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Country programme document

Philippines

Summary

The country programme document (CPD) for Philippines is presented to the Executive Board for discussion and approval at the present session, on a no-objection basis. The CPD includes a proposed aggregate indicative budget of \$17,325,000 from regular resources, subject to the availability of funds, and \$130,236,000 in other resources, subject to the availability of specific-purpose contributions, for the period March 2024 to December 2028.

* E/ICEF/2024/1.



Programme rationale

1. The Philippines is among the fastest-growing economies in Asia, with strong macroeconomic fundamentals and a solid policy environment. It achieved 7.6 per cent economic growth in 2022 and is a lower middle-income country with solid democratic institutions. The Philippines has shown a strong commitment to the 2030 Agenda for Sustainable Development. This country programme will build on the solid foundation of trust and mutual respect forged by UNICEF and the Government over the past seven decades of technical cooperation in furthering the rights of children. The programme is derived from the United Nations Sustainable Development Cooperation Framework (UNSDCF) and supports the achievement of the country's vision *AmBisyon Natin 2040*, the Philippine National Strategic Framework for Plan Development for Children, 2000–2025, the Philippine Development Plan 2023–2028 and implementation of the concluding observations of the Committee on the Rights of the Child. With only seven years left for the achievement of the Sustainable Development Goals, the Philippines is using a whole-of-nation approach to keep 7 targets on track, accelerate progress on 18 targets, address barriers where 17 targets have regressed and close data gaps for the remaining targets.¹

2. The Philippines has ratified eight out of the nine core international human rights treaties, and contributes to shaping regional agendas for children as a member of the Association of Southeast Asian Nations. Children under the age of 5 comprise 10.2 per cent of the population of more than 108 million people, while school-aged children, adolescents and youth (aged 5–24 years) account for over 42 per cent. The median age has risen over the past three decades and the total fertility rate has declined, signalling a potential demographic dividend that the Government intends to leverage with adapted policy frameworks and investments in adolescents.²

3. The country proactively responded to the coronavirus disease (COVID-19) pandemic through economic stimulus, social assistance programmes and other measures. While the Government continued to allocate a significant portion of public expenditure to the social sectors in 2022 (health, 5.5 per cent; education, 15.4 per cent; and social protection, 11.2 per cent), there is room to close the financing gap for health against international benchmarks.³ The Supreme Court ruling (2018) on the *Mandanas-Garcia* Petition on local government units is a landmark opportunity to further support localization of the Sustainable Development Goals, strengthen inclusive and sustainable local development and contribute to overall strengthening of subnational institutions, but the capacities of local authorities to plan, budget, regulate and deliver social services remain variable.

4. Poverty incidence declined from 23.3 per cent in 2015 to 18.1 per cent in 2021, but inequality has deepened (Gini coefficient 40.7).⁴ Child poverty was 26.4 per cent in 2021, rising from 23.9 per cent in 2018, leaving over 10 million children at risk of being left behind.⁵ The most vulnerable children are poor; living in geographically isolated or disadvantaged areas; living in regions vulnerable to

¹ National Economic and Development Authority, 2022 Voluntary National Review of the Philippines, 2022.

² Philippines Statistics Authority (PSA), National Demographic and Health Survey (NDHS), 2022.

³ Calculations based on Department of Budget and Management, Budget of Expenditures and Sources of Financing: Fiscal Year 2023, Table B.5.b, Manila, 2023.

⁴ World Bank, Poverty and Inequality Platform, data for 2021 (accessed on 9 November 2023).

⁵ PSA, Poverty Incidence among the Basic Sectors in the Philippines, 2023.

shocks; or facing discrimination, including children with disabilities and indigenous children.

5. The establishment of the Bangsamoro Autonomous Region in Muslim Mindanao in 2019 provided an unprecedented opportunity to further peace and sustainable development for the benefit of vulnerable children and adolescents. The Moro Islamic Liberation Front-led transition authority will act as an interim government in the Bangsamoro Autonomous Region until 2025, and the Second Bangsamoro Development Plan (2023–2028) charts a course for recovery.

6. Improving child survival remains a national priority. Between 2017 and 2022, infant and neonatal mortality rates increased from 21 to 22 deaths per 1,000 live births and 14 to 15 deaths per 1,000 live births, respectively, while the under-5 mortality rate dropped from 27 to 26 deaths per 1,000 live births. Neonatal deaths account for half of all deaths of children under the age of 5 years. Children from the poorest wealth quintile are almost four times as likely to die before their fifth birthday as children from the wealthiest quintile. Gaps in the coverage and quality of health services are a contributing factor: 83 per cent of pregnant women receive four or more antenatal care visits; 89.6 per cent of deliveries have a skilled birth attendant; and 75 per cent of mothers receive postnatal care in the two days after birth. Teenage pregnancy also puts young mothers and their babies at risk: 5.4 per cent of adolescent girls have reported a pregnancy.⁶ Twelve per cent of adolescents have a mental disorder, and 30 per cent of all newly reported HIV cases are among children and youth aged 15–24 years.⁷ Although there are enabling policy frameworks, public health platforms at decentralized levels struggle with retention of qualified human resources, supply chain management, lack of quality data and suboptimal health-seeking behaviours, leading to gaps in the delivery of primary health care. In 2022, 11 per cent of children aged 12–23 months received no vaccinations, and there were an estimated 637,000 “zero-dose” children in 2023.⁸

7. Some children face a triple burden of malnutrition. Although the rate has been declining since 2017, over 26 per cent of children under the age of 5 years are stunted (39 per cent in the Bangsamoro Autonomous Region) and 7 per cent of children aged 0–2 years are wasted. Anaemia affects 43.1 per cent of children aged 6–12 months. The prevalence of overweight among children has almost tripled since 2003, affecting 15 per cent of children aged 5–10 years and 13 per cent of children and youth aged 10–19 years.⁹ Barriers to progress include the lack of a national nutrition-sensitive framework, limited enforcement of existing laws that curb the marketing of breastmilk substitutes and unregulated marketing of unhealthy foods and beverages, including in schools. Inadequate human resources, fragmented data systems and limited integration of nutrition commodities in the health system supply chain affect the coverage and quality of services. There is a need to boost knowledge among caregivers – including fathers – of optimal care practices and diets.

8. Twenty-three per cent of children aged 2–5 years were not on track in terms of growth, learning and psychosocial well-being in 2022, including 26 per cent of boys

⁶ NDHS, 2022.

⁷ Department of Health, Epidemiology Bureau, HIV/AIDS and ART Registry of Philippines, June 2023.

⁸ World Health Organization and United Nations Children’s Fund (WHO/UNICEF), Estimates of National Immunization Coverage 2023.

⁹ Department of Science and Technology, Food and Nutrition Research Institute, Expanded National Nutrition Survey, 2021.

and 34 per cent of the poorest children.¹⁰ The lack of male involvement in childcare; inadequate caregiver knowledge of health, nutrition and key family care practices; and socioeconomic status are contributing factors, as well as poor early childhood education quality and lack of inclusiveness. Early childhood education is not mandated for children aged 3–4 years, and 78 per cent of children in this age group are not attending preschool.¹¹

9. The Philippines is addressing significant learning challenges, which were worsened by the impact of the COVID-19 pandemic. For primary-school-age children, attendance is high, but in 2019, 83 per cent of Grade 5 students had not reached minimum proficiency in mathematics and 90 per cent in reading.¹² This raises concerns about the quality of education, particularly in the Bangsamoro Autonomous Region, where Grade 4 students are estimated to be two years behind the rest of the country. Barriers to progress include weak governance of education at the decentralized level; insufficient learning facilities; non-conducive learning environments (70 per cent of public schools lack minimum water, sanitation and hygiene (WASH) facilities;¹³ and 38.5 per cent of children aged 10 years reported being physically hurt by friends/classmates¹⁴) and low retention of qualified human resources. The knowledge, beliefs and socioeconomic status of caregivers affect the learning environment at home, including access to technology to support distance learning. In 2019, 7.2 per cent of children aged 12 to 17 years were not attending secondary school, with higher dropout rates for boys.¹⁵ Reasons for dropout have included a need to seek employment and child marriage.

10. Almost 59 per cent of children have experienced some form of violence¹⁶ and one out of five has experienced online sexual abuse or exploitation.¹⁷ Boys are equally vulnerable to violence, but have lower rates of reporting. Between January 2020 and December 2021, there were 115 grave child rights violations against 104 children (62 boys and 42 girls), with cases in Mindanao comprising 83 per cent of the total.¹⁸ There were 13,000 children in conflict with the law from 2012 to 2021, with many children detained for lengthy periods, alone or with adults.¹⁹ While the rate of child marriage has decreased to 9.4 per cent, 460,221 young women aged 20–24 years are married before age 15 years,²⁰ with teenage pregnancy a contributing factor. While 96.6 per cent of the household population had their births registered in 2020,²¹ just 77 per cent of the population in the Bangsamoro Autonomous Region are registered. Although the legislative and policy environment is improving, child protection systems are limited by a weak accountability framework, insufficient or inequitable investments, fragmented information

¹⁰ NDHS, 2022.

¹¹ PSA, Functional Literacy, Education and Mass Media Survey (FLEMMS), Final report, 2019, p. 19.

¹² Department of Education, SEAMEO and UNICEF, Southeast Asia Primary Learning Metrics 2019, National Report of the Philippines, Bangkok, March 2021.

¹³ Department of Education, WASH in Schools Online Monitoring System, 2021 (accessed on 12 September 2023).

¹⁴ Largo, F.M. et al., 'Reducing the incidence of bullying and improving elementary school performance: Enhancing effectiveness of school programs, Longitudinal Cohort Study on the Filipino Child', *UNFPA-OPS Policy Notes Series* No. 2, 2019, p. 3.

¹⁵ FLEMMS 2019.

¹⁶ NDHS 2022.

¹⁷ ECPAT, INTERPOL and UNICEF, *Disrupting Harm in the Philippines: Evidence on online child sexual exploitation and abuse*, Global Partnership to End Violence Against Children, 2022.

¹⁸ United Nations, *Children and Armed Conflict in the Philippines: Report of the Secretary-General*, New York, 2022.

¹⁹ Philippines National Police 2021.

²⁰ NDHS 2022.

²¹ PSA, *Census of Population and Housing*, 2020.

management and technical capacity gaps. Social, cultural and gender norms contribute to violence and harmful practices affecting boys and girls.

11. Access to basic WASH services has improved since 2017. However, in 2023, only 47.9 per cent of households had access to safely managed water and 62.7 per cent had access to safely managed sanitation.²² Although progress has been made nationally, 13.8 per cent of the poorest households and 17.8 per cent of households in the Bangsamoro Autonomous Region still practice open defecation, highlighting the need for social and behaviour change at community level. Other barriers to progress include limited or inequitable financing for WASH, weak coordination of the WASH sector and variable technical capacities at decentralized level.

12. The country is ranked first globally in the 2022 WorldRiskIndex, with an average of 148 disasters annually triggered primarily by climate-related and geophysical hazards.²³ Child rights are also threatened by the slower-onset impacts of climate change (e.g., extreme heat, water scarcity, coastal erosion) combined with environmental degradation. However, there is low local capacity to safeguarding the environment, limited integration of the needs and capacities of children and adolescents in adaptation policies and plans, few mechanisms for boosting the participation of youth in climate action, and insufficient financing and technical resources at the local level for implementation.

Programme priorities and partnerships

13. The country programme has been designed in partnership with the Government and is aligned with the Philippine Development Plan, 2023–2028 and UNSDCF, 2024–2028. It was informed by consultations with national authorities, national human rights institution, development partners, civil society, the private sector and the United Nations system. The overarching theory of change suggests that children and adolescents will progressively realize their rights if the Government is more effective in regulating and delivering quality, child-sensitive, gender-transformative social services in an equitable, inclusive and efficient manner at all levels; if children and adolescents fully access and utilize these services; and if parents, caregivers, front-line service providers and other duty-bearers demonstrate and promote behaviours that support the healthy development of every child and adolescent. It also depends on boys, girls and adolescents, especially the most vulnerable, being empowered to participate more meaningfully in decisions that affect their lives and processes that further the peace, sustainable development and resilience of their communities and nation.

14. An evaluation of the previous country programme identified lessons learned that informed the strategic shifts for the new programme. It found that the UNICEF approach to systems strengthening was key to the sustainability of results but an integrated strategy for different levels of governance was needed. The new programme will strengthen the capacity of national and local government and ensure that innovations and models are co-designed with national counterparts for the purpose of social service delivery through public systems at scale. Subnational efforts will include capacity-building and modelling with national agencies in regions, including the Bangsamoro Autonomous Region, where children's outcomes need improvement. The evaluation also found that many child outcomes were lagging due to poor health-seeking behaviours and family care practices, or harmful gender norms, resulting in a stronger focus on social and behaviour change. In line

²² WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene, 2023.

²³ Atwii, F. et al., WorldRisk Report 2022, Bündnis Entwicklung Hilft, 2022, p. 54.

with the evaluation recommendations, the programme includes an outcome focused on fostering climate action and resilience-building, and interventions designed to promote shock-responsive and climate-resilient social services in each programme component.

15. UNICEF, in consultation with the Government and upon requests from relevant government authorities through their multi-year workplans, will apply a human rights-based approach to the country programme using the following cross-cutting strategies:

(a) System strengthening at all levels, with a focus on ensuring high-quality, inclusive and shock-responsive systems and services.

(b) Public finance for children to influence public investments and strengthen decentralized governance and social accountability mechanisms.

(c) Evidence-based advocacy to mobilize political and public will and drive policy changes.

(d) Community engagement and social and behaviour change to promote health-seeking behaviours and family care practices and address harmful norms and practices.

(e) Gender-transformative programming to address maternal mortality, child marriage, teenage pregnancy and gender disparities in learning outcomes, and to ensure gender-transformative social protection.

(f) Child and adolescent participation to ensure their meaningful engagement in decision-making processes that affect their lives.

(g) Leveraging of private sector partnerships and markets to benefit children and reduce the adverse impacts of business practices.

(h) Innovation and digital transformation to improve the effectiveness of systems.

Health and nutrition

16. This component will further the rights of every child to survive and have the potential to develop their physical, cognitive and social capacities. With the Department of Health and the National Nutrition Council, and through multisectoral nutrition platforms, the programme will aim to ensure that by the end of 2028, more children, adolescents and women have access to and utilize quality primary health care services, nutritious diets, nurturing practices, and essential supplies. This will contribute to UNSDCF output 1.1 and 1.2, the Health Sector Strategy 2023–2028, the Philippine Population and Development Plan of Action 2023–2028 and Sustainable Development Goal 3 and target 2.2.

17. The programme will strengthen government capacity at all levels to boost equitable access to, and utilization of, high-impact, inclusive, gender-responsive and shock-adaptive preventive, promotive and curative services for adolescent, maternal, newborn and child health. This includes supporting the development of a multisectoral strategy that leverages resources for adolescent health, and strengthening the capacities of the decentralized public health managers to plan, budget, monitor and deliver primary health care services. UNICEF will support the Government to strengthen the routine health information system, supply chain and quality improvement mechanisms that enable providers and community platforms to deliver services, including integrated routine immunization, humanitarian responses and social and behaviour change interventions, including parenting programmes and prevention of early pregnancies.

18. The programme will enhance government capacity to scale up equitable access to nutrition-specific and nutrition-sensitive interventions that prevent stunting, wasting, overweight and obesity in early childhood, adolescence and pregnancy, in line with the Philippine Plan of Action for Nutrition 2023–2028. UNICEF will conduct advocacy; policy development for the enforcement of regulations on maternal and child nutrition (e.g., on the International Code of Marketing of Breast-milk Substitutes and food fortification); capacity-building to scale up nutrition-specific interventions through primary health care and test operational guidelines for diet diversification; and strengthening data for nutrition. UNICEF will promote the integration of nutrition into early childhood development services and social protection programmes and further research, information management and social and behaviour change. UNICEF will engage national and local government, private sector food retailers and members of the Scaling Up Nutrition country platform to promote healthy diets and help to reshape food environments.

Education

19. This component, contributing to Sustainable Development Goal 4 and UNSDCF output 1.3, and supporting the Basic Education Development Plan 2030, will further the rights of every child to learn and gain foundational skills at school. With the Department of Education and the Early Childhood Care and Development Council, the programme is aimed at ensuring that, by the end of 2028, more children, especially the most vulnerable, are developmentally on track and learning in a safe, resilient, inclusive and holistic education system, including during emergencies.

20. The programme will strengthen the capacity of duty-bearers to ensure that children aged 3–5 years are ready for school and that children in primary school learn the foundational and twenty-first century skills that will enable their transition to secondary school. UNICEF will support the Government to implement relevant national laws and further evidence- and equity-based policies, plans, standards and financing in the education sector, while strengthening systems that promote accountability, real-time information management and quality assurance. UNICEF will support the modelling and scale-up of innovations in terms of learning recovery, remote learning, digitalization of education services, parental engagement and student participation (particularly in furthering climate adaptation in schools). UNICEF will work to ensure that out-of-school adolescents gain foundational and twenty-first century skills by innovating on learning continuity interventions; promoting flexible learning pathways and alternative means of certification; strengthening information management in the alternative learning system; and institutionalizing referral mechanisms for equitable education.

Child protection

21. This component will further the right of every child to protection from violence (online and offline), abuse and exploitation, contributing to Sustainable Development Goals 5 and 16, UNSDCF output 1.4 and the National Plan of Action for Children 2023–2028. UNICEF aims to ensure that, by 2028, an inclusive, adaptive and equitable child protection system is in place and used to prevent and respond to violence in all settings.

22. UNICEF will support the Government to establish a national, intersectoral coordination mechanism that capacitates local governments to effectively operationalize a disaster-resilient child protection and care system. This will require the adoption of a national accountability framework; advocacy for increased investment in child protection and care systems; adequate coordination among key

partners, including in the social welfare and justice sectors and businesses; capacity development of the social welfare workforce; expansion of the Child Protection Information Management System; and enhancing the child protection policy of the Philippine National Police. At the subnational level, UNICEF will create and expand innovative models to prevent and address online and offline violence, including strengthened capacity to plan, budget and implement protective services, coordination mechanisms and social and behaviour change interventions to address harmful practices. In the Bangsamoro Autonomous Region, UNICEF will support the adoption and implementation of the Bangsamoro children's code and other policy frameworks; accelerate action to address child marriage; strengthen birth registration systems; and support the monitoring, reporting and verification of grave child rights violations and the roll-out of inter-agency protocols on children in situations of armed conflict.

Child-sensitive public policy

23. This component will further the right of every child to an equitable start in life by increasing the coverage of social protection programmes and family-friendly policies focusing on children and adolescents living in multidimensional poverty. It will contribute to UNSDCF outputs 1.4 and 1.6 and all of the Sustainable Development Goals, including target 1.4 on social protection.

24. UNICEF will provide technical support for evidence generation, public policy development and efforts to strengthen integrated, child-sensitive and shock-responsive social protection programmes that are progressively universal in coverage, contributing to the social protection plan and floor. In the Bangsamoro Autonomous Region, this work requires building and operationalizing administrative systems (e.g., the registry and systems for information management, payments and grievance redress). To address the socioeconomic barriers for children with disabilities, UNICEF will support the design of an allowance that can help to defray the direct and indirect costs of disability.

25. UNICEF will strengthen the capacity of national and subnational governments in public finance management and local governance for children, to further the delivery of gender-transformative and climate-smart social services. This will include the development of an index to analyse child multidimensional poverty and support to budget frameworks, ensuring that public investments for children are transparent, equitable, efficient and informed by the participation of adolescents and child rights advocates. UNICEF will build a coalition of business champions and support national regulatory bodies to develop more family-friendly policies that align business operations to the Child Rights and Business Principles.

Climate, environment and resilience

26. This component will aim to protect the right of every child to live in a safe and sustainable climate and environment. The programme will contribute to UNSDCF output 3.1, Sustainable Development Goal 6 and the Sendai Framework for Disaster Risk Reduction 2015–2030.

27. UNICEF will strengthen the capacity of national and local governments to finance, coordinate, regulate and deliver climate-resilient, safely managed WASH services in communities, schools, child development centres and health facilities, including through humanitarian responses. In the Bangsamoro Autonomous Region, UNICEF will mobilize communities to reduce open defecation and promote community-led total sanitation, thereby contributing to the reduction of stunting in children. UNICEF will generate evidence on the impacts of climate, disasters and environmental hazards on children and use this evidence to enhance policies,

programmes and social and behaviour change interventions, making children and communities safer and more resilient. UNICEF will support the expansion of climate and disaster risk financing options for the Government; the participation of children in climate action and policymaking; the integration of business in resilience-building and safeguarding the environment; and overall efforts to make social services more shock-adaptive and climate-resilient.

Programme effectiveness

28. This component will ensure strategic and results-based design, coordination and management of programmes to further programme excellence; systematic cross-sectoral collaboration; and the monitoring of progress against three cross-sectoral priorities: children with disabilities; gender-transformative programming; and climate, environment and resilience. The component includes planning, monitoring and evaluation; communications, advocacy and partnerships; and social and behaviour change.

Summary table

<i>Programme component</i>	<i>(In thousands of United States dollars)</i>		
	<i>Regular resources</i>	<i>Other resources</i>	<i>Total</i>
Health and nutrition	2 472	45 584	48 056
Education	2 215	24 303	26 518
Child protection	2 175	26 639	28 814
Child-sensitive public policy	3 410	9 193	12 603
Climate, environment and resilience	2 915	11 658	14 573
Programme effectiveness	4 138	12 859	16 997
Total	17 325	130 236	147 561

* Other resources (emergency) may be mobilized, as required, through humanitarian appeals processes. Based on historical trends, it is estimated that \$50 million may be required.

Programme and risk management

29. This CPD outlines UNICEF contribution to the UNSDCF, the Philippine Development Plan, 2023–2028 and the Sustainable Development Goals, and serves as the primary unit of accountability to the Executive Board for the achievement of results and resources assigned to the programme. Accountabilities of managers at the country, regional and headquarters levels for country programmes are prescribed in the organization’s programme and operations policies and procedures. The programme is implemented in consultation with the Government and upon requests from relevant government authorities through their multi-year workplans. In the Bangsamoro Autonomous Region, UNICEF works with local authorities to accelerate progress for children, coordinating programmes through the field office in Cotabato.

30. The country programme assumes that at least one major emergency will occur during the cycle. UNICEF will continue to meet all minimum preparedness standards (including for business continuity); strengthen capacities to link development and humanitarian programming and deliver on the Core Commitments

for Children in Humanitarian Action; co-lead the nutrition, education and WASH clusters and the child protection subcluster, and further humanitarian reform efforts such as the anticipatory action pilot and flagship initiative of the Emergency Relief Coordinator.

31. Several focused risk responses are conducted through the United Nations system, in line with the Business Operations Strategy. For example, UNICEF continues to: use the harmonized approach to cash transfers, strengthen accountability to affected populations, and implement measures to prevent sexual exploitation and abuse.

Monitoring, learning and evaluation

32. Programme monitoring will be based on the results and resources framework. UNICEF will endeavour to have relevant indicators and targets disaggregated by gender, age and geography, whenever possible. Regular joint field monitoring and programme reviews with the Government will assess progress on output-level results and inform course corrections. UNICEF will report its UNSDCF contributions using the UN INFO platform.

33. To enhance analysis of the situation of children, UNICEF will continue its engagement with the Philippine Statistical System to strengthen data for children and monitoring systems to track progress against key national results, including support to the establishment of a statistical framework for children and implementation of the Philippine Statistical Development Program; the integration of child rights in surveys; and strengthening of administrative data systems. UNICEF will support the digitalization of data systems and digital transformation of social service provision. Data pertaining to the country programme will be made available to all relevant authorities to enhance credibility and national ownership.

34. UNICEF will continue to build the evaluation capacity of counterparts. During the country programme period, UNICEF will collaborate with key government agencies to conduct strategic country-led evaluations.

Annex

Results and resources framework

Philippines – UNICEF country programme of cooperation, March 2024–December 2028

<p>Convention on the Rights of the Child: Articles 4–7, 11–13, 16–17, 24, 27–29, 39</p> <p>National priorities: Sustainable Development Goals 1, 2, 3, 4 and 10 and the Philippine Development Plan 2023–2028, chapters 2 (2.1, 2.2, 2.3), 3 (3.1, 3.2); 5; 13, 14 and 15</p>
<p>United Nations Sustainable Development Cooperation Framework (UNSDCF) outcomes involving UNICEF:</p> <p>Outcome 1: By 2028, all people, especially those at risk of being left behind, have increased resilience to economic, climatic, disaster, and public health risk through improved, equitable, and gender-responsive access to and utilization of quality social services, social protection, healthy habitat, enhanced good governance and peace.</p> <p>Outcome 3: By 2028, all people benefit from just transition to low-carbon, climate-resilient development, sustainable management of environment, natural resources and biodiversity and strengthened resilience to disasters and natural hazards.</p>
<p>Related UNICEF Strategic Plan, 2022–2025 Goal Areas: 1–5</p>

UNSDCF outcomes	UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
						RR	OR	Total
1.	1. By 2028, more children, adolescents and women have access to nutritious diets, quality primary health care, nurturing practices, and essential supplies.	<p>Percentage of live births attended by skilled health personnel.</p> <p>B: 89%, including live births and stillbirths (2022)</p> <p>T: 95%</p> <p>Percentage of surviving infants (aged 12 to 23 months) who received first</p>	<p>National Demographic and Health Survey (NDHS)</p> <p>NDHS</p>	<p>1.1 Government capacity at all levels is strengthened to improve equitable access to and utilization of high-impact preventive, promotive and curative child health and nutrition for boys and girls under 5 years old.</p> <p>1.2 Health systems are strengthened at all levels to accelerate equitable access to high-impact, quality adolescent, maternal and newborn health interventions.</p> <p>1.3 Government has</p>	<p>Department of Health (DOH); National Nutrition Council; Department of Social Welfare and Development (DSWD); Department of Education (DepEd); National Youth Council</p> <p>Provincial health offices; local government units (LGUs); Bangsamoro Autonomous Region in Muslim Mindanao (BARMM); Ministry of Health</p> <p>United Nations agencies;</p>	2 472	45 584	48 056

UNSDCF outcomes	UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
						RR	OR	Total
		<p>dose of: (a) diphtheria/ tetanus/ pertussis (DTP) vaccine; (b) measles vaccine.</p> <p>B: (a) 86.7%; (b) 79.2% (2022) T: (a) 95%; (b) 95%</p>		<p>enhanced capacity to scale-up equitable access to nutrition-specific and nutrition-sensitive interventions to prevent all forms of malnutrition in early childhood.</p> <p>1.4 Legislative and institutional accountability frameworks are strengthened to enhance multisectoral planning, budgeting and coordination of nutrition services, and to promote food environments that prevent overweight and obesity in children and adolescents.</p>	civil society; private sector			
		<p>Proportion of children aged 6–23 months who receive a minimum acceptable diet.</p> <p>B: 13.3% (2021) T: 25%</p>	National Nutrition Survey (NNS)	<p>1.5 BARMM authorities has enhanced capacity to plan, implement, monitor and coordinate the integrated delivery of health and nutrition-specific and nutrition-sensitive services.</p>				
		<p>Prevalence of overweight and obesity among: (a) children aged 5–10 years; and (b) adolescents aged 10–19 years.</p> <p>B: (a) 14%; (b) 13% (2021) T: (a) 5.7%; (b) 4.6%</p>	NNS					

UNSDCF outcomes	UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
						RR	OR	Total
1.	2. By 2028, more children, especially the most vulnerable, participate in a more quality, inclusive, safe, resilient and holistic education system, including in emergencies.	<p>Percentage of children aged 3–5 years old who are participating in: (a) preschool; and (b) kindergarten</p> <p>B: (a) 47% (2020); (b) 72.4% (school year (SY) 2021/22)</p> <p>T: (a) 67%; (b) 83%</p>	<p>(a) DSWD Early Childhood Care and Development (ECCD) Information System</p> <p>(b) Basic Education Information System (BEIS)</p>	<p>2.1 Duty-bearers' capacities are strengthened to support children aged 3–5 years old, especially the most vulnerable, to be developmentally on track and able to transition smoothly to Grade 1.</p> <p>2.2 Duty-bearers' capacities are strengthened to support children, especially the most vulnerable, in acquiring foundational and twenty-first century skills in elementary school.</p> <p>2.3. Duty-bearers' capacities are strengthened to support out of school adolescents in acquiring foundational and twenty-first century skills, including in emergencies.</p> <p>2.4 Duty-bearers' capacities in BARMM are strengthened to support boys and girls in acquiring foundational and twenty-first century skills through quality, inclusive, safe, relevant, resilient and holistic education services.</p>	<p>DepEd; ECCD Council; DSWD</p> <p>LGUs; BARMM; Ministry of Basic and Higher Technical Education</p> <p>United Nations agencies; civil society; private sector</p>	2 215	24 303	26 518
		<p>Transition rate between primary and lower secondary education</p> <p>B: 99% (SY 2022/23)</p> <p>T: 100</p>	BEIS					
		<p>Percentage of enrolled learners who complete the Alternative Learning System Programme</p> <p>B: 49% (SY 2021/22)</p> <p>T: 65%</p>	Learner Information System					

UNSDCF outcomes	UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
						RR	OR	Total
1	3. By 2028, an inclusive, shock-responsive and equitable child protection system is in place and used to prevent and respond to violence in all settings.	<p>Existence of a mature child protection system</p> <p>B: systems integration (2023) T: systems maturity</p> <p>Percentage of girl in early unions or marriage before age 18</p> <p>B: 9.4% (2022) T: 7.4%</p> <p>Percentage of boys and girls who have experienced violent discipline</p> <p>B: 59% (2022) T: 54%</p>	<p>Government policies, evaluations and reports</p> <p>NDHS</p> <p>NDHS</p>	<p>3.1 A national, intersectoral collaborative mechanism is established to coordinate and capacitate LGUs to implement a functional and shock-responsive child protection system</p> <p>3.2 Communities, families and children in model LGUs demonstrate improved capacity to prevent violence against children and harmful practices.</p> <p>3.3 Models to effectively enhance and sustain a child protection system that responds to violence against children and other harmful practices in all settings are implemented at scale.</p> <p>3.4 Child protection system in BARMM is established and strengthened to prevent and respond to violence, including harmful practices against children and adolescents, in all settings.</p>	<p>DSWD; Department of Justice; DOH; DepEd; Council for the Welfare of Children; Juvenile Justice and Welfare Council</p> <p>LGUs; BARMM; Ministry of Social Services and Development</p> <p>Country Task Force on Monitoring and Reporting on grave child rights violations</p> <p>United Nations agencies; civil society; private sector</p>	2 175	26 639	28 814
1	4. By 2028, the coverage of children and adolescents living in multi-dimensional	<p>Poverty incidence among children</p> <p>B: 26.4% (2021) T: 13.2%</p>	<p>Annual Poverty Indicators Survey</p>	<p>4.1 Government has increased capacity to strengthen efficiency, effectiveness and transparency in key social sector spending at national and subnational level.</p>	<p>DSWD; National Economic and Development Authority (NEDA); Department of Budget and Management; Department of the Interior and Local Government (DILG)</p>	3 410	9 193	12 603

UNSDCF outcomes	UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
						RR	OR	Total
	poverty that benefit from social protection programmes and family-friendly policies increases.	<p>Percentage of poor households with members aged 18 years old and below that are beneficiaries of the Pantawid Pamilyang Pilipino Program (4Ps)</p> <p>B: 64.52% (2019) T: 85%</p>	Listahanan/ latest standardized targeting system	<p>4.2 Government has increased capacity to operationalize child- and gender-transformative, shock-responsive, integrated and inclusive social protection, informed by analysis of multidimensional child poverty.</p> <p>4.3 Child rights are integrated in policies, legislation and mechanisms governing responsible business conduct.</p> <p>4.4 BARMM government has increased capacity to design and develop climate-responsive social policies and equitable and shock-responsive social protection systems.</p>	<p>LGUs; leagues of local government; BARMM; Ministry of Interior and Local Governance</p> <p>United Nations agencies; civil society; private sector</p>			
		<p>Total expenditures on social protection programmes as percentage of gross domestic product (%)</p> <p>B: 2.7% (2021) T: 5.25%</p>	Classification of the functions of government table in the budget of expenditure and source funding					
3	5. By 2028, children, households, and communities are living in climate- and disaster-resilient	Extent to which national and local government frameworks for climate action and disaster	UNICEF progress reports	5.1 Government has strengthened capacity to deliver climate-resilient social services, accelerate climate action and strengthen disaster resilience with child and adolescent participation.	<p>NEDA; DepEd; DOH; DILG; DSWD; Climate Change Commission; Department of Environment and Natural Resources</p> <p>BARMM ministries</p> <p>United Nations agencies;</p>	2 915	11 658	14 573

UNSDCF outcomes	UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
						RR	OR	Total
	environments supporting equitable and sustainable development.	resilience are updated to be child sensitive at the national and local levels B: Level 1 (2022) T: Level 4		5.2 Government has improved capacity to coordinate and deliver climate-resilient, safely managed water and sanitation services in communities, schools, child development centres and health facilities, including during emergencies.	civil society; private sector			
		Proportion of population using: (a) safely managed drinking water services; and (b) safely managed sanitation services B: (a) 47%; (b) 60.6% T: (a) 85.11%; (b) 89.34%	WHO/ UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene	5.3 BARMM government has increased capacity to improve access to basic water and sanitation services in communities and institutions and participate in reducing disaster risks.				
		Proportion of BARMM population that: (a) use basic drinking water services; and (b) use basic sanitation services; (c) practice zero open	NDHS					

UNSDCF outcomes	UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
						RR	OR	Total
		defecation B: (a) 80%; (b) 55%, (c) 82.2% (2022) T: (a) 94.29%; (b) 87.14%; (c) 93%						
1, 3	6. The country programme is efficiently and effectively managed and coordinated for achieving results for children	Percentage of management and programme indicators on track B: 100% (2022) T: 100%	Internal reports	Effective implementation and coordination of multisectoral programmes, change strategies and enablers.	NEDA	4 138	12 859	16 997
Total resources						17 325	130 236	147 561