégrée. Le PC devrait avoir de lui-même la perception qu'il s'inscrit dans des partenariats plus larges, avec au cœur de sa mission un plaidoyer argumenté pour les droits des enfants.



# RESUMEN EJECUTIVO

## Objetivo y contexto de la evaluación

El Programa de Cooperación (PC) entre el Gobierno del Estado Islámico de Transición del Afganistán (a partir de ahora mencionado como el Gobierno del Afganistán) y UNICEF abarca el periodo de 2003-2005.

En noviembre de 2004 se terminó una Revisión de Medio Término (RMT). Un entorno que cambia con rapidez, con un nuevo gobierno elegido después de las elecciones presidenciales de octubre, así como la necesidad de un reajuste estratégico del PC, fueron los principales criterios para llevar a cabo una Evaluación del Programa de Cooperación (EPC) después de la RMT. La oficina de UNICEF en Kabul, en consulta con el Gobierno del Afganistán, solicitó que el desarrollo de la estrategia para el próximo PC 2006-2008 reciba el apoyo de una Evaluación de Programa de Cooperación (EPC).

La EPC ofrece un análisis a fondo sobre la pertinencia y la idoneidad del PC, así como la función, el diseño y el enfoque del apoyo de UNICEF a la realización de los derechos de la infancia. La EPC aborda también las dimensiones de la sostenibilidad y conectividad de las iniciativas patrocinadas en un contexto en el que existen considerables preocupaciones sobre la seguridad y una alta volatilidad política.

Además, la EPC evalúa los progresos alcanzados mediante la incorporación del enfoque a la programación basado en los derechos humanos y la gestión basada en los resultados en un PC que opera en un contexto inestable. También aborda la armonización del PC con las prioridades y estrategias organizativas de UNICEF definidas en el Plan Estratégico de Mediano Plazo, y su contribución a ellas, así como en relación con los Compromisos Corporativos con la Infancia / Compromisos con la Infancia en respuesta a situaciones de emergencia y los Objetivos hasta 2015 (Declaración del Milenio, Objetivos de Desarrollo del Milenio y Un mundo apropiado para los niños).

La EPC se centra en los cuatro objetivos principales del PC en vigor, que aborda desafíos relacionados con 1) mortalidad y morbilidad infantil y materna; 2) desnutrición y trastornos por carencia de micronutrientes; 3) una mejora en la matriculación escolar con una orientación especial hacia la educación de las niñas; y 4) protección de los niños afectados por la guerra. La EPC se apoya en el informe de la RMT sobre los progresos alcanzados en el quinto objetivo, relacionado con la prevención de las crisis humanitarias generalizadas mediante una mejora en la preparación y la respuesta.

La EPC se llevó a cabo mediante un procedimiento acelerado, ya que tenía que servir de fuente de información para la preparación del borrador del Documento del Programa de País, que debía estar terminado a final del primer trimestre de 2005. El ciclo del próximo PC será armonizado entre los socios del Marco de Asistencia de las Naciones Unidas para el Desarrollo (MANUD) y coincidirá con el ciclo del programa interino de reducción de la pobreza del Gobierno del Afganistán y el Banco Mundial (2006-2008).

El ejercicio ha recibido apoyo de la Oficina de Evaluación de la sede en Nueva York y la Oficina Regional para Asia Meridional (ROSA). La EPC del Afganistán es un caso piloto que forma parte del "Proyecto para el Desarrollo de Metodología y Directrices de Evaluación de Programas de Cooperación", que corre a cargo de la Oficina de Evaluación en la sede del

UNICEF de Nueva York y está financiado por el Departamento para el Desarrollo Internacional (DFID) del Reino Unido.

## Un panorama general sobre la situación de los derechos de la infancia

El Informe de la RMT de 2004 contiene una actualización sobre la situación de los niños y las mujeres en el Afganistán, que está en gran medida basada en las Encuestas de Múltiples Indicadores por Conglomerados (MICS) de 2003<sup>5</sup>. El Afganistán salió de una situación de emergencia aguda en una fecha tan reciente como 2002. Aunque los últimos dos años se han caracterizado por una relativa paz y estabilidad, la mayoría de las familias todavía se esfuerzan por garantizar su supervivencia, su seguridad y el acceso a servicios sociales básicos y puestos de trabajo. El informe hace hincapié en la resistencia del pueblo del Afganistán. Sin embargo, los indicadores sociales básicos todavía reflejan un enorme nivel de pobreza y privación:

- a) La tasa de mortalidad infantil se encuentra en la actualidad en 115-140 por cada 1.000 nacidos vivos y la tasa de mortalidad de menores de cinco años se encuentra en la escala de 172 a 210<sup>6</sup>. Las principales causas de la morbilidad y la mortalidad infantiles son el sarampión, la diarrea, las infecciones agudas de las vías respiratorias, el paludismo y las carencias de micronutrientes. El tétanos neonatal también es una de las principales causas de mortalidad en la infancia. Las tasas de mortalidad derivadas de la maternidad son también de las más altas del mundo, 1.600 por cada 100.000 nacimientos vivos (1.900 según el ajuste del *Estado Mundial de la Infancia*). Nueve de cada 10 mujeres del medio rural dan a luz en el hogar sin la presencia de una partera capacitada y sin que haya servicios adecuados de remisión de casos para salvar vidas mediante la atención básica y obstétrica.
- b) Un 69% de la población del medio rural y un 39% de la población del medio urbano carecen de acceso al agua potable, mientras que un 75% de los afganos no tienen acceso a instalaciones seguras de saneamiento. Alrededor de un 30% de todos los niños menores de cinco años padecen enfermedades diarreicas y 36 de cada 1.000 niños morirá a causa de la diarrea antes de cumplir cinco años.
- c) Las tasas netas de matriculación han aumentado de manera considerable entre 2002 y 2003, especialmente en el caso de las niñas. En 2003, dos terceras partes de los niños y 4 de cada 10 niñas de 7 a 12 años, se habían matriculado en la escuela. Pero un 45% de todos los niños y niñas no recibían una educación. En varias provincias había importantes disparidades entre los géneros, ya que más de un 80% de las niñas de ese grupo de edad no acudían a la escuela.
- d) Se calcula que alrededor de 8.000 menores de edad estaban asociados a las fuerzas combatientes. El trabajo infantil era frecuente, con un 28% de los niños y un 34% de las niñas de 7 a 14 años realizando algún tipo de trabajo. Otras formas de malos tratos y explotación estaban también generalizadas (el castigo corporal y la trata de niños).

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<sup>5</sup> Los datos de MICS de 2003 están siendo analizados en la actualidad por la oficina de UNICEF en el Afganistán. Todavía no se han publicado los resultados.

<sup>6</sup> El *Estado Mundial de la Infancia de 2005* indica una tasa de mortalidad infantil de 165 y una tasa de mortalidad de menores de cinco años de 257 para 2003.

El informe del Banco Mundial hace hincapié en que el Afganistán tiene que enfrentarse a retos importantes relacionados con la constante inseguridad, un debilitado imperio de la ley y los narcóticos. La propagación de la producción de opio durante los dos últimos años representa alrededor de una tercera parte de la economía del Afganistán y tres cuartas partes de la producción mundial ilícita de opio. El Afganistán tiene que entrar en un círculo virtuoso que incluya la mejora de la seguridad, el fomento de la capacidad estatal, la movilización de ingresos, el desarrollo oficial del sector privado y la adopción de medidas razonables y coordinadas contra las drogas.

### **Últimos acontecimientos políticos**

Desde 2001, el Afganistán ha logrado progresos considerables en el camino de la paz, la democracia y un gobierno estable. Después de la caída de los talibanes, las conversaciones presididas por las Naciones Unidas que se llevaron a cabo en Alemania condujeron al establecimiento de una Administración Temporal del Afganistán, con un mandato de seis meses, que organizó la convocatoria de una asamblea tradicional (Loya Jirga), celebrada en junio de 2002, donde se eligió a Hamid Karzai como presidente. En octubre de 2004 se celebraron las elecciones presidenciales, que confirmaron a Hamid Karzai como Presidente. Desde entonces se formó un nuevo gobierno. En septiembre de 2005 estaban previstas las elecciones parlamentarias, provinciales y de distrito.

El 24 de marzo de 2005, el Consejo de Seguridad amplió el mandato de la Misión de Asistencia de las Naciones Unidas en el Afganistán (UNAMA) por otros 12 meses, poniendo de relieve la función central e imparcial que siguen desempeñando las Naciones Unidas en la promoción de la paz y la estabilidad en el Afganistán. UNAMA seguirá prestando el apoyo necesario para facilitar la celebración de elecciones a tiempo con la mayor participación posible; para apoyar las actividades en marcha destinadas a establecer un sistema de justicia transparente y con las debidas garantías; y para mantener el proceso de desarme, desmovilización y reintegración. Con la asistencia de la comunidad internacional, el Gobierno del Afganistán sigue abordando la amenaza a la seguridad y estabilidad del Afganistán que representan Al-Qaeda, los talibanes y otros grupos extremistas, contrarrestando la violencia entre facciones de las fuerzas de la milicia y luchando contra actividades criminales, especialmente las que se refieren al comercio de drogas.

### **Objetivos, estrategias y estructura del Programa de País**

El Plan Maestro de Operaciones (PMO) para 2003-2005, firmado por el Gobierno del Afganistán y UNICEF, hizo hincapié en que el PC prestaría apoyo y reforzaría el compromiso y la capacidad del Afganistán en favor de la realización progresiva los derechos de la infancia a la supervivencia, el desarrollo, la protección y la participación, tal como lo establece la Convención sobre los Derechos del Niño y la Convención para la eliminación de todas las formas de discriminación contra la mujer. Al hacerlo, contribuirá al logro del Marco Nacional para el Desarrollo del Afganistán.

A fin de lograr este objetivo, el Programa trató de apoyar, para finales de 2005, las actividades nacionales dedicadas a (i) reducir la mortalidad infantil y de menores de cinco años; (ii) mejorar la salud de las madres y reducir la mortalidad derivada de la maternidad; (iii) reducir la desnutrición del recién nacido, del niño de corta edad y de las madres; (iv) reforzar las capacidades para promover, proteger y satisfacer el derecho del niño a la educación y ampliar las oportunidades para asegurar que alcance su pleno potencial; (v) proporcionar a los niños y

niñas las aptitudes, conocimientos y confianza para confrontar los retos que depara la vida y participar plenamente en el desarrollo del Afganistán; (vi) fortalecer las capacidades para reducir la vulnerabilidad y asegurar medidas de protección y atención especiales a los niños y niñas en peligro y que viven en circunstancias difíciles; (vii) evitar que se produzcan crisis humanitarias de grandes proporciones por medio de una mejora en la preparación y respuesta rápidas.

La estrategia del Programa de Cooperación de 2003-2005 estuvo guiada por los principios de la realización universal de los derechos del niño y la mujer. Se basa en la Cumbre Mundial en favor de la Infancia, dentro del contexto de la Convención sobre los Derechos del Niño y la Convención para la eliminación de todas las formas de discriminación contra la mujer. Se inspiró en las estrategias del Marco Nacional para el Desarrollo del Afganistán, el análisis de la situación de los niños y las mujeres en el Afganistán, las prioridades de UNICEF como organización según el MTSP para 2002-2005, y las estrategias en marcha del Banco Mundial y los principales donantes para el Afganistán con respecto a la reducción de las disparidades y la pobreza por medio de una mejora en el acceso a los servicios sociales básicos.

El PC tenía que atenerse a los cuatro principios clave de derechos humanos (universalidad, indivisibilidad, participación y responsabilidad). A lo largo del programa se utilizarían cuatro estrategias que se refuerzan mutuamente. A nivel nacional, el programa tenía como objetivo crear un entorno propicio por medio de (i) la formulación de políticas y (ii) la defensa de la infancia, en ambos casos centrándose en la necesidad de dar más importancia a los derechos de la infancia y la mujer en la esfera pública. A nivel subnacional, el problema tenía que apoyar (iii) el fomento de la capacidad para una prestación de servicios sostenible y de calidad – haciendo hincapié en la planificación, la gestión y la implementación, así como el apoyo material, y (iv) el desarrollo de la capacidad a nivel de comunidades para habilitar a las familias y las comunidades con conocimientos y aptitudes a fin de proteger y satisfacer los derechos de la infancia y la mujer. La estrategia final para (v) llevar a cabo tareas de investigación, supervisión y comunicación tenía el objetivo de apoyar el programa a todos los niveles.

Teniendo en cuenta las cuestiones subrayadas en el Análisis de la Situación y la ventaja comparativa de UNICEF, y a fin de aprovechar al máximo el impacto, promover vínculos intersectoriales y beneficiarse del sinergismo, el programa centró todas las medidas en cuatro prioridades generales intersectoriales del programa, que se refuerzan mutuamente y que eran: (i) la promoción de la educación de las niñas; (ii) el cuidado y desarrollo del niño en la primera infancia; (iii) la inmunización y más; (v) la mejora en la protección de la infancia contra la violencia, los malos tratos y la discriminación.

## **Hallazgos y conclusiones**

### **Hallazgo 1: Pertinencia e idoneidad de los objetivos relacionados con la mortalidad y la morbilidad de la infancia y de la madre**

La mortalidad y morbilidad de la infancia y de la madre son todavía muy elevadas en el Afganistán, debido a la mala salud, la nutrición, y el agua y el saneamiento ambiental. El nivel actual de servicios públicos y privados justifica un apoyo considerable. Para el PC apoyado por UNICEF sigue siendo altamente pertinente e idóneo abordar los objetivos de supervivencia infantil y de la madre en apoyo a las actividades nacionales y en coordinación con otras formas de asistencia externa.

## **Hallazgo 2: Enfoque de los Programas de Salud y Nutrición, y Agua y Saneamiento Ambiental**

El PC ha desempeñado un papel pionero y se ha centrado en la prestación de servicios e infraestructura en un momento en que había importantes necesidades en las esferas de la salud, la nutrición, el agua y el saneamiento ambiental. La promoción de conductas adecuadas en materia de salud, nutrición e higiene a nivel familiar y de comunidades fue una prioridad menor.

## **Hallazgo 3: Diseño de los Programas de Salud y Nutrición y Agua y Saneamiento Ambiental**

Los objetivos del Programa eran pertinentes, pero no específicos, mensurables, alcanzables y con plazos definidos (SMART), y no había referencias explícitas en la formulación de los objetivos a los cambios (efectos) institucionales y de conductas esperados.

## **Hallazgo 4: Puntos fuertes o débiles de la puesta en práctica de los programas de Salud y Nutrición y Agua y Saneamiento Ambiental**

El PC ha contribuido a lograr un aumento muy considerable en la cobertura de salud y nutrición y agua y saneamiento ambiental. Esto no es poca cosa en un país que se recupera de muchos años de conflicto civil, donde se ha prestado escasa atención al desarrollo social entre 1994 y 2001, y donde se ha producido una grave situación de emergencia en una fecha tan cercana como 2001-2002. El objetivo de alcanzar una cobertura a gran escala en un corto periodo de tiempo podría haber desplazado las preocupaciones para lograr una gestión más sistemática de los programas (por ejemplo, inmunización sistemática) y una mayor calidad de la infraestructura y servicios prestados (por ejemplo, en agua y saneamiento ambiental).

## **Hallazgo 5: Desafíos a la sostenibilidad y la conectividad de los resultados**

Existe una considerable preocupación sobre la sostenibilidad de los resultados en los programas de salud y nutrición y agua y saneamiento ambiental, debido a la disminución del interés entre los donantes que ha tenido como consecuencia una reducción en la financiación, la falta de financiación por parte del gobierno, las limitadas capacidades de gestión de las contrapartes, el frecuente movimiento del personal técnico de nivel superior y medio en los diferentes servicios y una baja motivación del personal gubernamental (especialmente a nivel de prestación de servicios). Los recursos existentes (por ejemplo, trabajadoras de la salud) no se utilizan siempre de la manera más óptima y los programas verticales (por ejemplo, el Programa Ampliado de Inmunización – PAI y nutrición) están insuficientemente vinculados. Un motivo especial de preocupación es también el bajo nivel de concienciación sobre la salud y la higiene entre los cuidadores de niños, su limitada demanda de servicios adecuados y el bajo nivel de su participación en la gestión de la infraestructura y los servicios de salud y agua y saneamiento ambiental. Los desafíos relacionados con la sostenibilidad pueden abordarse en parte mediante una conectividad más estrecha y la coordinación con el nuevo programa Paquete Básico de Servicios de Salud, que recibe un considerable apoyo externo.

### **Hallazgo 6: Pertinencia e idoneidad del Programa Básico de Educación**

El Programa Básico de Educación, y especialmente el “Proyecto de Regreso a la escuela”, un elemento central del mismo, fueron altamente pertinentes e idóneos dado el bajo nivel de matriculación en la escuela que prevalece en el Afganistán y también el alto nivel de analfabetismo que existe, especialmente entre las niñas y las mujeres. El hincapié en la educación de las niñas estaba plenamente justificado, ya que durante muchos años se ha denegado a las niñas y las mujeres la realización de su derecho humano básico a la educación.

### **Hallazgo 7: Enfoque del Programa Básico de Educación**

El núcleo del Programa Básico de Educación ha sido la campaña de Regreso a la escuela, que se centraba especialmente en un aumento en el acceso a la educación, especialmente para las niñas. Se hizo hincapié en la educación primaria oficial, especialmente los primeros grados, y una atención relativamente menor a la educación no oficial para los niños y niñas mayores de 10 años que habían abandonado la escuela primaria muy pronto o que nunca habían acudido a la escuela (aprendizaje acelerado / “segunda oportunidad”, así como alfabetización para adultos). Todos los intentos por mejorar la calidad de la educación por medio de la capacitación de maestros y el desarrollo de los planes de estudio no han impedido el abandono escolar, cuyos niveles son aparentemente bastante elevados.

### **Hallazgo 8: Diseño del Programa Básico de Educación**

El diseño del programa tuvo en cuenta los derechos humanos (especialmente de las niñas y las mujeres), pero no se puede decir que se haya acomodado plenamente a las orientaciones sobre la programación basada en los derechos y orientada hacia los resultados.

### **Hallazgo 9: Puntos fuertes de la puesta en práctica del Programa Básico de Educación**

El mayor logro del programa ha sido la matriculación espectacular de 4,4 millones de niños, de los cuales 400.000 eran niñas. Esto significa un aumento por 10 de las tasas de matriculación de las niñas. También se alcanzaron logros considerables con respecto a la calidad de la educación, por ejemplo por medio del desarrollo de planes de estudio y la capacitación de maestros, y en las esferas de sistemas de información y de políticas.

### **Hallazgo 10: Puntos débiles y desafíos de la puesta en práctica del Programa Básico de Educación**

Los logros cuantitativos sigue siendo débiles, debido a que todavía no se comprenden las razones que expliquen las elevadas tasas de abandono escolar y los factores subyacentes que causan el abandono y la retención. La sociedad civil muestra todavía un interés limitado por la educación, especialmente de las niñas. Los entornos escolares tienen todavía mucho camino que recorrer para convertirse en lugares acogedores para la infancia. También es necesario incluir cursos de aprendizaje básico para la vida práctica en los planes de estudio. Aunque las disparidades entre los géneros se han abordado con el mayor alcance posible, se ha prestado menos atención a otras disparidades (por ejemplo, entre las regiones, los lugares, los grupos sociales).

### **Hallazgo 11: Sostenibilidad y conectividad necesarias para la Educación básica**

La sostenibilidad del sistema educativo dependerá del apoyo financiero externo e institucional durante los próximos años. Es importante que la asistencia externa se integre bien en las políticas y estrategias nacionales y esté bien coordinada. Tan importante, o incluso más, es la movilización social de la sociedad civil (familias y comunidades) y el compromiso del personal educativo. El PC actual ha abordado hasta cierto punto ambas dimensiones. Sin embargo, el apoyo de UNICEF está comprometido en el presente en un proceso de transición desde el papel pionero que desempeñó poco después de producirse una situación aguda de emergencia, hasta el papel igualmente problemático de contribuir a un proceso de desarrollo cada vez más complejo y ambicioso.

### **Hallazgo 12: Pertinencia e idoneidad del Programa para la protección de la infancia**

Como resultado de dos décadas de guerra y destrucción, las redes nacionales dedicadas a asegurar la realización de los derechos de la infancia han quedado muy debilitadas. Muchos niños y niñas son ahora víctimas de la violencia, los malos tratos y la explotación. Bajo estas circunstancias, era pertinente e idóneo para el PC actual crear un programa para niños necesitados de protección especial, además de otros programas sectoriales que contribuyen a la protección y promoción de los derechos de la infancia.

### **Hallazgo 13: Enfoque del Programa para la protección de la infancia**

El Programa para la protección de la infancia ha estado firmemente dirigido hacia la cooperación con los socios nacionales existentes y el fomento de su capacidad. Frente a un amplio abanico de temas relacionados con la violencia, los malos tratos y la explotación, el Programa se centró relativamente bien en los derechos de los niños y niñas afectados por la guerra, ya que eran los que corrían un mayor riesgo. También se hizo un hincapié adecuado en la recopilación y análisis de información, así como una labor de orientación en materia de políticas. Como ocurre con otros programas, todavía no hay matrices de resultados, solamente los informes de la RMT sobre resultados al nivel de efectos, es decir, los cambios institucionales y de conducta inducidos por el Programa.

### **Hallazgo 14: Puntos fuertes y logros en la puesta en práctica del Programa de protección de la infancia**

El PC ha tenido éxito en su cooperación con, y fomento de la capacidad de, los Ministerios de Trabajo y Bienestar Social, Justicia e Interior. Un buen comienzo fue proporcionar información pertinente y análisis al Gobierno y los socios no gubernamentales sobre las cuestiones relacionadas con la protección de la infancia, que a su vez sentaron las bases para una visión estratégica del sector. También se hicieron mayores esfuerzos que en otros Programas del PC para fortalecer el nivel de la comunidad.

### **Hallazgo 15: Puntos débiles y desafíos en la puesta en práctica del Programa de protección de la infancia**

La coordinación y cooperación entre el Programa de protección de la infancia y otros programas del PC, por ejemplo, Salud y nutrición y Educación básica, así como con el programa intersectorial de Información y Comunicación, no ha sido muy firme. Una mayor cooperación e integración de los diversos programas podría haber tenido un efecto beneficioso en la coordinación entre los socios nacionales. El enfoque del programa en los niños y niñas

afectados por la guerra también llevó a que no se abordaran muchos otros temas relacionados con la protección, especialmente aquellos relativos a la dimensión del género.

### **Hallazgo 16: Desafíos para la sostenibilidad y conectividad del Programa de protección de la infancia**

Los niños y niñas necesitados de protección especial requieren un compromiso a largo plazo tanto por parte del Estado como de la sociedad civil (organizaciones no gubernamentales – ONG, comunidades, etc.). La medida final que define la sostenibilidad de las intervenciones del Estado es que se pongan en práctica marcos reguladores y que las prácticas de atención de las instituciones del Estado sean adecuadas. Al mismo tiempo, los niños y niñas vulnerables son también la responsabilidad de las familias y las comunidades. La sostenibilidad a este nivel dependerá de la restauración y creación de redes que supervisen todas las formas de abandono, violencia, malos tratos y explotación, y formulen medidas para contrarrestarlas. El PC actual ha comenzado a fomentar capacidades a ambos niveles, pero todavía es muy pronto para esperar que los efectos sean sostenibles.

## **Direcciones estratégicas y recomendaciones**

### **Recomendación 1: Visión a largo plazo sobre la reducción de la mortalidad y morbilidad de la infancia y la mujer**

En cooperación con otros socios de las Naciones Unidas, UNICEF debería prestar apoyo al Gobierno en la preparación de una visión integrada y a largo plazo sobre la reducción de la mortalidad y morbilidad de la infancia y la mujer y abordar ambos factores allí donde sea posible obtener resultados inmediatos (por ejemplo, inmunizaciones y prácticas de atención mejoradas para los recién nacidos y los niños de corta edad, e higiene) y factores que requieran una estrategia a largo plazo (por ejemplo, aspectos pertinentes de la educación).

### **Recomendación 2: Integración y coordinación con el proyecto Paquete Básico de Servicios de Salud (Programa BPHS) y otros importantes problemas nacionales**

El nuevo PC debería integrarse y coordinarse en la mayor medida de lo posible con los cinco programas prioritarios nacionales para la salud y educación, entre ellos el Paquete Básico de Servicios de Salud y el Paquete Esencial de Servicios Hospitalarios. Estos programas están orientados hacia el fomento de la capacidad nacional y reciben apoyo de las principales agencias de asistencia externas. Durante la preparación del nuevo PC será necesario establecer cómo los proyectos que reciben apoyo de UNICEF podrían contribuir a asegurar una integración eficaz con los programas prioritarios nacionales (por ejemplo, aspectos del Proyecto de salud de la madre y el niño - MCH; de la Atención Obstétrica de Emergencia – EmOC; del fomento de la capacidad para la inmunización sistemática; de la Reducción de la anemia por carencia de hierro – IDA; de la Atención Integrada de las Enfermedades Prevalentes de la Infancia - AIEPI). También es necesario evaluar cuáles son los proyectos de impacto rápido que pueden coordinarse eficazmente con estos esfuerzos de integración (por ejemplo, Iniciativas para la erradicación de la poliomielitis, campañas de reducción de la mortalidad debida al sarampión – MMR, Actividades de inmunización complementaria – SIA, Yoduración universal de la sal - USI).

### **Recomendación 3: Componentes programáticos del PC que requieren una constante cobertura nacional y aquellos que requieren intervenciones modelo de alta calidad para incorporarlas a la promoción**

Dado que llevará algún tiempo antes de que existan capacidades sistémicas adecuadas en materia de salud, nutrición y agua y saneamiento ambiental a nivel nacional, el PC apoyado por UNICEF debería mantener las principales intervenciones iniciadas durante el PC actual (2003-2005), como por ejemplo la orientación al Gobierno en materia de políticas y estrategias en estas esferas, erradicación de la poliomielitis, actividades complementarias de inmunización (por ejemplo, eliminación del tétanos neonatal y de la madre - MNTE), apoyo obstétrico de emergencia a los hospitales dirigidos por el Gobierno, yoduración universal de la sal y difusión de las experiencias a nivel nacional (incluido agua y saneamiento ambiental). Sin embargo, se debería prestar un mayor hincapié a la calidad de las intervenciones y de las experiencias piloto en una escala más limitada (por ejemplo, para el abastecimiento de agua y saneamiento) con el potencial de incorporar soluciones viables y de alta calidad a la formulación nacional de políticas.

### **Recomendación 4: Promoción de conductas basadas en una buena salud y nutrición, así como un mejor uso y gestión del agua y una higiene adecuada**

El próximo PC debería prestar más atención a la promoción de conductas basadas en una buena salud y nutrición, mejora en el uso y la gestión del agua, educación sobre la higiene, habilitación de las partes interesadas (titulares de derechos y detentores de obligaciones), y participación de la comunidad en el diseño y la operación y mantenimiento de la infraestructura (por ejemplo en agua y saneamiento ambiental). Es necesario mejorar la comprensión de las prácticas y factores tradicionales que impiden a la gente adoptar una conducta más apropiada. Se debe mejorar la comunicación de apoyo al programa y fomentar las capacidades nacionales a este respecto, por ejemplo mediante el gobierno y los dirigentes religiosos. UNICEF debe seguir llevando la iniciativa en el apoyo técnico al Ministerio de Salud Pública y a otros socios para asegurar una integración eficaz de los programas de prioridad nacional a nivel del beneficiario, y asegurar la puesta en práctica de políticas y orientaciones sobre nutrición pública a nivel de la prestación de servicios por medio del Paquete Básico de Servicios de Salud y el Paquete Esencial de Servicios Hospitalarios. UNICEF debe seguir apoyando al Gobierno y alentar al sector privado para que promueva el enriquecimiento de los alimentos (especialmente la USI) hasta que se elimine el trastorno por carencia de yodo y se adapten ampliamente otras políticas sobre el enriquecimiento de los alimentos.

### **Recomendación 5: Más integración horizontal de programas verticales**

Es necesario mejorar la integración de los elementos verticales de los Programas de Salud, Nutrición y Agua y Saneamiento Ambiental y entre diferentes programas sectoriales del PC, así como mejorar la cooperación programática entre los socios del MANUD con el potencial de lograr efectos positivos en la cooperación interdepartamental dentro del Gobierno.

### **Recomendación 6: Gestión de las implicaciones de un cambio de rumbo hacia un enfoque programático basado más en el desarrollo**

El cambio de rumbo desde una puesta en práctica directa de los programas y proyectos por parte de UNICEF hacia un enfoque programático basado más en el desarrollo, con desafíos relacionados con el fomento de la capacidad y la creación de alianzas con otros organismos, tendrá implicaciones de gestión que podrían requerir una mayor transferencia al Gobierno de la

responsabilidad para la puesta en práctica y/o la transferencia de determinadas responsabilidades que asumía el personal de UNICEF a nivel central al personal de UNICEF en los emplazamientos sobre el terreno.

### **Recomendación 7: Vínculos con los ODM, las Metas Nacionales de Desarrollo y los objetivos del MANUD**

Las Metas Nacionales de Desarrollo y el objetivo del MANUD relacionado con la educación básica conllevan dos cambios importantes de orientación para el próximo PC, que coinciden con el próximo Plan Estratégico de Mediano Plazo de UNICEF (MTSP 2006-2009): (i) aunque se mantengan las metas y objetivos relacionados con el acceso a la educación, debe prestarse a partir de ahora una mayor atención a la calidad de la educación, para que genere una mejora de la retención y la terminación de la enseñanza; (ii) en lugar de concentrarse solamente en la paridad entre los géneros (igual número de niños y niñas en la escuela), debe prestarse atención a la igualdad entre los géneros, por ejemplo, las relaciones sociales entre los hombres y las mujeres que es preciso transformar para superar la discriminación sistemática de la mujer y su posición subordinada en la sociedad.

### **Recomendación 8: “Regreso a la escuela” y “Mantenerse en la escuela”**

El próximo PC debe apoyar al Gobierno no solamente en su intento de mantener y aumentar las tasas de matriculación de los niños y niñas en la educación primaria, sino cada vez más también en la promoción de la retención y la terminación de la educación primaria. Uno nuevo eslogan podría ser “Mantenerse en la escuela”. En primer lugar, esto exigirá una mejor comprensión de los factores que influyen en la toma de decisiones de los progenitores y los niños para continuar la escolarización hasta la terminación, o para abandonar la enseñanza. Los estudios y las encuestas deben tener en cuenta la cuestión del género. Un buen análisis de causalidad permitiría una programación más selectiva que aborde las causas inmediatas y subyacentes de la falta de matriculación y la falta de terminación. Esto contribuiría también a una mejor comprensión de la noción de la calidad de la educación que debería ser más apropiada desde el punto de vista cultural.

### **Recomendación 9: La igualdad entre los géneros y la calidad de la educación**

Una importante contribución a la calidad de la educación es prestar una atención adecuada a la igualdad entre los géneros. No es suficiente que haya el mismo número de niños y de niñas matriculados en las escuelas; la preparación de los planes de estudio, la capacitación de los maestros y la promoción de la participación de la comunidad en la enseñanza debería transmitir mensajes que superen los estereotipos de género. Las actividades no solamente deberían estar dirigidas a la habilitación de las niñas y las mujeres, sino también muy específicamente a la educación de los niños y los hombres para que protejan y promuevan los derechos de las niñas y las mujeres. Una educación que tenga en cuenta el género podría mejorar la calidad general de la educación.

### **Recomendación 10: Mejorar la infraestructura de la educación y la situación de la demanda**

Dado el interés que tienen los principales donantes en el sector de la educación, cabría esperar que los Ministerios de Educación y de Reconstrucción y Desarrollo Rural reciban el apoyo necesario para lograr una cobertura gradual en lo que atañe a la infraestructura escolar. En lugar de mantener un enfoque de la cobertura de necesidades en la esfera de la infraestructura,

el próximo PC debe centrarse en las soluciones de alta calidad y bajo costo para los edificios escolares y el abastecimiento de agua y saneamiento en la escuela. UNICEF puede desempeñar un papel en el diseño y la puesta en práctica de proyectos experimentales para las escuelas primarias (incluido el abastecimiento de agua y saneamiento) en una escala limitada, que genere soluciones viables que puedan replicarse en otros lugares o integrarlos en las políticas y estrategias nacionales. Es necesario llevar a cabo tareas de promoción, basadas en datos empíricos, con el Gobierno y con las principales agencias de ayuda externa. Los criterios clave para la selección de lugares pilotos deberían ser (i) las características medioambientales y el lugar físico; (ii) los factores sociales, económicos, culturales y políticos (potencial para la participación de la comunidad, exclusión en términos de grupos específicos o zonas aisladas); (iii) alianzas con diferentes agencias de ayuda externa (iv) convergencia con otros programas que reciben apoyo de UNICEF (por ejemplo, en la salud y nutrición, protección de la infancia).

### **Recomendación 11: Escuelas de poblado basadas en la comunidad**

Las escuelas de poblado tienen la posibilidad de convertirse en experiencias interesantes para mejorar la matriculación en la escuela primaria, especialmente de las niñas, y alentar la participación de la comunidad en la educación en general. La aplicación a gran escala de este enfoque no parece estar justificada. Pero es preciso seguir realizando experiencias piloto donde ha habido iniciativas tradicionales para educar a las niñas en los poblados (educación basada en el hogar) y donde existe una demanda por parte de las familias y las comunidades. Las experiencias piloto pueden servir de referencia para la promoción basada en datos empíricos a nivel nacional.

### **Recomendación 12: Aprendizaje acelerado (segunda oportunidad en la educación primaria) y alfabetización funcional**

Dada la importancia que tiene llegar a los niños y a los jóvenes que son demasiado mayores para matricularse en la enseñanza primaria, el Gobierno debería aumentar las oportunidades en materia de educación no oficial (aprendizaje acelerado/segunda oportunidad en la enseñanza primaria) así como la alfabetización funcional. Sobre la base de las experiencias existentes en esta esfera, el próximo PC apoyado por UNICEF debe diseñar y poner en práctica proyectos experimentales para este tipo de educación no oficial en una escala limitada, que tengan el potencial de generar soluciones viables que podrían ser replicadas en otros lugares o integradas a las políticas y estrategias nacionales con el apoyo de otros organismos de asistencia externa.

### **Recomendación 13: Fortalecer los recursos humanos para la educación**

Existe la necesidad urgente y cada vez mayor de proporcionar capacitación a los maestros, una cuestión que solamente puede conseguirse mediante un considerable apoyo externo. El PC apoyado por UNICEF debería mantener su participación en la capacitación de maestros, especialmente en lo que se refiere a lograr que las escuelas sean más acogedoras para los niños y las niñas. Al mismo tiempo, el PC deberían contribuir a establecer un enfoque flexible para determinar la identidad de los maestros no oficiales y su capacitación.

### **Recomendación 14: Fortalecer las alianzas con el Gobierno y otras partes interesadas**

Resulta de gran importancia consolidar las relaciones con el nuevo Ministerio de Educación y seguir participando a nivel de políticas en la alianza con otros mecanismos de asistencia externa. Los puntos fuertes de UNICEF estarían basados en su amplia experiencia sobre el

terreno y su potencial para proporcionar promoción basada en datos empíricos mediante la utilización de proyectos experimentales. La participación simultánea en la puesta en práctica y las políticas podría crear desafíos de gestión para el personal de UNICEF.

### **Recomendación 15: Establecimiento de una función de observatorio social**

El programa de investigación debería estar estrechamente relacionado con la promoción para eliminar toda forma de abuso, abandono, explotación y violencia contra la infancia. La combinación de una investigación sistemática con las tareas de promoción y comunicación social constituyen en realidad una "función de observatorio social", que debería establecerse en última instancia con los socios nacionales, es decir, las ONG más o menos especializadas. El componente de protección infantil del próximo PC debería establecer esta función, que podría provisionalmente estar a cargo de la oficina de UNICEF. La parte correspondiente a la promoción de esta función incluiría el uso de medios de comunicación (radio y televisión) así como otros canales de comunicación (por ejemplo, las mezquitas) para informar a la población y aumentar los conocimientos de la ley que tiene el público y fortalecer las redes de protección en las comunidades. La función de observatorio social podría servir para recaudar fondos nacionales y externos destinados a proteger mejor a los niños y niñas vulnerables.

### **Recomendación 16: Fomento de la capacidad con socios gubernamentales y no gubernamentales**

La importancia que concede el apoyo de UNICEF a los niños y niñas necesitados de protección especial debería centrarse en el fomento de la capacidad de los socios gubernamentales y no gubernamentales. Esto incluye la creación de leyes adecuadas y el fortalecimiento de la aplicación de la ley. Quienes tratan con niños y niñas en las escuelas y otras instituciones tienen que sensibilizarse y recibir capacitación sobre prácticas adecuadas de atención. Esto conlleva una firme cooperación con otros sectores, por ejemplo, la salud y educación. Es preciso revitalizar las redes tradicionales a nivel de familias y comunidades que protegen a los niños y niñas contra todas las formas de abuso, violencia y explotación.

### **Recomendación 17: Fortalecer los Compromisos con la Infancia en respuesta a situaciones de emergencia y el enfoque de la programación basado en los derechos humanos en el próximo PC**

Aunque el PC ha cumplido en gran parte, e incluso superado, los Compromisos Corporativos con la Infancia en respuesta a situaciones de emergencia de 2000, ha habido algunas insuficiencias, sobre todo con respecto a lo que se refiere al enfoque de la programación basado en los derechos humanos. El respeto de los principios de derechos humanos es una condición necesaria, pero no suficiente, para que las estrategias programáticas sean reconocidas como enfoques plenos de la programación basados en los derechos humanos. En los diversos programas sectoriales no hay pruebas suficientes que demuestren una supervisión y comprensión de las causas inmediatas, subyacentes y estructurales que explican por qué no han cristalizado los derechos humanos, y que se hayan formulado estrategias apropiadas, especialmente para fortalecer las capacidades de los titulares de derechos. Las medidas para fortalecer las capacidades de los detentores de obligaciones a nivel central y provincial han sido, por el contrario, considerables. El próximo PC debería tener plenamente en cuenta los Compromisos con la Infancia en respuesta a situaciones de emergencia de 2004, así como las recomendaciones relativas al enfoque a la programación basado en los derechos humanos establecido en el Documento de Consenso de Stamford y el Documento Final de Quito (ambos de 2003). El PC debería establecer una relación activa con las actividades nacionales

dedicadas a mejorar el entorno de derechos humanos en el Afganistán, especialmente la Comisión Independiente de Derechos Humanos del Afganistán, que ya recibe apoyo de UNAMA, la Oficina del Alto Comisionado para los Derechos Humanos (OHCHR) y el Programa de las Naciones Unidas para el Desarrollo (PNUD).

**Recomendación 18: Contribuir a la realización de los Objetivos de Desarrollo del Milenio (ODM) relacionados con la igualdad entre los géneros**

Aunque el PC 2003-2005 ha hecho un firme hincapié en la mortalidad infantil y de la madre, así como en la educación de la niña, no se ha generado un análisis adecuado sobre la situación de las niñas y las mujeres en la sociedad del Afganistán y sus relaciones con los niños y los hombres, ni tampoco ha habido ningún intento por abordar la violación sistemática de los derechos humanos básicos de las niñas y las mujeres, enraizada en valores, creencias y costumbres tradicionales. Es necesario obtener una comprensión más profunda sobre la discriminación de las niñas y las mujeres en la sociedad del Afganistán y las causas estructurales y subyacentes que explican por qué las niñas y las mujeres siguen estando privadas de la realización de sus derechos humanos. El próximo PC debería apoyar al Gobierno del Afganistán y a la sociedad civil en el diseño y puesta en práctica estrategias que habiliten a las niñas y a las mujeres y que incorporen a los niños y a los hombres en este proceso. El PC debería por tanto hacer una contribución clara al ODM 3, que trata de lograr una cristalización progresiva de la igualdad entre los géneros.

**Recomendación 19: Seguir un enfoque basado en los resultados**

El diseño del próximo PC debería seguir un enfoque basado en los resultados y establecer matices de resultados / marcos lógicos claros que demuestren relaciones verticales y horizontales entre objetivos estratégicos (relacionados con los ODM) y efectos y productos. Los objetivos y los indicadores cualitativos y cuantitativos deberían ser SMART en la mayor medida posible. Las metas y los objetivos tienen que abordar las cuestiones que se identifican en los análisis causales. Se entiende que el marco de los resultados formara parte del Plan de Acción del Programa de País para el próximo PC y estar relacionado con el documento de resultados del MANUD.

**Recomendación 20: Hacia una promoción basada en datos como parte de alianzas más amplias**

El PC apoyado por UNICEF tiene que evolucionar de una función dedicada a la implementación a nivel nacional de los proyectos de servicios sociales básicos, a la función de promoción para la realización de los derechos de la infancia y la mujer con el objetivo de aprovechar los recursos nacionales y externos necesarios para alcanzar de manera progresiva las provisiones establecidas en la Declaración del Milenio y los ODM en el Afganistán. La promoción tiene que estar basada en datos empíricos. El PC debería por tanto centrarse en soluciones viables de bajo costo y altamente eficaces para concretizar los derechos de la infancia a los niveles local y regional, que eventualmente podrían replicarse en otros lugares y/o integrarse en el contexto más amplio del desarrollo. El PC debería considerar la posibilidad de centrarse geográficamente en zonas de convergencia, en las cuales todas las dimensiones de los derechos de la infancia pueden abordarse de una manera integrada. El PC debería comprender su importancia como parte de alianzas más amplias, con la promoción de los derechos de la infancia, basada en datos empíricos, como su misión básica.



# **1. Introduction**

## **1.1 Context and justification of the evaluation**

The current Country Programme of Cooperation (CPC) between the Government of the Transitional Islamic State of Afghanistan (hereafter referred to as Government of Afghanistan) and UNICEF covers the period 2003-2005.

A Mid-Term Review (MTR) was completed in November 2004. The MTR of the progress of the Country Programme was carried out with relevant Government Ministries, NGOs and other counterparts. However, at the time when it was carried out, presidential elections had just taken place and nominations had yet to be announced. As a result of elections a new cabinet was installed after the MTR.

The rapidly changing environment and also the need for a strategic re-adjustment of the CPC were the main rationale to conduct a CPE after the MTR. The UNICEF Country Office in Kabul, in consultation with the Government of Afghanistan, requested that the strategy development for the next CPC 2006-2008 be supported by a Country Programme Evaluation (CPE).

The CPE has been implemented in a fast-track mode, as it was to feed into the preparation of the draft Country Programme Document (CPD), which had to be completed by the end of the first quarter of 2005. The next CPC cycle will be harmonized among UNDAF partners and coincide with the programme cycle of the interim Poverty Reduction Strategy between the Government of Afghanistan and the World Bank (2006-2008).

The exercise has benefited from support from the Evaluation Office at New York Headquarters (NYHQ) and the Regional Office for South Asia (ROSA). The CPE Afghanistan is a pilot case as part of the UK Department for International Development (DFID) funded Project for CPE Methodology and Guidance Development, which is being implemented by the Evaluation Office at New York Headquarters.

## **1.2 Purpose, objectives and scope of the evaluation**

### ***Purpose***

The main purpose of the CPE Afghanistan is to feed into future strategy development. The CPE has built on the MTR, but provides a more in-depth assessment of the relevance and appropriateness of the CPC as well as of the role, design and focus of UNICEF support to the realisation of children's rights. The CPE also addresses dimensions of sustainability and connectedness of supported initiatives in a context of considerable security concerns and high political volatility.

The CPE also assesses progress made with the introduction of the Human Rights Based Approach to Programming (HRBAP) and Results-Based Management (RBM) in a CPC operating in an unstable context. It also addresses the CPC's alignment with and contribution to UNICEF's organizational priorities and strategies defined in the Medium Term Strategic Plan (MTSP) as well as in relation to Core Corporate Commitments / Core Commitments for Children (CCCs) and the Goals until 2015 (Millennium Declaration, Millennium Development Goals and World Fit for Children).

## **Objectives**

The *objectives* of the CPE Afghanistan are:

- (a) Assess the *relevance* and *appropriateness* of the CPC Afghanistan (i) as to the situation of children and women in a context which is still characterized by a high degree of insecurity and instability, (ii) in the context of national policies and strategies taking into account the important role of external support and (iii) as a reflection of international norms and standards concerning children's rights (especially CRC and CEDAW);
- (b) Assess *design, coherence, and focus* of the Country Programme, i.e. the realism and quality of the formulation of objectives and strategies, their adaptation in a volatile environment as well as scope, coherence and focus of the programme given changing security concerns and ad-hoc funding opportunities;
- (c) Assess the extent to which the Human Rights Based Approach to Programming as described in Executive Directive CF/EXD/1998-004, the Core Commitments for Children in Emergencies (CCCs) and guidance provided in the Programme Policy and Procedure Manual (PPPM) have been reflected in the design and implementation of the current CPC
- (d) Assess the *gender focus* of the CPC, i.e. are the extreme forms of discrimination and exclusion experienced by girls and women in Afghanistan adequately addressed?
- (e) Assess the *comparative advantage, roles and coordination mechanisms* of the Country Programme Afghanistan in relation to strategies and activities of other national and external partners, especially the UN agencies and the World Bank as well as bilateral partners that contribute to the realisation of children's and women's rights;
- (f) Analyse to what extent activities and results are *sustainable* at their respective levels (communities, intermediate or higher level institutions) and *connected* to local, regional and national capacities and / or other forms of external support.
- (g) Contribute to *CPE methodology and guidance development* supported by DFID, especially for CPE in unstable contexts.

## **Scope**

The scope of the CPE covers the current CPC (2003-2005). To the extent that information is available, attention has been given to lessons learned during the preceding programme cycle, (especially during the MTR of 2001) and strategic considerations in the preparation of the current CPC.

Country Programme Evaluations are meant to be strategic exercises at the programme level and do not usually involve evaluations of individual activities and projects. To avoid unnecessary transaction cost for national and external partners, they are well focused on specific themes and sectors.

The dimension of *efficiency* has not been evaluated in this CPE. The CPC Afghanistan shares a key feature of most UNICEF supported Country Programmes that there is little information on the *cost* of the operations, especially as far as contributions from partner governments and other partners (civil society, NGOs etc.) are concerned. Moreover, even if results are more or less clearly stated (which is by no means always the case), there is usually little information on

economic aspects of these results. It is hence impossible to assess whether results have been achieved at a reasonable cost, which is the key question related to efficiency.

The CPE has also not given special attention to other aspects of efficiency, such as human resource planning and management and the supply function. There is, however, some information on and an assessment of the mobilization of human and financial resources by UNICEF and aspects related to the financial expenditure during the current CPC (2003-2005).

The CPE focuses on four of the five objectives of the current CPC, which address challenges related to child and maternal mortality and morbidity, malnutrition and micronutrient deficiency disorders, improved school enrolment with a special focus on girls' education and protection of children affected by war. The CPE builds on the MTR report concerning progress made with the fifth objective related to the aversion of widespread humanitarian crises through improved preparedness and response.

### **1.3 Evaluation methods**

#### ***Key methods***

The evaluation takes into consideration commonly agreed evaluation norms and standards (OECD/DAC and Evaluation Associations) to ensure *utility* (ownership by stakeholders), *feasibility* (political viability and cost-effectiveness), *propriety* (impartiality, respect of rights of stakeholders, cultural sensitivity) and *accuracy* (adequate information). UNICEF's *evaluation report standards* and *style guide* will be followed when preparing the evaluation report.

The CPE Afghanistan to the largest possible extent builds on the MTR. The purpose is to limit the transaction costs of exercises, avoiding repetitions and gaps and ensuring a rational and transparent process.

Key methods for the conduct of the evaluation have been:

- (a) A comprehensive desk review of external and internal documents that are relevant to past and current Country Programmes;
- (b) A review of past and recent studies, reviews and evaluations of projects and programmes;
- (c) An extensive round of interviews and focus group discussions with key stakeholders in the past and present Country Programmes (Government, NGOs, International Security Assistance Force (ISAF), CBOs, United Nations Assistance Mission in Afghanistan (UNAMA), UN agencies, opinion leaders, children and youngsters, etc. at both national and local levels)
- (d) Field visits to the selected provinces (i.e. Kandahar, Herat and Mazar-e-Sharif) to gain first-hand information of the implementation of projects and programmes
- (e) A synthesis of reviews, interviews and field visits and an annotated outline of the report containing major lines of analysis
- (f) An on-line survey among UNICEF staff members of Afghanistan Country Office (ACO) involved in programme support;

- (g) Organisation of a preparatory meeting on 17 February 2005 and participatory CPE workshop on 28 March 2005, during which a “work in progress” presentation of main findings, conclusions and recommendations was discussed;
- (h) A draft evaluation report for comments by stakeholders.

The evaluation has been a participatory process that has given due importance to self-assessment by stakeholders involved in Country Programme design and implementation. All information was to the largest possible extent triangulated (three or more sources of information were used to verify and substantiate an assessment) and validated. Findings, conclusions, recommendations and lessons learned are user-oriented and feed into major decision-making during strategy development for the next Country Programme.

The selection of sites for field visits was inspired by one or more of the following criteria:

- the maturity of the programme, project or activity within the Country Programme;
- the wealth of experiences and the chances of their generating interesting lessons;
- strategic interest of the programme, project or activity for the whole Country Programme;
- interest of the experiences in the context of the inter-agency collaboration of the UN (UNDAF);
- the cultural, ethnic, linguistic and geographical diversity of Afghan provinces;
- logistics and security considerations.

#### ***Factors affecting the evaluation process***

The CPE has been a “fast-track” exercise, as it had to be realized within a precise period of three months (February – April 2005). A draft report had to be available at the end of March 2005, as findings and recommendations were to feed into the Country Programme Document, which was drafted at that time. The lack of flexibility as to the period and the duration of the evaluation had two major consequences:

1. In January 2005 it was not possible at short notice to assemble a complete team of qualified consultants who could be entrusted with the assignment of independently evaluating the CPC. This was partly due to the mobilization of expertise required for the Tsunami disaster. The CPE has hence been implemented by senior staff of UNICEF's Evaluation Office in New York with support provided by a senior consultant specialized in basic education and child protection with a profound knowledge of the situation in Afghanistan and a senior national staff member of the Health and Nutrition Section in UNICEF's Kabul Office.
2. The gathering of information in Afghanistan had to be completed within the shortest possible timeframe. The start-up of the process in February 2005 was also affected by exceptionally severe winter weather conditions limiting field visits outside Kabul. Three short visits were nevertheless made to Kandahar, Herat and Mazar-e-Sharif.

On the positive side, it may be noted that staff of both the Government and the UNICEF Office in Kabul actively participated in and contributed to the evaluation process. Both the preparatory meeting on 17 February and the CPE workshop on 28 March were attended by a large number of representatives of the Government of Afghanistan, of NGOs, of external aid and UN agencies as well as by UNICEF staff.

A deliberate attempt has been made to evaluate the CPC at a more general level taking strategic goals and the rights-based and results-oriented approach to programming as the framework of reference and benchmark. The disadvantage of such a holistic outlook is that

specific sectoral considerations and details concerning individual projects and programmes receive less attention. Among cross-cutting issues, children's rights and gender issues receive relatively more attention than others, e.g. public information and communication or monitoring and evaluation. The latter dimensions, although treated here and there when discussing the contribution to the goals, have by and large been addressed less systematically.



## **2. Country Programme of Cooperation 2003-2005**

### **2.1 Original objectives and strategies of the CPC 2003-2005**

#### ***Country Programme Recommendation (CPR)***

In September 2002, the Executive Board recommended “funding from regular resources and other resources for the country programme of Afghanistan with a duration of three years. The Executive Director recommends that the Executive Board approve the amount of \$ 28,542,000 from regular resources, subject to the availability of funds, and \$ 105,050,000 in other resources, subject to the availability of specific-purpose contributions, for the period 2003 to 2005”<sup>7</sup>.

The overall goal of the Country Programme as stated in the CPR was “to assist the Government in its obligation towards the progressive realization of the rights of children to survival, development, protection and participation, as set out under the Convention on the Rights of the Child”.

More specifically, the programme aimed to: (i) eradicate polio; (ii) immunize 6 million children against measles; (iii) achieve and sustain 80 per cent coverage for the six major antigens; (iv) improve prenatal, natal and post-natal care coverage and immunize women of childbearing age against tetanus; (v) provide 3 million children with access to high quality education, especially for girls and hard-to-reach children and provide clean water supply, hygiene education and sanitation facilities for around 2 million people; (vi) support the reform of the juvenile justice system, the demobilization and reintegration of child soldiers, and the adoption of appropriate policies for the children and youth in need of special protection measures; (vii) contribute to the reduction of gender and regional disparities as well as of poverty, and to the establishment of a base for the sustainable transition of the country from emergency to recovery and development phases

While meeting the immediate needs of children through service delivery, each programme would build national capacity, including that of the private sector, so that the Government, private sector and civil society can eventually take over specific programmes and activities, allowing UNICEF support to be shifted to other areas.

Gender would be mainstreamed within all programmes beyond awareness-raising, e.g. the education programme would work for increasing the enrolment of girls and the recruitment of women teachers and WES would ensure the participation of women in the operation and maintenance of water and in sanitation and hygiene education.

Each programme would develop a high degree of emergency preparedness and rapid response through maintaining plans and pre-stocking essential supplies. National and sub national institutions would be assisted to build similar capacity. Donor contributions for emergency situations and those raised through the Immediate and Transitional Assistance Programme (ITAP) would be allocated within a consolidated country programme.

#### ***Master Plan of Operations (MPO)***

The 2003-2005 MPO signed by the Government of Afghanistan and UNICEF emphasized that the CPC would support and strengthen Afghanistan commitment and capacities towards the progressive realisation of the rights of children to survival, development, protection and

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<sup>7</sup> UNICEF Executive Board (2002). Country Programme Recommendation. New York.

participation, as set out under the Convention on the Rights of the Child. In doing so, it would contribute to the achievement of Afghanistan's National Development Framework (NDF). In order to achieve this goal, the Programme sought to support, by the end of 2005, national efforts to (i) reduce infant and under-five child mortality; (ii) improve maternal health and reduce maternal mortality; (iii) reduce infant, young child and maternal malnutrition; (iv) strengthen capacities to promote, protect and fulfil children's right to education and expand opportunities to ensure they reach their full potential; (v) provide children with the skills, knowledge and confidence to manage life's challenges and fully participate in Afghanistan's development; (vi) strengthen capacities to reduce vulnerability and ensure special protection and care measures for children at risk and living in difficult circumstances; (vii) avert widespread humanitarian crises through improved preparedness and rapid response.

The strategy of the 2003-2005 Programme of Cooperation was guided by the principles of universal realisation of children and women's rights. It built upon the World Summit for Children, within the context of the CRC and CEDAW. It drew on the strategies of the Government's NDF, analysis of the situation of the children and women of Afghanistan, UNICEF organisational priorities as per the MTSP for 2002-2005, and current strategies of the World Bank and major donors for Afghanistan with regard to disparity and poverty reduction through improving access to basic social services.

The CPC would abide by the four key human rights principles (universality, indivisibility, participation and accountability). Five mutually reinforcing strategies would be used throughout the programme. At the national level, the programme aimed to create an enabling environment through (i) policy development and (ii) advocacy, both focusing on raising the profile of children and women rights in the public arena. . At sub-national level, the programme was to support (iii) capacity building for quality and sustainable service delivery – emphasising planning, management and implementation, as well as material support, and (iv) capacity development at community level to empower families and communities with knowledge and skills to protect and fulfil children and women's rights. The final strategy to (v) undertake research, monitoring and communication, was to support the programme at all levels.

Taking into account the issues highlighted in the Situation Analysis and UNICEF's comparative advantage, and in order to maximise impact, promote intersectoral linkages and benefit from synergism, the programme focused all actions on four cross-sectoral and mutually reinforcing overarching programme priorities, which were: (i) the Promotion of Girls' Education; (ii) Early Childhood Care and Development; (iii) Immunization Plus (v) improved protection of children against violence, abuse and discrimination.

## **2.2 Resource mobilization and expenditure**

### ***Funding***

The structure of the budget of the CPC Afghanistan follows the usual pattern of UNICEF supported Country Programmes and hence basically comprises a *Programme Budget* and a *Support Budget*.

The Programme Budget is composed of *Regular Resources (RR)* and *Other Resources (OR)*. The Programme Budget covers costs to support the implementation of the programmes as described in the MPO. The Programme Budget is made up of allocations from UNICEF's Regular Resources (RR), and of specific-purpose contributions from donors or funds, referred to as Other Resources (OR). The OR portion of the budget can be wholly or partially funded (when contributions have already been received), or unfunded (when contributions are still being

sought). The Programme Budget provides for cash, supplies and equipment, and contracts with individuals or institutions. It may also include salaries and costs of programme and project officers, contributions to travel expenses, vehicles or telecommunications, or any other expenses specific to the implementation of projects<sup>8</sup>.

A peculiarity of the CPC Afghanistan is that Other Resources have two components: *Regular Other Resources or ROR* (the amount of which should not exceed the ceiling approved by UNICEF's Executive Board) and *Emergency Other Resources or EOR*, which go beyond the ceiling fixed by the Board.

The Support Budget is allocated to Country Offices primarily to finance UNICEF's presence in the country, and covers costs under the categories of approved core international posts, local posts, other staff costs, consultants, travel, operating costs, furniture and equipment, and reimbursement and co-funding<sup>9</sup>.

The Board-approved Country Programme Recommendation for funding (see Exhibit 1) of the 2003-2005 Country Programme of Afghanistan allowed for the mobilization of \$27,260,000 from Regular Resources, subject to the availability of funds, and \$105,000,000 in (Regular) Other Resources, subject to the availability of specific-purpose contributions. The Support Budget has been limited to US\$1 million per annum.

**Exhibit 1: Afghanistan: Programme budget ceiling approved by the Executive Board  
(in thousands of USD)**

	2003		2004		2005	
	RR	(R)OR	RR	(R)OR	RR	(R)OR
Education	2,275	11,400	2,280	13,300	2,280	15,200
Health	1,896	11,400	1,900	13,300	1,900	15,200
Cross-Sectoral Costs	1,000	0	1,100	0	1,100	0
Child Protection	1,341	2,400	1,344	2,900	1,344	3,200
Assessment, Analysis, Monitoring & Evaluation	948	1,500	855	1,700	855	2,000
Water, Environment and Sanitation	1,612	3,300	1,615	3,800	1,615	4,400
<b>TOTAL</b>	<b>9,072</b>	<b>30,000</b>	<b>9,094</b>	<b>35,000</b>	<b>9,094</b>	<b>40,000</b>

Source: FLS Data

Exhibit 2 reflects major donors of the Country Programme of Cooperation in terms of OR. UNICEF Afghanistan received US\$45.3 million from seven countries, nine UNICEF National Committees, one academic institution, two international foundations and two UN agencies. Fundraising of OR is thus on track in global terms, as more than 69% of the OR target has been mobilized, not counting the Emergency Other Resources (see Exhibit 3).

<sup>8</sup> UNICEF (2004). *Programme Policy and Procedure Manual*. Page 51

<sup>9</sup> Idem ante.

**Exhibit 2: Afghanistan: Allotment by donor ROR (in thousands of USD)**

	ROR	
	2003	2004
Government of Australia		809.0
Government of Canada	49.8	
US Government / Centre for Disease Control & Prevention	4,400.6	5,206.8
Government of Canada / Food Aid Centre		0.1
Government of Denmark		1,558.8
Government of Germany		135.1
Government of Japan	10.2	4,623.0
Government of Switzerland		26.8
US Government / Department of Labor	675.8	752.6
US Government / United Department of State (DOS)		113.3
US Government / International Narcotics and Law Enforcement		54.5
US Government / BPRM		1,261.0
US Government / USAID Washington	1,351.5	2,226.1
Belgian Committee for UNICEF	22.1	3.3
German Committee for UNICEF	594.4	1,619.8
Japan Committee for UNICEF	220.0	251.9
Korean Committee for UNICEF	63.2	43.1
Norwegian Committee for UNICEF	110.4	
Spanish Committee for UNICEF		166.5
Swedish Committee for UNICEF	14.9	76.7
United Kingdom Committee for UNICEF	13.4	315.9
United States Fund for UNICEF	824.8	1,528.2
Columbia University (ARVs only)		71.4
Micronutrient Initiative	14.8	31.3
Rotary International	286.6	1,091.9
United Nations Foundation Inc.	1,800.8	
Global - Child Protection		130.6
Global - Girls Education (Thematic)		12,505.8
Global - Immunization Plus		185.0
UNAIDS		71.5
Total	10,453.4	34,860.1

Source: FLS Data

Exhibit 3 reflects Financial and Logistics System (FLS) data on allotments for the period 2003-2004. OR refers to Regular Other Resources only. Emergency Other Resources are shown in Exhibit 5.

**Exhibit 3: Afghanistan: Allocation of Regular Resources and Regular Other Resources  
(in thousands of USD)**

	2003		2004	
	RR	(R)OR	RR	(R)OR
Education	4,234.5	766.0	2,133.6	12,072.9
Health	4,286.0	8,737.9	2,365.4	15,863.5
Cross-sectoral costs	1,044.7	243.3	2,590.0	33.7
Child Protection	1,752.9	706.3	1,337.9	1,481.1
Assessment, Analysis, Monitoring & Evaluation	1,363.0	14.9	1,175.8	73.0
Water, Environment and Sanitation	1,853.9		1,916.0	2,024.7
<b>TOTAL</b>	<b>14,535.0</b>	<b>10,468.4</b>	<b>11,518.8</b>	<b>31,548.8</b>

Source: FLS Data

Resource mobilisation has hence been quite successful. A close look at the figures contained in the exhibits reveals:

Regular Resources announced in the CPR for 2003-2004 amounted to US dollars 18,166,000. RR actually allocated amounted to US dollars 26,035,825, which represented a substantial increase. This is not unusual, as CPR commitments tend to be on the conservative side. Especially activities in education, health and assessment, analysis, monitoring and evaluation benefited from this increase.

Regular Other Resource mobilisation amounted to US dollars 42,017,267 for 2003-2004, which constituted 64 percent of the Board approved OR target for these years (which was US dollars 65,000). This is relatively low, but this was compensated by a considerable mobilisation of Emergency Other Resources (see Exhibit 5 below). ROR were essentially spent on the Health and Nutrition Programme.

***Expenditure of Regular Resources (RR) and Regular Other Resources (ROR)***

Exhibit 4 reflects expenditure between 2003 and 2004. Percentages correspond to resources spent in relation to resources received (cf. Exhibit 4) and they show the programme's ability to execute funds. In this respect, the expenditure rate proved to be excellent. OR refers to Regular Other Resources only. Emergency Other Resources are shown in Exhibit 5.

**Exhibit 4: Afghanistan: Expenditure of Regular Resources (RR) and Regular Other Resources (ROR)**

*( in thousands of USD)*

	2003				2004			
	RR		OR		RR		OR	
Community Organization							22.7	
Education	4,231.5	99.9%	807.7	105.4%	2,063.3	96.7%	12,891.6	106.7%
Health and Nutrition	4,326.6	100.9%	9,114.4	104.3%	2,283.3	96.5%	17,077.3	107.6%
Cross-Sectoral Costs	1,044.6	99.9%	255.5	105%	2,558.9	98.7%	35.4	105%
Child Protection	1,479.2	84.3%	742.3	105%	1,289.7	96.3%	1,576.3	106.4%
Assessment, Analysis, Monitoring & Evaluation	1,363.0	100%	15.9	107%	1,117.5	95%	78.1	106.9%
Water, Environment and Sanitation	1,848.6	99.7%	-8.7		1,826.3	95.3%	2,149.0	106.1%
CRC Advocacy, Legal Reform, Reporting and Monitoring	236.1							
<b>Total</b>	<b>14,529.6</b>	<b>99.9%</b>	<b>10,927.1</b>	<b>104.4%</b>	<b>11,138.9</b>	<b>96.7%</b>	<b>33,830.4</b>	<b>107.2%</b>

Source: FLS Data

N.B. Expenditure figures may include balances from previous years and therefore exceed 100 percent as compared to the same year's income.

**Emergency Other Resources**

Both Non-emergency (Regular) OR and Emergency OR funds were recognised in the Government's Transitional Assistance Programme for Afghanistan (TAPA) for January 2003-March 2004. TAPA included the comprehensive budget requirements for the stabilisation and reconstruction of Afghanistan, a result of coordinated preparation for humanitarian and development assistance among Government authorities, United Nations Agencies, major NGOs and donors.

According to the MTR, during 2003-2004, two major Government donors of EOR funding were Japan (support for IDPs and returnees in education, water, sanitation and hygiene education, EPI), and the United States (EPI, nutrition, MRE, child soldier DDR). Other donors were Sweden (girls' education, DDR), Canada (health/nutrition), Australia (maternal health, education), Italy (juvenile justice) and Denmark (education, EPI).

The United States was very supportive of funding EPI activities through both supplies and cash. Japanese support came mainly from the Ogata Initiative Fund, for selected regions of the country with high numbers of IDPs and returnees, and for prevention of infectious diseases-EPI.

Major National Committees supporting UNICEF Afghanistan included the U.S. Fund for UNICEF (EPI, nutrition), the German National Committee (education, child protection), and the Japan National Committee (education, health and nutrition).

As shown in Exhibit 4, more than 80 percent of targeted EOR was mobilized in 2003, all of which was spent (Exhibit 5). In 2004, the resource mobilization rate was only a little more than 20 percent, but all resources were once again spent. The decline in resource mobilization in 2004 may have been due to a shift of donor attention to Iraq.

**Exhibit 5: Emergency Other Resources – Allocation as compared to resource mobilization target (in thousands of USD)**

	2003			2004		
	EOR	EOR	Percent	EOR	EOR Allocated	Percent
	Target	Allocated		Target		
Education	19826.0	24039.0	121%	18849.2	3364.9	18%
Health & Nutrition	26095.0	18707.0	72%	19510.8	2383.8	12%
Emergency & Rehabilitation						
Humanitarian Relief – EPR	4090.8	1235.1				
Cross-Sectoral Costs					38.8	
Child Protection	5920.0	1772.1	30%	5268.7	1573.6	30%
Assessment, Analysis, Monitoring & Evaluation		1444.2			1093.1	
Water, Environment and Sanitation	10235.0	6492.2	63%	12875.7	3268.5	25%
CRC Advocacy, Legal Reform, Reporting and Monitoring						
Total	66166.8	53689.5	81%	56504.4	11722.7	21%

**Exhibit 6: Emergency Other Resources – Allocation as compared to resource mobilization target (in thousands of USD)**

	2003			2004		
	EOR	EOR	Percent	EOR	EOR Allocated	Percent
	Target	Allocated		Target		
Education	19826.0	24039.0	121%	18849.2	3364.9	18%
Health & Nutrition	26095.0	18707.0	72%	19510.8	2383.8	12%
Emergency & Rehabilitation						
Humanitarian Relief – EPR	4090.8	1235.1				
Cross-Sectoral Costs					38.8	
Child Protection	5920.0	1772.1	30%	5268.7	1573.6	30%
Assessment, Analysis, Monitoring & Evaluation		1444.2			1093.1	
Water, Environment and Sanitation	10235.0	6492.2	63%	12875.7	3268.5	25%
CRC Advocacy, Legal Reform, Reporting and Monitoring						
Total	66166.8	53689.5	81%	56504.4	11722.7	21%

**Exhibit 7: Emergency Other Resources – Expenditure as compared to allocation  
(in thousands of USD)**

	2003			2004		
	EOR Target	EOR Allocated	Percent	EOR Target	EOR Allocated	Percent
Education	24,039.0	25,985.0	108%	3,364.9	3,432.8	102%
Health & Nutrition	18,707.0	19,538.6	104%	2,383.8	2,439.4	102%
Emergency & Rehabilitation		-104.5			29.2	
Humanitarian Relief – EPR						
Cross-Sectoral Costs	1,235.1	1,435.8	116%	38.8	47.6	123%
Child Protection	1,772.1	465.8	26%	1,573.6	1,401.2	89%
Assessment, Analysis, Monitoring & Evaluation	1,444.2	1,543.7	105%	1,093.1	1,173.5	107%
Water, Environment and Sanitation	6,492.2	6,813.1	105%	3,268.5	3,444.5	105%
CRC Advocacy, Legal Reform, Reporting and Monitoring	0.0	-157.2				
Total	53,689.5	55,782.0	104%	11,722.7	11,969.1	102%

N.B. Expenditure figures may include balances from previous years and therefore exceed 100 percent as compared the same year's income.

According to the MTR, the deterioration of the security situation throughout the country during 2004 forced the office to cancel or postpone some activities originally planned, e.g. activities related to Emergency Obstetric Care (EmOC) services and caring practices in rural areas were very limited and the implementation of community-based IMCI was delayed. Many planned water points and sanitary latrines in the southern region had to be postponed to 2005, because most of the areas in the south remained inaccessible to United Nations Agencies and implementing partners. Lastly, monitoring and evaluation activities in the field were severely limited and some training activities were cancelled or postponed until 2005.

As stated in the MTR, fundraising has been increasingly challenging for the Country Office following the trend toward donor support for Government Trust Funds, although the capacity of the Government needs to be further developed for adequate financial management and accountability.

### **Human Resources**

According to the *Annual Management Plan* for 2004 of the Afghanistan Country Office, the Afghanistan Country Office is organized in three groupings — the programme sections, the support sections and the field offices. The attributions have been:

- (a) The *programme sections* are based in Kabul and are responsible for: (i) interacting with the central line ministries to develop national policies and programmes; (ii) identifying areas of UNICEF participation; (iii) developing technical parameters and guidelines for UNICEF interventions; (iv) providing technical support to the field offices to implement

and monitor the implementation of the identified interventions and (v) being responsible for technical capacity building amongst the counterpart ministries, their various departments and sectoral partners at all levels of the administration.

- (b) The *support sections* include Supply and Logistics, Operations and Communications sections. It is expected that for the coming two to three years, a significant part (70% or more) of UNICEF support to Afghanistan will still be related to *Supply and Logistics*. With the commercial private sector still in its infancy in Afghanistan, a significant amount of procurement will be offshore. The unstable local currency and the fact that most of the local companies are not registered and newly formed, local procurement (USD18 m in 2002) will remain a challenge and will need close supervision and monitoring.
- (c) The *field offices* are in the Central Region (Kabul with outposts in Jalalabad and Bamyan), Mazar-e-Sharif (with outputs in Kunduz and Fizabad), Heart (with outpost in Farah) and in Kandahar<sup>10</sup>. Each field office has in principle a team of 3 international staff — the head of the field office, the head of operations and one sectoral technical specialist.

National staff has usually been twinned with international staff. A review of the capacities of national staff at the time of next budget submission (2005) would allow a decision to be taken regarding retention or abolishment of some of these international posts. Some international positions have been kept on TFT since it is envisaged that these capacities can be transferred to national staff or counterparts within this budget period.

With poor communications, a commercial private transportation sector being born and weak capacity and infrastructure for managing and operating warehouses, international expertise will be needed for sometime to come in the support sections. The weak infrastructure and capacities in the country also mean that the supply and logistics activities need to be closely coordinated not only between the two units but also with programme sections and field offices. This is a full-time function requiring senior in-house international expertise.

To ensure technical capacity in each field office, two technical expert positions have been proposed - one international and one national (strong national technical programme officers are currently in-position in ACO and can be reassigned for this function). These positions will be responsible for technical support to the Provincial Officers, engage in technical discussions with the counterparts at the regional level and be the interface between the technical sections and the field offices. The Chief of Health and Nutrition and Education will be the second reporting officers for these Technical Experts.

To ensure sub-national focus and provincial level planning, programming, monitoring and accountability, staff is being assigned to 32 provinces. While most Provincial Officers are based in the Field Offices, out-posts are being established in a few areas to overcome the constraints related to access. A Provincial Officer is assigned to each large/under-served province. In the provinces that have easy access or are already well served, one Provincial Officer is being assigned more than one province with a maximum of two provinces.

The Provincial Officers are responsible to plan, monitor and coordinate all UNICEF supported interventions in that province. They would also represent UNICEF in the provincial working groups. They also have the responsibility of developing provincial implementation plans

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<sup>10</sup> Outposts in Jalalabad and Bamyan were abolished as zonal offices in 2003.

(including emergency preparedness plans) and identifying local implementation partners. The Technical Experts at the Field Office level and, in case of additional needs will support them in this activity, by the sector staff from Kabul.

The present CPE does not address management issues of the Afghanistan Country Office in any major way. Some issues have, however, been reported to the evaluation team in a rather consistent manner<sup>11</sup>:

- (a) Delegation of authority to the field level seems to be relatively limited. All major decisions, including issues related to programming and allocation of financial and other resources to individual projects are, to a large extent, made in Kabul. This seems to create a considerable administrative workload for the office in Kabul and sometimes not inconsiderable delays for programme implementation in the field.
- (b) Technical expertise is, to a large extent, concentrated in Kabul. Security concerns limit field missions of technical staff. Field staff is hence faced with a large number of technical challenges, for which they are not always fully equipped.
- (c) Some of the national staff is very competent and experienced, while some of the international staff are mid-career professionals, who have not in all cases attained the level of seniority their Afghan counterparts would hope to find. The relatively short duration of assignments of international professionals (in principle two years with regular Rest and Recuperation Travel) as well as security concerns limit their exposure to Afghan realities. There seems to be a challenge to make better use of Afghan expertise and experience.

A significant number of staff both in Kabul and in the field stated that there was room for improvement for communication at all levels: (i) between senior management and other staff; (ii) between staff of different sections; (iii) between Kabul and the field and (iv) between national and international staff.

Exhibit 8 shows the distribution of staff by region and by category (without drivers). While gender balance is satisfactory among International Professionals (IP 48 percent), the number of women as compared to that of men is too low among national professionals (NO 18 percent) and among staff of the General Service category (GS 35 percent).

**Exhibit 8: List of staff showing the %age of female staff by office and category without drivers**

	ACO		East: Jal		North: Mazar		West: Herat		South: Kandahar		Total	Total F %
	Total	F %	Total	F %	Total	F %	Total	F %	Total	F %		
<b>IP</b>	32	47%	0		3	67%	3	33%	2	50	40	48%
<b>NO</b>	48	27%	3		14		6	17%	6	0	77	18%
<b>GS</b>	50	36%	4	25%	14	36%	8	50%	9	22	85	35%
<b>Total</b>	130	35%	7	14%	31	23%	17	35%	17	18	202	31%

<sup>11</sup> As part of the present CPE an internal and confidential survey was undertaken among staff of the Afghanistan Country Office, which had a response rate of around 70 percent.

## 2.3 Lessons learned and adjustments made during the MTR

According to the MTR document<sup>12</sup>, the constraints, opportunities and lessons learnt suggest that “many of the strategies that have been implemented in the Country Programme have worked and should be continued”. The report argues that there have been a number of achievements in responding to the immediate needs of children and women and “jump-starting” national capacities and the machinery of Government. Campaign approaches in health and education have borne results in an environment where there was a lack of institutions and there was an urgency to reach large unreached populations. But although the campaign approach will still be needed in specific areas, there should be a transition in responding to problems within sustainable national structures and systems.

According to the report the next Country Programme has to look much more at sustainability, which will inevitably mean a need for greater focus and partnerships to achieve results at scale, as well as for building national capacities at all levels and within institutional structures that will sustain the efforts. This would inevitably mean that there would be some streamlining in the programmes. The emphasis must remain on achieving sustainable results for children.

The other key element of the strategy laid out at the MTR for sustaining efforts in a number of areas is to work to change mindsets toward children and women. It is recognised that this is a massive task and that it will take considerable time, but the time has come to sow the seeds of such a strategy through various mechanisms and modalities. Efforts will need to be community-based and require using those mechanisms to impart messages on a range of issues, partly by influencing those who can especially influence communities in their thinking, such as teachers, health workers and religious leaders.

With the above considerations and focus, the MTR comes up with the following cross-cutting key recommendations for the remainder of the Country Programme and for consideration in the next Country Programme<sup>13</sup>:

- (a) UNICEF should seek opportunities for greater collaboration with other partners and joint programming with other United Nations Agencies in the programme cycle starting in 2006 (e.g. on maternal mortality and refugee children in Pakistan and Iran);
- (b) UNICEF should capitalise on its key strengths and successes in outreach into communities by building community capacity to sustain services even if UNICEF field presence is not possible. This would be done through strengthening the role of women in communities for the delivery of services through key programme-specific strategies in health, education, water, sanitation and hygiene protection and child protection.
- (c) Service delivery would continue in all areas, but this must be transitioned to work within sustainable systems, with an increasing role being taken on by the Government.
- (d) Key to both capacity building and service delivery within a sustainable structure is systems and institutional strengthening, and in many cases development from a very low or non-existent base, particularly at the provincial and district level. Thus, for example, it is not useful to train female teachers or female health workers if the institutional

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<sup>12</sup> Transitional Islamic State of Afghanistan and UNICEF (2004). Mid-Term Review (draft report). Kabul.

<sup>13</sup> Ibid 6. Pages 11-13.

mechanisms and resources are not present to be able to pay them or to develop other incentives for creating the demand for services and ensuring that other elements of supply are present. Much of this effort will have to be undertaken with other partners such as UNDP and World Bank as well as Government Ministries including Finance and Planning.

- (e) Getting messages across in all programmes to create community demand for services and the protection of children. Information and communications will be critical to generate demand-responsive approaches so that the community has a stake in what is provisioned, the community calls for accountability in what is provided, the Government plays a facilitating role, the community does not see the Government as the sole provider, and the private sector is fostered within a regulatory structure. Outreach to adolescents through information and communications on a range of child protection issues and on HIV/AIDS prevention also is critical, given that children younger than 18 years make up more than 57 percent of the population.
- (f) UNICEF should carry out evaluations and sustainability assessments of its current Country Programme as part of the preparation for the programme cycle starting in 2006.
- (g) UNICEF should work within the framework of broad and effective partnerships to achieve large-scale results for children, in particular within the UNDAF and I-PRSP processes. In doing so, it will support the Country Programme strategy in its approach of deploying resources on women at the community level as the primary outreach modality and ensure that adequate national resources are allocated and expended on a range of issues related to the survival and development of children.
- (h) Programme management should pay greater attention to results-based management approaches in which both the immediate achievements and the larger results to be achieved with other partners is clear and monitored.

The recommendations above are intended to ensure that the UNICEF Country Programme works downstream — at the community level, where the impact on the lives of children will be seen — but also mid-stream, at the provincial level, to deliver services, and upstream, at the central policy and institutional level with other partners. This will ensure that results do not occur in isolation, but can be taken to scale with other partners within a conducive, child-friendly policy environment.

### **3. Recent Developments in Afghanistan**

#### **3.1 Situation of children and women and poverty in Afghanistan**

The Report of the MTR of 2004 contains an update concerning the situation of children and women in Afghanistan, which is largely based on the MICS study of 2003<sup>14</sup>. Afghanistan emerged from an acute emergency as recently as in 2002. Although the past two years have been characterized by relative peace and stability, most families still struggle to ensure their survival, their security and access to basic social services and employment. The report emphasises the resilience of the Afghan people. However, basic social indicators still reflect a dramatic level of poverty and deprivation:

- (a) The Infant Mortality Rate (IMR) currently stands at the 115-140 per 1,000 live births and the Under-5 Mortality Rate (U5MR) is in the 172-210 range<sup>15</sup>. Major causes of child morbidity and mortality are measles, diarrhoea, acute respiratory infection, and malaria and micro-nutrient deficiencies. Neonatal tetanus is also a major cause of child deaths. Maternal mortality rates (MMR) are also among the highest in the world and stand at 1,600 per 100,000 live births (State of the World Children adjustment 1,900). Nine in ten rural women deliver their babies at home without skilled birth assistance and without proper referral services to save lives through essential and obstetric care.
- (b) Access to safe drinking water is not available to 69 percent of the rural population and 39 percent of the urban population, while 75 percent of Afghans have no access to safe sanitation facilities. Diarrhoea is found to be prevalent in about 30 percent of all children aged under-5 and 36 out of 1,000 children will die of diarrhoea before the age of five.
- (c) Net enrolment rates have increased significantly between 2002 and 2003, especially for girls. In 2003, two-thirds of boys and four out of ten girls aged 7-12 had been enrolled in education. But 45 percent of all children had not been in school. In several provinces, there was a major gender disparity with more than 80 percent of girls of this age group not being in school.
- (d) An estimated 8,000 minors were reported to be associated with fighting forces. Child labour was prevalent with 28 percent of boys and 34 percent of girls aged 7-14 being involved. Other forms of abuse and exploitation were also wide-spread (corporal punishment and child trafficking).

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<sup>14</sup> The MICS data of 2003 are currently being reviewed by the Afghanistan Country Office. The results have not yet been published.

<sup>15</sup> The State of the World's Children 2005 reports IMR at 165 and U5MR at 257 for 2003.

## HIV/AIDS

There is no reliable data on HIV/AIDS in Afghanistan. The only precise information concerns its existence among blood donors, who are the only group for which systematic checks for HIV/AIDS are undertaken. In 2004 there were 34 cases among blood donors. The Ministry of Public Health estimates there are around 700 HIV/AIDS cases in Afghanistan. But the specialists think that the real figure is much higher. The development of prostitution (without sexual protection) and the increasing number of injection drug user (IDU) sharing needles are the two main reasons of concern and request a strong prevention strategy, including legal management of the HIV/AIDS detection capacity building of the Ministry of Public Health and community awareness. A Detection Centre is already established with UNICEF support and a workshop was set up for consultation with religious leaders,

*Ministry of Public Health  
Kabul*

The Country Economic Report *Afghanistan, State Building, Sustaining Growth and Reducing Poverty* (World Bank September 2004) contains an analysis of poverty in Afghanistan based on the 2003 *National Risk and Vulnerability Assessment (NRVA)* that surveyed 1,850 villages and some 11,200 households. The key welfare indicator is the use of total food and essential non-food expenditure per capita. Key findings of this analysis are the following:

- (a) Average per-capita expenditure amounts to US \$ 165 with a range from US\$ 66 to US\$ 301. About 21 percent of all households did not consume 2,100 calories per person per day, which is a commonly used indicator of caloric sufficiency in food consumption,
- (b) Households do not perceive their welfare to have improved over the last 12 months. This was a surprising finding, as the economy had grown over the same period and agricultural production had benefited from the return of normal rainfall.
- (c) Per-capita expenditure correlates positively with land ownership. A significant number of households reported opium-poppy-cultivation, which was nevertheless found to be under-reported. A source of income is also wage labour connected to poppy cultivation and harvesting.
- (d) The survey found a significant number of female-headed households, which proved to be on average poorer than other households. This was probably due to restrictions against women to work outside the household in many rural areas and women's low level of education.

The World Bank report emphasizes that Afghanistan has to face major challenges related to the continuing insecurity, weak rule of law, and narcotics. The spread of opium production during the last two years now accounts for about a third of the Afghan economy and three quarters of global illicit opium production. Afghanistan needs to enter a virtuous circle of improving security, state capacity building, revenue mobilisation, formal private sector development and sensible and coordinated actions against drugs.

In line with the Millennium Development Goals, the Government of Afghanistan has adopted a number of pro-poor approaches to economic development and social protection. The Afghanistan Development Forum (ADF), which was organised by the Government in April 2005, provided several guidance notes on pro-poor policies and social development. During the forum, the Government stated:

*Our goal is not just growth, but equitable growth. Until our cities are liveable and our farms and small business have genuine opportunities to enhance their productivity and income, Afghanistan will not prosper, nor will the Afghan people's trust in the government and international community be rewarded. Our most precious resource, our human capita will require intensive support in the years to come and we do not have sufficient funding to meet those needs. For those who cannot help themselves emerge from chronic poverty, we must provide basic social protection. For those who lack access to quality of education, health care and economic opportunity to participate fully in a legal economy, we must do more, perhaps with fewer resources, to help them to fight their way out of poverty. We must continue to find more sustainable ways to fight poverty, to enhance the capacity of individuals and communities to work themselves out of poverty, while overcoming the corruption and insecurity that feeds on the hopelessness of the poor.*

The ADF provided the platform for the Government and the international community (bilateral and multilateral partners) to discuss how to combine 'pro-poor' and 'pro-growth' approaches effectively. The ADF reflected the ongoing dialogue within the Government between those advocating a 'pro-poor' agenda and those with a focus on 'pro-growth' strategies. The latter include furthering regional and international trade, industry, fiscal and monetary stability. The final outcome of the dialogue is expected to be reflected in the National Development Strategy (NDS) and the Interim Poverty Reduction Strategy, both of which will be completed during the second half of 2005.

### **3.2 Recent political developments**

Since 2001, Afghanistan has made significant progress on the road to peace, democracy and a stable government. After the fall of the Taliban, UN-chaired peace talks in Germany had resulted in the establishment of a six-month Afghan Interim Administration, which oversaw the organization of a traditional assembly (Loya Jirga) in June 2002 electing Hamid Karzai as president. Presidential elections were held in October 2004 and confirmed Hamid Karzai as President. Since then a new government has been installed. Parliamentary, provincial and district elections are now scheduled to take place in September 2005.

On the 24 of March 2005, the Security Council extended the mandate of the United Nations Assistance Mission (UNAMA) in Afghanistan for an additional 12 months. It stressed the central and impartial role that the United Nations continues to play in promoting peace and stability in Afghanistan. The Council emphasized the importance of establishing a framework for the holding at the earliest possible date of free and fair elections. In that regard, it welcomed the announcement of the Joint Electoral Management Body that elections for the Lower House of the Parliament and provincial councils will be held on 18 September 2005. UNAMA will continue to provide necessary support to facilitate timely elections with the broadest possible participation supported by financial donor assistance.

UNAMA will continue to support the ongoing effort to establish a fair and transparent justice system and to pursue the disarmament, demobilization and reintegration process. With the assistance of the international community, the Government of Afghanistan continues to address the threat to the security and stability of Afghanistan posed by Al-Qaeda, the Taliban and other extremist groups, counters factional violence among militia forces and fights against criminal activities, particular those involving the drug trade.



## 4. Assessment of the CPC 2003-2005

### 4.1 Objective 1: Reduction of child and maternal mortality and morbidity Objective 2: Reduction of malnutrition and micronutrient deficiency disorders

#### **Objectives and strategies**

The overall objectives to reduce child and maternal mortality and morbidity as well as to improve nutrition were to be achieved through two programmes, each of which had a specific set of objectives:

- (a) The *Health and Nutrition Programme*, the objective of which has been to provide increased coverage and quality of essential health services and to promote positive behaviours for better health and nutrition.
- (b) The *Water, Sanitation and Hygiene Promotion Programme (WSHP – commonly referred to as WES programme)*, the central objective of which were (i) to improve water supplies and sanitation and reduce poor hygienic practices; and (ii) to expand coverage in drought-affected areas and communities with high refugee and IDP returnees<sup>16</sup>.

Both programmes pursued strategies based on capacity development, advocacy, information systems and communication as well as service delivery. Each programme comprised a number of projects, which were:

- (a) *Health and Nutrition Programme*: (01) Expanded Programme of Immunization; (02) Maternal and Child Health; (03) Nutrition; (04) Policy, Research and Systems Development.
- (b) *Water, Sanitation and Hygiene Promotion Programme*: (01) Safe Drinking Water; (02) Sanitation and Hygiene Promotion; (03) Water supply, hygiene education and sanitation Policy Development.

It should be noted that the MTR of 2004 does not mention the policy development projects of either programme separately but as part of the overall reports on achievements, constraints and opportunities and lessons learned and adjustments.

#### **Relevance and appropriateness**

Afghanistan has faced tremendous challenges related to child and maternal mortality and morbidity and will continue to do so for many years to come. Infant mortality currently stands in the 115-140 range per 1,000 live births, while under-5 child mortality is in the 172-210 range that is among the highest rates (MICS 2003, figures under revision<sup>17</sup>). Major causes of mortality among children include measles, diarrhoea, acute respiratory infection, malaria, and micronutrient deficiencies.

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<sup>16</sup> Another objective of the WES programme was to promote girls education through the reduction of time and energy spent on water collection activities and the provision of sanitation facilities in schools so as to ensure privacy and dignity. This objective will be referred to in section 4.2.

<sup>17</sup> UNICEF's State of the World's Children (2005) reports an IMR of 165 and an U5MR of 257 (reference 2003).

Maternal Mortality Rate (MMR) in the country was 1900 per 100,000 live births (Maternal Mortality Survey by CDC & UNICEF, March-July 2002) and approximately half of the deaths in women of child bearing age were due to pregnancy complications. 88.5% of deliveries take place at home and 85.7% of them were attended by untrained people. Even in urban areas less than 40% of deliveries take place at health facilities or attended by trained persons. Level of awareness among the married women regarding family planning is 45% in urban areas and 22% in rural areas (MICS 2003, figures under revision).

Case-fatality rates for measles were particularly high among malnourished children. Due to the remote location of many villages and poor immunization services, a large proportion of rural children did not have access to routine immunization, except polio vaccine during National Immunization Days and national measles campaigns. Coverage for routine Expanded Program on Immunization (EPI) in Afghanistan was lower than 50% for DPT3 among children less than one year of age in 2002 (MoPH/WHO/UNICEF joint report 2003). Polio was endemic in some part of Afghanistan. Polio eradication activities which began in Afghanistan in 1994 was been facing serious challenges to interrupt wild virus transmission due to civil war, poor transportation infrastructure, extremes of climate and massive population shifts.

According to UNICEF/MOPH database of nutrition surveys and assessments conducted over the past few years (2001 – 2004), the nutrition situation in Afghanistan is characterized by high levels (45 – 60%) of chronic malnutrition (stunting) with relatively low levels (5 – 12%) acute malnutrition (wasting) with high prevalence of clinical indicators of mineral and vitamin deficiencies that include: 20 – 70% prevalence of goitre (one of the signs of iodine deficiency); 50 – 75% anaemia among infants, young children and women and high levels of (up to 20%) night blindness among women (one of the symptoms of vitamin A deficiency).

A number of surveys and studies have also documented extremely high prevalence of severe scurvy (up 10%) in some remote areas, scurvy is a rare deficiency diseases elsewhere and can be considered a proxy indicator of the extremely poor dietary diversity and high prevalence of many other micronutrient deficiencies. Such levels of malnutrition could have a devastating effect on physical and mental development and reduction in IQ of millions of children, loss of productivity, intergenerational cycle of malnutrition and highly attributable to the high levels of infant, child and maternal mortality and morbidity.

The underlying factors for the micronutrient deficiencies in Afghanistan are complex and diverse throughout the country that include: lack of food diversity, lack of financial resources or other assets to buy or exchange micronutrient rich food; lack of access to markets (some of the population resides in areas that do not have access to markets for periods of more than three months during the winter); lack of knowledge on benefits of micronutrients and food sources rich in micronutrients, cultural taboos, high exposure to infectious diseases and poor access to health services.

Access to improved sanitation facilities and safe water has been very low. A total of 69 percent of the population in rural areas and 39 percent of the urban population used unprotected sources for drinking water. Meanwhile, although 59 percent of the rural population and 87 percent of urban dwellers claim access to sanitation facilities (MICS 2003, figures under revision), the proportion nationwide with access to safe, sanitary latrines was estimated to be lower than 25 percent.

Diarrhoea was found to be prevalent in about 30 percent of children under-5 (MICS 2003). Risk of cholera outbreaks was greater in urban and population concentrated area because of

population movement and displacement and increasing population pressure on limited basic water supply, hygiene education and sanitation facilities and poor hygiene practices. Limited treatment of drinking water at the point of use, along with low hand washing practices with soap after defecation among caregivers of children under-5 (their own or child defecation) represent major threats for diarrhoea (couple of diarrhoea outbreaks happened in different regions during 1998-2002). Only 32.2 percent of mothers of under-5s in urban areas and 13 percent in rural areas used water or soap/ash to wash their hands after their own or their child's defecation. In addition, 29 percent of households in urban areas and 50 percent in rural areas had no fixed place for disposal of child faeces.

At present, there are significant efforts by the new elected and legitimate Government to enhance the coverage and quality of both public and private health and WES services. These efforts are supported by an increasing number of aid agencies. But the country is still in the phase of transition from emergency to a more developmental context.

**Finding 1: Child and maternal mortality and morbidity are still very high in Afghanistan due to poor health, nutrition and water and environmental sanitation. The present level of public and private services justifies considerable support. For the UNICEF supported CPC it therefore remains highly relevant and appropriate to address child and maternal survival objectives in support of national efforts and in coordination with other forms of external aid.**

### ***Focus and design***

The MPO defined the following main strategies for both the Health and Nutrition and the WSHP programmes: capacity development, advocacy, information systems and communication, and service delivery.

- (a) A perusal of the MTR report suggests that both programmes have placed a strong emphasis on provision of infrastructure and service delivery as may be inferred from the following illustrative list of major achievements:
- (b) The Expanded Programme of Immunization (EPI) provided polio and measles vaccinations through National Immunization Days (NIDs) and Supplementary immunization activities (SIA) reaching more than 6.7 million and 11.5 million children respectively. It provided Vitamin-A to 5.7 million children aged 6-59 months. It included a first round of tetanus campaign reaching three million women and also helped in the establishment of national/regional and provincial cold chain systems in the country.
- (c) The Nutrition Project provided Vitamin-C supplementation in remote and high-risk areas covering 1.2. Million people during the winter months of 2002-2003 and about 500,000 during the winter months of 2003-2004 and 2004-2005.
- (d) The Maternal and Child Health Project (MCH) resulted in the establishment of a Comprehensive Emergency Obstetric Care Centres in Kabul, Jalalabad, Kandahar, Mazar provinces and supported such facilities in 26 provinces as well as the distribution of 5,000 bed-nets to provinces where malaria is most endemic. A plan of action to implement the IMCI strategy was developed with support from WHO, UNICEF and NGOs.

- (e) The Universal Salt Iodization (USI) project, contributed to initiation and rapid expansion of iodized salt production factories starting March 2003. Eight salt iodization factories have been established in major salt producing and importing locations of the country with capacity that can cover the national requirement for human consumption.
- (f) In collaboration with UNFPA and WHO, UNICEF has provided technical assistance to the MOPH and contributed to the development of a National Strategy on HIV/AIDS. Support was also given to the development of a safe blood supply strategy and blood screening kits were sent to some provincial hospitals.
- (g) UNICEF supported Government Consultative Groups in the initiation of national policy, budget and guidelines development and in preparation of the National Development Framework.
- (h) The WES programme provided nine piped water schemes, 1,167 community wells and 649 family latrines in areas of high returnees and IDPs, and facilitated the construction of 800 hand washing tanks. 4,800 teachers, more than 700 religious leaders and 2,400 community hygiene promoters received hygiene orientation training. The CPC also contributed to various inter-agency working groups related to hygiene education and promotion, water quality monitoring and technical issues like drillings standards, hand-pump technology and alternative latrine options.

The mentioned strategies were followed due to tremendous need for this type of capacity development in the MoPH/MRRD especially in the rural areas. The strong emphasis on infrastructure and service delivery was appropriate at a time when significant needs existed and few other external aid agencies specialized in these areas were on the ground.

The CPC has hence to a large extent focused on the first part of its Health and Nutrition objective, i.e. to provide increased coverage and quality of essential health services. The second part of this objective apparently was a lesser priority, i.e. to promote positive behaviours for better health and nutrition. Programme communication in health and nutrition is basically campaign based activities such as USI communication campaign, or some activities during NIDs, but the effects will necessarily be relatively limited and sporadic. It may equally be doubted, whether the hygiene orientation provided to teachers, religious leaders and community hygiene promoters will by itself induce a major behaviour change.

**Finding 2: Focus of the Health and Nutrition and the Water and Environmental Sanitation Programmes: The CPC has played a pioneering role and focused on the provision of service delivery and infrastructure at a time when major needs existed in the areas of health, nutrition, water and environmental sanitation. The promotion of good health, nutrition and hygiene behaviours at the family and community levels was a lesser priority.**

Objectives and strategies that can be found in the MPO and also in the MTR are not formulated according to basic principles of rights-based and results-oriented programming. The formulations typically emphasize activities (e.g. “contribute to ...”, “strengthen ...”, “support...”) and highlight abstract outputs and outcomes (“coverage of antenatal care, “access to water supply, hygiene education and sanitation” etc.). Rights-holders and duty-bearers, i.e. children, parents, communities, NGOs and specific levels of governmental services are not mentioned explicitly nor are the institutional and behavioural changes that are to be induced by the CPC. Objectives in MCH are not accompanied by indicators and they are not specific, measurable,

achievable, time-bound, though they are definitely relevant. Basic requirements of Results-Based Management (e.g. SMART objectives and indicators) are hence not meant.

**Finding 3: Programme objectives were relevant, but they were not specific, measurable, achievable and time-bound (SMART) and there were no explicit references in the formulation of the objectives to expected institutional and behavioural changes (outcomes).**

### ***Strengths and weaknesses in implementation***

One of the most important achievements of the CPC has been to develop a concrete and hands-on action programme to tackle the huge challenges of child mortality and morbidity and their underlying causes. This has boosted the confidence in policy-makers and policy-implementers alike that something can be done about these issues on a massive scale.

Based on observations in the MTR report and observations made during the present evaluation, strengths and weaknesses of the various projects of the Health and Nutrition Programme may be summarized as follows:

- (a) *EPI*: Measles and polio immunization reaching more than 6.5 million children has been a particular success story for the current CPC. For the first time, maternal health was brought in the forefront of health agenda through a nationwide maternal and neonatal tetanus immunization campaign that vaccinated more than three million women of childbearing age. Progress has been made toward rebuilding the structure of the routine EPI to provide regular vaccination to Afghan women and children. However, overall management and coordination of routine EPI has been observed to be weak due to conflicting priorities (different campaigns) and limited time to be spent for routine activities. Capacity of the existing staff of UNICEF ACO and zonal offices does not match with the present volume of work (routine immunization and supplementary immunization activities). Tremendous efforts are needed to improve access, quality and management of routine immunization through building management and implementation capacities at different levels.
- (b) *MCH*: Although the required EmOC facilities and equipment has been provided to most of the provincial hospitals, inadequate management practices, shortage of qualified health staff in rural provinces makes it difficult to reach the real objective. It should be solved through increasing community midwifery programme as well as providing continuous capacity building programme to existing health personnel. Lack of general hospital management capacity in EmOC facilities, lack of patient referral and follow up systems, presence of low motivated staff due to low and delayed salary payment, and limited programme communication for increasing the utilization of available services could have been some of the issues that need to be tackled in collaboration with all stakeholders.
- (c) *Nutrition*: Major achievements include start-up and rapid expansion of the USI project, and national capacity development in public nutrition and establishment of the Public Nutrition Department in 2003. With technical assistance provided by Tufts University and UNICEF, comprehensive nutrition policy and strategies (2003 – 2006) as well as other technical guidelines and protocols were developed. Other achievements include an in-depth assessment and analysis of the national nutritional status (the first ever national survey in Afghanistan conducted in June 2004) as well as a formative research on infant and young child feeding/caring practices. A formative research on salt iodization, and

knowledge, attitudes and practices was also conducted during the CP. This provided the base for development of communication strategy and package. Advocacy efforts for food fortification will be part of a medium- and long-term strategy to combat numerous micronutrient deficiencies in Afghanistan. To strengthen the MoPH implementation and monitoring capacity in public nutrition at regional and provincial levels, a position of Provincial Nutrition Officer (PNO) has been approved under the new Priority Reform Restructuring Reform (PRR) and assignment of PNOs has taken place for some of the provinces. However there is much capacity development required to enable PNOs to effectively support public nutrition at BPHS and EPHS due to poor communication between central MoPH and provinces and lack of required facilities (e.g. transport) and low motivation. Programme communication to encourage communities to adopt good health behaviour, e.g. in the field of breastfeeding and complementary feeding remained relatively underdeveloped. As far as the utilization of iodized salt is concerned, the CPC has a communication strategy in place, a communication package with more than ten items geared for advocacy, social mobilisation and interpersonal communication, a monitoring tool to assess progress, an implementation tool to guide roll out of activities. Full fledged implementation of activities started in 2000. Vitamin A supplementation has been limited to NIDs and needs to be part of the Basic Package of Health Services (BPHS) at different levels and through existing community service providers covering Vitamin A supplementation for children under five years of age as well as women immediately after delivery. It is worth mentioning that the need for such integration has been recognized in the Annual Workplan 2005.

- (d) *HIV/AIDS*: This area has so far received relatively little attention in Afghanistan. There is a general lack of data for advocacy, while awareness and life skills related to transmission, prevention and treatment are relatively low in society.

On the basis of the MTR report and observations of the CPE team, the following comments can be made on strengths and weaknesses of the WES Programme:

- (a) The lack of information on hydro-geological status of under-ground water (depth, quantity and quality) for proper planning of water projects has not been considered as a need on a nation-wide scale. Shortage of information might have led to wastage of significant amount of resources and time. There seem to be hundreds of wells in the country dug without clear knowledge of the water levels in the area resulting in wells drying up after a short period of time. Out of 320 wells surveyed by PINF in Balkh province in 2004, only 56 (18%) were fully functional at the time of the survey, 126 (39%) were semi-functional, 138 (43%) were not functional at all (Well Assessment in Balkh Province conducted by People in Need, August-September 2004).
- (b) There has been limited oversight and management in the construction of wells and latrines in schools. Construction of latrines in schools was generally contracted out to NGOs and private operators. It was observed that the quality of work has been a concern. While standards and protocols were included in the contracts, there was not sufficient enforcement of these provisions and the construction was largely left to contractors whose competency was limited. The overall management was also rather centralized (with limited delegation of authority to field offices) sometimes resulting in delays in the allocation of funds to the regions and lengthy processes of contract negotiations and eventual project implementation.

- (c) The MTR also reports that the provision of water supply, hygiene education and sanitation at schools and local communities has been highly supply-driven. The low demand by users may explain high breakdown rates, long “down time” and a low level of operation and maintenance of facilities by teachers, parents and children. Support to operation and maintenance by stakeholders has by and large been limited, which is somewhat surprising given UNICEF’s expertise and experience in this area.
- (d) The hygiene and sanitation promotion activities have been implemented on a limited scale and practically consisted of a few briefing sessions. There is a general lack of sufficient information on Knowledge, Attitude and Practice (KAP) patterns in Afghan society with regards water, hygiene and sanitation issues. This is a major bottleneck for targeted programming aiming at behaviour changes.

The CPC has apparently been confronted with huge challenges to ensure the quality of the infrastructure and the services provided. Especially in WES, there is a need to enforce standards and protocols for site identification and specifications for constructions and required operation and maintenance. There should also be adequate supervision and quality control of construction activities and operation and maintenance.

Both well and latrine construction (the “hardware”) and health, nutrition and hygiene promotion activities as well as community involvement (the “software”) are essential components of an integrated WES approach. The UNICEF supported CPC necessarily has been involved in both types of activities, though more attention has been given to the creation of infrastructure. To the extent that other external support mechanisms will become available to the Ministry of Reconstruction and Rehabilitation, UNICEF may consider focusing to a greater extent on promotional activities and community involvement.

**Finding 4: The CPC has contributed to a very significant increase in coverage both in health and nutrition and in WES. This is no mean achievement in a country, which is emerging from long years of civil strife, little attention to social development between 1994 and 2001 as well as an acute emergency that happened as recently as in 2001-2002. The aim to achieve large-scale coverage in a short time may have crowded out concerns for a more systematic management of programmes (e.g. routine immunization) and quality of provided infrastructure and services (e.g. in WES).**

#### ***Sustainability and connectedness of results***

The health and rural infrastructure systems of Afghanistan have to a large extent relied on external aid for the past two decades. The resources available now are not enough to respond to the tremendous needs of the country. Financial support of the international community also created a sense of donor dependency among different sections of the system.

As far as the UNICEF supported CPC is concerned, there is a significant concern regarding sustainability of maintaining high-coverage of UNICEF supported programme due to the decline of interest among external funding partners, the decreasing funding situation as a consequence, limited management capacities of counterparts, frequent turn over of senior/mid level technical staff in different services and low motivation of government staff (especially at the service delivery level). With the establishment of the new administration in Afghanistan, there are again significant changes in the government structures at all levels.

Some UNICEF supported projects have taken measures to ensure sustainability of results on the longer term. Activities initiated by the USI project have a potential to become sustainable because of the involvement of the private sector and the political will of the Government and its emerging technical capacity in providing leadership.

Existing resources are not always used in a rational way, as there is an insufficient linkage between interventions. Most interventions/projects are vertical interventions and as a result they compete for rather than complete each others' resources. One example is the competition among different projects for female health workers. Another example is that significant number of children under one year of age are protected from vaccine preventable diseases each year by EPI but there is no complementary intervention protecting all of them from diarrhoea, ARI , malnutrition etc. As a result, EPI achieves its own outputs but fails to result in more comprehensive outcomes. It is thus necessary for UNICEF to develop a more integrated approach for its child health interventions. The BPHS Programme (see below) could provide an adequate policy and programming platform.

A particular concern is also the low level of health and hygiene awareness among caregivers of children, their limited demand for adequate services and the low level of their involvement in the management of health and WES infrastructure and services.

While the high incidence of poverty may limit the feasibility of people's participation in investments and service delivery, there seem to be some interesting experiences with cost-sharing. The CPE team observed that the cost-sharing pilot project in Mazar Provincial Hospital has been implemented by MoPH and the income has been utilized through a Hospital Committee for more transparency and accountability. The cost sharing/recovery has been basically for laboratory tests and other specialized services. Preventive services and primary medical cares such as EPI, maternal services are still free of charge. UNICEF in collaboration with other partners could support the Government to develop policies, strategies and guidelines for replication of such experience in order to improve the sense of ownership among users and health workers and thereby increase chances for the sustainability of results at their respective levels.

To the extent that sustainability of results purely on the basis of Afghan capabilities is not an option in the short run, the CPC has developed initiatives to establish connectedness to other programmes supported by external aid agencies. Since 2003, the Interim Government of Afghanistan has promoted the BPHS Programme, which is currently supported by the World Bank, the Asian Development Bank, the European Commission, USAID and some other donors. Implementation of contract out mechanism to implement BPHS through NGOs started in 2003 and would continue up to end of 2006.

The main purpose of BPHS is to provide a standardized package of basic services which forms the core of service delivery in all primary health care facilities, promote a redistribution of health services by providing equitable access, especially in underserved areas, and help to create a more uniform system for technical and financial support in the health system in Afghanistan. Contents of BPHS is child health and immunization, maternal and newborn health, public nutrition, communicable diseases, mental health, disability, supply of essential drug.

The BPHS will basically cover different regions through establishing/supporting Health Posts, BHCs (Basic Health Centres), CHCs (Comprehensive Health Centres). The package is also supporting provincial hospitals (as district hospital) in order to cover some needs of the provinces under the same package. The present BPHS does not cover tremendous

requirement of provincial hospitals to offer comprehensive EmOC (Emergency Obstetric Care) services due to limited support provided under the same package. UNICEF can still continue its technical and supply support (equipment, drugs) to upgrade and maintain comprehensive EmOC services at the hospital level. The supply support provided to the hospitals should be part of institutionalized management practices and quality improvement process for ensuring results and sustainability. UNICEF should advocate the importance of promoting integrated preventive activities at beneficiary level to implementing partners. Also implementing NGOs may need UNICEF technical support to enhance quality of maternal care at BHC and CHC levels.

Several surveys show that vast majority of BPHS implementing NGOs has a few activities in community level, and they provide more curative oriented service rather than preventive and promotional activities. UNICEF should advocate the importance of promoting integrated preventive activities at beneficiary level to implementing partners. UNICEF can also continue its technical and supply support (equipment, drugs) to upgrade and maintain either comprehensive or basic EmOC services at the hospital level. The supply support provided to the hospitals should be part of on-going management improvement efforts, such as standard based management and data based quality improvement for ensuring results and sustainability. Also BPHS implementing NGOs may need UNICEF technical support to enhance quality of maternal care at BHC and CHC levels.

**Finding 5: There is a significant concern regarding sustainability of the results of both the health and nutrition and WES programmes due to the decline of interest among donors, decreasing funding as a consequence, lack of funding from government side, limited management capacities of counterparts, frequent turn over of senior/mid level technical staff in different services and low motivation of government staff (especially at the service delivery level) Existing resources (e.g. female health workers) are not always used in an optimal fashion and vertical programmes (e.g. EPI and nutrition) are insufficiently linked. A particular concern is also the low level of health and hygiene awareness among caregivers of children, their limited demand for adequate services and the low level of their involvement in the management of health and WES infrastructure and services. Challenges related to sustainability may in part be addressed by close connectedness to and coordination with the new BPHS programme, which benefits from considerable external support.**

#### **4.2 Objective 3: Improved school enrolment with a special focus on girls' education**

##### ***Objectives and strategies***

The MPO states the objectives of the Basic Education programme of the CPC as to support and strengthen national capacities to:

- (a) Ensure rapid resumption and a continuation of learning opportunities for 4 millions Afghan children with a special emphasis on girls' education
- (b) Support the long-term reconstruction and transformation of the education system.

The MPO defines five key strategies:

1. *Service delivery*: to ensure children's access to education, to involve local authorities and civil society in planning and implementation
2. *Increased opportunities for the participation and development of women and girls*: Girls' education will be used as an entry point for Education for All in all projects with a focus on gender disparity reduction through rapid and flexible delivery of services. Girls-specific to ensure their enrolment and retention will be based on a gender analysis of education. Non formal literacy programme for women to be conducted at community level and through a range of Early Childhood Development activities to prepare them for better position the school. The program will identify other hard-to reach groups including IDP and returnee children and out of school youth.
3. *Focus on quality learning, support to consensus building and curriculum development*: This will include teaching materials, complemented by teacher training and teacher education and training initiative. Cross-cutting issues such as peace building, rights protection, life skills, and HIV/AIDS.
4. *Human resource development*: Building capacities of partners at community, district provincial and central ministry level will be supported. This will include training, exchange, visits, support materials and workshops. Research and policy and systems development is a core intervention to ensure sustainability of education services.
5. *Advocacy* to promote the policy, partnership and resource environment essential to ensuring that children rights to basic education are fulfilled and are integrated into the projects.

During programme implementation, the core of the basic education programme was the *Back-to-School Project*, which drew considerable funding for school infrastructure (tents and construction and rehabilitation of existing schools) as well as essential supplies and learning materials. The project aimed at significantly increasing access to education with a special emphasis on girls' enrolment.

#### **Temporary measures for girls education in remote areas**

In the Kandahar region, the Security issue continues to render difficult field activities. Sometimes a region, which is considered as not secured, includes many villages where it is possible to work without risk. Even in a place like Zabol where anti-Governmental forces are active, if we have a good area strategy we can work. For example we can work easily on immunization and nutrition. There is no resistance in this field because they are aware of the importance of vaccination for children and health care for mothers. The problem is not that they refuse girls to be educated, but their tradition does not allow them to send the girls to school with a male teacher. For girls' education in a place like Zabol, we need more time to train female teachers from the region and girls will go to school. It will take time to change the behaviour of this region; we have to adapt our strategy to the cultural context before the tradition changes. Using the *molla's* skill can be a temporary solution to provide an elementary education for girls during the time we train female teachers.

*Interview with UNICEF staff*

### ***Relevance and appropriateness***

Given the high level of illiteracy prevailing in Afghanistan, the basic education programme was highly relevant. “Back-to-School” has undoubtedly been an excellent slogan to install a sense of normalcy into the national debate on education and also to mobilize external resources. It must, however, be acknowledged that the slogan suggests that children were just returning to school after an intermittent period of being deprived of the right to education. In fact, this was the first time that children were enrolled on such a massive scale. This applies especially to girls, who had always been denied access to schools.

The successive political conflicts, the scattering of rural communities, as well as the difficult access to isolated villages, did not allow past Governments that were mostly short-lived to develop the education sector at national level. In rural communities, the local religious leader was often the only educated person to teach the children (mainly boys) to read and write. The very small number of educated women shows that even in towns the education of girls concerned only a limited number of children<sup>18</sup>. Half of all men and 85% of women of more than 15 years old are illiterate in Afghanistan. The rates are even higher in rural areas: 60% of men and 90% of women are illiterate<sup>19</sup>, which is particularly worrying because of the importance of the rural population (four times more than urban population).

When the on-going Country Programme Cooperation started its activities, Afghanistan had just been liberated from the Taliban regime. The education system was in a critical situation. Many schools were destroyed and no equipment had remained or it was in a very bad condition. Girls were excluded from the school and the female teachers jobless. The traditional network, which had allowed many children in the past to learn how to read and write, even in very remote areas, was disrupted. It was urgent to answer to the huge need of children for education and the priority was given to bringing boys and girls to the school with an emphasis on the provision of infrastructure and basic supplies.

**Finding 6: The Basic Education Programme and especially its core “Back-to-School Project” were highly relevant and appropriate given the low levels of school enrolment that prevail in Afghanistan and also the high level of illiteracy that exists especially among girls and women. The emphasis on girls’ education was fully justified, as girls and women have long been denied the realization of their basic human right to education.**

### ***Focus and design***

The focus of the programme can be assessed in terms of (i) gender (boys and girls), (ii) age groups: (iii) formal vs. non-formal basic education, and (iv) access to education vs. quality of education. The various dimensions are strongly inter-related.

Interestingly, the MPO conceptualized the programme in a comprehensive manner with three projects, which were:

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<sup>18</sup> According to MICS data, 86% of women over 15 and 71% of the total population over the age of 15 were still illiterate in 2004.

<sup>19</sup> La population of Afghanistan is estimated more than 22 million. Only 4.6 million live in urban area and more than 17.5 million in rural area. (see: *Afghanistan Statistical Yearbook*, No 25, September 2004/1383). MICS estimates the total population of Afghanistan to be 24.5 million, but does not give the estimation of rural and urban population separately.

- (a) Access to education: Develop national, provincial and district capacities to increase access to primary and non formal education, with an emphasis on girls, women and other hard to reach groups.
- (b) Quality of Education: Develop national systems and approaches to improve learning outcome, thus ensuring higher retention and promotion levels, especially in primary education;
- (c) Policy Systems Development: Develop and strengthen the Ministry of Education's capacity to develop systems, policies and plans which promote equity and access to quality, relevant basic education for Afghan children.

The MTR suggests that all three projects have been implemented with tangible results. However, the main focus seems to have been on the Back-to-School Project, which was essentially meant to increase access. There has been a clear focus on the enrolment of girls to achieve some gender balance. Community-based schools have been created, which are meant to overcome the obstacle of distances to primary schools especially for girls during the first years of primary school, as they are situated in the proximity of their places of residence.

It is understood that theoretically the Back-to-School Project was to address all levels (grades 1-12), but in practice the emphasis has apparently been very much on the initial grades of primary school). This may have involved children above normal age for primary school enrolment, but the main focus in practical terms has been on children aged 07-10 years old. This left out the considerable number of children that either drop out of school during primary school<sup>20</sup> as well as the huge number of children of more than 10 years old, who have never been to school. These children can be reached through non-formal education (e.g. accelerated / second chance learning and / or adult literacy courses). There have been some more limited initiatives in this regard, but their scope was significantly smaller than the overall Back-to-School campaign. Education of young girls of 10-14 years who become women of child bearing age (and also do bear children because of early marriage) seems to be particularly important, as poor education is a contributing factor that explains high maternal and infant mortality rates.

There has also been an overwhelming emphasis on access to education. This was supported by activities aiming at the improvement of quality of education. The MTR reports that by 2003, the Back-to-School campaign had resulted in the enrolment of 4.4 million children, of which around 40 percent girls. Activities aiming at the improvement of quality resulted, for example, in the training of all teachers (52,000 teachers trained), curriculum development, as well as the establishment of an Education Management Information System (500 staff of the Ministry of Education trained). The provision of water and environmental sanitation facilities in schools could also be considered as a contribution to the quality of education.

Drop-out rates seem to be high, though no statistics concerning attendance and school completion exist in Afghanistan. One may question the significance and value of high enrolment ratios, if the same children quickly drop out of school and have no opportunity to maintain their literacy and other acquired skills. After just a few years, their situation is not unlike that of children who have never been to school. Enhancing retention of children in schools should be part of strategies to improve the quality of education.

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<sup>20</sup> Children in the higher grades of primary school are often returnees (e.g. from Pakistan, Iran and urban areas).

**Finding 7:** The core of the Basic Education Programme has been the Back-to-School campaign with a strong focus on increasing access to education especially for girls. The emphasis was on formal primary education, especially the initial grades and relatively less attention to non-formal education for children above 10 years old who either dropped out of primary school very soon or who had never been to school (accelerated / “second-chance” learning as well as adult literacy). The quality of education in the broad sense, i.e. that children and their families consider that something useful is learned in school and that the school environment is adequate and safe, will determine to a large extent whether children will stay in school for the full duration of at least the primary school cycle.

The design of the programme, as stated in the MPO, was hence quite comprehensive, but the actual focus was more pragmatic. As in the Health and Nutrition and the WES programmes, objectives are formulated as statements describing activities rather than “SMART” results. Human rights were taken into consideration, especially those of girls and women, but there were no substantive descriptions as to various dimensions of empowerment, e.g. life-skills including gender relations, hygiene, participation in public life and especially in the management of facilities such as schools, health centres etc. The rights- and results orientation of this part of the CPC was hence limited.

**Finding 8:** The design of the programme took into account human rights (especially those of girls and women), but the programme cannot be said to be fully compliant with guidance concerning rights-based and results-oriented programming.

#### Better coordination

“Back to School” was a successful operation because of the close collaboration of partners: UN agencies, political actors and religious leaders. The number of registrations was much higher than expected.

Access to accelerated education for adolescents and vocational training for young adults didn't have the same success. If the intervention and assistance of concerned UN agencies, international organizations and local actors were coordinated the Afghan population would be much better assisted.

*Meeting with UN, International agencies and NGOs  
Herat*

#### ***Strengths and weaknesses in implementation***

The MTR report summarizes major achievements of the Basic Education Programme, the most important of which has been the tremendous success of the Back-to-School campaign in terms of enrolling boys and girls at the primary school level. The programme inspired confidence among national and external partners that something can be done about education in a country with very considerable rates of illiteracy and a huge gender discrepancy in this regard.

The Back-to-School campaign involved the creation of physical education facilities on a large scale, i.e. the distribution of 12,000 temporary classroom tents, construction or rehabilitation of 193 schools, distribution of 10 million textbooks in both national languages, provision of water systems to 2,200 schools and of 1,000 community water points benefiting 500,000 people as well as construction of latrines in 991 schools.

Achievements that were significant for the improvement of the quality of education and overall policy development were:

- (a) *Curriculum development*: After two decades of war and disruption of the educational system, the school curriculum was updated. UNICEF assisted the Ministry of Education with the development of a new curriculum in collaboration with Columbia University. Materials for grade 1 and 4 have been already completed and the remaining grades will be completed by March 2006.
- (b) *Teacher Training*: UNICEF has assisted an important initiative to improve the teacher training policy. Together with USAID, DANIDA, JICA and the World Bank, UNICEF supported the Ministry of Education to form a multi-stakeholder group on teacher education. Short-in-service teacher training was conducted for all 52,000 primary teachers and a task force of Afghan educators developed a set of standards for teaching in primary school. On the basis of these standards a full two-year curriculum for Teacher Training Institutes is being prepared.
- (c) *Information systems*: The absence of a reliable, up-to-date national or desegregated data constrains measurement of overall progress. UNICEF supported a Multiple Indicator Cluster Survey (MICS) of 21,000 households in 2003. MICS findings were widely utilised as a primary baseline data sets by Government counterparts, UN agencies, NGOs and donors. The CPC also contributed to the establishment of an Education Management Information System.
- (d) *Development of policy systems*: Major achievements include (i) the establishment of the Grants Management Unit in the Ministry of Education (with DANIDA and the World Bank), (ii) UNICEF's role as focal point for the Education Consultative Group (with USAID) and (iii) support to the Ministry of Education to formulate the National Development Budget.

**Finding 9: The greatest achievement of the programme has been the spectacular enrolment of 4.4 million children, of which 40 percent girls. This means a tenfold increase of enrolment rates for girls. Significant achievements were also made with regards to the quality of education, e.g. through curriculum development and teachers' training, and in the areas of information and policy systems, but it is too soon that these interventions can be expected to have a significant impact on retention and completion rates.**

There have, however, also been several weaknesses and challenges. While laudable efforts have been made to reduce gender disparities, efforts to reduce other disparities have been less pronounced. The enrolment rates for both and girls are lower in the south than in the rest of the country. Probably in part due to the prevailing security situation, there has not yet been a significant attempt to attract specific groups of hard-to-reach groups, e.g. nomads and ethnic minorities, populations in remote areas, but also marginalised children and adolescents excluded from education (e.g. children with physical or mental disabilities, street children, children in conflict with the law).

There is a need to better understand the factors that prevent children from attending and completing their school education. The MICS survey mentions a number of factors that explain why children are not enrolled (notably distance of the schools, inadequacy of facilities, no separation between boys and girls, domestic work). In 2004, a formative research was

undertaken on the cultural and socio-political dimensions of girls' education, which was to be the basis of an improved communication strategy. Yet there is a need to investigate the more profound causes, especially those related to economic factors (household income, direct and indirect costs etc.) as well as cultural and socio-political dimensions (e.g. early marriage, perceived benefits and enhanced opportunities in life, advice received from religious leaders).

The weakness of the concern for the education of children in the civil society is a serious problem that must be better analyzed and taken into consideration in the strategy of action in the field of education. An important effort should be done at community level to raise the awareness of the parents and community leaders in this matter. An important factor is also the involvement of parents in the management of schools (e.g. through Parent-Teacher Associations). Very little has been done in this regard.

There is still a long way to go before schools are fully child-friendly, teachers practise the right type of knowledge, attitudes and behaviours and the education curriculum imparts basic knowledge and life skills that are perceived to be useful by children and parents alike. There is a challenge for the Ministry of Education to harmonize different types of materials and training cycles, so that there is consistency in basic messages and materials. Another question is whether teachers actually apply what they have learned once they employed in the schools.

The lack of female teachers especially in rural areas seems not to have easy solutions. The educational background of teachers (male and female) is weak and/ or out-dated and the training provided to them is not enough to make them able to do a good work with children. Teachers with young children are not encouraged to work because of the lack of arrangements to keep their children in school. The lack of concern to give priority to education does not only apply to the parents. It is also true for teachers, who would, in majority, abandon their position if they found a better paid job. It is equally true about other educated people, who will not use their spare time to teach to children. Even in a village, a literate woman would not teach girls unless she received some incentive.

In practice, education can be imparted in existing infrastructure (public buildings, mosques etc.), but the CPC rightfully emphasized the need for physical infrastructure. The Back-to-School campaign provided a large number of tents, which have a maximum lifespan of a couple of years. As school construction and rehabilitation cannot catch up with the required pace, the important question is whether the disappearance of the makeshift infrastructure may increase the already considerable rate of dropouts. Sanitation may at times also be less than optimal (and perhaps even worse than traditional solutions).

The approach of *Community Based Schools* is interesting, as it creates schools for very young children (especially girls) in the immediate proximity of their places of residence. It is perhaps too early to assess these experiences, which started in 2004. Positive aspects include the potential for community mobilization and increased chances for girls and boys in more remote areas to attend school. Experience in other countries shows that these initiatives work best, when several conditions are met: (i) the initiatives should be demand-driven, i.e. parents and communities should be at the origin or at least strongly involved; (ii) even if free education is guaranteed by the Government, communities still need to find resources and organizational modalities to support this type of education; (iii) community-based schools usually only cover the very first grades and the problem the schools were meant to overcome is likely to also exist when children need to switch to regular primary schools resulting in high dropout rates.

**Finding 10:** Although data on attendance and completion are weak, it seems that quantitative achievements remain fragile. Dropout rates are likely to be high and underlying factors explaining abandonment and retention are as yet not well understood. Civil society still shows a relatively limited interest for education, especially for girls. School environments still have a long way to go to become child-friendly. There is also a need to further enhance the emphasis on basic life-skills in curricula. While gender disparities have been addressed to the greatest possible extent, there has been less attention for other disparities (e.g. between regions, locations, social groups).

### ***Sustainability and connectedness***

Afghanistan's educational system has to deal with two major challenges: a high rate of illiteracy in the current population as well as an increasing demography. Children and adolescents (18 years or below) represent 57% of the population and their number will increase rapidly with the high rate of fertility (estimated at 6.3 %) <sup>21</sup>.

The development of the educational sector will hence require a growing number of teachers and administrative personnel. The cost of teacher training, teaching and learning materials will increase as a consequence. More schools and other infrastructure related to the education sector are to be built and equipped. It is obvious that the cost of education sector will be multiplied.

Sustainability in the education sector is related to the *scope* and *quality* of its institutions (administration and management), the number and qualifications of the teachers and their socio-economic status. To develop its education sector, Afghanistan will require substantial *external aid* both for investments as well as operating cost. But *financial and institutional viability* cannot bring sustainability alone.

The education sector is linked with all spheres of the social and economic life of the country. It is particularly related to the perception of its principal actors (the state, teachers, parents and communities as well as students). If they do not believe in their educational system and if they do not perceive the interest of it they will neglect it. An important factor of sustainability is *social involvement*. Even with the best constructions, most qualified teachers and best school curriculum there would still be no continuity in the educational process, if the population is not involved in child education.

The current CPC has addressed these dimensions to a certain extent. It is obvious that systems will only be sustainable, if they are closely connected to each other through stable partnerships and clear divisions of labour and complementarity of results. Good examples are UNICEF's cooperation with UNESCO and other UN agencies as well as with bilateral aid agencies.

**Finding 11:** The sustainability of the education system will depend on external financial and institutional support for some years to come. It is important that external aid is well integrated in national policies and strategies and well coordinated. As or even more important are the social mobilization of civil society (families and communities) and the commitment of education staff. The current CPC has addressed both these dimensions a certain extent.

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<sup>21</sup> According to the MICS estimation, the population of Afghanistan is 24.5 million and overall population growth rate over the 24 years of conflicts is estimated at 2.5%.

**However, UNICEF support is presently engaged in a transition process from a pioneering role in the aftermath of an acute emergency situation to an equally challenging role of contributor to an increasingly complex and ambitious development process.**

#### **4.3 Objective: 4: Protection of children from violence, abuse and exploitation**

##### ***Objectives and strategies***

According to the MPO the objective of the Child Protection Programme was to improve protection from all form of violence, abuse, exploitation and discrimination for all children in Afghanistan. The aims of the programme were to:

- (a) Support the development of child protection policies, system and care services that are in line with Afghan culture and meet international standards Strengthen;
- (b) Strengthen capacities for family and community based care and protection of children
- (c) Support legal protection and justice systems for children and young people.
- (d) Improve monitoring and reporting on rights violation through new human rights institutions and protection mechanisms;
- (e) Increase awareness about child concerns at all levels of society.

The programme strategy was based on development of policies, research, legislation and operational guideline for protection and care of vulnerable children and women in compliance with the CRC, CEDAW and other human rights instruments.

##### **Children's rights**

The Ministry of Justice recognizes that child protection is an important issue in Afghanistan. The family relations are regulated by customary law. In order to protect the rights of children a new law, advocated by UNICEF, was promulgated by President Karzai, which states that under 18 year olds are considered as children and the age for penal responsibility is raised from 7 to 12, but a detailed revision of the law is necessary.

Beyond the legal and judicial reform for child protection, the most important point is to change behaviour of parents and the whole society toward children's rights. In Afghan tradition the child is not perceived as an individual but a family member; they have to obey their parent's decision and to provide services to them. Parents are not aware of the rights of their children and they behave themselves more as the owners of their children than responsible of their personal well-being and development.

The first step to protect children is to educate parents. We need to work at community level and to educate parents to enable them to protect their children from all forms of violence and abuse. It is not difficult to mobilize religious leaders to familiarize adults with children's rights and the duty of parents to protect their children. They can also participate in the public information campaign (radio and TV) on children's rights in order to reinforce the efficiency of the messages, particularly in traditional areas.

The weakness of child protection in Afghanistan is also a consequence of extreme poverty. Children drop out of primary school to work, they are sometimes pushed to accept hazardous jobs or sent with the consent of the parents to neighbouring countries to work.

*Interview with officials in the Ministry of Justice, Kabul*

##### ***Relevance and appropriateness***

Afghan children have traditionally been protected by their parents and extended family. Under normal circumstances, children are subject to the authority of the father, the grandfather, the uncles and the elder brothers. The protection of children is dictated by both customs (which can

be different from one region to another) and religious laws (which can be interpreted differently by specific communities).

Even orphans used to be taken care of by relatives. But community networks were deeply affected by 23 years of war and conflicts and the extended family networks were seriously eroded. Especially the female-headed households (mostly widows) have been unable to offer adequate care and protection to their children. There has hence been a partial breakdown of networks. The percentage of children in institutions also seems to be rather high.

Childhood in Afghanistan is a very short period and as soon as children become teenagers, they are burdened with nearly all the responsibilities that pertain to adulthood. As soon as the age of puberty is reached, girls can be married and boys be sent to war if the sacred values of the community (homeland or religion for instance) are at risk. In poor families, the children (both boys and girls) have to contribute to the economic survival of the family by working at a very early age (from age 7). These practices have been exacerbated by the many years of war and destruction of livelihoods.

The Convention on the Rights of the Child (CRC) and the Convention on the Elimination of all Forms of Discrimination against Women (CEDAW) have both been signed by the Government of Afghanistan. But the State has neither the juridical and legal tools nor the executive capacity to have the basic principles respected. There is no system of harmonized arrangements to ensure the realization of child rights. There is only reference to Islamic law and its local interpretation and the traditional community still functions on the basis of customary law. Even if customary law and the local interpretation of Islam protect the rights of children and women in some way, they often overlook or even violate some of their fundamental rights.

The UNICEF supported CPC has addressed all four categories of child rights as defined in the CRC: (i) the right to survival; (ii) the right to development; (iii) the right to protection; and (iv) the right to participation.

Since 2003, the CPC has included a specific programme that addresses children in need of special protection, because they have been subjected to some form of violence, abuse and exploitation. The main focus has been on children affected by war and especially the protection and reintegration of child soldiers. Some more systemic support has also been provided to child protection policy and system development with a special emphasis on juvenile justice and special groups of vulnerable or affected children.

**Finding 12: As a result of two decades of war and destruction, traditional networks to ensure the realization of children's rights have been eroded. Many children are now the victims of violence, abuse and exploitation. Under these circumstances it was relevant and appropriate for the current CPC to create a programme for children in need of special protection in addition to the other sectoral programmes that contribute to the protection and promotion of children's rights.**

### ***Focus and design***

According to the MPO, the Child Protection Programme was to be implemented through four projects: (i) protection and reintegration of child soldiers and other war affected young people (which later became the Disarmament, Demobilization and Reintegration or DDR Project); (ii) Mine/UXO awareness / mine risk education (MRE); (iii) psycho-social support and social work capacity building (which later became the social protection project with a focus on child

trafficking and children in institutions); (iv) child protection policy and system development (which later focused on juvenile justice).

The main focus of the Programme has hence been on children affected by war, including child soldiers. This focus was justified as the country was still in the process of gradually coming out of war and instability when the Programme was designed. It was also appropriate to address broader issues related to violence, abuse and exploitation of children.

**Finding 13: The Child Protection Programme has been strongly geared towards cooperation with existing national partners and their capacity building. Faced with a wide range of issues related to violence, abuse and exploitation, the Programme was relatively well focused on the rights of children affected by war, as they were most at risk. There has also been an adequate focus on gathering and analysis of information as well as on policy advice. Like in other programmes, there have not yet been results matrices, but the MTR reports on results at the outcome level, i.e. institutional and behavioural changes induced by the Programme.**

### ***Strengths in implementation***

Although the Child Protection Programme in Afghanistan was only initiated at the start of the current CPC, it has already produced a number of important achievements that lay the groundwork for an improved response capacity by the Government and other national partners. Main achievements have been:

- (a) The DDR project conducted a rapid field assessment on the situation of child soldiers and developed operational guidelines for a community based demobilisation process and for the reintegration of war affected children and young people. Around 8,000<sup>22</sup> demobilized child soldiers usually aged 14-18 years and hence too old to go to school, lack livelihood skills and often end up in poppy cultivation. Support to reintegration is sought through community sensitization with the support from the traditional council of elders responsible for the enforcement of social norms (*shura*), various forms of life-skill training and psycho-social support as well as family tracing and reunification. The project also organized training for implementing partners. The advocacy of UNICEF and other rights-based organizations resulted in the signing by the Government of an Optional Protocol to the CRC on the involvement of children in armed conflict. A DDR Steering Committee was established in early 2004 and dialogue and cooperation were improved with various Ministries, the National Security Advisor and all relevant international stakeholders. The signing of the Optional Protocol was a major achievement.
- (b) As the lead agency for the implementation of Mine Risk Education (MRE) within the UN Mine Action Programme for Afghanistan (UNMAP), UNICEF provided overall co-ordination, technical guidance and capacity building support. This involved (i) training of teachers in MRE and provision of required teaching material; (ii) training teachers from non-formal education; (iii) awareness raising and sensitisation campaign (production and distribution of MRE posters, leaflets, radio); (iv) development and piloting of a Community Based Package, (v) development of a five-year strategic plan for MRE to be included in the overall Mine-Action Strategic Plan. Data collected by ICRC indicate that

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<sup>22</sup> "Rapid field assessment on the situation of child soldiers in Afghanistan", UNICEF ACO, Child Protection, July 2003.

the number of mine/UXO victims in general as well as the percentage of victims who had received MRE prior to the incident had decreased.

- (c) The main focus of the Social Protection Project was on child trafficking and on children in institutions. In October 2003 UNICEF conducted a rapid assessment in the North and Northeast provinces of Afghanistan and confirmed that child trafficking was a serious concern in the region. Agreement has been reached for the initiation of pilot reunification projects for children in orphanages in Kabul and Mazar in partnership with the Ministry of Labour and Social Affairs and Save the Children-UK. Through support to partner agencies, UNICEF promoted “community-based child protection”. UNICEF also acted as a secretariat for the creation of a Task Force on Child Trafficking. Technical support and capacity building were provided for the prevention of trafficking and protection of child victims, and modules were developed for teachers and health workers how to respond to abuse or violence. With support from UNICEF, a transit centre for the temporary placement of children was established in Kabul. A Presidential Decree was issued concerning child trafficking. As far as children in institutions were concerned, a national assessment was conducted, which was the basis for the development of plan of action for reform of the social protection system and services for children at risk.
- (d) In the field of Juvenile Justice, UNICEF supported the preparation of a draft Juvenile Code and provided a series of specialized trainings on juvenile justice. UNICEF also undertook a comparative legal study between the CRC and Afghan laws. The Ministry of Justice set up the first Juvenile Rehabilitation Centre in Afghanistan with UNICEF support

**Finding 14: The CPC has been successful working with and building capacity in the Ministries of Labour and Social Welfare, Justice and Interior. A good start was made to provide reliable information and analysis to the Government and non-governmental partners concerning child protection issues, which in turn laid the groundwork for a strategic vision of the sector. There were also more efforts than in other Programmes of the CRC to strengthen the community level.**

#### ***Weaknesses and challenges in implementation***

Abuse and violence directed against children are not yet fully recognized as major child rights issues in Afghan society. There is a certain culture of silence that needs to be overcome. There is also a serious lack of human resources in this sector – both in the Government and in civil society - that needs to be addressed. Last but not least, there is no appropriate legal framework. These are all tremendous challenges that need progressively to be responded to.

As far as the DDR project is concerned, there has apparently been little contact and coordination with the demobilization project for adult soldiers supported by UNDP. The DDR project for soldiers suffered some delays as a result of the reform of the Ministry of Defence, a lack of political consensus and coordination among main stakeholders and policy shifts within the overall DDR framework.

The Department of Juvenile Justice recognizes the lack of trained staff in the public sector and considers the quality of NGOs for the implementation of the UNICEF supported programme as rather low. During interviews it was stated that, rather than support weak NGOs, UNICEF might consider strengthening the national staff of the Ministry through more training and technical support. To the extent that NGOs are involved, the Ministry would prefer to be more involved in

their selection and oversight. It may be concluded that it is probably necessary to strengthen the capacities of both the governmental and non-governmental actors for their respective roles.

The gender dimension has been relatively absent from the Child Protection Programme. Even if the reference to CEDAW is present in all strategic texts, child protection projects and activities are not specifically oriented towards gender issues. Protection issues with clear gender dimensions such as domestic violence, early and/or forced marriage, incest and rape and sexual abuse of children from vulnerable groups (especially boys) are not (yet) covered.

The articulation between the Child Protection Programme and other sectors supported by UNICEF is weak. Activities are not linked to activities of the Health Programme, e.g. those concerning HIV/AIDS and possibly those dealing with disabled children. There is also limited interaction with the education sector, e.g. for girls' and boys' formal education and for various forms of non-formal education. Child protection issues could also receive more attention in national media and in programme communication directed at influential members of society (e.g. religious leaders).

**Finding 15: Coordination and cooperation between the Child Protection Programme and other programmes of the CPC, e.g. Health and Nutrition and Basic Education, as well as with the cross-cutting programme of Information and Communication has not been strong. More cooperation and integration of the various Programmes could have had a beneficial effect on coordination among national partners. The focus of the Programme on children affected by war also resulted that many other protection issues were not yet addressed, especially those with a gender dimension.**

#### ***Sustainability and connectedness***

The current CPC has started to build capacities at both the level of State Institutions and in civil society (NGOs, communities). It is far too early to expect outcomes to be sustainable at their respective levels without continuous support. An important dimension of sustainability will be cooperation and long-term partnerships between all institutions intervening in this sector. The Child Protection Programme is well connected with all relevant State institutions (Ministries of Labour and Social Affairs, Interior, Justice, Women's Affairs) and UN agencies (UNODC, UNAMA, UNHCR, IOM, UNMAPA). It also developed a wide range of partnerships other organizations, e.g. the Afghan Independent Human Rights Commission and national NGOs (especially Save the Children – US, UK, S – and Child Fund Afghanistan). Especially capacity-building in civil society will require a long-term commitment of all stakeholders.

**Finding 16: Children in need of special protection require a long-term engagement both of the State and within civil society (NGOs, communities etc.). The ultimate measure of the sustainability of interventions of the State is that regulatory frameworks are enforced and that the care practices of State institutions are adequate. At the same time, vulnerable children are also the responsibility of families and communities. Sustainability at this level will depend on the restoration and initiation of networks that monitor all forms of neglect, violence, abuse and exploitation and develop measures to counter them. The current CPC has started to build capacities at both levels, but it is still too early to expect outcomes to be sustainable.**



## 5. Strategic orientations and recommendations

### 5.1 The CPC's niche and contribution in a changing environment

#### ***Joint programming within UNDAF***

The next UNICEF supported CPC will be part of the United Nations Development Framework (UNDAF) comprising all UN agencies present in Afghanistan. Building on the analysis of the Common Country Assessment of 2004, the UNDAF Document (final draft February 2005) describes how the UN System can continue to improve its response to Afghanistan's national priorities and needs. The UNDAF for 2006-2008 for Afghanistan commits the United Nations agencies to work together towards the overarching goal of human security and peace building in Afghanistan, thus contributing to Afghanistan's national priorities and needs. The UNDAF was developed by the United Nations Country Team together with the Government of Afghanistan.

The UNDAF is guided by the goals and targets of the Millennium Declaration of 2000, the National Development Framework of the Government, the strategic document *Securing Afghanistan's Future* and other relevant documents. The UNDAF will address human security and peace building through four inter-related areas of cooperation:

- (a) *Governance, rule of law and human rights*: Government at all levels and civil society are better enabled to realise improved governance based on the rule of law and human rights, with particular emphasis on women and marginalized groups;
- (b) *Sustainable livelihoods*: By 2008, more Afghans, particularly vulnerable groups, will have increased and equitable access to assets, activities and entitlements that improve individuals' sustainable means of living;
- (c) *Health and education*: By 2008, equity and access are improved for quality health and education services, as well as food security and nutrition, especially for women and girls;
- (d) *Environment and natural resources*: By 2008, development and implementation of environment and natural resource policies strengthened at all levels of Government, including the community level, to ensure proper management of, and appropriate education on, rare and important natural resources.

Programme cycles of all UNDG Executive Committee Agencies (UNDP, UNFPA, UNICEF and WFP)<sup>23</sup> will be harmonized. All agencies will formulate their goals, outcomes and strategies in a manner that is fully consistent with UNDAF areas of cooperation and outcomes as well as the UNDAF Results-Based Management approach.

Based on UNICEF's current CPC (2003-2005), the organisation's contribution may be expected to address issues related to all four areas of cooperation. For example, UNICEF is strongly involved in capacity building in Government and civil society with an emphasis on human rights and empowerment of women and girls and other marginalized groups, e.g. children in need of special protection (area 1). There are clear linkages to the areas of sustainable livelihoods (area 2, e.g. skills development, community participation), health and education (area 3 - EPI, mother and child health, formal and non-formal basic education etc.) as well as environment and natural resources (area 4, e.g. WES).

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<sup>23</sup> Other agencies usually work on a biennial basis.

UNICEF offers comparative advantages primarily in Health and Education and will assist the Government in achieving concrete results toward the Millennium Development Goals. For the next programme cycle UNICEF will engage in joint programming with the other relevant agencies, e.g. WHO, UNFPA, WFP in the following areas: maternal mortality, healthy schools, and women's literacy. It will also contribute to the environmental programme, called Greening Afghanistan Initiative (GAIN).

While strategy development of the new UNICEF supported CPC is still under way and as an input to the new Country Programme Action Plan (CPAP), the CPE formulates broad recommendations concerning the next CPC's potential contribution to the realization of three main possible goals: (i) reduction of child and maternal mortality and morbidity; (ii) basic education and gender equality; and (iii) realization of the rights of children in need of special protection.

### ***Contribution to the reduction of child and maternal mortality and morbidity***

In line notably with MDG 3, the reduction of child and maternal mortality and morbidity rates is a major goal of the Government of Afghanistan. This goal is to be achieved through development of an equitable, effective and efficient basic package of health services that addresses priority health and nutrition problems, and through developing the capacity to deliver the necessary services (Securing Afghanistan's Future, UNDAF document).

Given the very high incidence of child and maternal mortality and morbidity rates in Afghanistan, there should gradually emerge a long term strategy with a horizon of the Millennium Declaration and the Millennium Development Goals, which is 2015. During the next three-year CPC (2006-2008), there should be a focus on those factors that can directly and immediately have an impact in terms of child and maternal survival, e.g. immunizations and improved iron, iodine and vitamin A supplementation. But there should also be a longer vision how to tackle underlying factors where palpable results can only be achieved in the longer run, e.g. overcoming the low level of (women's and girls') education. The Government should be encouraged to further develop such an integrated and long-term vision and thereby benefit from the support of UNICEF and other UN partners.

**Recommendation 1: In cooperation with other UN partners, UNICEF should support the Government in further developing an integrated and long-term vision concerning the reduction of child and maternal mortality and morbidity and address both factors where immediate results can be achieved (e.g. immunizations and improved caring practices of infants and young children and hygiene) and factors that require a longer-term strategy (e.g. relevant aspects of education).**

In late 2004, the Ministry of Public health selected five National priority programmes viz. (i) Basic Package of Health Services (BPHS); (ii) Essential Package of Hospital services (EPHS); (iii) National Capacity Building Programme; (iv) Communicable Disease Control Programme; and (v) Administrative Reform and Restructuring.

**Recommendation 2: The new CPC should to the greatest extent possible be integrated in and coordinated with the five national priority programme in health and nutrition including BPHS EPHS. These programmes are geared towards national capacity building and supported by major**

**external aid agencies. During the preparation of the new CPC it will be necessary to determine, how UNICEF supported projects could contribute to ensuring effective integration with the national priority programmes (e.g. aspects of the MCH project such as EmOC, building capacities for routine immunization, Iron Deficiency Anaemia reduction, IMCI). It is also necessary to assess which quick impact projects can be efficiently coordinated with such integration efforts (e.g. Polio Eradication Initiatives, Measles mortality reduction campaigns, Supplementary Immunization Activities, Universal Salt Iodization).**

UNICEF could give priority to implement projects through government structures and personnel that could contribute for capacity building and sustainability of programmes. Direct contracts with NGOs are costly and the enforcement of the standards concerning the quality of services has been a concern. The emphasis of capacity building should be on the enforcement of standards and the need for operation and maintenance, especially in water supply, hygiene education and sanitation, but also in the management of the cold chain for vaccines.

The increasing presence of major external aid programmes directed, for example, at the Ministry of Public Health and the Ministry of Rural Rehabilitation and Development, may be expected to help the Government to progressively achieve national coverage in the creation of rural infrastructure (hospitals, health posts, wells, latrines etc.), which could ease the pressure on UNICEF to achieve quantitative targets in this regard. This would allow the CPC to enhance the quality of its interventions, the development of workable and potentially replicable solutions on a more limited scale that could be brought to the attention of the Government and major donors in view of their mainstreaming.

**Recommendation 3: Given the fact that it will still take some time, before there are adequate systemic national health, nutrition and WES capacities, the UNICEF supported CPC should continue major interventions initiated under the current CPC (2003-2005), e.g. policy and strategy advice in these areas to the Government, Polio Eradication, Supplementary Immunization Activities (e.g. MNTE), EmOC support to hospitals run by government, Universal Salt Immunization and dissemination of experiences at the national level (including WES). There should, however, be a greater emphasis on the quality of interventions and pilot experiences on a more limited scale (e.g. for water supply, hygiene education and sanitation) with the potential of feeding workable and high-quality solutions into national policy development.**

Under these circumstances, the CPC could also give more attention to the promotion of good health and nutrition behaviours, water use and management, hygiene education, empowerment of stakeholders (rights-holders and duty-bearers), community involvement in design and operation and maintenance of infrastructure (e.g. in WES). These dimensions have remained somewhat underdeveloped in the current CPC and deserve to be scaled up significantly during the next CPC.

Despite of the role of public nutrition towards reduction of mortality, morbidity both in children and women and potential contribution to economic development through its effect on human capital development, the national capacity is under developed and no other agency is mandated

in public nutrition. There are no professional nutritionists in Afghanistan nor has training been adequately institutionalized within national structures. UNICEF could consider training some nutritionists for MoPH and also continue its technical support for capacity building of the newly established Public Nutrition Department within MoPH. The present focus of capacity development activities could be expanded from central level to the provinces through existing provincial nutrition officers with better communication between central MoPH and provinces and provision of required facilities for them. There is also a need to expedite campaign and awareness activities for the use of iodized salt. Activities to raise awareness on use of iodized salt have been on-going without interruption since July 2004, through radio spots, placement of posters and billboards, radio programmes on the issue, distribution of leaflets, training of PNOs, partners and UNICEF staff on communication, etc. A second batch of materials and activities are planned to start in May 2005. There is also a need for continuous support to create a regulatory framework for the production and distribution of iodized salt.

To allow for appropriate programming, there is a major need to have a better understanding of traditional practices, e.g. concerning antenatal and perinatal care, nutrition of mothers and children, and hygiene behaviours. UNICEF should pursue its role in information generation beyond the exiting Situation Analysis and the MICS studies and undertake specific thematic studies and surveys concerning traditional practices and reasons why these practices are not adequate. In this area, there is also a need for technical support to the relevant Government departments. Capacity building of local staff could be part of the process for data generation.

Building on existing communication strategies concerning iodized salt and the promotion of girls' education, UNICEF should use its comparative advantage in the field of communication to promote institutional and behavioural changes and help MoPH to develop comprehensive communication strategies and packages for prevention and management of vaccine preventable disease, diarrhoeal disease, malaria, and respiratory infections. Similar strategies are equally necessary for nutrition and water use and sanitation practices. UNICEF can help MoPH and other Ministries to find proper ways and means to channel the messages through religious leaders and media.

**Recommendation 4:** The next CPC should give more attention to the promotion of good health and nutrition behaviours, improved water use and management, hygiene education, empowerment of stakeholders (rights-holders and duty-bearers), and community involvement in design and operation and maintenance of infrastructure (e.g. in WES). There is a need for a better understanding of traditional practices and factors that prevent people from adopting more appropriate behaviour. Programme communication needs to be enhanced and national capacities should be developed in this regard, e.g. through the government and religious leaders. UNICEF should continue to take the lead in technical support to MoPH and other partners to ensure effective integration of national priority programmes at beneficiary level, and to ensure the implementation of Public Nutrition policies and guidelines at service delivery level through BPHS and EPHS. UNICEF should continue to support government and encourage private sector for food fortification (especially USI) until iodine deficiency disorder (IDD) is eliminated and other food fortification policy and practice is widely adapted.

Beyond the coordination with BPHS/EPHS mentioned above, horizontal linkages between otherwise vertical interventions need to be established. There are several examples where this could happen within the Health and Nutrition Programme (e.g. between EPI and nutrition activities) and the integration in and coordination with the national programs would provide the adequate platform for this endeavour. In addition, the UNICEF supported CPC offers the opportunity to enhance cooperation between sectoral programmes. There are obvious connections between Health and Nutrition and WES (control of water-borne diseases, hygiene etc.), between Health and Nutrition and Education (e.g. school sanitation), between all these sectors and Child Protection (e.g. various forms of abuse, prevention of child labour). A more integrated approach among UNICEF's programme components and also with UNDAF partners (notably WHO, UNFPA, WFP) could enhance inter-departmental cooperation within the Government. It would also be in tune with the whole-child approach that is an essential part of the HRBAP. Last but not least, more integration could have positive benefits for a more rational use of scarce human resources (e.g. female staff in the field) and financial and material resources (multiple purpose field travel resulting in more rational use of scarce staff time).

**Recommendation 5: There is a need to enhance integration among vertical components of the Health, Nutrition and WES Programmes and among different sectoral programmes of the CPC as well as enhance programmatic cooperation UNDAF partners with a potential for positive effects on inter-departmental cooperation within the Government.**

The next CPC will, to an even larger extent, than the final stage of the current cycle be characterized by a transition from an emergency operation to a more developmental programme. This will involve major managerial challenges. On the one hand, the programme will have to continue to create infrastructure and deliver services (e.g. construction and rehabilitation of physical infrastructure, EPI and nutrition campaigns etc.). On the other hand, the programme will have to develop capacities within the Government, especially at the service delivery levels, and in civil society. These are two rather different modes of intervention requiring to a certain extent different staff competencies and managerial practices. Part of the solution might be a transfer of implementation responsibilities to Government and / or more deconcentration of implementation to UNICEF staff in field locations outside Kabul. The present management system is still relatively centralized, which at times seems to lead to long delays in the delivery of supplies. Another effect of a relative degree of centralization is that UNICEF staff in Kabul is over-stretched with administrative and managerial tasks, which leaves too little time for the more structural and systemic aspects of capacity building.

**Recommendation 6: The shift from direct implementation of programmes and projects by UNICEF to a more developmental programme approach with challenges related to capacity building and building partnerships with other agencies will have management implications that may involve a greater transfer of the responsibility for implementation to the Government and / or a transfer of certain responsibilities from UNICEF staff at the central level to UNICEF staff in field locations.**

### ***Basic education and gender equality***

Basic education (comprising both formal and non-formal education) is closely related to MDG 2 (achieve Universal Primary Education, i.e. ensure that all children, boys and girls alike, complete primary schooling), MDG 3 (promote gender equality and empower women) and MDG 4 (reduction of child mortality). Afghanistan's national priority is to ensure that all children

complete compulsory education (nine years) and have opportunities to continue to higher levels (Securing Afghanistan's Future and UNDAF document). This is to be achieved through (i) expanding access and raising the quality of primary and secondary education nationwide; (ii) building a higher education system; (iii) expanding citizen's access to vocational and informal education, with specific focus on improving livelihood opportunities for vulnerable groups.

**Recommendation 7: The National Development Goals and the UNDAF objective related to basic education entail two important shifts in emphasis for the next CPC, which are also in line with UNICEF's next Medium Term Strategic Plan (MTSP 2006-2009): (i) while maintaining goals and objectives related to access to education, there should henceforth be more attention for the quality of education resulting in improved retention and completion of schooling; (ii) rather than only aim at gender parity (equal numbers of boys and girls in school), there should be attention for gender equality, i.e. social relations between men and women that need to be transformed to overcome the systematic discrimination of women and their subordinate position in society.**

The Back-to-School campaign was appropriate in the immediate aftermath of long years of lack of attention for formal schooling and the acute emergency situation linked to the war of 2001-2002. The campaign was not only a spectacular success in terms of enrolment of both boys and girls, but also a politically important movement that restored a sense of normalcy within the country and boosted confidence among policy and decision makers both within and outside Afghanistan. In the mean time, it is not likely that the high enrolment rates can be maintained and that many of the enrolled children have already dropped out of schools after just a few years of schooling. There is a strong likelihood that these dropouts will not be able to maintain the little knowledge they may have acquired in schools, especially if there is no further stimulation to use these skills (e.g. literacy).

While maintaining objectives to provide access to education to the growing new cohorts of children that will reach school-age, the emphasis should also be on regular attendance and completion of primary schooling. This could be expressed through a new slogan "Stay in School". This will require a much more in-depth understanding of factors that are at play in the decision-making of parents and children whether to stay in school or to pull out. The MICS survey of 2003 investigated some factors, but the reality is likely to be more complex. There is a need to conduct more comprehensive studies and surveys into the economic reality (e.g. direct and indirect cost of education for parents, the latter linked to domestic tasks and possibly child work and child labour, possible job opportunities as a result of schooling) as well as into socio-cultural values and practices (value of formal education as compared to religious teaching, early marriage etc.). A good causality analysis could translate into more appropriate strategic programming. It would also be interesting how parents and children perceive the school environment (e.g. aspects of security, gender relations, hygiene, teachers' attitudes and behaviours).

The notion of quality in education goes beyond a mere academic understanding related to the level of knowledge and life-skills imparted in schools to prepare children (boys and girls) for an active future life. Quality in education also involves the existence of a safe and stimulating learning environment that promotes children's cognitive and psychological abilities to deal with economic and political challenges they will meet later in life. Education will only be perceived by parents, teachers and children to be of high if it is culturally appropriate.

**Recommendation 8: The next CPC should support the Government not only in maintaining and increasing enrolment rates of children into primary education, but increasingly also in promoting retention and completion in primary education. A new slogan could be “Stay-in-School”. This will first of all require a better understanding of factors that are at play in the decision-making of parents and children to continue schooling until completion or to abandon schooling. Studies and surveys should be gender-specific. A good causality analysis would allow for more targeted programming addressing the immediate and underlying causes of non-attendance and non-completion. This would also contribute to a better understanding of the notion of quality of education that should become more culturally appropriate.**

The gender equality approach is a much more complex and profoundly challenging endeavour than reaching gender parity (or gender equity). The gender equality and empowerment approach has implications far beyond the education sector. In virtual all spheres of development, it involves reconsidering stereotypes that historically and culturally determine role matters of girls and boys and women and men. It is necessary not only to work closely with women and girls, but, also, with men and boys and the public at large on eliminating gender bias and discrimination. Children entering puberty require special attention and an emphasis on gender equality needs to be integrated in life skills education.

There is a need for a more in-depth understanding of the gender dimension in Afghanistan, which could be covered by specific studies and surveys to be undertaken by the next CPC. Like in other rural and traditional countries, girls and women are not spontaneously allowed to enjoy full education and freely participate in social and political life. Beyond aiming at gender parity in terms of enrolment in schools, there is a challenge to address gender bias in the curriculum content that should be addressed through curriculum development, teachers’ training and promotion of community involvement (e.g. parent-teacher associations).

Girls and young women require special life-skills related to their reproductive function, especially as far as hygiene and nutrition are concerned that may contribute to the reduction of maternal and child mortality and morbidity. Girls and young women need to be empowered to be in control of their own lives and to make their contribution to a safe delivery and a good start in life of their children. They should at the same time be empowered to make their voices heard within the family and in the communities they live in and participate in active life.

A case could also be made for the education of boys and men in the sense of overcoming stereotypes of dominant and discriminatory behaviour and promote the rights of girls and women. In some cases, men may also have to learn how to show more responsible behaviour in dealing with their own and other children and overcome different forms of abuse and exploitation (e.g. using children for heavy domestic tasks or even child labour as well as various forms of neglect or abuse or exploitation). Overcoming stereotyped behaviour will be a long-term process, but should start at an early age. Primary schooling seems to be an appropriate platform for such an endeavour. It may have to be accompanied by non-formal adult education (e.g. through literacy classes and through religious leaders).

**Recommendation 9: An important contribution to the quality of education is adequate attention for gender equality. It is not enough to have equal numbers of girls and boys in schools, Curriculum development, teachers' training and promotion of community involvement in education should convey messages that overcome gender stereotypes. Activities should not only aim at the empowerment of girls and women, but also very specifically at the education of boys of men to protect and promote girls' and women's rights. A gender-sensitive education may be expected to improve overall quality of education.**

#### **Forced Marriage**

Marriage is a community affair in Afghanistan and forced marriage is not a rare phenomenon. Parents (the father or elder male family members) decide who will marry whom and young people have to follow the parental decision even if their marriage was decided before their birth. The decision of parents is not necessarily perceived as a forced marriage in remote rural areas where young people have limited access to other potential partners. Forced marriage is not necessarily perceived as such by the victims.

During an interview with a female teacher who was complaining about her husband, her cousin, she was asked if she was forced to marry him, she answered: "No it was not a forced marriage. I was promised to him by my parents before I was born".

*Interview with a female teacher,  
Kabul*

The current CPC has addressed a fundamental aspect of child-friendly schools: the physical infrastructure of schools. The prevailing emergency situation three years ago and the urgency to get children into school justified temporary infrastructure (tents) and, to a more limited extent, rapid construction and rehabilitation of schools. Considerably efforts have also been made to provide water and latrines to schools, however with mixed results in terms of quality. The tents were a temporary solution and most of them are now in a bad condition. School construction and rehabilitation could not catch up with the tremendous need for educational infrastructure.

The next CPC should also deal with children's need for physical activities. Most children interviewed during the present evaluation requested facilities for sport activities. Sport and other health leisure are also good occasions for children to socialize with others and to develop friendship relations. These activities are important for all children but much more for girls who are usually not allowed to go out as soon as they return back from the school. The municipality could provide some terrain for sport and other social activities.

Parents, children, teachers and directors of school mentioned that in case of accident there is no possibility to bring any rapid health care to the children or teachers (no transportation, no drugs). It is perhaps possible to find an arrangement to provide some basic medicine and to train teachers in elementary first aid practices in the case of emergency situation.

As far as supplies are concerned, the increasing social differentiation within the population may justify a more refined and targeted approach. It is perhaps not necessary to provide basic education materials for (school bag, books, notebooks, pencils and other materiel) to all children. Some children, e.g. those coming back from Pakistan or Iran, are not poor. They may even have their personal computers at home or benefit from private tuition. The real poor should hence be identified in each school and supported to prevent their drop-out for financial reasons.

**Recommendation 10:** Given the interest of major donors in the education sector, it may be expected that the Ministries of Education and of Rural Reconstruction and Development will receive support to gradually achieve coverage in terms of school infrastructure. Rather than maintain a focus on coverage of needs in terms of infrastructure, the next CPC should focus on high quality and low-cost solutions both for school buildings and for school water supply and sanitation. UNICEF could play a role in designing and implementing experimental demonstration projects for primary schools (including school water supply and sanitation) on a limited scale resulting in workable solutions that could be replicated in other locations or mainstreamed in national policies and strategies. There is need for evidence-based advocacy both with the Government and with major external aid agencies. Key criteria for the selection of pilot sites should be (i) environmental and physical site characteristics; (ii) social, economic, cultural and political factors (potential for community involvement, exclusion in terms of specific groups or isolated areas); (iii) partnership with different external aid agencies (iv) convergence with other UNICEF supported programmes (e.g. in Health and Nutrition, Child Protection).

The experience of community-based schools is relatively recent and it is too early to draw definite conclusions from the experience. The initiative seeks to overcome a major obstacle in the enrolment of small children and especially of girls, which is the distance to the next primary school. Community-based schools are created in the proximity of the children's residence. Given the low demand for and interest in education among the population, there are some doubts concerning the viability and sustainability of these initiatives.

**Recommendation 11:** Community-based schools have the potential of being interesting experiences as a means to enhance the enrolment especially of girls into primary education and to stimulate community involvement in education in general. Large-scale implementation of this approach seems not to be warranted. But pilot experiences should be pursued where there have been traditional initiatives to educate girls in villages (home-based education) and where there is a demand from families and communities. The pilot experiences may result in evidence-based advocacy at the national level.

While the Back-to-School campaign allowed for the enrolment of children older than 10 years into primary schools, a more targeted approach may be envisaged for 10-14 year old children who have either never been to school or have dropped out of school. These children are tomorrow's parents and potentially active community members. To the extent that poor education of girls and women is an important factor contributing to high maternal and child mortality and morbidity, there seems to be an urgent need to reach them (and their future husbands) and provide some non-formal education. This could minimally consist of classes of functional literacy, but optimally involve an accelerated cycle of complete primary education.

**Recommendation 12: Given the importance to reach children and young adults who are too old to be enrolled in regular primary education, the Government should increase opportunities for non-formal education (accelerated learning / second chance primary education) as well as for functional literacy. On the basis of its existing experiences in this area, the next UNICEF supported CPC should design and implement experimental demonstration projects for this type of non-formal education on a limited scale resulting in workable solutions that could be replicated in other locations or mainstreamed in national policies and strategies with the support of other external aid agencies.**

The current CPC has made commendable efforts to strengthen the human resources in the education sector. UNICEF should remain involved in teacher training and especially provide knowledge and skills that are necessary to make schools more child-friendly, e.g. attitudes and behaviours, gender sensitivity, hygiene etc. The Government should be supported to harmonize different types of teacher training and also envisage re-training and field monitoring.

The lack of certified teachers requires a flexible approach that may involve creative solutions to strengthen human resources in the education sector. Other categories of the population could be mobilised for non-formal education, e.g. students from the University and other volunteers. These volunteers may require specific training and may require some form of recognition and reimbursement of expenses.

The insufficient number of female teachers is one of the main reasons, which explains the resistance of some families to send their daughters to school. The Ministry of Education may consider providing special incentives to female teachers and / or provide specific infrastructure (e.g. simple kindergartens). During the time the future female teachers are not yet trained, it should be possible to train male religious leaders, who enjoy the trust of the families and communities, and make them able to teach reading and writing to the village children. If these traditional educators are well trained in the use of new pedagogical methods, they can at least temporarily replace female teachers.

**Recommendation 13: There is an urgent and growing need to provide training to teachers, which can only be responded to with substantial external support. The UNICEF supported CPC should remain involved in teachers' training, especially as far as elements are concerned that make schools more child-friendly. At the same time, the CPC should contribute to a flexible approach in identifying and training non-formal teachers.**

UNICEF's pioneering role in the education sector may have created habits in certain cases to act on its own and without sufficient consultation with counterparts in the Government at the various levels. Such concerns were voiced during several interviews with Government counterparts. On the other hand, UNICEF has been involved in and contributed to the Consultative Group and provided various forms of assistance at the policy level.

The shift from direct implementation of programmes and projects by UNICEF and its sub-contractors to a more developmental programme approach may have similar management implications as in the Health and Nutrition sector (see recommendation 6)

**Recommendation 14: It is important to consolidate relationships with the new Ministry of Education and to remain involved at the policy level in partnership with other external aid mechanisms. UNICEF's strengths would be based on its extensive field experience and its potential to provide evidence-based advocacy with use of demonstration projects. The simultaneous involvement in implementation and at the policy level may create managerial challenges for UNICEF staff.**

***Children in need of special protection***

Issues related to the abuse, exploitation and neglect of children as well as violence inflicted upon them are still very little known in Afghanistan. This is partly due to a culture of denial, but also related to the absence of systematic studies on these subjects. The current CPC has started to document some forms of abuse and exploitation, e.g. through studies on child soldiers and child trafficking, but many more forms are still poorly documented. They include children with disabilities (there is apparently a significant number of such children in the aftermath of the wars), children involved in child labour, children exposed to sexual abuse and domestic violence as well as children affected by drug use and HIV / AIDS.

Research and advocacy should be much more gender-specific than in the current CPC. The gender dimension is nearly absent from the present Child Protection Programme. The programme should include issues in relation with specific gender discrimination (domestic violence, early and/or forced marriage, incest and rape and other violence against girls and women). Data collection should be as much as possible gender-disaggregated and strategies should very explicitly address girls and young women as much as boys and young men.

**Recommendation 15: The research agenda should be closely linked with advocacy to curb all forms of abuse, neglect, exploitation and violence against both girls and boys. The combination of systematic research with advocacy and social communication actually constitutes a "social observatory function", which should eventually be built with national partners, e.g. more or less specialized NGOs. The Child Protection component of the forthcoming CPC should build such a function that could provisionally be lodged within the UNICEF Office. The advocacy part of this function would involve the use of media (radio and TV) as well as other communication channels (e.g. Mosques) to inform the population and to raise the public knowledge of the law and strengthen protection networks in communities. The social observatory function could also raise national and external financial resources to better protect vulnerable children.**

As far as Child Protection is concerned, the current CPC has made a good start in strengthening capacities of Ministries and other public institutions directly dealing with children affected by the war, e.g. the Ministries of Social Welfare, Justice, Interior and Labour. While this work needs to be consolidated, the next CPC will have to diversify its partnerships with institutions that deal with other forms of abuse or exploitation. This may involve a closer cooperation with other sectoral programmes, e.g. Health and Nutrition and Education. There are obvious links between health and child protection (e.g. children with disabilities, children affected by drug use) and education and protection (e.g. child labour).

UNICEF's mandate to protect and promote children's rights obliges the organization to strengthen the capacity of the Government in terms of creating appropriate legislation and support the ability of the Government to enforce the legislation. At the same time, care practices need to be brought up to standards in public institutions dealing with children (e.g. not only orphanages and juvenile justice, but also schools, where certain forms of abuse seem not to be uncommon, e.g. corporal punishment). At the same time, non-governmental institutions dealing with children (e.g. religious schools) need to be sensitized to and trained in adequate practices as to how to deal with children.

**Recommendation 16: The emphasis of UNICEF's support to children in need of special protection should be on capacity-building of governmental and non-governmental partners. This includes the creation of adequate legislation and the strengthening of law enforcement. Those dealing with children in schools and other institutions need to be sensitized to and trained in adequate care practices. This entails a strong cooperation with other sectors, e.g. Health and Education. Traditional networks at the level of families and communities that protect children from all forms of abuse and violence and exploitation need to be revitalised.**

## 5.2 Strengthening rights-based and results-oriented management

### ***UNICEF's Core Corporate Commitments (CCC) and Human Rights-Based Approach to Programming (HRBAP)***

In 2000, UNICEF adopted *Core Corporate Commitments in Emergencies (CCC)*<sup>24</sup>, which were based on recommendations from the Martigny Global Consultation in 1998 to improve UNICEF's responsiveness to children in unstable situations, e.g. civil strife, armed conflict and natural disasters. They defined commitments of the organisation in terms of rapid assessment, coordination, programme commitments and operational commitments. The CCCs of 2000 were updated in August 2004 and renamed *Core Commitments for Children*<sup>25</sup> after another Global Consultation that took place in Copenhagen in April 2003. The new document clarified UNICEF's role in protection and assistance to children and women with a clear distinction between life-saving interventions that should be carried out within the first six to eight weeks of any crisis, and the broader spectrum of essential activities that may be added, once an initial response is well established.

In 1998, UNICEF issued Executive Directive 1998-04 providing "Guidelines for a Human Rights-Based Programming Approach". Since then, UNICEF has made serious efforts worldwide to translate its mandate related to the Convention on the Rights of the Child (CRC) into its programming practice. HRBAP has been a core strategy that has guided UNICEF's Medium Terms Strategic Plan (2002-2005). Since 1998, HRBAP has been operationalised through numerous Country Programmes of Cooperation, through documentation and analysis of experiences, dialogues with partners and two major Global Consultations in 2001 and 2003 (Dar-es-Salaam and Quito). UNICEF's emphasis on the need for an HRBAP was supported by a number of external developments. The UN Secretary General's Programme for Reform has shown a strong commitment to integrating human rights throughout the UN System. The

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<sup>24</sup> Executive Board Document E/ICEF/2000/12

<sup>25</sup> Executive Directive CF/EXD/2004-015

Millennium Declaration and the Millennium Development Goals also essentially pursue the realisation of human rights.

Among UNDG agencies there has been a common understanding of the core features that characterize a HRBAP<sup>26</sup>. These agencies have committed themselves to further the realisation of human rights as laid down in the Universal Declaration of Human Rights and other international human rights instruments and abide by standards contained in and principles derived from the Declaration. Development cooperation is expected to contribute to the development of capacities of duty-bearers to meet their obligations and / or of rights-holders to claim their rights. The following elements are necessary, specific and unique to a HRBAP:

- (a) Assessment and analysis identify the human rights claims of rights-holders and the corresponding human rights obligations of duty-bearers as well as the immediate, underlying and structural causes of the non-realization of rights;
- (b) Programmes assess the capacity of rights-holders to claim their rights, and of duty bearers to fulfil these obligations. They then develop strategies to build these capacities.
- (c) Programmes monitor and evaluate both outcomes and processes guided by human rights standards and principles.
- (d) Programming is informed by the recommendations of international human rights bodies and mechanisms.

The implementation of the HRBAP in unstable and / or emergency contexts has proven to be a particular challenge in programming.. The CCC of 2004 did not contain an explicit reference to HRBAP, although during the Second Global Consultation on HRBAP which was held in September 2003 in Quito it had been emphasized that HRBAP should be part of the CCC. The Quito Outcome Document<sup>27</sup> defined the following features that would characterize HRBAP in an emergency context:

- (a) The CCCs should reflect key HRBAP principles: (i) people are subjects of rights; (ii) equal emphasis on outcome and process; (iii) the need to strengthen the capacity of rights-holders and duty-bearers to claim and realise rights.
- (b) Specific challenges that exist in humanitarian crises may include: (i) failing or failed states; (ii) non-state entities that control populations and territory; (iii) massive populations in flight; (iv) denials of humanitarian access for political, economic or security reasons; and (v) high levels of insecurity.
- (c) Humanitarian action must include protection, gender equality, advocacy, participation and empowerment of people as actors in managing their own humanitarian assistance and protection.
- (d) The normative basis of UNICEF's work must systematically build upon the key pillars of international humanitarian law, human rights law and international criminal justice.

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<sup>26</sup> Report on the Second Interagency Workshop on Implementing a Human Rights-Based Approach in the Context of UN Reform (Stamford, USA, May 2003)

<sup>27</sup> Outcome Document Second Global Consultation on HRBAP, Quito, 21-24 September 2003

- (e) There should be more attention for the monitoring of the violation of rights of children and women, advocacy for the safeguards of their rights at all times, and the pursuit of an end to impunity for crimes committed against children and women during armed conflict.

UNICEF's programme guidance does not distinguish between emergency and development programmes. Individual CPC's are hence expected to follow guidelines of both HRBAP and CCC. It is therefore legitimate to assess how the HRBAP of 1998 and the CCC of 2000 have been reflected in the CPC 2003-2005 in Afghanistan.

The UNICEF supported CPC was formulated at the end of 2002, so the new CCC of 2004 could not have influenced the MPO design. However, the MPO should have taken into account the CCCs of 2000 and the MTR should have looked at the CPC considering the new CCCs of 2004. Neither was done in a systematic manner. But in practice, the old CCCs have been covered by the 2003-2005 CPC in all four principal areas:

- (a) *Rapid assessment* of the situation of children and women in areas of crisis; and an objective assessment of the measures needed to ensure effective UNICEF Country Office management of the situation, and of the UNICEF response;
- (b) *Coordination* of sectoral support and ability to initiate appropriate strategies for initial response in collaboration with United Nations and other partners;
- (c) *Programme commitments* in the form of policy and programme guidance in the required interventions to assist field staff in designing and implementing responses to the assessed situation of children and women, in cooperation with national counterparts and international partners (including continued monitoring and evaluation of UNICEF humanitarian activities); and
- (d) *Operational commitments* in terms of organizational capacity, procedures and resources (funds, staff and supplies) to ensure that the appropriate programmatic response will be available on a timely basis (including the ability to provide humanitarian coordination in selected instances).

The CPC even goes beyond the CCCs and takes into consideration most of the issues that 2004 CCCs would later advocate for, e.g. HIV/AIDS and DDR or safety and security of staff and assets.

The MPO mentions that the CPC 2003-2005 is guided by the principles of universal realisation of children and women's rights (see 2.1), but does not make an explicit reference to the HRBAP, which had become part of corporate policy as from 1998. The MTR reports that the CPC had basically been successful in pursuing five strategies: (i) strengthening of household contacts for improving survival and participation of women and children; (ii) making the school the centre for social change in the community, starting with children; (iii) building capacity in various counterpart Ministries through arrangements with leading institutions; (iv) creating an improved environment for children and protecting them from abuse and exploitation and promoting children's participation; (v) strengthening emergency preparedness and response<sup>28</sup>. The CPE cannot fully endorse the positive assessment made in the MTR concerning the implementation of right-based strategies.

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<sup>28</sup> MTR Report section 5.1

**Recommendation 17: Whereas the CPC has largely complied with and even gone beyond the CCC of 2000, there have been some shortcomings, as far as the HRBAP is concerned. Respect of human rights principles is a necessary, but not a sufficient condition for programme strategies to be recognized as a full-fledged HRBAP. There is not enough evidence in the various sectoral programmes that the immediate, under-lying and structural causes of the non-realisation of human rights are sufficiently understood and monitored and that appropriate strategies especially to strengthen the capacities of rights-holders have been formulated. Efforts to strengthen capacities of duty-bearers at the central and provincial levels have by contrast been significant. The next CPC should fully take into account the CCC of 2004 as well as recommendations concerning HRBAP as laid down in the Stamford Consensus Document and the Quito Outcome Document (both of 2003). The CPC should establish an active relationship with national efforts that aim to enhance the human rights environment in Afghanistan, especially the Afghan Independent Human Rights Commission (AIHRC) already supported by UNAMA, OHCHR and UNDP.**

***Gender parity and gender equality***

The Convention on the Rights of the Child (CRC) and the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW) have both been signed by the Government of Afghanistan. They constitute the guiding frame of reference for the UNICEF supported Programme of Cooperation.

The gender dimension is a double concern in all fields of UNICEF supported interventions for the following reasons:

- (a) Half the children and adolescents are girls and their health and education, compared to boys, are more often neglected. In many countries, they have less opportunity to develop their potential and they are victims of discrimination and violence. This is true in the family and in the community through customary practices and in the society through dominant stereotypes and by discriminatory laws.
- (b) The child is by definition a dependent being. More than anybody else children depend on their mothers. It is a recognized fact that the well being of children (boys and girls) is closely linked to the situation, status, well being, knowledge and skills of women as mothers, principal caregivers and major contributors to household production and income. The health, practices, education and socio-economic status of women determine the well-being of the child.

The empowerment of women and girls are hence central to the realization of the rights of children. But the MPO 2003-2005 also emphasizes that women's rights are human rights by themselves. Women's and girls' inequality has important negative implications for the achievement of human development goals in general, beyond those associated with women's reproductive and caring functions.

### Women's suicide

There are no data related on the suicide rate among young women in Afghanistan. Suicide is an individual act but it is addressed to the family and the social environment. The community hides women's suicide and the authorities are reluctant to talk about it. Most of the victims die out of hospital and their death is not declared as a suicide.

The increasing number of suicides by women in Afghanistan is a post-war phenomenon and it is directly related to the difficulty of the community to deal with the war trauma as well as social change. The number of women's suicide by fire is particularly important in Herat. Women in Herat are usually much more educated than the average in Afghanistan. They have more difficulties in accepting the limitations of their rights.

Suicide is often a desperate act against forced marriage and other forms of domestic violence. The problem is that there is no protective structure which works on the prevention of suicide among women and the provision of assistance to the survivors of attempted suicides.

*Interview with the head of Mental Health Hospital  
Kabul*

As far as the situation in Afghanistan is concerned, it is important to remember that in spite of more than a million victims of war, mostly men, Afghanistan is one of the rare countries in the world where the female population is less than male population<sup>29</sup>. It means that during 23 years of war, women died chronically more than combatant men largely because of bad health condition and absence of access to health care, early marriage, multiple pregnancy, poverty and heavy work.

In Afghanistan, violence against women and girls' deprivation of their right to education during the Taliban years shocked public opinion around the world and, beyond its political violence, the rejection of the Taliban regime was justified by the systematized discrimination against women. The fall of the Taliban regime naturally mobilized international organizations to restore women's rights in Afghanistan. While it is true that violence and discriminatory measures against women were pushed to extremes under the Taliban regime, but it is also true that inequality between the sexes, and women's deprivation of their legitimate human rights, have much deeper roots in the ancestral culture of the country.

Afghanistan is a rural country, with a tradition strongly rooted in a patriarchal culture. The attempts of a few enlightened political leaders in the past could not change the dominant cultural practices. Even before the war, only a small minority of the Afghan population living in cities had taken advantage of the social changes and women were a small minority among them. Most of the population was scattered in rural areas, isolated from urban centres with a tribal/community type of social organization in which power was the exclusive property of men. Discriminatory practices against women were part of the dominant norms ruled by customary law.

Empowering women to gain control over the self, over ideology and the resources which determine power is not tolerated by a society where gender relation is based on domination of women by men. In Afghanistan as in other traditional societies, the gender inequality is justified by: (i) acceptance of the traditional role difference as a natural given; (ii) internalization of

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<sup>29</sup> See the Statistical Yearbook 2004 ,Afghanistan Statistic Centre, 2004

dominant gender stereotypes; (iii) socialization of gender inequality through partisan interpretation of religious law and principles. This attitude is rooted in a long process of primary socialization at home reinforced by the secondary socialization at community level, at school and in society.

“Gender” refers to the comparative or differential roles, responsibilities and opportunities for women and men in a given society. Gender relation is a social relation, in which a culture or society prescribes rights, roles, responsibilities, and identities of women and men in relation to one another. In a patriarchal society, norms, values, attitudes and perceptions are not compatible with equal status between women and men.

Strategies to enhance gender equality within a broader human rights based approach to programming should in all cases contain the following elements:

- (a) *Gender socialization.* Primary socialization at home is the most influential system. It can be reinforced or moderated at school and by the social relations away from home, but it remains a determining factor in the shaping of gender relations. To change the discriminatory attitudes toward girls and women a long term programme strategy needs to be conceived, involving communities, teachers and media at national and local levels.
- (b) *Men’s participation in women’s empowerment.* It is difficult and risky to empower women without involvement of men. Men may react negatively to women’s unilateral empowerment with possible adverse effects. Any intervention to make men more gender- sensitive will prepare the ground for gender equality.

Afghanistan is on its way toward democratization. Democracy does not concern only the political life. Equal civil rights for individuals (from any religion, ethnic origin, social class and sex), is the basic values of democracy. Gender equality is one of the conditions to reach the democracy. Political actors should be aware that in a democratic system, the equal right does not stop at the door of the household. Women are entitled to the right to decide for their personal and family lives. The promotion of equal rights of women in public and private spheres should be taken into consideration by the political actors and national media.

**Recommendation 18: Although the CPC 2003-2005 has placed a strong emphasis on child and maternal mortality as well as on girls’ education, there has not been a proper analysis of the situation of girls and women in Afghan society and their relations with boys and men nor has there been an attempt to address the systematic violation of basic human rights of girls and women rooted in traditional values, beliefs and customs. There is a need to gain a more in-depth understanding of the discrimination of girls and women in Afghan society and the structural and under-lying causes that explain why girls and women remain deprived of the realisation of their human rights. The next CPC should support the Government of Afghanistan and civil society to design and implement strategies that empower girls and women and that involve boys and men in this process. The CPC should thereby make a clear contribution to MDG 3 aiming at the progressive realization of gender equality.**

### ***Results-based management and monitoring and evaluation***

Problems affecting children and women arise from a multiplicity of interrelated and interacting causes. Ensuring rights therefore requires an integrated approach based on a careful causality and vulnerability analysis at all levels.

Such an analysis guided the choice of strategies selected to address the rights of children and women and girls included within the UNICEF supported CPC. It drew upon the Preliminary Needs Assessment in December 2001 and was revised during the Joint Donor Missions undertaken in February-March 2002. There have also been an on-going revision and strategy development between line-Ministries and UNICEF and related assessments, surveys and evaluations that set-out needs, priorities, comparative advantages and areas for improvement. Thus the first step of Results-Based Programming, which is adequate causal problem analysis, was largely respected.

Given the relative thoroughness of the problem analysis, one would expect to see the translation of the findings into qualitative and quantitative objectives to describe expected results in programming. However, the MPO did not contain a programme design with objectives that were *SMART* (*specific measurable, achievable, relevant and time-bound*). The programme could have largely benefited from a logframe approach, helping to see the hierarchy of results (vertical and horizontal logic of strategic results or impact, outcomes, outputs and activities) as well as a performance monitoring tool (indicators and sources of verification).

The Annual Management Plans enumerate a list of deliverables in which activities, outputs and outcomes are mixed, sometimes quantified and others not so. Logframes would have considerably helped in planning and monitoring interventions, not to say that they would have made reporting easier.

The Integrated Monitoring, Evaluation and Research Plan (IMERP) of December 2004 is a very welcome (however late) first step to try and systematise performance monitoring, but fails to link evaluation and research to major decision making events.

**Recommendation 19: The design of the next CPC should follow a results-based approach and develop clear results matrices / logframes that demonstrate vertical and horizontal relationships between strategic goals (related to MDGs) and outcomes and outputs. Objectives and qualitative and quantitative indicators should to the largest possible extent be SMART. Goals and objectives need to address the issues that are identified in causal analyses. It is understood that the results framework will be part of the Country Programme Action Plan (CPAP) for the next CPC and relate to the UNDAF outcome document.**

### ***The crucial role of public information and communication***

Public information and (programme) communication are particularly important aspects of the CPC that have not been systematically assessed in the present CPE (see 1.3). "Public information" is focused on the external presentation of UNICEF supported programmes while "communication" is focused on behaviour changes among the Afghan population. Public information was geared towards the international media in the immediate aftermath of the war in 2001. It is presently seeking to strengthen capacities of national media and opinion leaders. Communication has focused on specific issues, e.g. salt iodization and girls' education. To the extent that both strategies address domestic audiences, a case could be made that the two

could in fact be merged or at least be called upon to work closely together as part of a complementary and mutually reinforcing approach.

Both public information and communication seek to provide information and raise awareness among the public concerning social issues in general and the non realization of children's rights in particular. This should ultimately result in overcoming discriminatory and harmful practices concerning children and women. Effective information and communication strategies require an in-depth understanding of the issues at hand (hence the need for strong involvement of specialists, for example, in health and nutrition, in basic education and in child protection), direct contact with and involvement of the targeted audience, and perhaps most importantly, culturally appropriate communication means and strategies. Especially if the aim is to change behaviours, it is not enough to display posters or distribute booklets, especially if these materials have been produced in other cultural contexts. Whether the messages are meant to be informative, educational, inciting or dissuasive, they should suggest a new approach or vision of the subject matter. They should make use of the appropriate cultural codes to allow the receiver to identify with the values and cultural models to which the message refers. That is why the information and communication material should be prepared in close collaboration with cultural actors, using different aspects of the national and local culture. Art, poetry, historical references, popular stories and legends, and different kinds of humour should be used as a mode of expression for specific targets.

Recommendation 20: The CPC should clarify the relation between Public Information and Communication in order to facilitate their mutual reinforcement. Cooperation with national and locally based media (e.g. Afghan Radio and Television, BBC, Free Radio) should be pursued. Greater use could be made of social and cultural actors (artists, poets, writers, humorists etc.) to prepare the communication materials. Iran, Pakistan and Central Asia being culturally close to Afghan people, UNICEF Afghanistan may wish to establish contacts with UNICEF *Communication* teams in those countries to share their experience with them. The communication materials already prepared by them can easily be used in Afghanistan (with some adjustments to the Afghan context).

### **5.3 Strengthening focus, design and integration in wider partnerships**

The UNICEF supported CPC for Afghanistan was primarily designed as an emergency programme supporting the expansion of basic social services to save children's and women's lives, to reduce the high levels of morbidity and mortality, to promote better access to primary education especially for girls and to assist and protect children affected by war. The essential aim was to bring basic social services to the greatest number of people as quickly as possible. UNICEF was one of the organizations that played a pioneering role at that time. It was the right thing to do under the circumstances and the task was to a large extent accomplished in a satisfactory manner.

The situation has changed since 2003. The CPC has evolved in a changing environment, as the country has made progress on the road to peace, security and a stable Government. The international community has pledged to support the new Afghanistan in major ways. Virtually all important development partners are now committed to provide significant external assistance both in terms of funding and in other forms of capacity building. This is notably the case in the areas of health and nutrition and in basic education.

As the new Government presently develops its own policies and strategies, the UNICEF supported CPC has an opportunity to advocate for children's and women's rights and contribute

expertise and experience based on its past programme performance in Afghanistan as well as on solutions developed elsewhere in the world. The Government will seek to bring development to all Afghans and will progressively be able to do so with massive external funding that will complement its own resources. As these resources become available and nation-wide programmes are put in place, the next CPC will be able to gradually decrease its emphasis on direct implementation of specific projects and on national coverage in terms of implementation and focus on advocacy and policy dialogue in favour of specific groups and locations that deserve special attention given UNICEF's mandate and programming approach.

Advocacy should particularly emphasize the reduction of disparities through empowerment of those whose rights are least fulfilled and capacity building of those who have the obligation to promote and protect the rights of these groups. Priority would thus have to be given to women and girls in general and specific poor groups in particular (e.g. remote areas, nomads and ethnic minorities, particularly vulnerable groups). In other words, overall development benefits should reach those whose rights are the most infringed.

Good advocacy needs to go beyond mere recalling of human rights principles. While it is important that the Government adopts adequate legislation and strengthens its law enforcement, the adoption of good policies and strategies requires the demonstration of workable and efficient solutions on the ground that are effective in terms of their benefits for the promotion and protection of children's rights. Good advocacy is hence evidence-based, i.e. fed with good examples from pilot or demonstration projects on the ground, e.g. community-based hygiene and nutrition behaviour change initiatives, village and child-friendly primary schools, second-chance education, child protection initiatives.

Greater emphasis on evidence-based advocacy for the next CPC would entail several shifts in emphasis and also a changing partnership with the Government and other partners in the development process:

- (a) The CPC should be strategically anchored in national policies and strategies as well as in the Millennium Declaration and MDGs with the greatest possible synergy with other UNDAF partners. On the basis of a rights-based causal analysis, strategic objectives need to be formulated especially at the outcome level, i.e. institutional and behavioural changes that are required to empower those whose rights are not or but partially realized and those who have the obligation to promote and protect these rights. The greatest benefit the CPC can have is leveraging national and external resources for the progressive realization of children's and women's rights.
- (b) While the Government will progressively ensure national coverage for basic health and education as well as other social services, the CPC may gradually phase out of large-scale implementation programmes, e.g. the Back-to-School Programme. This should by no means be done abruptly and may take the full duration of the next CPC. Rather than cover all 34 provinces of the country, the CPC may gradually focus on a limited number of geographical areas, in which converging development models are developed and tested that have the potential to feed into advocacy at the regional and or national levels. Experiences could be brought to the attention of Government at various levels, partners in civil society, and other external aid agencies.
- (c) Good demonstration projects should be rights-based and results-oriented and emphasize capacity-building for both rights-holders and duty-bearers. Strong involvement of stakeholders (families, communities) should ensure some degree of

sustainability beyond external support at the respective level. It is important to document the economic dimension of these projects, i.e. inputs provided by and operation and maintenance required from the communities and by local partners (governmental and non-governmental). Factors that contribute to the success of such experiences need to be adequately documented in view of their replicability elsewhere and / or their mainstreaming in a broader regional or national context.

**Recommendation 21: The UNICEF supported CPC needs to evolve from a role in nation-wide implementation of basic social service projects to that of advocate for the realization of children's and women's rights with the aim of leveraging national and external resources required to progressively realize the provisions of the Millennium Declaration and the MDGs in Afghanistan. Advocacy needs to be evidence-based. The CPC should hence focus on low-cost and highly effective workable solutions to realize children's rights at the local and regional levels that can eventually be replicated in other locations and / or mainstreamed in the wider development context. The CPC should consider to geographically focusing on convergence areas, in which all dimensions of children's rights can be addressed in an integrated manner. The CPC should understand itself as part of wider partnerships with evidence-based advocacy for children's rights as its core mission.**



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# **ANNEX 1: TERMS OF REFERENCE**

## **FAST-TRACK COUNTRY PROGRAMME EVALUATION**

**GOVERNMENT OF THE TRANSITIONAL ISLAMIC STATE OF AFGHANISTAN / UNICEF  
07 FEBRUARY 2005**

### **1. Background and Context**

The current Country Programme of Cooperation (CPC) between the Government of the Transitional Islamic State of Afghanistan (hereafter referred to as Government of Afghanistan) and UNICEF covers the period 2003-2005. A Mid-Term Review (MTR) was completed in November 2004. The next CPC cycle will be harmonized among UNDAF partners and coincide with the programme cycle of the interim Poverty Reduction Strategy between the Government of Afghanistan and the World Bank (2006-2008).

The CPC in Afghanistan has operated in a rapidly changing environment and a high degree of insecurity. As a result of elections a new cabinet has recently been installed. Security concerns and the need for military protection have been major factors in the implementation of the CPC.

The UNICEF Country Office in Kabul requested that the strategy development for the next CPC 2006-2008 be supported by a Country Programme Evaluation (CPE). The CPE will have to be implemented in a fast-track mode, as it should feed into the preparation of the draft Country Programme Document (CPD), which will have to be completed by the end of the first quarter of 2005. Draft findings, conclusions and recommendations of the CPE should be available by mid-April 2005 and the full report should be ready for publication by June 2005.

The exercise will benefit from support from the Evaluation Office at New York Headquarters (NYHQ) and the Regional Office for South Asia (ROSA). The CPE Afghanistan will be a pilot case as part of the DFID funded Project for CPE Methodology and Guidance Development, which is being implemented by the Evaluation Office at New York Headquarters.

### **2. Purpose and scope of the Country Programme Evaluation**

The main purpose of the CPE Afghanistan is to feed into future strategy development. The CPE will build on the MTR, but provide a more in-depth assessment of the relevance and appropriateness of the CPC as well as of the role, design and focus of UNICEF support to the realisation of children's rights.

The CPE also asks more fundamental questions about effectiveness and efficiency and addresses dimensions of sustainability and connectedness of supported initiatives in a context of considerable security concerns and high political volatility.

For UNICEF, it is also important to assess progress made with the introduction of the Human Rights Based Approach to Programming and Results-Based Management in a CPC operating in an unstable context. It is also important to assess the CPC's alignment with and contribution to UNICEF's organizational priorities and strategies defined in the Medium Term Strategic Plan (MTSP) as well as in relation to Core Corporate Commitments (CCCs) and the Goals until 2015 (Millennium Declaration, Millennium Development Goals and World Fit for Children).

The scope of the CPE covers the current CPC (2003-2005). To the extent that information is available, attention will be given to lessons learned during the preceding programme cycle,

(especially during the MTR of 2001) and strategic considerations in the preparation of the current CPC.

### 3. Objectives of the Evaluation

The *objectives* of the CPE Afghanistan are the following:

- a) Assess the *relevance* and *appropriateness* of the CPC Afghanistan (i) as to the situation of children and women in a context which is still characterized by a high degree of insecurity and instability, (ii) in the context of national policies and strategies taking into account the important role of external support and (iii) as a reflection of international norms and standards concerning children's rights (especially CRC and CEDAW);
- b) Assess *design, coherence, and focus* of the Country Programme, i.e. the realism and quality of the formulation of objectives and strategies, their adaptation in a volatile environment as well as scope, coherence and focus of the programme given changing security concerns and ad-hoc funding opportunities;
- c) Assess the extent to which the Human Rights Based Approach to Programming as described in Executive Directive CF/EXD/1998-004, the Core Commitments for Children in Emergencies (CCCs) and guidance provided in the Programme Policy and Procedure Manual (PPPM) have been reflected in the design and implementation of the current CPC
- d) Assess the *gender focus* of the CPC, i.e. are the extreme forms of discrimination and exclusion experienced by girls and women in Afghanistan adequately addressed?
- e) Assess the *comparative advantage, roles and coordination mechanisms* of the Country Programme Afghanistan in relation to strategies and activities of other national and external partners, especially the UN agencies and the World Bank as well as bilateral partners that contribute to the realisation of children's and women's rights;
- f) Analyse to what extent activities and results are *sustainable* at their respective levels (communities, intermediate or higher level institutions) and *connected* to local, regional and national capacities and / or other forms of external support.
- g) Contribute to *CPE methodology and guidance development* supported by DFID, especially for CPE in unstable contexts.

N.B. The dimensions of effectiveness and efficiency will not be assessed during this fast-track evaluation due to lack of time. The report will, however, take into consideration the main conclusions and recommendations in this regard which were included in the MTR report.

#### 4. Key questions

##### a) *Relevance and appropriateness*

- i. How adequate and comprehensive is the knowledge as to the situation of children and women in a context which is still characterized by a high degree of insecurity and instability?
- ii. Does the CPC address major issues of non-realization of children's and women's rights?
- iii. How are national policies and strategies reflected in the CPC against the background of the important role of external support in Afghanistan?
- iv. How is the international consensus of the CRC / CEDAW reflected in the implementation and advocacy of the CPC?

##### b) *Design, coherence and focus*

- i. To what extent is programming based on an objective assessment of humanitarian needs and capacity gaps or is programming more driven by funding opportunities with a risk of lack of coherence and relevance? How realistic is programme design given the volatile environment?
- ii. How is the dimension of exclusion on the basis of gender, group and geography addressed in the CPC?
- iii. How does the current Programme address the Millennium Development Goals, the organisational priorities of the MTSP, CCCs, and the World Fit for Children agenda?
- iv. Is the current Programme well focused, coherent and logic? Does it respond to the challenges of national capacities and does it evolve towards a progressive ownership of projects and programmes by the national partners? Does it offer opportunities for partnerships and linkages with other development agencies?
- v. Are UNICEF supported programmes planned and implemented in coordination with other UN agencies as well as the World Bank and bilateral development programmes in Afghanistan? In which areas are there opportunities for joint programmes with other UN agencies?

##### c) *CCC, HRBAP and RBM*

- i. How have the Core Commitments for Children in Emergencies (CCC), as formulated in 2000 and revised in 2004, been applied in the CPC?
- ii. To what extent has the Human Rights Based Approach to Programming as described in Executive Directive CF/EXD/1998-004 been implemented in the CPC?
- iii. In what ways has guidance (especially as to RBM) provided in the Programme Policy and Procedure Manual (PPPM) been reflected in the design and implementation of the current CPC?
- iv. To what extent and in what ways have HRBAP and RBM been applied in programming? What examples are there for strengthening of capacities of rights-holders and duty bearers at different levels (empowerment, support to coping strategies, rights and obligations of women and men)? Are the principles of interdependence and indivisibility of children's rights respected?
- v. How do other development partners perceive HRBAP and RBM?
- vi. How are results defined (especially in terms of outcomes, i.e. institutional and behavioural changes)? How SMART (specific, measurable, achievable, relevant and time-bound) are the objectives? How could HRBAP and RBM be strengthened in the CPC?

### c) Gender focus

- i. How is the concept of gender reflected in programming? To what extent and how does the CPC pay special attention to girls and women's' rights?
- ii. To what extent is the gender dimension included in the situation analysis and other forms of data collection? Are there qualitative and quantitative gender desegregated data?
- iii. Does UNICEF address adequately the extreme forms of discrimination and exclusion experienced by girls and women in the country?
- iv. What contribution is made to the progressive realization of gender parity and gender equality as expressed in the MDGs?

### d) Comparative advantage, roles and coordination mechanisms of the CPC

- i. How have the niche and the comparative advantages of the CPC in the national context been identified?
- ii. What is the role of the CPC? Does it play substitutive, facilitatory and / or innovative roles? Are the definition and the assumption of these roles dynamic?
- iii. How good a partner is UNICEF for national institutions and in the context of external support?
- iv. To what extent is UNICEF support integrated in national planning and coordinated with other external assistance (especially with UN partners, but also with bilateral and other forms of multilateral aid)?
- v. The Government of Afghanistan (GA) is supported by external humanitarian / development and external military forces. Does UNICEF have a clear strategy on how to relate to these forces?
- vi. To what extent and how is the current Programme integrated in the UNDAF process? How are complementarity and synergy assured with the programmes supported by other UN agencies? Are there opportunities for joint programmes with other UN agencies and / or other development partners (e.g. bilateral or other multilateral organizations, e.g. World Bank)? the Government? Does the CP monitor and supervise projects well enough in areas

### e) Sustainability and connectedness

- i. To what extent are activities and results supported by the CPC sustainable at their respective levels (communities, intermediate or higher level institutions)
- ii. How are they connected to local, regional and national capacities and / or other forms of external support?

## 5. Methods

The evaluation will take into consideration commonly agreed evaluation norms and standards (OECD/DAC and Evaluation Associations) to ensure *utility* (ownership by stakeholders), *feasibility* (political viability and cost-effectiveness), *propriety* (impartiality, respect of rights of stakeholders, cultural sensitivity) and *accuracy* (adequate information). UNICEF's *evaluation report standards* and *style guide* will be followed when preparing the evaluation report.

The CPE Afghanistan will to the largest possible extent build on the MTR. The purpose is to limit the transaction costs of exercises, avoiding repetitions and gaps and ensuring a rational and transparent process.

Key methods for the conduct of the evaluation will be the following:

- a) A comprehensive desk review of external and internal documents that are relevant to past and current Country Programmes;
- b) A review of past and recent studies, reviews and evaluations of projects and programmes;
- c) An extensive round of interviews and focus group discussions with key stakeholders in the past and present Country Programmes (Government, NGO's, International Security Assistance Force (ISAF), CBOs, United Nations Assistance Mission in Afghanistan (UNAMA), UN agencies, opinion leaders, children and youngsters, etc. at both national and local levels)
- d) Field visits to the selected zones, provinces and communities to gain first-hand information of the implementation of projects and programmes (pending security clearances)
- e) A synthesis of reviews, interviews and field visits and a annotated outline of the report containing major lines of analysis
- f) A survey among UNICEF staff members of CO Afghanistan involved in programme support;
- g) Organisation of a participatory workshop, during which main findings, conclusions and recommendations of the evaluation will be discussed, validated and finalised.
- h) A broad discussion of the draft evaluation report with national and external partners.

The evaluation will be a participatory process that will give due importance to self-assessment by stakeholders involved in Country Programme design and implementation. All information will to the largest possible extent be triangulated (use of three or more sources of information to verify and substantiate an assessment) and validated. Findings, conclusions, recommendations and lessons learned should clearly be user-oriented and feed into major decision-making during strategy development for the next Country Programme.

The selection of sites for field visits will be inspired by one or more of the following criteria:

- a) the maturity of the programme, project or activity within the Country Programme;
- b) the wealth of experiences and the chances of their generating interesting lessons;
- c) strategic interest of the programme, project or activity for the whole Country Programme;
- d) Interest of the experiences in the context of the inter-agency collaboration of the UN (UNDAF).

## 6. Organisation and Management

The evaluation will be carried out by a technical team of international and national consultants. This Evaluation Team will be composed of:

- a) A senior evaluation specialist of the Evaluation Office of UNICEF New York Headquarters, who will act as team leader;
- b) an international programme evaluation specialist with experience in programming in humanitarian action in unstable contexts covering the areas (girls') education, child protection and gender issues
- c) one national programme evaluation specialist covering the following areas: health and nutrition as well as water and sanitation (detached staff member of Afghanistan Country Office)
- d) a junior evaluation specialist of the Evaluation Office of UNICEF New York Headquarters, who will cover all aspects related to UNICEF programming, including Human-Rights Based Approach to Programming (HRBAP) and Results-Based management (RBM).

Good knowledge of evaluation standards and methodologies and previous experience in evaluation is required for all team members. All members of the team should be highly gender-sensitive. None of the team members should have had recent involvement with the current CPC or should be eligible to play a role in the remainder of the current Country Programme or the next one.

The Afghanistan Country Office of UNICEF will assume responsibility for all aspects related to relations with host country authorities and UN security arrangements. Technical guidance, supervision and support will be provided to the Evaluation Team by the Evaluation Office in UNICEF New York Headquarters. The Monitoring and Evaluation Officer of the Regional Office for South Asia (ROSA) will also provide support to the exercise to the extent of her availability. Support missions are foreseen at the beginning and at the end of the Evaluation Team's activities in Afghanistan (in situ briefing and debriefing)

Major milestones of the evaluation process will be the following:

- a) The Evaluation Team will work in Afghanistan between 07 February and 31 March 2005 for extensive document review, interviews and focus group discussions among staff and partners (national and external), possibly field visits (pending security situation) as well as the preparation of the draft report (including a summary of findings, conclusions and recommendations) and PowerPoint presentation for the CPE workshop (mid-March).
- b) At the beginning of the CPE and no later than two weeks into the exercise, the Evaluation Team will submit an *Inception Report* defining the approaches and methods chosen for the evaluation. Most notably, this report will contain information about the selection of programmes and projects to be assessed more closely as well as the geographical areas to be covered, ultimately depending on their accessibility in view of the security situation. The Inception Report will also include a timetable of activities to be undertaken by the Evaluation Team and a draft *annotated outline* of the evaluation report.

- c) *Findings, conclusions, recommendations* as well as a *draft report* must be available for a CPE workshop, which will be organised on 28-29 March 2005, so as to allow partners in the Country Programme to examine the implications of conclusions and recommendations for the next Country Programme and to set a timetable for implementation.
- d) The *full draft report* will thereafter be finalized in the respective home countries of the consultants by 15 April 2005. The report will have to be revised and ready for publication by 30 June 2005.

The Evaluation will benefit from the support of a Reference Group composed of representatives of major governmental and non-governmental organisations as well as UN agencies and bilateral and multilateral partners associated with the CPC. The Reference Group will meet in the beginning of the exercise (early February 2005) and at the stage of the formulation of conclusions and recommendations (workshop end-March 2005). Specific tasks include the following:

- a) Advise on scope and content of the CPE, as stated in the TOR, and the role that can be played by this exercise for strategy development in view of the next CPC and in relation to UNDAF;
- b) Make suggestions on ways and means to implement the CPE, e.g. for the document review, rounds of interviews and focus group discussions, possible field visits, validation of findings and conclusions etc.
- c) Once draft findings, conclusions and recommendations have been formulated, provide feedback and contribute to their validation and formulation.

The CPE will be jointly overseen by the Government of Afghanistan and the UNICEF Country Office in Kabul. Close coordination will be maintained with the Resident Coordinator of the UN in Kabul.

07 February 2005



## ANNEX 2: LIST OF PERSONS MET

Full name	Title / function	Agency / organization
<b>GOVERNMENT</b>		
<b>Kabul</b>		
Shaista Mir	President	Ministry of Hajj (Religious Affairs)
Moshref Agha	Rural Water Supply Advisor	Ministry of Rural Rehabilitation and Development
Jan Mohammad	Rural Water Supply Advisor	Ministry of Rural Rehabilitation and Development
Abdol Rahman Maqool	Director General of Statistic	Ministry of the Interior
Mr. Samandari	Director Juvenile Justice	Ministry of Justice
Habibollah Moshakhas	Judge Legal Support	Ministry of Justice
Mohd Rostam	Head of Broadcast Baihaqi	Ministry of Information and Culture
Gholam Mustafa	Head of Planning	Central Statistical Office
Azizollah Faqiri	Head of Education	Central Statistical Office
Mohd Azam Karbolai	Head of Planning	Ministry of Education
Dr. Najib	Director of Public Nutrition	Ministry of Public Health
Dr. Faizollah Kakar	Deputy Minister for Policy, Planning and Preventive Medicine	Ministry of Public Health
Dr. M. Mostafa Mastoor	Head of Grant and Contract Management Unit (GCMU)	Ministry of Public Health
Dr. Abdollah Salam	Public Health and Research Centre	Ministry of Public Health
Dr. Mehr Nisaar	Director Women's and Reproductive Health	Ministry of Public Health
Dr. Katja Schemionek	Grants and Contracts Management Unit (GCMU) / External Coordination Technical Assistance	Ministry of Public Health
<b>Herat</b>		
Dr. Raufa Niazi	Provincial Director	Ministry of Public Health, Herat
Dr. Khalil Tawakal	Deputy Director	Ministry of Public Health, Herat
Dr. Aref Shahram	Director Herat Hospital	Ministry of Public Health, Herat
Dr. Hassan Farid	Maternity Advisor Herat Hospital	Ministry of Public Health, Herat
Dr. Waheed	Regional Extended Programme on Immunisation (EPI) Management Team (REMT) Manager	Ministry of Public Health, Herat
Mr. Shah Rassool Ehrari	Head of Nursing Herat Hospital	Ministry of Public Health Herat
Dr. Sayedah	Head of Maternity Ward Herat Hospital	Ministry of Public Health Herat
Zamir Badar	Head of Education	Ministry of Education Egeel Province
Salahoddin	Head of Sarwestan High School	Ministry of Education Egeel Province
Haji A.Hamid	Assistant & Member of Education Monitoring	Ministry of Education Egeel Province
A.Hadi	Teacher Sarwestan High School	Ministry of Education Egeel Province
Rahima	Teacher Sarwestan High School	Ministry of Education Egeel Province
Nazaneen	Teacher Sarwestan High School	Ministry of Education Egeel Province
Farzana	Teacher Sarwestan High School	Ministry of Education Egeel Province
Arifa	Teacher Sarwestan High School	Ministry of Education Egeel Province
Shafiq	Teacher Sarwestan High School	Ministry of Education Egeel Province
Najiba	Teacher Sarwestan High School	Ministry of Education Egeel Province

Maliha	Teacher Sarwestan High School	Ministry of Education Engeel Province
Soma Ahmady	Teacher Sarwestan High School	Ministry of Education Engeel Province
Farzana	Teacher Sarwestan High School	Ministry of Education Engeel Province
Elhama Zamani	Student	Sarwestan High School
Huma Zamani	Student	Sarwestan High School
Mohamaddin Fahim	Director	Ministry of Education Herat
Aziza Sayee	Deputy Director	Ministry of Education Herat
Noor Mohamad Ehrary	Administrative Deputy Director	Ministry of Education Herat
Ghula Mahboob Dostyar	Supervision Director	Ministry of Education Herat
Aqa Mohammad Sidiqi	Director	Ministry of Rural Rehabilitation and Development Herat
Eng. Fazil Ahmad Barak	Provincial Management Advisor	Ministry of Rural Rehabilitation and Development Herat
Sadat Arzoo	National Solidarity Programme	Ministry of Rural Rehabilitation and Development Herat
Mawlawi Mohammad Alim	Acting Director	Ministry of Hajj (Religious Affairs)
Mawlawi Mohammad Afzal	Deputy Director	Ministry of Hajj (Religious Affairs)
Mawlawi Mohammad Akbar	Deputy Director	Ministry of Hajj (Religious Affairs)
<b>Mazar</b>		
Eng. Abdol Besaat Aaini	Head	Ministry of Rural Rehabilitation and Development Mazar
Habibollah Amerkhel	Provincial Management Advisor	Ministry of Rural Rehabilitation and Development Mazar
Dr. Merwai Rabi	Provincial Health Director	Ministry of Public Health Mazar
Dr. Asadollah Sharifi	Regional Extended Programme on Immunisation (EPI) Management Team (REMT) Manager Northern region	Ministry of Public Health Mazar
<b>EXTERNAL PARTNERS</b>		
<b>Kabul</b>		
Mohammad Arash	Project Manager	Agriculture & Construction Development (ACD)
Lourdnt Vgloor	Project Manager	Danish Committee for Aid to Afghan Refugees (DACAAR)
Eng. Bismellah	Supervisor	Danish Committee for Aid to Afghan Refugees (DACAAR)
Thea Anderson	Deputy	Save The Children (STC)
Eng. Sher Ali	Technical Assistant	Save The Children Alliance
Dr. Ahmad Abd El Rahman	Medical Director	Save The Children Alliance
Dr. Mohamd Wazir Wazir	Extended Programme of Immunization (EPI) Advisor	Save The Children Alliance
Dr. Aqella Noori	Health Coordinator	Save The Children Alliance
Sylvi Hill	Programme Manager	Children in Crises (CIC)
Eng. Yousuf	Director	Aschiana
Dr. Mohd Nazeer	Project Officer	Child Fund Afghanistan (CFA)
Najiba	Project Supervisor	Care International
Noriko Osada	Consultant	Aga Khan Foundation
Shahboddin Ahmad	Project Manager	Aga Khan Foundation
Shahidol Hassan	Project Coordinator	Aga Khan Foundation
Vikas D.	Field Officer	John Hopkins University
Dr. L. P. Singh	Data Management Advisor	John Hopkins University
Ms. Noriko Fujita	Reproductive Health Chief Advisor	Japan International Cooperation Agency (JICA)
Saqib Younus	Programme Officer	Voice of Women Organization (VWO)
Dr. M.Yusas Ehrary	Medical Coordinator	Danish Afghanistan Committee (DAC)

Karim	Manager	International Rescue Committee (IRC)
Barbara Kaursten	Administrator	Malteser
Nadia Sakhi	Admin Officer	Women Activities and Social Services Association (WASSA)
Dr. Akbar	Project Manager	Coordination of Humanitarian Assistance (CHA)
Malalai Emadi	Education Officer	Catholic Relief Services (CRS)
Dr Mohamad Ismail Hail	Health Advisor	Ibne Sina Public Health Program For Afghanistan
Dr. Hedayatollah Stanekzai	Director	Medical Refresher Courses for Afghans (MRCA)
<b>Herat</b>		
Dr. Sayeed Rashid	Provincial Health Advisor	United States Agency for International Development (USAID) / Rural Expansion of Afghanistan's Community -Based Healthcare (REACH)
Dr. Zarif Ahmad Akbaryan	Health Management Information Systems (HMIS) Specialist	United States Agency for International Development (USAID) / Rural Expansion of Afghanistan's Community -Based Healthcare (REACH)
Eng. Mohamad Alim Faizi	Field Manager Water Supply	Danish Committee for Aid to Afghan Refugees (DACAAR) - Herat
Eng. Bismellah Mowaffaq	Supervision Team Leader	Danish Committee for Aid to Afghan Refugees (DACAAR) - Herat
Eng. Toryalai Sadiq	Assistant Supervision Team Leader	Danish Committee for Aid to Afghan Refugees (DACAAR) - Herat
<b>Mazar</b>		
Shameem Ahmad	Project Manager Health	Bangladesh Rural Advancement Committee (BRAC) - Mazar
Dr. Mohamad Abdol Baqi	Hospital Management Expert	Bangladesh Rural Advancement Committee (BRAC) - Mazar
Dr. Mohamad Hassan Hossain	EPI Supervisor	Bangladesh Rural Advancement Committee (BRAC) - Mazar
Abdol Wahis	Sector Specialist	Bangladesh Rural Advancement Committee (BRAC) - Mazar
Dr. Rahima Zia	Programme Development Manager	Bangladesh Development Forum (BDF) - Mazar
Mr. Golbuden	Field Officer	Adventist Development and Relief Agency (ADRA) - Mazar
Mr. Enayatollah	Project Coordinator	People in Need Foundation (PINF) - Mazar
Vladimir Lima	Programme Officer	People in Need Foundation (PINF) - Mazar
Eng. Naqibollah	Head of engineering	Samaritan's Purse - Mazar
James Bavler	Country Director	Samaritan's Purse - Mazar
Eng. Mohammad Shah	Program Manager	Zuid Oost Azie (ZOA) - Mazar
Eng. Zikrollah Khorram	Senior Project Manager	Zuid Oost Azie (ZOA) - Mazar
Mannu Pereira	Deputy Country Director	Zuid Oost Azie (ZOA) - Mazar
<b>UN AGENCIES, PROGRAMMES AND FUNDS</b>		
<b>Kabul</b>		
Lotfollah Safi	Education Coordinator	United Nations Education, Scientific and Cultural Organization (UNESCO)
Mahbooba Abawi	Admin Officer	Food and Agriculture Organization (FAO)
Sukanta Sarker	Technical Advisor	United Nations Population Fund (UNFPA)

Meryam Aslan	Head of Office	United Nations Development Fund for Women (UNIFEM)
Ashok Nigam	Director	United Nations Assistance Mission in Afghanistan (UNAMA)
Sanjana Quazi	Special Assistant to the Deputy Special Representative of the Secretary General	United Nations Assistance Mission in Afghanistan (UNAMA)
Toshiko Kyahara	Programme Officer	World Food Programme (WFP)
David McLoughlin	Head Food For Education Programme	World Food Programme (WFP)
Craig Naumann	Research and Manager Food For Education Programme	World Food Programme (WFP)
Patrick Fruchet	External Liaison Officer	United Nations Mine Action Centre in Afghanistan (UNMACA)
Mobammad Tahir Wardak	Communication Senior Officer	United Nations High Commissioner for Refugees (UNHCR)
Adela Mubasher	Maternal and Child Health (MCH) Programme Officer	World Health Organization (WHO)
Dr. Dr Riyad Musa Ahmad	Water and Sanitation Officer	World Health Organization (WHO)
Dr. Naveed Sadozai	Polio Officer	World Health Organization (WHO)
Dr. Abdi Momin Ahmad	Primary Health Care (PHC) Officer	World Health Organization (WHO)
Eng. Khabir Amin	Water Environment and Sanitation (WES) Officer	World Health Organization (WHO)
Shafiq Ahmad	Assistant Country Director	United Nations Development Programme (UNDP)
Miwa Keiko	Education Specialist	World Bank
Habibollah Wajdi	National Officer	World Bank
Dr. Kayhan Natiq	Health Specialist	World Bank
<b>Kandahar</b>		
Bernard Doyle	Head of Sub-Office	United Nations High Commissioner for Refugees (UNHCR)
Abu Diek	Head of Sub-Office	United Nations Assistance Mission in Afghanistan (UNAMA)
Abdol Qader Qayoumi	Area Manager	United Nations Assistance Mission in Afghanistan (UNAMA)
Nadir Habib	Programme Officer	World Food Programme (WFP)
Zainolabuddin Hamid	Regional Engineer	United Nations Office for Project Services (UNOPS)
Soltan Ghazialam	Engineer	United Nations Office for Project Services (UNOPS)
Dr. Shahwali Popal	National Health Coordinator	World Health Organization (WHO)
<b>Herat</b>		
Ahmad Jama	Head of Programme	World Food Programme (WFP) Herat Area Office
<b>Mazar</b>		
Dr. Mir Ahmad Ghaffari	Acting National Health Coordinator	WHO Mazar
<b>UNICEF</b>		
<b>Kabul</b>		
Bernt Aasen	Representative	UNICEF Kabul
Sikander Khan	Senior Programme Officer	UNICEF Kabul
Deguene Fall	Project Officer Monitoring & Evaluation	UNICEF Kabul
Norah Espejo	Head of Section Water, Environment and Sanitation (WES)	UNICEF Kabul
Samuel Mawunganidze	Project Officer, Water Environment and Sanitation (WES)	UNICEF Kabul
Zahia Stanekzai	Assistant Project Officer Water Environment and Sanitation (WES)	UNICEF Kabul
Nakila Afzali	Assistant Project Officer Water Environment and Sanitation (WES)	UNICEF Kabul

Samay Saquib	Project Officer Water Environment and Sanitation (WES)	UNICEF Kabul
Ahmad Zia	Assistant Project Officer Water Environment and Sanitation (WES)	UNICEF Kabul
Kunihiko Chris Hirabayashi	Head of Section Health and Nutrition	UNICEF Kabul
Fitsum Assefa	Project Officer Nutrition	UNICEF Kabul
Edward Carwardine	Communication Officer	UNICEF Kabul
Montse Povil	Programme Communication Officer	UNICEF Kabul
Ibrahim Sesay	Project Officer Child Protection	UNICEF Kabul
Fazlol Haque	Project Officer Education	UNICEF Kabul
Daisuke Kanazawa	Project Officer Education	UNICEF Kabul
Dr. A. S. Ghafari	Technical Officer Education	UNICEF Kabul
Jawad Mofleh	Assistant Project Officer - IDPs/Returnees Reintegration Liaison	UNICEF Kabul
Sami Hashemi	Project Officer Child protection	UNICEF Kabul
Najibullah Hameem	Project Officer Juvenile Justice, Child Protection	UNICEF Kabul
Dr. Nick-Mohammad Attai	Provincial Project Officer Ghazni	UNICEF Kabul
Anowara Bari	Budget officer	UNICEF Kabul
Laylee Moshiri	Resident Project Officer	UNICEF Central Region Zone Office
Ghulam Rafiqi	Technical Officer	UNICEF Central Region Zone Office
<b>Mazar</b>		
Gepke Hingst	Resident Project Officer	UNICEF Mazar

Benjamin Perks	Project Officer Child Protection	UNICEF Mazar
Eng. Sibghatullah Salimi	Technical Officer WES	UNICEF Mazar
Dr. Rawnak Khan	Project Officer Health	UNICEF Mazar
Marisabel Gouverneur	Midwifery Advisor	UNICEF Mazar
Dr. Fazil Ahmad	Provincial Project Officer Faryab	UNICEF Mazar
Eng. Ahmad Shah Azizyar	Provincial Project Officer Saripul	UNICEF Mazar
Farid Dastgeer	Provincial Project Officer Jawzjan	UNICEF Mazar
Dr. Attiqollah Amiri	Provincial Project Officer Samangan	UNICEF Mazar
Hashmat Latifi	Programme Assistant for WES, Education and Child Protection	UNICEF Mazar
Maulooda Yahquby	Project Assistant Health/Nutrition	UNICEF Mazar
Zakia Begzad	Finance Assistant	UNICEF Mazar
Karima Zia Haidari	Admin Assistant	UNICEF Mazar
Eng. Enayetollah Siddiqi	Supply Assistant	UNICEF Mazar
Eng. Zabiollah Wahedi	Assistant Logistics Officer	UNICEF Mazar
<b>Kandahar</b>		
Selim Ahmed	Resident Project Officer	UNICEF Kandahar
Zarghuna Kochi	Admin Assistant	UNICEF Kandahar
Rahmatollah Quraishi	Assistant Project Officer Monitoring and Evaluation	UNICEF Kandahar
Eng. Nazar Gul	Technical Officer Education	UNICEF Kandahar
Ahmad Taher Tahiri	Provincial Project Officer Nimroz	UNICEF Kandahar
Abdol Wahid Wahidi	Provincial Project Officer Helmand	UNICEF Kandahar
Mohd Ibrahim Shinwari	Provincial Project Officer Uruzgan	UNICEF Kandahar
Mohd Jan Mehrabi	Provincial Project Officer Kandahar	UNICEF Kandahar
<b>Herat</b>		
Baba Danbappa	Resident Project Officer	UNICEF Herat
Qasim Nazari	Provincial Project Officer Badghis	UNICEF Herat
Aysha Ghafari	Provincial Project Officer Herat	UNICEF Herat
Abdol Latif Salem	Assistant Project Officer Planning Monitoring and Evaluation	UNICEF Herat
Rabbani Wardak	Project Officer Health	UNICEF Herat
Alaa Al-Alami	Operations Officer	UNICEF Herat
Lailoma Malikzada	Senior Finance Assistant	UNICEF Herat
Aminollah Azhar	Admin Assistant	UNICEF Herat
Abdol Qadeer	IT Assistant	UNICEF Herat

Nafissa Noorzai	Radio Operator	UNICEF Herat
Nasratollah Shahnan	Supply Procurement Assistant	UNICEF Herat
Haji Abdol Mobin	Driver	UNICEF Herat
Mohammed Rafeeq	Driver	UNICEF Herat
Abdol Wasi Azimee	Driver	UNICEF Herat
Mohammed Naeem Faqiree	Driver	UNICEF Herat
Sirajoddin Noorzai	Driver	UNICEF Herat

### **ANNEX 3: LIST OF DOCUMENTS CONSULTED**

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## **ANNEX 4: GENDER RELATIONS IN AFGHANISTAN**

*By Nouchine Yavari d'Hellencourt*

### **Introduction**

Gender-based violence is one of the dimensions of all war, armed conflict and displacement. There is a positive correlation between armed conflict and domestic violence, sexual abuse and exploitation, rape and forced and/or early marriages and trafficking girls and women during the war. Among refugees and displaced persons, adolescent girls and women are particularly at risk and often victim of violence. These are additional traumatic experiences in addition to the loss of husbands and sons, as women are obliged to leave home and community and fight to protect other family members from all kinds of dangers.

But beyond the traumatizing experience of war and displacement, during two decades of an extremely difficult situation, Afghan women have also improved their capacities and accumulated a constructive experience of resistance and ability to fight for survival, often in the absence of the male family members who were in combat on the front, or who were dead or out of the country. As refugees they also had to lead the families and sometimes even their communities abroad.

Before the war only a minority of Afghan women could have access to education and confirm their ability to play important roles in society and get access to the positions requiring leadership. But they usually belonged to the socio-cultural or political elite. The war revealed the extraordinary capacity of ordinary Afghan women to become actors of change in their own community. Women who could prove their capacity and their quality of leadership during and after the war are respected by the community, but it does not mean that their rights are recognized.

Since the Transitional Government, the political participation of women is considered as one of the conditions of democracy and changes have taken place with an improvement in the opportunities for women. Several women are members of the new Government and the number of female employees in administrative functions in the state institutions is increasing. But it concerns very small numbers mostly in urban areas.

Afghanistan is a rural country, with a tradition strongly rooted in a patriarchal culture. The violence and discriminatory measures against women under the Taliban regime should not make us forget that gender inequality and women's deprivation of their legitimate human rights have much deeper roots in the ancestral culture of the country.

### **Gender relations and community regulation**

Afghanistan is a Muslim country, which, in its religious practice, refers to the Hanafi school, one of the four schools of Sunni Islam. Afghan civil rights are deeply rooted in the Islamic law, the *shari'a* that defines the rights of the woman as an individual, member of the family and of the community. Gender inequality indeed exists in Islamic law, conceived from various interpretations of the *shari'a*, but they also grant women unalienable rights such as the right to receive an education, to have a professional activity, to inherit (from her parents, husband, and even children), to have economic independence, and to freely remarry after a divorce or the death of her husband.

Yet, family life and community affairs in Afghanistan are ruled by customary law rather than by the *shari'a*, or by the civil law. Customary law is a collective construction, which gives priority to the cohesion of the group. The customary law resists social change and even religion, if it does not go into the same direction. Customary law is based on three principles: age, sex, and belonging to the community. It favours the father over the son, the man over the woman, and the interest of the community over the individual.

The Afghan communities are patriarchal with a strong hierarchy of power based on the primary criteria of age and sex. The regulation of community life is performed by the customary law and the rights and duties of female members of the community are defined within this construction. Any changes questioning the sacred values and the laws of the community are perceived as a risk for its identity and power structure. The resistance to change is supposed to prevent any risk of alteration of the values, on the basis of which the community is constructed.

The two fundamental arguments to justify unequal gender relations in Afghanistan are usually "respect of tradition" and "Islamic principles". In reality the most deep-seated cause of resistance to gender equality is based on the preservation of the community and its interest. The community system with its values and modes of regulation is a collective construction, which answers to the social, political and economic needs of people belonging to it. Its preservation guarantees the identity and the perpetuation of the group and the power of its leader.

The social, economic and political life in Afghanistan is regulated through three systems of law: official law, based on the Constitution, Islamic law based on interpretation of religious precepts (*fiqh*)<sup>30</sup> and customary law (*urf*)<sup>31</sup> based on ancestral values and traditional practices. The legal status of women is often uncertain and in practice Afghanistan's courts have been applying *Shari'a* and customary law to cases relating to women. However, the most discriminatory practices against women are those justified by the customary law and the problem is that the customary law instrumentalizes the religion without necessarily respecting its values. The religion is used by the customary law only when it is not in contradiction with the value of the community.

As Afghans are in majority Muslim, the customary law (which is a secular law) makes reference to Islam to reinforce its impact and provoke confusion particularly for women. It is much more difficult for Muslim women to contest a discriminatory law when it is presented as belonging to the religion. Despite their strong belief in Islam, not all Afghans have a good knowledge of their religion and the Islamic law.

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<sup>30</sup> *Fiqh* is the jurisprudential corpus developed by the Islamic jurists (*ulema*) on the basis of the principles of Islam with reference to the verses of the Koran. There are different approaches and interpretations according to the different Sunni and Shi'a schools, and between *ulema* belonging to the same school, but the differences concern derivative rights and not the main rights.

<sup>31</sup> *Urf* is the secular law and tradition, based on the values and norms of the civil society or community. *Urf* can be different from one region to the other. Islam recognizes the *urf* only if it is not in contradiction with the Islamic values.

## Women's rights according to religion and in customary law

A few examples show the distance between women's rights according to Islamic or customary law:

- *In Islamic law*, no marriage can take place without the man making, according to his financial means, a gift (*mahr*) to the woman he weds. The *mahr* is one of the conditions for a religious marriage (*nikoh*) to be legitimate. It is both a sign of respect and a guarantee for the woman. The parents of the bride and groom discuss, before the wedding, the nature and importance of the *mahr* which can be a sum of money, real estate, or anything of value<sup>32</sup> which will then belong to the woman.
- *In customary law*, the *mahr* is replaced by the *tuyana*, a sum of money or other property that is given not to the bride herself but to her father. The *tuyana* is also discussed before the wedding and represents an important financial sacrifice to which the groom is bound, in order to get married. The *tuyana* is therefore the price of the girl, paid to the head of the family who will keep it. It is never transferred to the daughter.
- *In Islamic law*, a woman inherits from her father, her mother, her husband, her children, and under certain conditions, from other members of her family. A man inherits more than a woman<sup>33</sup> but the principle of a right to inherit is undisputable for a woman as daughter, wife and mother- although the inheritance is not equally divided between male and female members of the family.
- *In customary law*, women are taken care of by the family but they don't inherit from their fathers or husbands. That is perhaps why it is shameful in the community system to not protect a widow. The widow will remain in her family in law, and if she is young, she is often encouraged to marry her brother in law in order to be able to take care of her children within the community.
- *In Islamic law*, the family (including the husband, father, brother or son) has no right on the properties of the woman (*mahr*, inheritance, salary or business) and she has no obligation to spend anything for her family. She can even freely (just as a man can) choose an heir (a relative, or a person outside the family, or an institution) for up to one third of her patrimony<sup>34</sup>.
- *In customary law*, considering that the woman has no right to inherit, to receive her *mahr*, or to work outside home, she is (if she doesn't receive anything from her own family) economically deprived of everything and depends totally on her husband, father or brother (if she's not married). The husband, father or brother can forbid her to go on with her studies or to have a professional activity.

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<sup>32</sup> The nature of the *mahr* is not necessarily material. According to a *hadith* (saying of the prophet), a poor man who had nothing to offer to his future wife came to the prophet for a solution. The prophet suggested he teach his wife to read as *mahr*.

<sup>33</sup> This difference is in the logic of the Muslim conception, which makes the man solely responsible for the support of his family (wife, kids and parents if they are in need). The wife has no financial responsibility towards her husband and children. Even towards the parents, if there is a son, the daughter has no financial responsibility (regardless of economic conditions).

<sup>34</sup> The other two thirds will be divided between the members of the family according to the rules of the *shari'a*.

- *In Islamic law*, a widow has the right to remarry and to choose freely her future husband, and, considering that she has no obligation to financially support her family, it is the family of her deceased husband who is in charge of supporting the children.
- *In customary law*, the widow does not remarry, or if she does, she marries one of her husband's brothers (regardless of age or family situation). For a family in law to let go of a widow is considered dishonour. The customary obligation to keep the widow within the husband's family is a protection for her and her children. A woman without a man is neither respected nor protected in the society, she is therefore taken care of by her family in law until the end of her life.
- *According to the Muslim law*, marriage is a freely accepted contract between the two parties (the bride and groom)<sup>35</sup>. A marriage contracted under constraint, ruse, or by cheating is not valid.
- *In customary law*, girls and boys are often married without their consent. Some marriages are even concluded by the parents before the children are even born.
- *In Islamic law*, divorce is considered as a sometimes "necessary evil". Traditionally, it is the man who decides to divorce. But the woman can also ask for it if the man doesn't support the family, is sterile or impotent, in case of severe mental disease or of socially unacceptable conduct (obvious immorality, violence or crime). In such cases, the judge will decide to grant the divorce even without the husband's consent.
- *In customary practice*, divorce is completely out of the question. Even if the husband doesn't want to live with his wife any more, whatever the reason, divorce is not admitted by the community. Getting a divorce is dishonour for the whole family.

Islamic law is derived from the fundamental principles of Islam mentioned in the Koran and in some of the *hadith-s* (acts and words of the Prophet) which are considered as authentic<sup>36</sup> and most credible. Some of the Koranic rules are not supposed to be interpreted. But they are rare<sup>37</sup> and do not concern the social life of Muslims. At the same time many of the *ulemas* from the Sunni branch recognize the necessity of re-interpretation of the Islamic law which regulates the social and family life in order to better apply the spirit of the Koran to the modern times. The argument is based on examples from the past. It was the case of slavery<sup>38</sup> before, and if it is possible to elaborate a new approach and interpretation to reject the practice of slavery, other practices which are unacceptable today, such as early and forced marriage or lapidating,

<sup>35</sup> Considering the fact that marriage is authorized right after puberty, the consent of the bride's father is generally required for a first marriage. But for a second marriage, the woman decides for herself.

<sup>36</sup> The corpus of *Hadith-s* has been developed during the time of the Prophet and after. Some of them are not considered as authentic by the specialists of *Elm-ul-Hadith* (Science of *Hadith-s*), but they are believed by people and used as religious references and source of confusion among Muslims.

<sup>37</sup> For example the consumption of pork or the use of substances which alter one's consciousness (Alcohol or drugs)

<sup>38</sup> For example, slavery was accepted by Islamic law (as in secular law) and not forbidden by *ulema-s*. Today no religious authority justifies slavery. They argue that the Koran never defended slavery and mention verses, which advise Muslims to be kind and just with slaves and promise big rewards to those who liberate them. The reasons why Islam did not forbid slavery are explained by the acceptance of this practice by society at that time and the necessity of it for some extremely poor communities who had no other choice to survive. The new interpretation of the *ulema-s* is based on: 1) recognition of the evolution of the human society and 2) confirmation of the principles of justice and humanity of Islam.

can also be revised and submitted to new interpretations in order to answer the new demands of Muslim society and in conformity with human rights of women.

Afghanistan belongs to the Hanafi School, one of the Sunni branches of Islam, which represents one of the interpretations of Islam. But Islam does not prevent Muslims to refer to other interpretations provided by other Islamic schools. The Islamic jurisprudence and laws are diverse and have the potential to promote gender equality as a human right within the Islamic principles. Better knowledge of contemporary Islam, *Shari'a* and its different interpretations in various contexts will be particularly helpful for Afghan women and men in post-war society.

### **Conclusion**

In the social and cultural sphere, it is not possible to go ahead at a faster pace than that allowed by society. The best way to reach the goal is not always the shortest. Time is needed for Afghan society to be deeply convinced that gender equality is not only a fundamental right of women but also one of the conditions of social, political and economic development of their country.