1. EXECUTIVE SUMMARY

2010 was a year of transition into the new Country Programme as UNICEF worked to ensure that the programme contributes to the ongoing reform agenda of the Government of Turkmenistan. Significantly, UNICEF worked with the Medjlis on areas of juvenile justice and enhancing knowledge and practice of the CRC. Other achievements involved the support to the preparation of a third and fourth periodic national report on the CRC. An MOU was signed between the Ministry of Health and Medical Industry (MOHMI) and UNICEF for the procurement of vaccines, supplies and cold chain equipment. In education, the focus was on disseminating useful practices and norms from the Child Friendly Schools initiatives to teachers, school managers, communities and children to support the ongoing reforms in the education sector.

The year saw strong articulation of a reform agenda in all sectors, the overarching goal being to bring the country’s institutions, norms, processes and methods of delivery up to international standards. The first phase of reform is addressing the infrastructure, equipment and upgrading of other elements related to the material environment – in schools, health posts, and hospitals. UNICEF’s role in this phase is to help promote appropriate standards and processes to optimize these hardware elements. The Country Office accordingly is engaged in a series of capacity development and knowledge management initiatives to help upgrade the technical, professional and normative dimensions of the reform process.

In keeping with UNICEF’s emerging focus on equity within the framework of the Millennium Development Goals (MDGs), the Government of Turkmenistan notably has proposed an overall framework for regional development that addresses the differential rates of growth across the country. Importantly, the Government continues its efforts to accede to international conventions appropriate to its role as an active member of the UN. Since the country has signed the Convention on People with Disabilities and ratified ILO Convention 182, UNICEF in 2011 will work closely with the Government and nascent civil society organisations to ensure that national legislation, regulation and programmes reflect obligations to children assumed through these conventions.

2. COUNTRY SITUATION AS AFFECTING CHILDREN AND WOMEN

Even as the global financial crisis affected most countries, the IMF reported that Turkmenistan’s economy remained resilient. As part of the reforms the Government has stated its intention to introduce international standards in finance, accounting and statistics. Real gross domestic product (GDP) grew by 9.4 percent in 2010, reflecting continued growth in public investment spending. Inflation slowed significantly from 8.9 percent in 2008 to 0.1 percent in 2009 primarily due to falling import prices coupled with a stable exchange rate, a more liberal trade regime, and increased access to foreign exchange. At 7.8 percent of GDP, the surplus of the state budget exceeds the target. While total revenues fell as a percent of GDP, current expenditures increased on account of higher education and social security spending and doubling of capital spending. The budget surplus was saved in the Stabilization Fund, the total value of which is estimated at 15 percent of GDP.

In 2011 more than 75 percent of the national budget will be allocated to the social sphere: education, science, health, culture and social welfare. This is an increase of 28.3 per cent over the amount allocated in 2010. The health sector will receive 20.7 percent more funds than in 2010 and the provision of social welfare will increase by 35.4 percent. A number of initiatives were undertaken with partners to ensure not only the above enhancements but also social protection of the vulnerable segments of the population. Salaries, pensions and payments to people with disabilities, children and
families were increased by 10% at the beginning of the year to ensure reasonable living standards.

Turkmenistan's HDI is 0.669 that places it 87th out of 169 countries with comparable data. While Turkmenistan has already achieved gender parity in school enrolment along with a high level of political participation of women, absence of gender-specific statistics constrains a full understanding of the nature of gender equity.

The national reform agenda is driven by the goals and strategies of the National Programme for Social and Economic Development of Turkmenistan for 2011-2013. The focus on aligning national legislation with international standards led to several positive outcomes. In May 2010 the criminal code was amended to prescribe penalties for all forms of human trafficking. On 27th September 2010 the Medjlis of Turkmenistan ratified ILO Convention 182. The Government of Turkmenistan prepared its periodic country report on the implementation of CRC and CEDAW. It made efforts to strengthen the health system through the introduction of contemporary approaches in health management systems. The new state medical university of Turkmenistan was opened with a capacity of 3,000 students. The Ministry of Health and Medical Industry inaugurated a complex of modern health facilities in Ashgabat.

Responding to a significant outbreak of type 1 polio in Central Asia, the Government through sensitive surveillance, combined with good quality immunization rounds, covered over 95% of the population. Significantly, based on an assessment undertaken in 2009 and 2010, Turkmenistan became the first country in the WHO EURO region certified as having eliminated malaria.

Although the country has not reported active HIV cases, the sub-region exhibits rapid increase in the incidence of HIV/AIDS. While messages on HIV prevention are developed and disseminated, discussions to strengthen HIV surveillance and tackle stigmatization have been initiated.

The PMTCT protocols are in place but they are not integrated in the peri-natal care system, and information about the availability of ARV treatment for pregnant women and children in the country is not readily available.

Reforms in the education sector aim to ensure the quality of education comparable with the developed countries by 2016-2020 through alignment with international education standards, introduction of new learning techniques, use of information technologies improvement of infrastructure and updating the content of education.

Turkmenistan’s first privately owned newspaper was launched this year. The internet has also become more available across the country with the opening of Internet cafés, dial-up services, and mobile Internet services. The number of users, especially among young people has grown from 2000 at the beginning of the decade, to an estimated 80,400.

The country’s robust economy (even though largely based on hydrocarbon resources), along with the Government’s expressed intentions to advance the well being of its citizens are promising developments. Together they suggest that the fiscal space for leveraging greater resources for children and young people is available.

### 3. CP ANALYSIS & RESULT

#### 3.1 CP Analysis

**3.1.1 CP Overview:**

2010 was the first year of the new country programme for 2010-15. Although the CPAP was not signed until early December, Rolling Workplans for 2010-11 were signed early in the year and the Country Office (CO) fully engaged with the partners on addressing the issues identified as a priority under UNDAF and CPAP. Through strategic advocacy, UNICEF contributed to getting the ILO Convention 182 on the worst forms of child labour ratified on 27 September 2010. Thus, Turkmenistan fulfilled its obligation towards Concluding Observations of the Committee on the Rights of the Child issued in 2006.

UNICEF interventions focused on capacity building and enhancing of the knowledge base, with key contributions to strengthen the justice for children system through technical
assistance in improving the penitentiary legislation, young child’s health and survival and improving the quality of education through CFLE initiative. Several initiatives were started focusing on risk and crisis communication this year. UNICEF developed communication messages and materials, built capacity, conducted social mobilization and advocacy. Medical professionals were trained on risk and crisis communication management. Different media channels were approached to promote positive behaviours to prevent pandemic influenza.

The CO was constrained by the lack of key international professionals due to recruitment and transfer issues that impacted programme delivery. Regardless, the country team is reviewing modalities to ensure that an effective mix of strategies that can influence national policies and leverage national resources for children’s issues is in place. Negotiations are ongoing with the Government to ensure that in 2011, UNICEF can facilitate the Multi-indicator Cluster Survey (MICS), last conducted in 2006. The importance of such an exercise in charting this country’s programme along key social parameters cannot be over-stressed. UNICEF is cautiously optimistic that this large-scale exercise can be conducted in 2011. For Turkmenistan, it will represent yet another manifestation of its stated aims to adopt the highest standards of international practice in all sectors.

3.1.2 Programme Strategy

3.1.2.1 Capacity Development:
Given the country’s intentions to adopt international standards in social sector, capacity development to complement these reform processes was an important component of the programme mix.
In-country capacity building activities included:
• Implementation of the CRC and National Plan of Action for the working group of the inter-ministerial commission on treaty body reporting
• Training on international and national child rights norms and provisions of 200 velayat level officials by MPs
• Census planning and mapping training for statisticians
• DevInfo software training for specialists from the MoHMI and State Statistics Committee (SSC)
• ECD and CFS training by UNICEF for caregivers, service providers and schoolteachers
• IYCF practices orientation by UNICEF for family doctors
• Risk and crisis communication management training for Media and health specialists
• The Kazakh Academy of Nutrition trained national officials and experts on current nutrition trend.
In keeping with the practices of the programme in strategic use of exchange of the best practices as part of capacity development, the following study tours were undertaken:
• A study tour to Turkey to understand management and legislation issues pertaining to exploitation and abuse of children for representatives of the Medjlis, Ministry of Internal Affairs, Prosecutor General’s Office and NIDHR
• Regional Education in Emergencies (EiE) training in Geneva to build national capacity of front-line responders on emergency preparedness, response and recovery in education for officials from the Ministry of Education
• An exposure trip to Estonia to experience first-hand, the process of education reform in the country for two specialists from the Ministry of Education
• A study tour to UNICEF Supply Division and WHO EURO to orient the government officials on selection criteria of vaccine producers and WHO pre-qualification process, management of vaccine stocks and cold chain and highlight UNICEF procurement service capacity and standards
• A visit to the Moscow Medical Academy, to build skills and strengthen institutional linkages to reorganise and upgrade medical education for high level managers from the Turkmen State Medical Institute.

3.1.2.2 Effective Advocacy:
UNICEF strongly advocates for the implementation of the concluding observations of the CRC committee. Accordingly, the CO continued ongoing efforts and advocacy to deepen the current reform in juvenile justice towards initiating policies and services that are sensitive to the needs of children and young people. With the Ministry of Health, UNICEF is advocating for the development of the National Nutrition Programme and a comprehensive Peri-natal Care Strategy.

To promote equity of outcome for all children, with focus on the MDGs, UNICEF ensures that the joint programme of cooperation contributes to the Government’s Reforms and the adoption and maintenance of the highest international standards with respect to children and youth. A priority for UNICEF is to facilitate collection and analysis of data on key social indicators in the areas of health, education, and child protection to monitor progress and assist in appropriate course correction. To this end, The UNICEF programme is gearing up to support the execution of MICS 4 in 2011. The CRC advocacy and dissemination remain at the core of all UNICEF media activities, especially work with children’s media.

UNICEF also participated in national events such as the International Children’s Festival and the International Education Exhibition. The UNICEF Regional Director’s visit was another opportunity to advocate for the implementation of the CRC at all levels.

To contribute to and ensure vibrancy in children’s literature, a storybook for children entitled “Continuation of the Fairy Tale” was produced in 2010. Developed by Turkmen writers and children, a compilation of some 150 stories, poems and riddles in Russian and Turkmen was produced and the book was very well received. It was widely distributed to all national schools and kindergartens, cultural children’s establishments and libraries.

**3.1.2.3 Strategic Partnerships:**

As in the previous years, the CO continued to build strategic partnerships to address health, education and protection, as well as behaviour change communication.

More specifically, partnerships on issues of MCH and adolescent development with WHO, UNFPA, USAID were strengthened and new partnership possibilities with the Turkish International Cooperation Agency (TICA) are being explored to strengthen the local health system. TICA is already playing an active role along with UNESCO in the sphere of education and culture.

In social policy, to support the 2012 Census, partnerships were forged amongst UN agencies including UNFPA, UNDP and UNHCR, as well as with UNFPA on the wide-spread application and use of DevInfo software. Informal partnerships were initiated with the British Embassy for lending support to the reform of juvenile justice as part of the larger agenda on reform.

**3.1.2.4 Knowledge Management:**

UNICEF prioritizes Knowledge Management (KM) in its involvement with the Government. The CO initiated various efforts to improve KM systems in education and health. In education, initial steps have been made to complement the work undertaken on ECD and CFLE through the development of the new web resource which will enable educators and pre-school teachers to obtain more up-to-date information on the application of the child-friendly concepts.

Teaching and learning materials used in Child Friendly Schools are now available electronically on the UNICEF website for education professionals. Some 70 teachers from pilot schools were oriented on ICT application in education and the use of web-resources developed by UNICEF. To widen the coverage and access to knowledge materials, the first edition of CFLE newsletter was designed and disseminated among schools and the CFLE network where Internet access was not available.

UNICEF continued to support the information resource centres of the National Mother and Child Health Institute, Turkmen State Medical University and Health Information Centre. This enables medical professionals and educators to access global sources of information and research. In collaboration with UNFPA, the CO continued to strengthen
the health system information dissemination capacity of the MOH. At the request of the Government UNICEF provided advanced user and administrator training on DevInfo, which will contribute to the finalisation of the HealthInfo database currently under preparation by MoHMI.

3.1.2.5 C4D Communication for Development:
C4D interventions focussed on risk and crisis communication this year, as emergency preparedness is priority in the 2010-2015 UNDAF. UNICEF developed communication messages and materials, built capacity, conducted social mobilization and advocacy. Media and medical professionals were trained on risk and crisis communication management. Different media channels were oriented on promotion of positive behaviours to prevent pandemic influenza. This integrated mass distribution of print communication materials for local communities, families with a special focus on young children, special features in national print, broadcast media and an online website of the Health Information Centre. On the creative front, a musical was produced jointly with national partners and over 30 performances were organized for schoolchildren during the summer, reaching around 20,000 children across Turkmenistan with key hygiene messages. From this musical, clips were prepared for regular broadcast on TV. Two films for children were also developed for preschoolers and school students. These films will be aired on national TV. A significant feature of the interventions was that all activities went beyond pandemic influenza prevention in communities, and emphasised on broader risk communication.

In 2010 Turkmenistan received certification from WHO as a malaria free country. UNICEF provided C4D support to the Ministry of Health and Medical Industry on malaria prevention and control. A children’s storybook on malaria prevention jointly prepared with the Ministry entitled “Communicating with Children: Principles and Practices to Nurture, Inspire, Excite, Educate and Heal” is considered an innovative practice.

C4D involved regular programme-related interventions including ECD, immunization, breastfeeding, adolescent development and health communication. UNICEF has a strong partnership in public health communication with national counterparts. Events held annually such as the European Immunization Week and National Breastfeeding Week are fully owned and organised by the national partners. UNICEF provides technical expertise and assists in publication of communication materials, while these activities are organized and facilitated in communities, educational establishments and among medical specialists by national partners.

3.1.3 Normative Principles
3.1.3.1 Human Rights Based Approach to Cooperation:
Child Rights principles guide programming in health, education, social policy and protection, nutrition, and HIV/AIDS. This includes all development cooperation and partnerships directed towards the achievement of the Country Programme results in line with the MDGs and the Nationalised MDGs. Consequently, human rights standards and principles guided both the Common Country Assessment and the UN Development Assistance Framework that was developed prior to the beginning of this CP cycle.

Activities undertaken at all levels by the CO are directed by the Convention of the Rights of the Child. In 2010 as in the previous year, the CO implemented numerous activities that targeted the improvement of the quality of life and wellbeing of children in Turkmenistan. The underlying principle in all areas was providing complete assistance to the Government in fulfilling the obligations under the Convention. As in the past, the CO partnered closely with the Parliament of Turkmenistan (Medjlis) to promote the child rights at the national and sub-national level and continued to enhance the knowledge and skills of legislators on child rights.

3.1.3.2 Gender Equality and Mainstreaming:
At the beginning of 2010, the CO finalised the Gender Assessment exercise, which took place in 2009. The final report was shared with the RO. Overall, the assessment
identified that the CO is well placed and has good ties with national level organizations responsible for the implementation of the gender policy in Turkmenistan, and programme documents have an adequate focus on gender issues and contain a sound description of the situation of women and girls, and analysis of the relevant factors. The assessment revealed areas for further operationalisation of gender mainstreaming in programmes and in the office. For instance, one of the areas that will require extra efforts is limited availability of reliable gender-disaggregated data.

UNICEF’s revised Gender Policy and its implications for programming were well discussed by the CO team. The reinforced focus on gender is also used to strengthen the capacity of the partners to address gender issues and increase the quality and effectiveness of UNICEF assistance and advocacy of children’s rights and gender equality.

The CO is an active member of the UN Thematic Group on Human Rights and Gender. This participation enables promotion of children rights with due attention to

3.2 Programme Components:
Title: Social policy and child rights advocacy

Purpose:
This programme aims to strengthen the capacities of partners at all levels to formulate relevant social policies, build reporting capacity and improve the legislative environment. There are several expected results: (a) better harmonization of national laws with the UN Convention on the Rights of the Child; (b) increased awareness and capacity of State institutions to accurately report to the UN Committee on the Rights of the Child and implement its observations and recommendations; (c) availability of gender-disaggregated social data; and (d) knowledge of child rights acquired by all girls and boys between 6-16 years of age. The programme has the following sub-components:

- Social Policy
- Monitoring children’s and women’s rights
- Communication for development.

Resources Used:
The total CP-approved budget for 2010 was US$355,467.96 including US$195,467.96 from RR. OR funds for C4D in the amount of US$160,000.00.

Result Achieved:
Social Policy sub-component
UNICEF assisted the State Statistics Committee on improvement of the capacity of its national field specialists on DevInfo through a weeklong training. This will further the rollout of the TurkmenInfo database.

Within the framework of a joint programme with UNDP, UNFPA and UNHCR, the CO continued to support the Census preparation processes. The Census questionnaires were discussed and finalized in the working group. In addition, the capacity of specialists on mapping and GIS technologies for the Census was enhanced through a series of trainings lasting over 3 months.

Data transparency and access continue to be an issue, which needs further exploration and advocacy. The SSC did not provide inputs to TransMONEE and some indicators of MICS 2006 results are yet to be cleared for use in the public domain.

The CO prepared analytical articles and briefs on the state budget allocations, social protection, and micro/macroeconomic conditions in response to a regional questionnaire. Strong partnerships were forged to support the Census amongst UNFPA, UNDP, and UNHCR; and with UNFPA on widespread application and use of DevInfo software and preparation of the HealthInfo database.

Monitoring Children’s and Women’s Rights sub-component
In collaboration with the Children’s Legal Centre at Essex University, UNICEF supported the National Institute of Democracy and Human Rights (NIDHR) in reforming legislation
and practice pertaining to children in conflict with the law. The NIDHR also drafted a new Penitentiary Code with support from UNICEF and the British Embassy. This new code will be adopted in 2011.

UNICEF worked closely with the NIDHR and improved the capacity of the members of the working group on treaty body reporting on the methodology of the CRC national report writing. As a result, an advanced draft of the CRC periodic report was sent to the CO in November 2010. As of now, an elaborated draft is pending approval of the Governments Commission on Treaty Body Reporting and it is expected that the report will be forwarded for the attention of the Committee on the Rights of the Child by the reporting party in 2011. UNICEF worked with parliamentarians to underline the importance of their role in advancing the rights of women and children. It facilitated their countrywide tour to promote children’s and women’s rights through visits to all five velayats. The Medjlis will be hosting the Central Asian Child Protection forum in 2011 and the preparations are currently underway.

Changes in the management of our partners had some impact on the modes of our interaction.

Strong partnerships evolved on legislative reform particularly with the British Embassy on reforming the penitentiary code of the country. UNICEF worked closely with the EU/UNDP/OHCSH project on human rights reporting capacity.

Communication for Development sub-component

This year special emphasis was given to pandemic influenza prevention to better prepare local communities, health care providers and media to prevent the spread of influenza. The foundation was laid to develop national capacities in addressing risk and crisis communications, especially those related to health outbreaks. UNICEF also supported the Ministry of Health and Medical Industry in social mobilization component of the national polio immunization campaign, which was undertaken in several rounds.

Issues of school readiness, infant and young child feeding, malaria prevention, immunization and socio-emotional topics were addressed in an integrated manner. This year UNICEF continued to work closely with kindergartens and primary schools on promotion of reading among young children. Children’s storybooks and posters for caregivers were distributed across the country.

UNICEF provided technical support in developing Basic Life Skills textbooks for the 1st-10th grades of secondary schools. This engagement started in 2009 with the introduction of the new discipline to the school curriculum and UNICEF was requested by the Government to contribute its expertise to this. UNICEF assisted in the development of a communication kit on adolescent health and development, which covers issues such as healthy nutrition, hygiene, stress management, HIV prevention, sports and prevention of risky behaviours. This child-friendly communication package is designed as an additional reference material for promotion of youth friendly services among young people, including testing for and counselling about HIV.

The CO continued to partner with the Youth Channel on television to promote issues of health, education and children’s rights with the active participation of children.

Future Workplan:

In Social Policy, decentralized institutionalization of Turkmen-Info and advocacy and support for MICS 4 will be a priority, along with assistance in conducting a national Census, scheduled for 2012.

With regard to Monitoring Children’s and Women’s Rights, activities will be pursued in collaboration with the NIDHR and Medjlis, and work will continue towards the reforming of the juvenile justice system, capacity building particularly training of specialists on international standards, and activities promoting child participation. Further dissemination and implementation of the concluding observations of the Committee on the Rights of the Child will dominate programme implementation.

In Communication for Development strategic interventions will be designed to
individually support all programmatic areas while ensuring synergies across all sectors to address the whole child. CRC will be unpacked and integrated into C4D interventions. Closer interaction will be sought with creative individuals and groups to better promote children’s issues and position these issues within the Government’s reform agenda. The major programmatic emphases will be on priority focus areas such as exclusive breastfeeding, life skills, including HIV prevention among young people, improvement of childcare practices etcetera. Advocacy to highlight disability issues in national communication will be another priority.

Title: National and local systems strengthening

Purpose:
The Government reform programme has paid attention to quality assurance and the strengthening of social services. Involving local authorities this programme builds capacity, particularly in the areas of planning, monitoring and coordination of the social sector. Data will be used to design targeted interventions at the velayat level to address regional situations. The key results of these interventions are: a) Increased exclusive breastfeeding rates by three times (baseline 11%); b) At least 50% of maternal facilities provide peri-natal care, including PMTCT at primary level in accordance with updated protocols (baseline 0); c) 30% of the families and caregivers are aware of appropriate early child care standards, practices and life skills (baseline 15%); d) 30% of adolescents (10-18), both in and out of school, have correct information and relevant skills and services to reduce HIV risk and vulnerability (baseline 9% of adolescents countrywide); e) At least 50% of pre-school children attend kindergartens implementing approved ECD standard education package (baseline 24%); f) at least 25% schools in the country are implementing national standards for child-friendly schools principals and child-centred teaching method (baseline <1%).

The child protection component will support the Government in strengthening national knowledge on gaps in service provision and improving planning capacity through the enhancement of data collection, monitoring and impact evaluation. Two main expected results will be availability of disaggregated data on key indicators on child protection, and alignment of juvenile justice instruments with international standards. UNICEF will work with the TNIDHR to build local capacity to provide effective community rehabilitation schemes for young offenders and children at risk of coming in conflict with the law.

The programme has three sub-components:

- **Health policies, systems and child survival**
- **Pre-school and basic education**
- **Child protection.**

Resources Used:
The total budget for this Country Programme Component for 2010 was US$ 810,656.94 of which US$ 379,532.04 was from RR and US$ 650,000.00 was from OR funds.

Result Achieved:

**Health Policies, system and child survival and HIV prevention sub-component:**
The focus in 2010 was on strengthening local capacities in priority areas with special emphasis on medical education. The Adolescent Health and YFS Training package of WHO was adapted and introduced into the curricula of pre and post-graduate education courses of the Medical University.

A draft multiyear agreement to support the development of a national nutrition strategy through a strategic partnership between the MOHMI, Kazakh Academy of Nutrition and UNICEF was developed. UNICEF also provided technical assistance on anaemia prevention.

Following the US $ 22 million MOU signed between UNICEF and the Government (2010-2015) UNICEF's Supply Division procured vaccines and related supplies as well as cold chain equipment. The MOHMI vaccine database was updated and introduced to central
and regional SSES with UNICEF assistance. National immunization calendar was updated and HIB vaccine was introduced for children 2, 3, 4 months of age. UNICEF assisted in the implementation of epidemiological surveillance standards for measles, rubella and CRS, by strengthening the capacity of 170 core staff and physicians.

UNICEF also provided support to strengthen the capacity of family doctors from remote rural areas on infant and young child feeding practices. As well, the changeover of key health sector managers impacted our cooperation.

Progress on Vitamin A supplementation is now contingent to the development of an evidence base. UNICEF also assisted MOHMI in conducting quality assurance of institutional monitoring systems on USI and FF.

UNICEF is in discussions with both USAID and Turkish International Cooperation Agency, to strengthen cooperation in the health sector.

**Results Achieved:**

**Pre-school and Basic Education sub-component**

Strategic partnerships were established with Kazan and Tomsk Pedagogical Universities to support the process of education sector reform.

As a result of a joint collaboration with the Ministry of Education, CFS and ECD principles were integrated in the agenda of the Teacher’s National Conference in 2010. Consequently, about 80 per cent of teachers were introduced to CFLE principles.

Pre-school and schoolteachers can now use a user-friendly database to obtain information on ECD and CFS. The database includes most Child Friendly Schools teaching and learning, training materials and web-resources for teachers. This will significantly reduce printing costs and be widely used by education professionals.

A CFS toolkit was prepared on Health Promoting Schools adapted by a team of experts from the Health Information Centre and the Ministry of Education.

To further support the CFS initiative, UNICEF deployed national expertise and developed strategic relationships in the regions by networking with key partners to facilitate adaptation of the CFS principles.

A key constraint in the Education sector is the paucity of reliable technical data.

A total of 26 Child Friendly Schools were assessed this year – an initiative supported by the government at the national and sub-regional levels.

UNICEF convened the development partners group established on Education this year.

**Results Achieved:**

**Child Protection sub-component**

The major focus of this sub-component was building consensus and finalizing the work carried out in 2009 on the juvenile justice reform strategy. The strategy was presented to the Commission on Treaty Body Reporting and feedback from various actors were collected and incorporated into the final document. The Strategy is currently under consideration of the Commission and is expected to be approved early in 2011.

The CO continued to build the capacity of lawyers, prosecutors, judges and juvenile affairs inspectors on international standards of juvenile justice as well as standards for working with children in conflict with the law in collaboration with the CLC. Together with the British Embassy, UNICEF offered its expertise on the new draft of the penitentiary code. Through Children’s Legal Centre, the CO provided the required expertise on the part concerning persons under 18.

Assessment of the Juvenile Justice system was undertaken under a contract commissioned by the RO. The final report will be made available in 2011.

With the support of Government partners, direct partnerships with the Ministry of Interior, Prosecutor General’s Office and Supreme Court will be explored.

**Future Workplan:**

*Future Work Plan for Health policies, systems, child survival and HIV prevention sub-component:*
In keeping with the rolling workplan signed for 2010-2011, the Ministry of Health and other partners will be supported further in health policies and systems strengthening efforts, with an emphasis on neonatal health. Knowledge and skills of health workers in cost-effective neonatal and child survival practices will be addressed. At the policy level, the CO will partner with others to develop a national nutrition programme. Preparation and adoption of a plan to implement a national code on breast milk substitutes will also be supported. Attention will be given to the strengthening of government capacity for monitoring and evaluation and quality assurance of the immunization, flour fortification and salt iodization programmes to foster sustainability and maintain universal coverage.

**Future Work Plan for pre-school and basic education sub-component of the programme:**
Capacities of 20% of pre-school establishments and 10% of model CFS secondary schools in the country will be strengthened to meet international standards on ECD and CFS. MOE will be supported to implement education policies, curricula and community awareness programmes that enhance quality of education through ECD and CFS. In addition UNICEF will help in establishing institutional links with external educational establishments and institutions to bring know-how and best practices in improving the quality of education. Advocacy materials and teaching/learning guidelines on ECD/CFLE will be developed and disseminated.

**Future Work Plan for Child Protection sub-component of the programme:**
In 2011, the capacity of lawyers, prosecutors, and juvenile affairs inspectors to deal with children in conflict with the law will be strengthened. Attempts will be made to implement juvenile justice reform by high-level advocacy and through Central Asia Child Protection forum, hosted by the Turkmenistan Parliament in mid-2011.

**4. OPERATIONS & MANAGEMENT**

**4.1 Governance & Systems**

**4.1.1 Governance Structure:**
During 2010, the CMT met every quarter to discuss management issues related to office strategic directions, programme/management priorities, funding, donor reporting, major programme planning, work processes, HR issues, training/learning, office/staff security and other management issues. The results of management meetings, such as programme coordination and operations meetings are included in the standard agenda. The CMT also adopted performance standards for Programme and Operations staff during the year.

The agenda of regular meetings always include criteria to assess the quality of office performance and donor reports. The appraisals of staff performance records are conducted and documented on an annual basis. The Office maintains an updated list of established office committees as well as tables of authority and reference. At the Annual Management Retreat on December 10th, 2010 the changes in office CPMP were discussed as well as the revision and updates of DAT, TOA and Office Committees. Corporate priorities and their actual fulfilment were under full consideration during the retreat.

The office structure has changed in keeping with the principal of one-year duration of TA posts due to which the number of staff reduced from 19 to 16.

**4.1.2 Strategic Risk Management:**
In 2010 the CO began the transition to the new Early Warning Early Action (EWEA) online system. Several consultations with programme and operations staff were conducted to introduce the new EWEA system and plan a smooth transition. Staff was also oriented on the newly revised Core Commitments for Children in Humanitarian Action, which helped to integrate new developments into emergency preparedness. A special orientation retreat was organized with the support of the Staff Association. During the retreat, staff participated in risk situation analysis and developed key actions
and preparedness planning components. With respect to preparing the groundwork for the enhanced processes that are now in the UNICEF pipeline, the team has put its key processes under the scanner to reduce risk and optimize impact.

4.1.3 Evaluation:
No audits and assessments were undertaken.

4.1.4 Information Technology and Communication:
Continued availability of ICT resources and effective user support was ensured in 2010. System upgrades and migrations allowed for a more secure network environment. All UNICEF Standard Security upgrades were applied in time. Automated Patch Downloader was installed on all workstations and servers to ensure timely updates distribution, issued by NYHQ GHD. All servers and PCs are configured to receive antivirus updates from Symantec Endpoint Protection (SEP), version 11.0.4. Full File/Notes/ProMS backup is performing according to the established schedule. All backup facilities are functioning according to established standards. All UNICEF desktops and laptops were imaged from UNICEF Image version 2.0 according to GHD instructions. All hardware is meet requirements and ready for Microsoft Windows 7 migration. The global naming policy is used for all office PCs. Lotus Domino server and Clients were upgraded to version 8.5. ProMS cubes and patches are continuously applied according to GHD instructions. Current ProMS version is 9.1.

Following a review of the status of equipment, the office procured the necessary hardware to support its Business Continuity Plan, including ETR-1 kit. Citrix server is up and running. A backup connection BGAN is already in place. The office uses a 1024/512Kbps VPN connection over a satellite connection provided by GSI. All network services (web/mail/ProMS replications/etc.) run over the VPN. VoIP router is configured by NYHD and installed to communicate with other offices. The CO and all three UNICEF vehicles are equipped with Motorola VHF radios: VHF repeater (Motorola GR-500) and a Base Station (Motorola GM-380) in the office and Motorola GM-360 in the vehicles. Ten handhelds are distributed among the staff. HF transceivers (Codan NGT SR) are installed in both 4WDs Toyota Land Cruiser and Nissan Patrol. HF Base Station (Codan NGT SR) is installed in the office. Three Mini-M satellite phones are installed: in the office (Provident), in the Representative’s apartment (Provident) and in one office vehicle (Voyager).

4.2 Fin Res & Stewardship
4.2.1 Fund-raising & Donor Relations:
As Turkmenistan is not an ODA dependent country, donor funding by diplomatic missions and corporate sector in the past have tended to be modest. However, this year, UNICEF was successful in getting the British Embassy to fund the reform of the penitentiary code of the country. Negotiations are ongoing with the Turkish International Development Agency to undertake complementary funding in health activities. Funding negotiations are undertaken as part of a three way process led by our Government partners. With greater opening to global practices, the concept of corporate social responsibility is slowly percolating into Turkmenistan. Accordingly this year, UNICEF partnered with mobile phone operator MTS, a mobile operator, to send child immunisation messages. In 2011, the CO will explore a similar collaboration with Turkmen Tel. Initial discussions have taken place also with a multinational corporation in the oil and gas industry to support children’s literature initiative.

4.2.2 Management of Financial and Other Assets:
Support Budget and Cross-Sectoral funds of the organization are utilized during the year for current expenses connected with operations executed on annual basis.
All mission travels and salaries of support budget and cross-sectoral staff are charged to SB and cross-sectoral budget correspondingly. Management of both budgets is done by Operations Manager and Representative.

4.2.3 Supply:
The total value of supply component for programme supplies is USD186,000.00 (excluding freight costs), which has not changed compared with the last year. As in previous years, the major proportion of supplies was from local procurement (value of about USD172,500.00). Local procurement mostly involves printing costs for programme communication, advocacy and ECD materials, which are estimated at USD 151,000.00. Direct order procurement mostly involves procurement of IT and ETR equipment. In 2010, due to the outbreak of polio in neighbouring countries, emergency procurement of mOPV1 vaccine was organised by UNICEF Supply Division for the national immunization campaign that took place during August and September. The total amount for procuring 3.7 million doses was USD 573,000.00 (excluding freight costs). This procurement was funded by UNICEF NYHQ. Assessment of local printing capacity and empanelment of these companies on a one-year LTA was undertaken by an international print consultant. The LTA framework will be used as tool to further enhance capacity of printing companies and monitoring the quality of printing materials and timely delivery.

Procurement for the Ministry of Health of Turkmenistan and the Bread Association is a large component of UNICEF’s cooperation. In 2010 the MoHMI Turkmenistan transferred USD 4,027,208.36 for the procurement of vaccines, injection and cold chain equipment. The procurement and delivery of the vaccines and other supplies were promptly executed. Cold chain equipment was ordered in the third quarter of the year and some cold chain equipment will arrive early next year.

All partners are working to improve the planning process and timely transfers to optimize delivery with respect to the procurement of pre-mix.

4.3 Human Resource Capacity:
An NOB FT C4D was hired. The post of Health & Nutrition Specialist P3 was filled in July. The Deputy Representative, P4 will join the team early next year. Mobilisation of OR funds will determine recruitment of the Health Officer NOB. The Programme Assistant for Education, GS6 FT has resigned, following his recruitment with a local company. The Finance/HR Assistant on LWOP for studies abroad resumed work at the end of August 2010. The Executive Assistant was assigned to this post and a Receptionist, TA, GS3 hired to support the front office. The Programme Assistant, Health & Nutrition who is on a one-year LWOP extended this by 1.5 months to finish her Masters course in Public Health. She will rejoin the team mid-January 2011.

On the request of HQ, the ICT Assistant supported relief efforts in Haiti for three months. The Communication Officer was on a 16-week maternity leave and is now on 3-month AL, the C4D Officer has backed up her duties.

The CO uses these gaps as opportunities to redistribute tasks and build capacity competencies of staff. In addition, performance appraisal is closely monitored. Staff members also enhance capacity through UNICEF on-line courses, including IPSAS training.

This year, two meetings of the Joint Consultative Committee (JCC) took place between the management and the Staff Association. These meetings addressed issues that emerged during the 2009 Global Staff Survey. Areas affecting staff morale were: Work/Life balance and Career/Professional development. Staff members feel that the existing salary survey methodology needs to be amended. Staff members have also expressed concern with respect to the medical services available to them.

A retreat to orient staff members on emergency preparedness was organized by the Staff Association. Two UNICEF staff members received emergency trauma bag training.
As part of general staff development, international consultants to the CO orient all staff on current trends and best practices in the field of their expertise.

5. STUDIES, SURVEYS, EVALUATIONS & PUBLICATIONS

5.1 List of Studies, Surveys & Evaluations:
1. CFS assessment

5.2 List of Other Publications
2. 2010-2015 UNICEF Turkmenistan Advocacy Kit (booklet, pen, folder, bag, desk and wall calendars, CRC booklet)
3. ECD Communication package (children's Illustrated and photo-based books, Illustrated and photo-based posters for caregivers)
4. YFS manual and textbook "Child infectious diseases"
5. Immunization communication package (Immunization calendar, poster and leaflet, PSA, length measuring mat for child)
6. Joint TV show with Yahslyk with episodes on health, education, CRC and culture
7. ECD/CFS teachers and parents' manuals