

# Knowledge for Children in Africa

2016 Publications Catalogue



# Contents

Foreword	i
Part 1 Child Poverty and Socio-Economic Development	1
Part 2 Public Finance for Children	28
Part 3 Social Protection	41
Part 4 Child Protection	53
Part 5 Maternal, Newborn and Child Health	68
Part 6 Child Nutrition	93
Part 7 Water, Sanitation and Hygiene	99
Part 8 Education and Early Childhood Development	112
Part 9 HIV/AIDS	126
Part 10 Adolescents	136
Part 11 Humanitarian Action, Resilience and Peace Building	140
Part 12 Climate Change	149
Part 13 Miscellaneous	151

# Foreword

Every year, UNICEF and its partners in Africa generate a wealth of evidence on the situation of children. Knowledge and evidence are essential for informing the development, monitoring and implementation of policies and programmes for the realization of children's rights. To this end, we are pleased to present the 2016 edition of UNICEF Africa Publications Catalogue.

The 2016 catalogue features over 250 reports and studies that UNICEF and its partners are generating on the situation of children and young people in the region. These reports and studies represent the collective knowledge produced by UNICEF Country and Regional Offices in Africa. They capture the work that UNICEF and its partners do in the continent to support children and young people realise their rights to survival, development and protection.

The publications cover a wide range of topics organised in the catalogue under the following categories:

1. Child Poverty and Socio-Economic Development
2. Public Finance for Children
3. Social Protection
4. Child Protection
5. Maternal and Child Health
6. Child Nutrition
7. Water, Sanitation and Hygiene
8. Education and early childhood development
9. HIV/AIDS
10. Adolescents
11. Humanitarian Action, Resilience and Peace Building
12. Climate Change
13. Miscellaneous

Most publications are, and will, be available online. For each publication, the catalogue includes Authors/Contributors, web-links, dates of (planned) publication and contact details for additional information.

The most successful efforts for women and children are based on evidence. We sincerely hope that you will find this catalogue, and most importantly the publications, very useful resources for evidence-based decision making and programming.

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# Part 1

## Child Poverty and Socio-Economic Development

### Child Poverty in Angola: a Multiple Overlapping Deprivation Analysis

The Multiple Overlapping Deprivation Analysis (MODA) provides comprehensive estimates of child poverty in Angola, based on 2015 Demographic and Health Survey/Multiple Indicator Cluster Survey data. By examining the relationship between monetary well-being and childhood deprivations, the analysis establishes that a child's experience of deprivation is multifaceted and interrelated, and that such multiple overlapping deprivations are more likely to occur in more socially disadvantaged groups.

Child poverty in all its dimensions is part of the Sustainable Development Goals, and countries will be required to define multidimensional child poverty and to track its evolution over the next 15 years. The Multidimensional Child Poverty Index can be used as the national measure to track child poverty over time. The results of this child poverty study will be used to inform national and decentralized-level advocacy towards more equity-focused and child-centred policies and programmes.



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### Benin Multiple Indicator Cluster Survey 2014

The first edition of the Multiple Indicator Cluster Survey (MICS) in Benin was completed in early 2016 by the National Institute of Statistics and Economic Analysis, with UNICEF technical and financial support. This nationwide survey, which covered 14,606 households, provided the country with recent data, disaggregated by age, gender and poverty quintile on the situation of women and children. MICS implementation was an opportunity to innovate in terms of data collection (using Computer Assisted Personal Interview (CAPI) software), but also in terms of the interviewers' recruitment process, communication arrangements and data-sharing mechanisms. These organizational innovations allowed: (i) data transmission time to be reduced and new updates to the CAPI application to be made; (ii) the data quality and robustness to be strengthened; and (iii) the duration of the MICS data processing to be reduced. All devices helped ensure enhanced quality and reliability of the MICS5 process.



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These data have been used for reporting on the Millennium Development Goals (MDGs) final report. The Benin 2014 MICS will also provide the most up-to-date baseline statistics for the post-MDGs era.

## Child Poverty in Benin: a Multiple Overlapping Deprivation Analysis

Data recently generated through the two nationally representative household surveys – Multiple Indicator Cluster Survey (MICS) 2014 and the Enquête Modulaire Intégrée sur les Conditions de Vie de Ménages (EMICOV) 2015 – offer an important opportunity to undertake in-depth analysis of child poverty and deprivations in Benin. This study is of particularly high importance in Benin, where MICS and EMICOV results show an alarming situation in key human development dimensions, such as a high under-five mortality rate (estimated at 115 per 1,000 live births) and an increased monetary poverty rate over recent years.

The Multiple Overlapping Deprivation Analysis (MODA) methodology developed by the UNICEF Office of Research – Innocenti will be used to measure child poverty. Building on the existing methodologies of measuring poverty, and as part of UNICEF's continued efforts to generate quality evidence on child poverty and disparities, MODA methodology defines child poverty as non-fulfilment of the rights listed in the Convention on the Rights of the Child, moving from household-level to child-level poverty measurement.

The MODA study will provide sound descriptive and analytical information on child poverty and deprivations, to inform national policies/plans and in particular the upcoming Fourth Growth Strategy for Poverty Reduction.



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## Child Poverty in Botswana: a Multiple Overlapping Deprivation Analysis

In Botswana, while the country has registered remarkable economic growth over the past few decades, key human development indicators are far below the norms for an upper-middle-income country. Its Human Development Index ranking is about 40 places below its per capita GDP ranking.

In partnership with the Office of the President, which is in charge of poverty reduction (a national priority in the country), UNICEF has conducted a Multiple Overlapping Deprivation Analysis (MODA). The study looks beyond monetary poverty at the multiple deprivations faced by children in Botswana, in line with the definition of poverty contained in the new Sustainable Development Goals. It reveals that a significantly higher number of children suffer of multiple deprivation compared to those that are monetary poor, as well as a weak correlation between multiple deprivation and monetary poverty. The report also draws on the key findings to include a set of actionable recommendations that would help the country close the gap between human development and economic growth. It will provide inputs to the formulation of Botswana's Poverty Eradication Strategy, Eleventh National Development Plan and Vision 2036.



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## Child Poverty in Burundi: a Multiple Overlapping Deprivation Analysis

The Multiple Overlapping Deprivation Analysis (MODA) provides comprehensive estimates of child poverty in Burundi, based on analyses of the Burundi Household Budget Survey (BHBS 2013/2014). By examining the relationship between monetary well-being and childhood deprivations, the analysis establishes that a child's experience of deprivation is multifaceted and interrelated, and that such multiple overlapping deprivations are more likely to occur in more socially disadvantaged groups.

Child poverty in all its dimensions is part of the Sustainable Development Goals, and countries will be required to define multidimensional child poverty and track its evolution over the next 15 years. The Multidimensional Child Poverty Index can be used as the national measure to track child poverty over time.

The analysis will use and show the magnitude of deprivation before the current crisis. The results will help to update the country's poverty and deprivation map and will strengthen the Country Programme interventions in Burundi.

## Simulation of the Burundian Political Crisis on Children Well-being

Since April 2015, Burundi – one of the poorest countries in the world, with a history of violent conflict – has once more become fragile. This situation has caused a downturn in economic activity, an increase in unemployment and a loss of household income. Household purchasing power has been eroded by rising inflation, which stood at 5.5 per cent in 2015 against 4.4 per cent in 2014. In addition to these adverse effects on households, the crisis has led to a decrease in aid from several donors, in a context where the country's budget is heavily dependent on foreign resource: health (-87 per cent); education (-87.9 per cent); and water (-100 per cent).

To build evidence on the potential impact of this crisis on different social sectors, this study will quantify the effects of the crisis on social outcomes. The purposes of this exercise are to: (i) simulate the effects of the current crisis on social sectors and specifically on child deprivation; (ii) provide information on the distribution of these effects on different vulnerable socio-economic groups; and (iii) propose policy measures to mitigate these effects on children's well-being.

This analysis will be based on (i) national accounts data; (ii) the Household Living Condition Survey 2014; and (iii) country economics data. It will help persuade donors not to withdraw their funding, but to put in place transitional mechanisms through which to channel their resources.



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## Cameroon Multiple Indicator Cluster Survey

The Multiple Indicator Cluster Survey (MICS) programme was developed by UNICEF to provide up-to-date information on the situation of children and women. MICS measures key indicators that allow countries to monitor progress towards internationally agreed commitments. Under-five mortality is still a major concern in Cameroon (103 deaths per 1,000 births) with significant regional disparities. Children born in the northern regions are more at risk of dying before their fifth birthday than are those in the remaining parts of the country.

Children in rural areas (48 per cent) are less likely to sleep under treated mosquito nets than are those in urban areas. In term of primary-school enrolment, the Far North, North and Adamawa regions are still lagging behind in terms of girls' education.



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## Situation Analysis of Women and Children in Comoros

Since 2000, no situation analysis (SitAn) of children and women has been conducted in Comoros. This large gap in strategic knowledge is recognized by the Government of Comoros and its development partners, including UNICEF. The 2016 SitAn uses new data (2012 Demographic and Health Survey/Multiple Indicator Cluster Survey, 2015 Afristat/Inseed Living Standards Survey, etc.) and new analytical work (from the World Bank, European Union, Comoros Government, etc.) to provide an updated picture of the status of child rights in Comoros.

The 2016 Comoros SitAn identifies and analyses critical barriers and bottlenecks that prevent children and families from enjoying their rights with equity. This publication makes well-targeted recommendations on how to reduce or eliminate these bottlenecks, as well as on the most relevant policies and systems to sustain such efforts. It also serves as a resource for advocacy on policies and strategies geared towards the improvement of children's and women's rights in Comoros.



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## Child Poverty in Democratic Republic of Congo: a Multiple Overlapping Deprivation Analysis

The Multiple Overlapping Deprivation Analysis (MODA) provides comprehensive estimates of child poverty in Democratic Republic of Congo (DRC). By examining the relationship between monetary well-being and childhood deprivations, the analysis establishes that a child's experience of deprivation is multifaceted and interrelated, and that such multiple overlapping deprivations are more likely to occur in more socially disadvantaged groups.

Child poverty in all its dimensions is part of the Sustainable Development Goals, and countries will be required to define multidimensional child poverty and to track its evolution over the next 15 years. The Multidimensional Child Poverty Index can be used as the national measure to track child poverty over time.

The report will help understand how and where children in DRC are experiencing deprivation, and the kind of policy responses that would structurally address their different deprivations. The purpose of the report is to inform planning, programming and decision making. The publication will highlight indicators that give insights into where policy interventions can produce improvements and promote various measures based on a child-rights approach to reducing the deprivations.

## Democratic Republic of Congo Gender Atlas

This Gender Atlas presents visually, through maps and charts, gender statistics for Democratic Republic of Congo (DRC), a selection of indicators from major surveys (Multiple Indicator Cluster Survey, Demographic and Health Survey), such as education, health, etc., which are particularly important for measuring differences in the situation of women and men (i.e. gender gaps). The Gender Atlas for DRC addresses the issue of producing and disseminating data reflecting the realities of the lives of women and men, and policy issues relating to gender equality.

Mapping the gender indicators will provide vital visual information for adjusting programmes and activities, so that they better achieve gender equality goals. We believe that what is measured and mapped is more likely to be prioritized, and visual evidence gathered against indicators can help make the case that gender issues should be taken seriously.



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## Child Poverty in Egypt: a Multiple Overlapping Deprivation Analysis

Multiple Overlapping Deprivation Analysis (MODA) provides comprehensive estimates of child poverty in Egypt, based on analysis of the 2014 Egypt Demographic and Health Survey. The methodology of the study has been adapted to the Egyptian context through a process of consultation with national stakeholders, which contributed to the definition of the deprivation indicators and of the poverty thresholds.

By examining the relationship between monetary well-being and childhood deprivations, the analysis establishes the fact that a child's experience of deprivation is multifaceted and interrelated, and also that such multiple overlapping deprivations are more likely to occur in more socially disadvantaged groups.

Child poverty in all its dimensions is part of the Sustainable Development Goals, and countries will be required to define multidimensional child poverty and to track its evolution over the next 15 years. The Multidimensional Child Poverty Index can be used as the national measure to track child poverty over time. The report presents sound evidence that will inform the national debate on poverty and the current reform of social protection, with evidence on disadvantage and vulnerability experienced by Egyptian children.

## Children in Egypt 2016: a Statistical Digest

Children in Egypt 2016 is the third edition of a statistical publication that focuses on children and brings together a wide spectrum of data relevant to child well-being. It contains over 200 statistical tables, organized into 14 thematic chapters and covering essential dimensions of child well-being, including survival, health and nutrition, access to water and sanitation, education, child protection, and poverty.

The most recent available data and trends are reported for each of the selected indicators, together with metadata that include reference to the original data source. To the extent possible, data are disaggregated by gender, geographical location and socio-economic status. The 2016 edition of Children in Egypt also reflects new data from the 2015 Egypt Health Issues Survey, education statistics for the 2015–2016 school year, new poverty and government budget data, updated demographic data, and a comprehensive update of statistics on children from international data sources.

The publication, which reflects the current situation of children in Egypt, aims to give professionals and the general public access to a comprehensive selection of the most recent and quality statistics that are available on children in Egypt.



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## Child Poverty in Ethiopia: a Multiple Overlapping Deprivation Analysis

Child poverty in Ethiopia will be analysed using the Multiple Overlapping Deprivation Analysis (MODA) method, on the basis of 2011 Demographic and Health Survey, household income consumption expenditure and Welfare Monitoring Survey data. The purpose of the analysis is to generate evidence on multidimensional child poverty in Ethiopia. The study is expected to find that even though overall monetary poverty has declined over the years, there is very little change in terms of the degree of multidimensional poverty. It is expected that more than 80 per cent of children in Ethiopia are deprived in three or more dimensions, such as nutrition, education, health and housing. Spatial differences across regions or different socio-economic characteristics of children are also among the expected findings.

The analysis will be useful to provide the Government of Ethiopia and other stakeholders with a new perspective on child poverty, as well as a baseline and a target for the national Strategic Development Goal indicators. The analysis will also contribute to the design of integrated policies, action plans and programmes for addressing monetary and non-monetary child poverty in Ethiopia.

## Socio-economic Atlas of Children and Women in Ethiopia

The atlas presents a range of indicators on health, education, nutrition and water, sanitation and hygiene (WASH), showing the social and economic lives of the Ethiopian population, with a focus on children. The atlas explores spatial differences among various districts and regions. It aims to provide an easy reference for programme implementers and policy decision makers, so that they are able to develop better pro-poor policies/programmes that target the vulnerable children and women in the Ethiopian population.



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## Situation Analysis of Women and Children in Gabon: 2015 Situation Analysis

Preliminary results of the General Census of Population and Housing indicate that the Gabonese population in 2013 was 1.803 million. Gabon appears as the most urbanized country on the continent, with 86 per cent of the population living in cities. In 2005, a third of Gabonese were poor, with 5 per cent of the population living in extreme poverty. According to a recent analysis, many children under five suffer from multiple deprivations, especially in the areas of health (42 per cent), sanitation (40 per cent), nutrition (35 per cent) and protection (27 per cent).

The main objective of this situation analysis is to provide the Government and development partners with an analytical assessment of the fulfilment of child rights in Gabon, in order to guide the vision and actions to be taken within the upcoming Gabon–UNICEF cooperation programme. The results of the analysis will stimulate further policy dialogue and advocacy to strengthen or develop relevant policies and strategies targeting children and women. The analysis aims to provide an exhaustive framework on the rights of Gabonese children. It will also serve as a marker to monitor developments in coming years.

The study was conducted using an approach based on 'human rights' and 'fairness'. It is primarily based on the analysis and cross-checking of existing data, in order to present an updated overview of the fulfilment of each category of children's rights, to measure the main disparities and inequalities between population groups and to identify major issues to be addressed in the coming years.

## Gambia Integrated Household Survey

The Integrated Household Survey (IHS) provides important data on household income, consumption expenditure and patterns at the national and the urban/rural level. The results of the survey will be used as a baseline for the National Development Plan 2017–2020. The IHS data will provide an insight into the extent and nature of poverty and inequality in terms of income, education, health services and other key poverty-related measurements.

The IHS data are disaggregated by locality and socio-economic characteristics, such as educational attainment, employment status, occupation, skills, access to health and sanitary facilities. This provides invaluable information for targeting the most vulnerable socio-economic groups in Gambian society.



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## Situation Analysis of Women and Children in Gambia

This situation analysis (SitAn) was conducted to generate evidence through the analysis of key barriers, bottlenecks, inequities and deprivations, in order to inform policy dialogue and child-focused policy advocacy. In addition, the SitAn informed the new United Nations Development Assistance Framework and UNICEF Country Programme 2017–2021.

The analysis provides the most up-to-date information on the emerging issues facing the most vulnerable, and identifies the bottlenecks to achieving their rights. It facilitates decision making by UNICEF, development partners and the Government on how the rights of children can be achieved in an equitable manner.



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## The Ghana Inequality and Poverty Analysis

Over recent years, Ghana has ranked among the world's fastest-growing countries, with over 5 per cent average annual GDP growth since 2006. Between the early 1990s and Ghana's previous Household Livelihood Survey in 2006, the country also appeared to be comfortably on track to halve poverty, although data from the same period indicated that income inequality levels were on the rise. Following recently accelerated growth, the discovery of oil in 2010, and recent shocks that have often hit the poor hardest, speculation is rife that Ghana's inequality has increased drastically and that a sub-group of extreme poor are being left behind.

This paper uses the data from the new (sixth) Ghana Living Standards Survey (2012/2013): (i) to determine how (and why) income inequality has affected the contribution of Ghana's economic growth to poverty reduction since 2006; and (ii) to understand the extent to which the poorest group of Ghana's population has benefited from growth in terms of reduced poverty incidence and depth.



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## Child Poverty in Kenya: a Multiple Overlapping Deprivation Analysis

The latest household poverty estimates for Kenya indicate that over 40 per cent of households fall below the absolute monetary poverty line, with a large number of children living in these poor households. Although many poverty studies and analyses have already been conducted, these have not devoted adequate attention and focus to child poverty and to the multiple deprivations that are faced by children.

Multiple Overlapping Deprivation Analysis (MODA) provides comprehensive estimates of child poverty in Kenya. By examining the relationship between monetary well-being and childhood deprivations, the analysis establishes that a child's experience of deprivation is multifaceted and interrelated, and that such multiple overlapping deprivations are more likely to occur in more socially disadvantaged groups.

Child poverty in all its dimensions is part of the Sustainable Development Goals, and countries will be required to define multidimensional child poverty and to track its evolution over the next 15 years. The Multidimensional Child Poverty Index can be used as the national measure to track child poverty over time. The report presents sound evidence that will inform national strategies and plans to improve the socio-economic development of the country.

## Knowledge, Attitudes, Practices and Behaviours (KAPB) study on Key Behaviours in Kenya

Improving the situation of children and women requires behaviour and social change approaches and interventions. This enables children and women to participate in and influence policy, decision-making dialogue and demand for services. The study will explore the prevailing knowledge, attitude, beliefs and practices of child caregivers, children and adolescents around key behaviours, such as: handwashing at critical times; care seeking among pregnant mothers (at least four antenatal care visits) and seeking skilled delivery; early and appropriate care seeking for pneumonia and malaria; appropriate feeding practices; early initiation and full immunization of children by one year of age; sanitary disposal of human waste; rejection of child-harmful practices; and registration of the birth of children within one year from birth.

The study will also look at the gaps in behaviour/practices and the dynamics of the social norms that are at play around these key behaviours. It will identify the relevant factors required to create an enabling environment and responsive policy that address both demand and supply needs of the key behaviours. The study will provide baseline data to monitor changes in trends and patterns in key behaviours beyond end-line studies.



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## Multiple Indicator Cluster Survey 2013/2014 in Bungoma County in Kenya

The Bungoma County Multiple Indicator Cluster Survey (MICS) is a representative sample survey designed to provide estimates for a large number of indicators on the situation of children and women at the county level, in both urban and rural areas. The survey used two-stage stratified cluster sampling. Information was collected from a total of 1,246 households.

Key findings include: approximately 43 per cent of children aged under six months had been exclusively breastfed. Overall, 64 per cent of children aged 12–23 months were fully immunized against vaccine-preventable childhood diseases. Some 4 per cent of women aged 15–49 years had had a live birth before age 15. About 37 per cent of children aged 36–59 months attended an organized early childhood education programme. The gender parity index for primary school was 1.00 and for secondary school – 1.22. Only 40 per cent of children under five years had had their births registered. Around 2 per cent of women had some form of female genital mutilation.

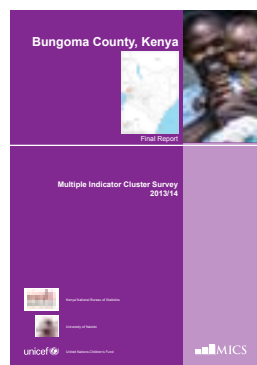
The results of this survey provide baseline information that is critical in facilitating evidence-based planning, budgeting and programming by policy makers and stakeholders at the county level, in order to improve child well-being.

## Multiple Indicator Cluster Survey 2013/2014 in Kakamega County in Kenya

The Kakamega County Multiple Indicator Cluster Survey (MICS) is a representative sample survey designed to provide estimates for a large number of indicators on the situation of children and women at the county level, in both urban and rural areas. Information was collected from a total of 1,221 households, representing a 92 per cent response rate.

The findings show that 98 per cent of children had been breastfed, but only 30 per cent of babies were breastfed for the first time within one hour of birth. Some 67 per cent of children had been fully vaccinated by their first birthday. Around 16 per cent of women aged 15–19 years had already given birth, and 3 per cent were pregnant with their first child. About 40 per cent of children aged 36–59 months attended an organized early childhood education programme. Some 50 per cent of children under five years had had their births registered.

The results of this survey provide requisite baseline information that can be used to facilitate evidence-based planning, budgeting and programming by policy makers and stakeholders at the county level.



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## Multiple Indicator Cluster Survey 2013/2014 in Turkana County in Kenya

The Turkana County Multiple Indicator Cluster Survey (MICS) is a representative sample survey designed to provide estimates for a large number of indicators on the situation of children and women at the county level, in both urban and rural areas. The survey used two-stage stratified cluster sampling. Information was collected from a total of 1,277 households; the response rate was 93 per cent.

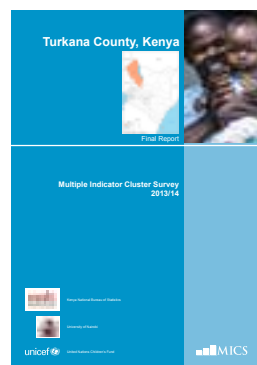
Key findings include: 97 per cent of children had been breastfed, with 54 per cent of babies breastfed for the first time within one hour of birth. Overall, 79 per cent of children aged 12–23 months had been fully immunized against vaccine-preventable childhood diseases. Some 16 per cent of women aged 15–19 years had begun childbearing; 3 per cent were pregnant with their first child; and 3 per cent had had a live birth before age 15. Around 40 per cent of children under five years had had their births registered. Some 3 per cent of women had some form of female genital mutilation.

The results of this survey provide requisite baseline information that can be used to facilitate evidence-based planning, budgeting and programming by policy makers and stakeholders at the county level.

## Child Poverty in Lesotho: a Multiple Overlapping Deprivation Analysis

Multiple Overlapping Deprivation Analysis (MODA) provides comprehensive estimates of child poverty in Lesotho, based on analyses of the 2014 Lesotho Demographic and Health Survey (DHS), the Continuous Multipurpose Survey, and the Household Budget Survey. By examining the relationship between monetary well-being and childhood deprivations, the analysis establishes that a child's experience of deprivation is multifaceted and interrelated, and that such multiple overlapping deprivation is more likely to occur in more socially disadvantaged groups.

Child poverty in all its dimensions is part of the Sustainable Development Goals (SDGs), and countries will be required to define multidimensional child poverty and to track its evolution over the next 15 years. The Multidimensional Child Poverty Index could serve as a baseline for the SDG, and as a national measure to track child poverty over time. The report presents sound evidence that will inform national strategies and plans to improve the socio-economic development of the country. Findings will also be used to design and implement the upcoming Country Programme Document for Lesotho.



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## Child Poverty in Madagascar: a Multiple Overlapping Deprivation Analysis

The availability of a recent household survey that incorporates both consumption and socio-demographic data (Millennium Development Goals Survey 2012/2013) provides a great opportunity to perform a more in-depth analysis of child poverty in both monetary and non-monetary terms. This is particularly relevant in the context of the widespread and consistently high levels of poverty and other key development indicators, such as chronic malnutrition, as well as in the development of new national poverty reduction and development strategies.

This study analyses the situation of child poverty in Madagascar using the Multiple Overlapping Deprivation Analysis (MODA) methodology developed by UNICEF. The results of the study will be used to inform both advocacy and policy work with the Government and development partners. The objective is to maintain children's rights high up on the development agenda.



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## Child Poverty in Malawi: a Multiple Overlapping Deprivation Analysis

The Multiple Overlapping Deprivation Analysis (MODA) provides comprehensive estimates of child poverty in Malawi, based on analyses of the 2013 Integrated Household Panel Survey (IHPS). By examining the relationship between monetary well-being and childhood deprivations, the analysis establishes that a child's experience of deprivation is multifaceted and interrelated, and that such multiple overlapping deprivations are more likely to occur in more socially disadvantaged groups. The analysis shows that in Malawi child poverty levels are very high, with 43 per cent of children living in monetary poverty and 63 per cent living in non-monetary poverty.

Child poverty in all its dimensions is part of the Sustainable Development Goals, and countries will be required to define multidimensional child poverty and to track its evolution over the next 15 years. The Multidimensional Child Poverty Index can be used as the national measure to track child poverty over time. The report presents sound evidence that will inform national strategies and plans, including the Malawi Vision 2020, which sets out national goals, policies and strategies to improve the socio-economic development of the country.



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## Mapping Child Vulnerability in Mauritania

Mauritania has experienced remarkable economic growth over the past decade. However, key human development indicators are lagging behind. Several regions of the country are moreover prone to cyclical food and nutrition crises, which are further compounded by risks of either flooding or drought in these and other geographical areas. Building on the recent household census, UNICEF Mauritania, in close collaboration with the National Office of Statistics, has developed a Child Vulnerability Map, combining multiple child deprivation data with existing disaster risk mapping. A better understanding of multidimensional poverty and vulnerability to shocks is essential for proper targeting of the most vulnerable populations and strengthening the adaptive capacities of the poorest children. Geospatial representation is the best tool for decision making, since it provides a situational summary at a glance.



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## Mauritania Multiple Indicator Cluster Survey 2015

The Multiple Indicator Cluster Survey (MICS) is a worldwide tool developed by UNICEF. MICS gives decision makers evidence to act on the situation of women and children. In Mauritania, the MICS was carried out in 2015 by the National Statistics Office, in collaboration with UNICEF, the United Nations Population Fund (UNFPA) and Agence Française de Développement (AFD). The results of the survey, to be published in 2016, are going to be critical in the framework of definition of the post-2015 national development strategy for Mauritania, as well as in establishing a baseline for the Sustainable Development Goals in Mauritania.



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## Situation Analyses of Children in the Provinces of Zambezia, Tete and Cabo Delgado in Mozambique

In 2014, UNICEF Mozambique carried out a situation analysis (SitAn) of children. One of the major highlights of the report was the great disparity in outcomes for children in the different provinces, with Zambézia, Tete and Cabo Delgado being the worst performing in terms of children's access to health, education, water and sanitation services. In order to gain a better understanding of the situation of children in these provinces, UNICEF and its provincial government partners will conduct specific analyses that aim to provide more in-depth information regarding the situation of children in the three provinces. At the same time, they will examine major bottlenecks and barriers that prevent disadvantaged children and families from benefiting from required interventions and services.

The provincial SitAns will provide a basis for strong and evidence-based recommendations and will inform policies and programmatic interventions that will focus on an integrated package of services for children.



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## Report on the Secondary Analysis of the 2013 Namibia Demographic and Health Survey

The secondary analysis of the Namibia Demographic and Health Survey (NDHS) is designed to assist the Ministry of Health and Social Services and development partners to generate further evidence on National Maternal and Child Health (NMCH) mortality and morbidity. This evidence will further develop and shape strategies to improve maternal and child health in the country. The secondary analysis of the NDHS will also promote strategic planning for expanded access to NMCH services by providing current, focused and timely data to ensure the implementation of national policies.



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## Child Poverty in Niger: a Multiple Overlapping Deprivation Analysis

This study on multidimensional child deprivations in Niger is designed to identify and analyse the contours of the phenomenon of poverty in all its dimensions, its extent, its distribution and its characteristics in Niger, its main determinants and manifestations among children with regard to policies and strategies that have been implemented in recent years.

To do this, the study is conducted using the Multiple Overlapping Deprivation Analysis (MODA) approach to analyse the overlap in multiple deprivations. The main objective of this study is to include child poverty as part of the national social and economic plan, and to position it as a national priority.



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## Nigeria Multiple Indicator Cluster Survey: Summary Report

The Multiple Indicator Cluster Survey (MICS) is an international household survey programme developed by UNICEF. MICS is designed to collect statistically sound, internationally comparable estimates of key indicators that are used to assess the situation of children and women in the areas of health, education, child protection and HIV/AIDS.

The current round of MICS 2016 in Nigeria has been expanded in content and scope to include a questionnaire for individual men and modules such as water quality test, tobacco and alcohol use, life satisfaction, access to mass media and use of information and communication technology. MICS will provide up-to-date data (information) for assessing the situation of children and women in Nigeria and will contribute data for monitoring the socio-economic activities of the Nigerian population. It will also provide an opportunity for Nigeria to capture rapid changes in key indicators, particularly the Millennium Development Goals (MDGs) and set the post-MDG agenda.



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## Situation Analysis of Children and Adolescents in Nigeria: an Equity and Child Rights Analysis

A situation analysis (SitAn) of children and adolescents is an important process aimed at documenting the opportunities, challenges and changes affecting child well-being in Nigeria.

The SitAn will also review the causes which ensure or hinder child well-being and will portray both the recent evolution and the likely future prospects for Nigerian childhood.

It is a crucial source of information which the Government can use to design, assess and sharpen its programmes, policies and plans.

An important element of the SitAn is the description and analysis of equity. This covers all the dimensions of equity (socio-economic, ethnic-linguistic, geographical and gender).

The SitAn is anchored in the Convention on the Rights of the Child. In other words, it covers all aspects of the experience of childhood (birth, health, education, play, etc.). As the SitAn describes all aspects of child well-being and child rights, it can also contribute to the upcoming reports submission of the Government to the Committee on the Rights of the Child.



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## São Tomé and Príncipe Multiple Indicator Cluster Survey 2014

For a decade, the archipelago of São Tomé and Príncipe has recorded many advances in the field of maternal and child health, education and protection. However, despite the efforts, many challenges remain.

The Multiple Indicator Cluster Survey, which was carried out five years after the Demographic and Health Survey 2009, will assess the impact of efforts put in place by the Government and development partners across the country and will identify areas that still deserve attention. During the multiple indicator survey, HIV, anaemia and malaria tests were performed on children. In addition, the report provides interesting data that can help identify priority areas for development programmes benefiting children.



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## Situation Analysis of Women and Children in São Tomé and Príncipe in 2015

The archipelago of São Tomé and Príncipe was classified as a middle-income country in 2013. It has a population of 197,900 inhabitants, of whom 61 per cent are under 25 years. This is accompanied by a high demand for social services, such as education, health and employment. This demographic pressure is a challenge in terms of social inclusion and socio-economic integration. The relatively good macroeconomic performance has not translated into a significant improvement in the living conditions of the population.

It is noted that the country has made considerable progress in reducing the infant and the under-five mortality rate. Unfortunately, chronic malnutrition and anaemia remain significant problems, affecting one child in four under the age of five. In the area of education, the gross enrolment rate in primary education is 93 per cent for both boys and girls. Analysis of bottlenecks in the education sector highlighted a high school drop-out from primary to secondary school. In terms of child protection, the rate of registration of births increased from 69 per cent in 2006 to 95 per cent in 2014. On the other hand, new problems are emerging, such as child labour and the issue of street children. The violence against children remains a concern. Access to safe drinking water and sanitation varies by wealth quintile.

This situation analysis provides evidence to inform and guide the strategic direction of the programmes benefiting children in São Tomé and Príncipe.

## Proceedings of the National Children's Symposium in the Context of the Emerging Senegal Economic Strategy

The Proceedings of the National Children's Symposium in the Context of the Emerging Senegal Economic Strategy is a collection of Scientific Committee-reviewed articles presented at the First National Symposium on Children in Senegal. It is based on the latest research and analysis in the areas of child health, nutrition, education, protection, impacts of economic and fiscal policies, as well as the financing of social sectors. The collection includes analysis on: (i) the health of mother and child and child nutrition; (ii) the education, training and development of young children; (iii) child protection against exploitation, abuse, violence and neglect; (iv) the implementation of the Convention on the Rights of the Child; (v) giving voice to the children; (vi) better analysis and use of statistical data regarding children; and (vii) the costs and funding of policies and programmes for children.

The 40-plus innovative research pieces included in the Proceedings will help inform policies and programmes aimed at addressing the persistent challenges of malnutrition, out-of-school children, street children, female genital mutilation, girl child marriage, etc.



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## Senegal Continuous Demographic and Health Survey Report: Regional Analysis

At the end of 2011, Senegal embarked on the implementation of a programme of national demographic and health surveys (DHS), in which data collection and analysis is conducted on an annual basis. Thus, the first phase was carried out in 2012–2013 (Continuous DHS 2012–13), the second in 2014 (Continuous DHS 2014) and the third in 2015 (Continuous DHS 2015). None of annual reports provides data by region.

To meet the need for regional data, without increasing the cost of the survey, a technical solution was identified. This involved combining the clusters of two consecutive years, in order to produce statistically significant data at the regional level. In 2016, a regional report based on 2014–2015 data is expected. The report is expected to inform both national and decentralized policy and programmes in the women and child-related domains, and better geographic equity in resource allocation.



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## Senegal Urban Multiple Indicator Cluster Survey (Dakar Region): Survey Report

Senegal is facing rapid urbanization, although most of the population, especially the poor, continue to live in rural areas. According to the Population Census of 2013, the urban population in Senegal is 5,824,977, corresponding to an urbanization rate of 45 per cent, which is above the regional average for West and Central Africa.

There is a dearth of urban data to help appreciate the effects of this rapid urbanization on the living standards of the population and its access to basic social services, despite the fact that information on increasing peri-urbanization, pockets of poverty and inequality is plentiful.

The urban Multiple Indicator Cluster Survey (MICS) has collected data on a wide range of indicators in the areas of health, education, child protection and HIV/AIDS. The findings of the MICS will be used as a basis for policy decisions and programme interventions in urban areas, and in order to influence public opinion on the situation of children and women in the Dakar Region, and implicitly in other urban areas of Senegal. Besides providing quantitative information for assessing the situation of children and women living in urban and suburban areas of Dakar, it will provide basic data for specific urban programmes that target vulnerable populations in urban communities.



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## Statistical Book: 111 Statistical Tables on Children in Senegal

For the first time, UNICEF Senegal has produced a comprehensive compilation of key statistics on children in Senegal, to help track progress on the realization of children's rights in Senegal over the period of the current Country Programme.

The statistical book serves as an aid to decision makers in policy discussions and in tracking progress across key social programmes that target children.



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## Statistical Profile of Children in Senegal Based on the Latest Population Census Data: a Contribution towards the Situation Analysis of Children

The Statistical Profile of Children in Senegal Based on the Latest Population Census Data: a Contribution towards the situation analysis of children was conducted after the release of the data from the latest population census. Its objective is to present and analyse the situation of children in Senegal using the census data. More specifically, it presents and analyses demographic and socio-economic trends; identifies and analyses gaps and disparities that persist in relation to geographic location, gender, the socio-economic status of households, etc.; and formulates conclusions and recommendations for policies and programmes aimed at accelerating the realization of the rights of children in Senegal.

The Statistical Profile of Children in Senegal is organized into three main parts. First, it includes a descriptive presentation, with an overview of the situation of children in Senegal by domain. It then analyses the relationship between the variables representative of the situation of children. Finally, it presents the decentralized data by region and department. Addressing the bottlenecks to the effective realization of children's rights leads to key policy recommendations.



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## Situation Analysis of Children in Somalia

The 2015 UNICEF situation analysis (SitAn) for Somalia provides a comprehensive, child rights-based and equity-sensitive analysis of the situation of children in Somalia, while reflecting on the emerging challenges and fluid country context. Given its tumultuous history since the state collapse in 1991, there is a risk of old narratives infecting new initiatives with a malaise that undermines solid foundations for change. While statistics underline the bleak situation and apparent stagnation of progress in terms of children's access to the most basic social services (including adequate nutrition and protection from abuse), opportunities to champion child rights in Somalia abound. The SitAn contextualizes well-known disparities and shortcomings in health, education, water and sanitation, and protection outcomes, as well as incompletely understood issues such as opportunities to explore the impacts of security, migration (Tharib), clan, political economy, culture and programmatic biases.



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## Child Poverty in Sudan: a Multiple Overlapping Deprivation Analysis

The Multiple Overlapping Deprivation Analysis (MODA) provides comprehensive estimates of child poverty in Sudan, based on analyses of the Multiple Indicator Cluster Survey (MICS) 2014 and Poverty Household Survey data. By examining the relationship between monetary well-being and childhood deprivations, the analysis establishes that a child's experience of deprivation is multifaceted and interrelated, and that such multiple overlapping deprivations are more likely to occur in more socially disadvantaged groups.

Child poverty in all its dimensions is part of the Sustainable Development Goals, and countries will be required to define multidimensional child poverty and to track its evolution over the next 15 years. The Multidimensional Child Poverty Index can be used as the national measure to track child poverty over time.

The analysis will inform the new Poverty Reduction Strategic Plan (PRSP) 2017–2021 and the development of the new United Nations Development Assistance Framework and UNICEF's Country Programme 2018–2022. The report will also be used for policy advocacy regarding the equity agenda.



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## Initial Assessment of Sustainable Development Goals for Children in South Sudan

As of early 2016, the United Nations Country Team (UNCT) is still awaiting the formation of a transitional government of national unity to fully engage in a national dialogue over how to localize Sustainable Development Goals (SDGs) to the realities of South Sudan, and to make them goals of a new National Development Plan.

In preparation for this, during 2016 UNICEF will produce briefing notes on the contribution of each section's planned strategy to the SDGs in the implementation of the 2016–2018 Country Programme Document, and on how the results of related monitoring and evaluation work can contribute to tracking progress in meeting the SDGs. This will help lead discussions and feed the UNCT's reflections on elements of a National Development Plan that will focus on attaining SDGs relevant to children and women. This initial assessment will be published in 2016, and will be complemented in 2017 by contributions from the results of the Multiple Indicator Cluster Survey (MICS) currently underway, which should help establish baselines for about 50 per cent of the household-based indicators of the SDGs. Results of the child poverty and vulnerability assessment should further provide proxy baseline indicators for issues not directly addressed by the MICS. This work will also be one component of our efforts to strengthen the national statistical system, which in the longer term should enable South Sudan to track its own achievements towards the SDGs. Finally, it should help the Country Office engage the whole UN country team in better-informed discussions on SDG-aligned, child-centred development.



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## Atlas of Equity and Child Rights in South Africa

This publication, a follow-up of the Review of Equity and Child Rights in South Africa published in 2011, provides a snapshot of the status of realization of child rights in the country, with an emphasis on persistent inequalities and disparities across race, wealth, place of residence and other demographic and socio-economic indicators. The report contains a number of graphs and tables that provide a visual display of the persistent gaps in the enjoyment of basic rights among children belonging to different categories of the South African plural society. It serves a critical advocacy purpose, insofar as it serves to highlight how, 20 years after the end of apartheid, the country still struggles to confront the legacy of exclusion and marginalization.



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## South Sudan Child Poverty and Vulnerability Assessment

Building on the findings of the 2015 Situation Assessment of children and women, a child poverty and vulnerability assessment will be carried out in South Sudan over the course of the new two-year Country Programme (July 2016 – June 2018) that will accompany the country in its transition from civil conflict to some peace and stability. To build a common vision and develop synergies with other agencies, the assessment will draw on contributions from major partners working on complementary components of poverty and vulnerability (the Government, other UN agencies, the World Bank, academia). Data and analysis will come from ongoing work by all UNICEF sections, from partners, and from original research conducted across the country.

By 2016, two qualitative studies on child poverty and vulnerability conducted in the two currently accessible regions of South Sudan – the Greater Bahr el Ghazal and the Greater Equatoria – will be produced. The work aims to give a voice to children, mothers and the youth in analysing their situations and expressing their visions for a better future, focusing not only on getting their views of the deprivations they face, but also – and centrally – of their current coping mechanisms to face and overcome the challenges they meet at the individual, household and community level.

This will help identify positive coping mechanisms to build upon (as well as negative ones to be eradicated) when turning the results of the poverty assessment into directions for action that should feed into the new National Development Plan for South Sudan and UNICEF's programming for the post-2018 Country Programme Document.

## Situation Assessment of Children and Women in South Sudan

The Situation Assessment was conducted in 2015, based largely on a review of existing material, but also including new data generated since the start of the crisis in 2013. Overall it paints a comprehensive picture of the challenges faced by the current generation of South Sudanese children, as they strive to be happy and healthy, explore their world safely, and reach their full potential. It focuses on their key rights to survival, education, protection and participation. The Situation Assessment was used by UNICEF and other agencies during the development of the United Nations Interim Cooperation Framework, as well as by UNICEF during the formulation of its Country Programme 2016–2018. It is hoped that it will act as an essential information base on issues relating to children and women in the country.



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## Sudan Multiple Indicator Cluster Survey 2014 Final Report

The Sudan Multiple Indicator Cluster Survey (MICS) was carried out in 2014 by the Central Bureau of Statistics, in partnership with UNICEF, the United Nations Population Fund, the World Food Programme, the World Health Organization and the UK's Department for International Development. This is the first nationwide household survey based on accurate statistical source of data in Sudan following the separation of Sudan from South Sudan in 2011.

MICS 2014 aimed to provide up-to-date information to assess the situation of children and women in Sudan and to measure trends towards achievement of the Millennium Development Goals and the goals of the World Fit for Children plan of action and other internationally agreed indicators related to children and women. Among others, the MICS 2014 findings revealed the decline in under-five mortality during the last five years (2010–2014); increased access to improved water sources; increase in net education attendance ratio; and an increase in birth registration. However, the survey shows that the national figures mask geographical and wealth disparities.

The Final Report will provide a wealth of information on indicators disaggregated by gender, wealth quintile and geographical area. The publication will facilitate the large-scale utilization of MICS findings both in country and internationally to improve knowledge of the situation of children in Sudan. It will be used for public policy advocacy, the development of strategic planning and for adequate accountability of achieved results in favour of children and women.

## Child Poverty in Tanzania: a Multiple Overlapping Deprivation Analysis

This report provides comprehensive national estimates of child poverty in Tanzania, based on the 2012 National Panel Survey. A major innovation is the estimation of child deprivation using a multidimensional child poverty indicator that is specific to the context in Tanzania.

The report concludes that 74 per cent of children in Tanzania live in non-monetary poverty, defined as being deprived in three or more dimensions, while 29 per cent live in households below the monetary poverty line. A key finding is that there is not a one-to-one correspondence between the two measures of child poverty. In particular, 48 per cent of children in Tanzania who live in non-monetary poverty do not live in monetarily poor households. This has important implications for public policy that seeks to address child well-being. This new measure of child poverty could also serve as a baseline for the Sustainable Development Goal (SDG) on child multidimensional poverty, as set out in Goal 1.2 of the SDGs.



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## Child Poverty in Swaziland: a Multiple Overlapping Deprivation Analysis

The Multiple Overlapping Deprivation Analysis (MODA) provides comprehensive estimates of child poverty in Swaziland, based on analyses of the datasets from the Demographic Health Surveys and the Multiple Indicator Cluster Surveys. By examining the relationship between monetary well-being and childhood deprivations, the analysis establishes that a child's experience of deprivation is multifaceted and interrelated, and that such multiple overlapping deprivations are more likely to occur in more socially disadvantaged groups.

Child poverty in all its dimensions is part of the Sustainable Development Goals, and countries will be required to define multidimensional child poverty and to track its evolution over the next 15 years. The Multidimensional Child Poverty Index can be used as the national measure to track child poverty over time. The report presents sound evidence that will inform the UNICEF Swaziland Country Programme about which sectors to prioritize and whom to focus on – the most deprived, or those with the most rights violations, which is consistent with the human rights-based approach to programming.



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## Child Poverty in Togo: a Multiple Overlapping Deprivation Analysis

Togo has had positive economic growth in recent years, with an annual growth rate of around 5 per cent. Though the economy has experienced positive strides, it faces numerous challenges: key human development indicators are far below the norm, and more than half of the population still lives in poverty, with a poverty rate estimated at 55.1 per cent.

The Multiple Overlapping Deprivation Analysis (MODA) provides comprehensive estimates of child poverty in Togo. By examining the relationship between monetary well-being and childhood deprivations, the analysis establishes that a child's experience of deprivation is multifaceted and interrelated and that such multiple overlapping deprivations are more likely to occur in more socially disadvantaged groups.

Child poverty in all its dimensions is part of the Sustainable Development Goals, and countries will be required to define multidimensional child poverty and to track its evolution over the next 15 years. The Multidimensional Child Poverty Index can be used as the national measure to track child poverty over time.

The results of the study will be used to inform both advocacy and policy work with the Government and development partners, with the objective of keeping children's rights on the policy agenda. The study will also provide inputs for the UNICEF mid-term review.



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## Child Poverty in Zambia: a Multiple Overlapping Deprivation Analysis

The monetary poverty rate among children aged 0–18 years in Zambia is higher than among the adult population: 65 per cent and 60.5 per cent, respectively. There is consensus that the specific nature of poverty among children, as well as the nature of deprivations across the spectrum of child rights, requires the development and application of a multidimensional measure of child poverty, at the same time as continuing to measure the proportion of children in households below the poverty line. In 2016, UNICEF, the Ministry of Development Planning and the Central Statistics Office will collaborate to develop a multidimensional measurement for child poverty in Zambia and to apply that to the Demographic and Health Survey (2014) and the Living Conditions Monitoring Survey (2015) nationwide survey datasets.

The study will reveal the actual levels of child poverty among Zambian children and will make recommendations for actions and policy measures to address child poverty. The child poverty measurements for Zambia have the potential to inform advocacy of a number of stakeholders. The information generated through the study will also inform the integration of child poverty indicators in relevant monitoring and evaluation frameworks, such as for the National Child Policy, the National Social Protection Policy, and the Seventh National Development Plan for 2017–2021. In addition, the outcome measures will allow the Government of Zambia to set a child poverty reduction target in its Seventh National Development Plan, which is scheduled to be approved in early 2017.

## Child poverty in Zimbabwe: a Multiple Overlapping Deprivation Analysis

The Multiple Overlapping Deprivation Analysis (MODA) provides comprehensive estimates of child poverty in Zimbabwe, based on analysis of the 2014 Multiple Indicator Cluster Survey (MICS) data. By examining the relationship between monetary well-being and childhood deprivations, the analysis establishes that a child's experience of deprivation is multifaceted and interrelated, and that such multiple overlapping deprivations are more likely to occur in more socially disadvantaged groups.

Child poverty in all its dimensions is part of the Sustainable Development Goals (SDGs), and countries will be required to define multidimensional child poverty and to track its evolution over the next 15 years. This new measure of child poverty could also serve as a baseline for the SDG Goal 1.2 on child multidimensional poverty. The report presents sound evidence that will inform national strategies and plans to improve the socio-economic development of the country. The findings will help to inform the design of services and interventions which more accurately meet the needs of children.



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## Extended Equity Analysis of Zimbabwe Multiple Indicator Cluster Survey 2014

UNICEF Zimbabwe, in collaboration with the Zimbabwe National Statistics Agency and various Government of Zimbabwe line ministries, conducted a Multiple Indicator Cluster Survey (MICS) in 2014. The MICS is an international household survey programme developed by UNICEF; it is designed to collect statistically sound, internationally comparable estimates of key indicators that are used to assess the situation of children and women in the areas of health, education, child protection, HIV/AIDS, and water, sanitation and hygiene promotion.

The purpose of this secondary analysis is to disaggregate and examine more closely the data collected in the 2014 MICS. This analysis will look at the patterns of equity across a wide range of indicators, including demography, urbanization and migration, poverty, education, nutrition, health, water and sanitation, child marriage, and attitudes towards domestic violence and religion.

It will inform the Zimbabwe Agenda for Sustainable Socio-economic Transformation, the 2016–2020 Zimbabwe United Nations Development Assistance Framework and the roll-out of the Sustainable Development Goals in the country.

## Zimbabwe Youth Investment Case

Zimbabwe has been experiencing a population increase, which has put pressure on scarce resources amid the other serious economic problems. While investment over the years has largely been directed toward groups that are considered more vulnerable – such as children, women and the disabled – investment in young people has largely been neglected. Delivering and sustaining the needs of the youth requires investments by the Government of Zimbabwe, the private sector, civil society and development partners.

This analysis will detail the cost and benefits, as well as the cost-effectiveness, of all youth interventions that have been carried out in Zimbabwe. The results will include the current situation faced by the youth and the cost of youth programming in health, education, employment creation, culture, arts, sports and recreation. The findings will be used as evidence for resource mobilization, strategic programme implementation, and as an advocacy tool for supporting investments in adolescent health, education, skills development and adolescent well-being.



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# PART 2

## Public Finance for Children

### Budget Allocation and Spending on Children in Botswana: 2016 Budget Briefs

The Government of Botswana spends a significant portion of its budget on social sectors, such as education and health, which are crucial for the survival, development and protection of children. However, the outcomes for children, such as nutritional status and educational performance, as revealed by a recent UNICEF study on child poverty, do not seem to be in line with the huge investment the Government is making in these sectors. In addition, there are large disparities in the key outcomes for children across regions. Improving the equity, effectiveness and efficiency of public expenditure in social sectors is a consensus among key stakeholders in the country.

The study analyses public expenditure on children to assess how effectively and efficiently it addresses child poverty in its multidimensional form. It includes a series of concise budget briefs for a number of key sectors for children, such as health, nutrition, education and social protection; these analyse how the government budget and actual expenditure out-turn contribute to the reduction of child poverty in these sectors. It also makes an attempt to link the regional disparities in child poverty to the regional disparities in public expenditure. The findings are expected to guide the Government towards more equitable, effective and efficient expenditure on children in the social sectors.



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### Budget Allocation and Spending on Children in Malawi: 2015/2016 Budget Briefs

UNICEF Malawi produces budget briefs to contribute to debate around public investment for children. The budget briefs in health, education, social welfare, and water and sanitation are aimed at improved transparency, efficiency, equity and adequacy of resources for children. The briefs present a simplified analysis of the budget and draw policy recommendations for advocacy towards inclusive growth and better spending on children.



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## **Budget Allocation and Spending on Children in Burundi: 2016 Budget Briefs**

Disparities and inequalities in access to and quality of social basic services provided by the Government contribute to the non-realization of the rights of all children. Such disparities are a result of inequitable resource allocation across provinces and within sectors for the provision of those services. Within the context of the current crisis in the country, UNICEF Burundi will produce budget briefs, simplified analyses of the state budget and related documents that provide a thorough picture of the trends in allocation and execution in the key social sectors for children, and will try to identify consequences of the 2016 'austerity' budget on social sector resources.

There is a series of concise budget briefs on a number of key sectors for children, such as health, education, and water, sanitation and hygiene. These analyse the extent to which the government budget and actual expenditure out-turn contribute to a reduction in child poverty in these sectors.

The budget briefs are aimed at improved transparency, efficiency, equity and adequacy of resources for children. Budget briefs are strong informative and advocacy pieces that can be used by civil society, line ministries, parliamentarians, the donor community, and all who work towards more equitable development in the country.

## **Public Expenditure Review of Social Sectors in Cameroon 2008–2014**

As with many other governments on the continent, the Government of Cameroon is committed to attaining the status of an emerging country. This ambitious programme is being implemented within the framework of the long-term vision and the Growth and Employment Strategic Paper. Since 2010, the foremost objective of the Government has been to revamp and strengthen economic growth. Productive sectors have therefore benefited from consistent resources allocation, unlike social sectors, where the budgets have either been kept stable or have been reduced.

In the context of very limited monetary poverty reduction, insufficient economic growth and persisting demographic growth, social demand is increasing. It is therefore necessary to support high-level advocacy with evidence.

The Public Expenditure Review analyses amounts, trends and geographical distribution of budgetary resource allocation. The analysis basically compares social demand and the allocation of state resources, and makes suggestions for corrective measure necessary to increase the consistency between social demand and budgetary allocations.



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## Public Expenditure Review on Health and Education in Côte d'Ivoire

Increasing fiscal space for social spending is a key approach to facilitating vulnerable people's access to quality social services and building an inclusive social protection system. Government spending on pro-poor services represents only 24 per cent of the total state budget (2015 SitAn), with a low proportion of investments. Investments in the education sector, for instance, amount to 7 per cent of total spending. In particular the health sector is underfinanced. Health expenditure has decreased over the last years to just 4 per cent of the total state budget (2013), which is far below the international allocation of 15 per cent fixed by the 2001 Abuja Declaration. Furthermore, only 3 per cent of the state budget is allocated to the water and sanitation sector. Lastly, the households that are already poor cover most of the health and education-related expenses. To improve the quality, efficiency and equity of public spending in social sectors, UNICEF will conduct a public expenditure review on health and education, in partnership with the World Bank. The review will be used to feed high-level advocacy and policy dialogue on child-sensitive public finance, to support the elaboration of new sector plans and to monitor the new National Development Plan 2016–2020.



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## Budget Allocation and Spending on Children in Kenya: 2016 Budget Briefs

UNICEF Kenya produces budget briefs to contribute to debate around public investment for children. The budget briefs on the education, health, social protection, child protection, HIV/AIDS, nutrition, and water, sanitation and hygiene (WASH) sectors at the national level, and in Kitui, Mombasa, Marsabit, Migori and Homa Bay, Kakamega, Baringo, Kilifi, Garissa and Wajir counties, are aimed at improved transparency, efficiency, equity and adequacy of resources for children. The briefs present a simplified analysis of the budget, and include policy recommendations for advocacy towards inclusive growth and better spending on children.

The devolution process, as provided for under the Constitution of Kenya 2010, offers a great opportunity for counties to influence national planning and budget processes. By undertaking budget analysis, the study establishes a link between resource allocation and expenditure, with development priorities in the social sectors and with allocations targeted at the most deprived children.

The analysis will identify areas of advocacy and capacity building that UNICEF can focus on in conjunction with the counties and the national Government, in order to support the future planning and budgeting process.



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## Budget Allocation and Spending on Children in Lesotho: 2016 Budget Briefs

Disparities and inequalities in access to, and quality of, social basic services provided by the Government contribute to the non-realization of the rights of all children. Such disparities are a result of inequitable resource allocation across provinces and within sectors for the provision of those services.

UNICEF produces budget briefs, simplified analyses of the state budget and related documents that provide a thorough picture of the trends in allocation and implementation in the key social sectors for children.

These briefs serve three main purposes: (i) to demystify the budget instruments and promote budget literacy within civil society and the public in general; (ii) to increase budget transparency through the participation of civil society, parliamentarians and other stakeholders in the budgetary decision process; (iii) to advocate for more equitable resource allocation for social sectors. Budget briefs are strong informative and advocacy pieces that can be used by civil society, line ministries, parliamentarians, the donor community and all who work for more equitable development in the country. These tools will assist in shaping a more child-centred, transparent, participatory and equal pattern of public spending.



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## Public Expenditure Review in the Education Sector in Madagascar

The Public Expenditure Review is a key diagnostics instrument used to evaluate the effectiveness of public finances. This review focuses on the education sector in Madagascar, using 2014 budget data. The review examines how public expenditure was allocated and managed in the education sector. The objective is to establish a baseline understanding of key fiscal management and policy challenges, highlight priority reform areas for policy makers, and set the agenda for the next phase of budgetary planning.



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## Public Expenditure Review in the Health Sector in Madagascar

The Public Expenditure Review is a key diagnostics instrument used to evaluate the effectiveness of public finances. This review focuses on the health sector in Madagascar, using 2014 budget data. The review examines how public expenditure was allocated and managed in the health sector. The objective is to establish a baseline understanding of key fiscal management and policy challenges, highlight priority reform areas for policy makers, and set the agenda for the next phase of budgetary planning.



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## Budget Allocation and Spending on Children in Zimbabwe: Budget Briefs 2016

The state budget is a critical tool for the realization of children's rights and in addressing poverty and disparities in the country. UNICEF Zimbabwe will develop a series of budget briefs in key sectors for children. The main purposes are to: (i) provide simplified information to civil society, development partners, the media and the general public on the state of budget spending; (ii) provide budget stakeholders with a tool to advocate for adequate and equitable resource allocation to sectors that are crucial for children; and (iii) inform and guide UNICEF programming, in view of the prevailing trends in resources allocation and spending/ investments in specific social sectors.

The briefs highlight that the Government of Zimbabwe budget is highly consumption oriented, with more than 92 per cent of resources going towards current spending; employment costs alone account for 80 per cent of the total budget. There is a lack of fiscal space for non-wage spending in all sectors of the economy in general, and in social sectors (health, education, social protection), in particular. In education, 98.4 per cent is consumed by employment costs, while in health, 60 per cent of the budget allocation goes on wages. The briefs highlight the need for strong donor engagement in the short term, to sustain the gains that have been recorded in social sectors to date. In addition, the briefs make a strong case for: (i) credible policies to grow the national revenue base; (ii) reform of the civil service wage structure; and (iii) expenditure prioritization that is supportive of long-term growth and more and equitable spending in social sectors.



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## The Public Expenditure Tracking Survey (PETS 2015) in the Education and Health Sectors in Malawi

The Government of Malawi spends a large proportion of its resources in the budget on health and education, with a view to improving quality of life and education performance for children. However, the high investment of resources in these priority sectors does not seem to be in line with the provision, quality and utilization of social services in Malawi. Large disparities in health and education child well-being also emerge at the national, district and community levels.

The study analyses the flow of resources from the treasury to the lowest cost centre, and attempts to match this with service provision. The study describes and compares the accountability mechanisms functioning at the different levels of the education and health sector systems. Results will inform improvements in public financing, accountability mechanisms, service provision and quality of services for health and education in Malawi.



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## Falling Commodity Prices and the Implications for Public Spending on Children in Eastern and Southern Africa

Despite sustained levels of growth in the past 20 years, most African countries have not been able to achieve substantial diversification of their economies and composition of trade. The region is still a net exporter of primary commodities, and oil is one of the most important commodities traded in the region. This dependence exposes some countries to fluctuations in the price of these goods. The marked drop in oil and commodity prices since June 2014 has translated into a terms-of-trade deterioration for some of the countries of the Eastern and Southern Africa Region (ESAR). Net oil importers are set to gain from lower global prices of energy commodities. However, the gains have been cancelled out, in some instances, by price declines in these countries' commodity exports.

Lower commodity prices will put pressure on the current account and fiscal balances of commodity-exporting countries. Governments that rely heavily on commodity revenues will have to find other ways to collect revenues, in order to fund public investment programmes and other spending. The consequences for countries' fiscal space and adjustments in public spending will likely reflect on investments for children. This paper aims to: (i) analyse the vulnerability of ESAR countries to fluctuations in commodity prices; (ii) discuss the recent trends in public spending for children by examining ESAR budgets for 2013–2015; and (iii) identify areas that require UNICEF intervention and advocacy to avoid crowding out spending on children.

This paper will contribute to the dialogue about the need to invest in children and will provide advocacy opportunities to promote effective mobilization and use of domestic resources for children.



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## Budget Allocation and Spending on Children in Mozambique: Budget Briefs 2016

Disparities and inequality in access to and quality of social basic services provided by the Government contribute to the non-realization of the rights of all children. Such disparities are a result of inequitable resource allocation across provinces and within sectors for the provision of those services. Since 2007, UNICEF has been producing annual budget briefs, simplified analyses of the state budget and related documents that provide a thorough picture of the trends in allocation and execution in the key social sectors for children.

These briefs serve three main purposes: i) to demystify the budget instruments and promote budget literacy within civil society and the public in general; ii) to increase budget transparency through the participation of civil society, parliamentarians and other stakeholders in the budgetary decision process; iii) to advocate for more equitable resource allocation for social sectors. Budget briefs are strong informative and advocacy pieces that can be used by civil society, line ministries, parliamentarians, the donor community and all who work towards more equitable development in the country.



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## Budget Allocation and Spending on Children in Namibia: 2016 Budget Briefs

The budget briefs analyse Namibia's revenues and expenditure in the sectors that are most relevant to children, including health, nutrition, water, sanitation and social welfare. The main audience for the budget briefs will be government officials, members of parliament, development partners and civil society representatives engaged in child rights advocacy. The intention is to help spark broad public interest and debate around the state budget and how resources are distributed across – as well as within – social sectors, in light of the country's poverty profile and its national and international treaty obligations with respect to children.



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## Public Expenditure Analysis in the Education Sector in Namibia

The Ministry of Education, Arts and Culture has recognized the challenges that the sector faces with regard to equitable financing for education, which leads to inefficiencies in service delivery. With the introduction of universal primary education in 2013 and universal secondary education in 2016, the ministry is looking at different strategies to fund the sector effectively, especially with regard to the provision of qualified teachers, infrastructure development, continuous professional development and the production of teaching and learning materials.

As a result, the ministry has requested UNICEF to provide both technical and financial support in developing a comprehensive public expenditure analysis to strengthen fiscal efficiency. The analysis will provide recommendations for the Government to improve the allocative efficiencies of spending in the education sector.



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## Analysis of Public Spending in the Social Sectors in Senegal

This report reviews public expenditure in the social sectors in Senegal, with a focus on the volume of public financial flows and their distribution in the different social sectors. The aim is to provide a critical assessment of public social spending.

This report comprises four chapters, two of which examine the macroeconomic and social context and the budgetary framework and public expenditure planning. The analysis of public spending in the social sectors distinguishes between the different economic categories of spending and assesses the overall management of public expenditure, from planning to allocation and execution. It looks at expenditure trends and patterns, and includes an analysis by functional and economic category, with a programme-based analysis wherever the data allow.

The analysis will help in improving the formulation of public budgets and achieving a more rational and transparent allocation of public spending. The review is expected to inform better monitoring of the execution of public finance laws.



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## Impact of Fiscal Reform on the Well-being of Households in Senegal

Over the past decade, Senegal has recorded average annual economic growth of about 3.5 per cent; meanwhile there have been high poverty rates, estimated at 46.7 per cent, according to the most recent poverty assessment. In 2013, the Government of Senegal introduced a new tax code as a measure to achieve greater fiscal justice and to reduce inequality; but this was done without a rigorous ex-ante impact assessment.

This research, conducted in collaboration with the Ministry of Economy, Finance and Planning, aims to identify the effects of the fiscal reform on the main macroeconomic variables (growth, investment, employment, budget deficits, etc.), and also the microeconomic impact of the tax measures on the living standards of households, by analysing the effects on poverty, inequality and social mobility (based on simulations of microeconomic behaviour of production, consumption, transfers, as well as the redistribution mechanisms) – and thus to appreciate the differential effects on households. The findings of the research will be used to inform the policy discussions regarding the new revisions to the tax code.



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## Leveraging Islamic Finance for Human Development in Somalia

The recently launched Strategic Development Goals (SDGs) provide an ambitious agenda and a unifying vision, with several goals in support of children and families. However, the most prominent forms of development and humanitarian funding in the past – in particular, official development assistance – are stagnating in absolute terms and shrinking in relative terms, compared to alternative sources of public and private finance. Identifying new means of development and humanitarian financing will therefore be a priority to meet the ambitious goals.

In light of the above, UNICEF and the London School of Economics have examined the potential for Islamic Finance (IF) to be leveraged to support human development programming for children and the achievement of the SDGs. This study will (i) summarize the current knowledge on the magnitude of IF; (ii) consider the operational challenges and opportunities in increasing UNICEF's work with IF institutions; and (iii) survey the regulatory environment governing IFs and their intermediaries and provide guidance on how this can be taken into account, should UNICEF increase its engagement with these institutions.



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## Understanding Public Financing for Children in South Sudan

Building on the notes prepared for the last two national budgets on the allocation of public finance for children, in 2016 the Country Office will produce deeper analyses of the allocation of resources – from the Government, aid agencies and communities themselves – that aim to benefit children. Aside from an assessment of the national budget in supporting the rights of children, a holistic review of the budget process will be conducted. It will first look at how needs are assessed and prioritized (and the extent to which this is done in a decentralized or participatory manner), how these priorities are transformed into plans for action, how they are costed, and how the budget is then arrived at and approved, taking account of competing priorities. It will then investigate how funds are secured to actually finance the budget. Lastly, it will look at the mechanisms by which the planned actions actually receive (or do not receive) money for implementation.



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## Budget Allocation and Spending on Children in Swaziland: 2016 Budget Briefs

Disparities and inequalities in access to and quality of social basic services provided by the Government contribute to the non-realization of the rights of all children. Such disparities are a result of inequitable resource allocation across provinces and within sectors responsible for the provision of those services.

UNICEF Swaziland produces budget briefs, simplified analyses of the state budget and related documents that provide a thorough picture of the trends in allocation and execution in the key social sectors for children. The budget briefs in education, health and nutrition, water and sanitation, social protection and social welfare (child protection) are aimed at improved transparency, efficiency, equity and adequacy of resources for children.

The briefs are designed to inform the Government at all levels, parliament, development partners, civil society and the general public, and to expand the debate around social sector budgets to help shape a more child-centred, transparent, participatory and equitable pattern of public spending in the countries concerned.

The analysis underpinning the budget briefs will also help inform the development of a fiscal space profile, as a basis for exploring ways of leveraging more resources and/or better spending in favour of children in Swaziland.



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## Budget Allocation and Spending on Children in Tanzania: Budget Briefs 2016

Disparities and inequalities in access to and quality of social basic services provided by the Government contribute to the non-realization of the rights of all children. Such disparities are a result of inequitable resource allocation across provinces and within sectors responsible for the provision of those services.

UNICEF Tanzania produces budget briefs, simplified analyses of the state budget and related documents that provide a thorough picture of the trends in allocation and execution in the key social sectors for children. The budget briefs in health, education, social welfare, and water and sanitation are aimed at improved transparency, efficiency, equity and adequacy of resources for children.

The briefs are intended to inform the Government at all levels, parliament, development partners, civil society and the general public, and to expand the debate around the social sector budget, in order to influence a more pro-poor, transparent, participatory and equitable public spending across regions and districts.



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## Budget Allocation and Spending on Children in Zambia: Budget Briefs 2016

Budget allocations, disbursements and actual expenditure of domestic resources is a critical determinant for achieving child rights goals and, through this, for addressing child rights deprivation. This is particularly significant for countries such as Zambia, where child poverty remains high and children face multiple deprivations.

The aim of this budget brief is to improve awareness and understanding of allocations to social sectors (health; education; water and sanitation; and social protection) in the 2016 Zambia national budget. The main overall findings of the 2016 budget briefs are that: (i) social sector budget allocations have declined substantially, from 35.3 per cent of the national budget in 2015 to 29.6 per cent in 2016; and (ii) declining social sector allocations come at a time of increased pressure on poor and vulnerable households, due to increasing costs of living, bad harvests and job losses. This typically requires counter-cyclical investments in social sectors.

In general, the budget briefs may raise awareness and strengthen budget advocacy among a wide range of governmental and non-governmental stakeholders. In addition, they may lead to the formulation of detailed recommendations to address budget shortfalls.



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## Togo Social Sectors Budgets Analysis

Togo is characterized as a low-income economy, but it has experienced positive economic growth in recent years, with an annual growth rate of around 5 per cent. Though the economy has experienced positive strides, the share of government spending allocated to social sectors decreased significantly from 2009 to 2014. Moreover, wages and salaries are the largest component of total expenditure on the social sectors. This underfinancing of the social sectors hampers the improvement of the living conditions of the vulnerable population, especially the elderly, children and poor households.

Reducing child poverty and vulnerability requires public resources to be allocated and spent in a way that serves the interest of Togolese children and their families. The national budget is a key policy instrument in this regard. UNICEF Togo therefore contributes to the debate on social sector budgeting through a budget analysis that provides evidence on social sector financing.

This reports provides an in-depth analysis of public spending on social sectors in Togo, as well as of the bottlenecks faced by social sectors in spending their budget. The main challenges for these sectors are: (i) low level of expenditure, with a quasi-absence of capital investment, while wages represent the main part; and (ii) inefficient spending in almost all the sectors.

The evidence and findings generated by the study will be used for the policy dialogue with the Government of Togo and to design capacity-building activities for social sector ministries.



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## Financing Basic Social Services for Women and Children in Mauritania

Reducing child poverty requires public resources to be allocated and spent in a way that prioritizes the needs of children. UNICEF Mauritania contributes to the debate on inclusive growth and public investment in children, through the production of regular studies on the allocation of public resources to basic social services for women and children. The 2016 edition of Financing Basic Social Services for Women and Children in Mauritania will analyse budget allocation efficiency and execution, and will serve as an advocacy tool in the context of the definition of the post-2015 national development strategy for Mauritania.



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## Financing Development for Children in Africa: the State of Budget Transparency, Participation and Oversight on the Continent

Africa is witnessing a historic demographic change. The population of Africa's under-fives will swell by 51 per cent – from 179 million in 2015 to 271 million in 2050; its overall child population (under-18s) will increase by two-thirds – from 547 million in 2015 to almost 1 billion by mid-century. As the child population in Africa is exploding, investing in these children becomes essential for the future socio-economic development of the continent, as well as for its political stability. Future development progress for children in the region will rely primarily on domestic financing. Budget transparency and government accountability are essential to assess public financial decisions and processes, address equity gaps in public funding and ensure that public resources are spent in the best interests of children.

UNICEF and International Budget Partnership (IBP) will develop a report on budget transparency and oversight in Africa that will draw on data collected in IBP's 2015 Open Budget Survey. The report will outline the general strengths and deficiencies in government budget systems in African countries, as well as highlight recommendations to increase investment in children through government budget systems. In addition, it will provide a scorecard of budget openness across the countries.

The report will be an entry point for dialogue about the need to invest in children, and will provide advocacy opportunities to promote effective mobilization and use of domestic resources for children, particularly in the context of the follow-up to the Strategic Development Goals, the Addis Ababa Action Agenda on financing development and the COP 21 conference on climate change.



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# PART 3

## Social Protection

### Options of a Child Support Grant in Botswana: Cost Implications and Impact Simulation

Botswana is an upper middle-income country with a comprehensive social system that is fully funded from its own resources. However, the fragmentation and inefficiency of the system, which is largely in-kind based, is often criticized. The formulation of Vision 2036 and the Eleventh National Development Plan (NDP 11) has provided an opportunity for government reflection on the future direction of its social protection system. There are emerging policy dialogues regarding the possibility of introducing a household minimum income guarantee grant, plus a child support grant wherever appropriate, to improve the efficiency of the current system.

The study is expected to supplement these policy dialogues. More specifically, it will produce information on the cost implications of different options for a child support grant, including its affordability and sustainability. It will also simulate the impact of each option on the key outcomes for children (such as nutritional and educational outcomes), as well as on long-term growth. It will provide policy makers with the evidence they need to take an informed decision on the exact design of the child support that will be implemented, based on the cost benefit of different options.

### Livelihood Empowerment against Poverty Programme in Ghana: LEAP 1000 Baseline Study

This report will present results from the baseline survey of the impact evaluation of LEAP 1000, a sub-component of the wider Ghana Livelihood Empowerment against Poverty (LEAP) programme. LEAP explicitly targets poor households, providing cash transfers to pregnant and lactating women or to women with a child under the age of 12 months. The LEAP 1000 programme will initially reach 6,000 households in three districts in Northern Ghana. The benefit structure and associated services, such as national health insurance enrolment, are identical to the broader LEAP programme. This study will provide robust baseline information against which to compare future programme performance.



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## How Do Linkages Between Social Protection and Nutrition Work in Practice in Ethiopia?

This operational research contributes to a wider portfolio of research and evaluation activities linked to the three-year evaluation of the social cash transfer programme piloted under the national Productive Safety Net Programme (PSNP) in four selected woredas (districts) in the country's Oromia Region and the Southern Nations, Nationalities and Peoples' Region (SNNPR). The purpose of the operational research is to analyse: (i) the integration of cash transfer with nutrition activities; (ii) the relationship between the social protection programme and communication activities designed to bring about behavioural change; and (iii) the nutritional status of members of beneficiary households involved in the programme.

The expected findings will identify what works well (or what does not work) in terms of the impact of a safety net programme on the nutritional status of household members. The findings of the research will be useful in revising the design of the pilot programme and the PSNP, and will inform the elaboration of federal and regional social protection programme action plans, with the aim of improving linkages between social protection interventions and basic social services.

## Real impact of the Social Cash Transfer Pilot Programme on Local Economy and Social Capital in Tigray, Ethiopia

Preliminary analysis of the impact of the Tigray cash transfer programme implemented during 2011–2015 shows a positive impact on the local economy and social capital. The purpose of this additional analysis is to validate the qualitative and simulated impact, using supplementary data collected during the end-line survey and additional econometric models to assess the empirical evidence of the impact of the social protection programme on the local economy and social capital.

The findings of the analysis will be useful for Ethiopia, as they will further inform the country's social protection interventions, particularly in the context of the ongoing development of a national social protection action plan. As one of the objectives of the Government of Ethiopia is to reduce and ultimately eliminate extreme poverty, social protection instruments are key to achieving this objective.



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## The Ethics of Poverty and Social Protection

There is little academic literature on the role of ethical norms (e.g. social justice or human rights) in terms of defining and addressing poverty, or on the role such norms play in the development of a social protection system to tackle vulnerabilities and inequalities. This thematic study aims to examine the extent to which the way a country sees and interprets poverty (e.g. its causes) determines and shapes a social protection system – or, more generally, how a country decides to tackle poverty.

The study aims to answer some of the questions on the relationship between ethical norms, poverty and social protection.



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## Investment Case in Social Protection in Madagascar

In Madagascar, the National Social Protection Policy and the National Social Protection Strategy reached the finalization stage, and this led to a request for continuous improvement of these documents. Moreover, the issue of budgeting for social protection measures was not raised, and this is often the subject of questions from stakeholders. This study aims to develop a business case for economic analysis of the social protection sector in all its aspects.

It discusses the arguments for investment in social protection, maps existing social protection instruments, and provides a comparative analysis of the different options for types of instruments and targeting. An analysis of various scenarios of social policy is subsequently provided through a combination of a macro-costing model and a dynamic model of impact simulation. The study and the tools developed will help UNICEF Madagascar to ensure effective assistance for the Ministère de la Population, de la Protection Sociale et de la Promotion de la Femme in developing advocacy to channel funds towards these social protection actions.



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## Social Cash Transfer Programme End-line Impact Evaluation in Malawi

The overall aim of the social cash transfer (SCT) programme in Malawi is to reduce poverty and hunger, and to increase school enrolment rates in ultra-poor, labour-constrained households. The mid-line impact evaluation demonstrated that the Malawi SCT pilot scheme had a range of positive outcomes, including: (i) increased food security and material needs of beneficiary households; (ii) enhanced nutritional status of children; (iii) improved acquisition of household assets; (iv) increased enrolment in schools; and (v) increased well-being of caregivers.

The end-line report analyses the impact of the Malawi SCT programme on individuals, households and communities, 30 months after baseline data were collected. The results of the evaluation will inform further improvements in the implementation of the SCT in Malawi. The findings of the evaluation will also contribute to enhancing global knowledge about the positive impact of social cash transfers on poverty reduction.



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## Morocco Integrated Social Protection Vision

Despite the achievement of significant results, the social protection system in Morocco still presents substantial challenges. The system suffers from fragmentation, due to the multiplicity of mechanisms and stakeholders, and this problem is compounded by a lack of coordination and coherence of interventions. Morocco has initiated progressive reform of the subsidy system, which will generate financial resources that could be reallocated to financing targeted measures to support the disadvantaged population. Moreover, it has a strong political will for democratization and support for human development goals.

The development of an integrated national vision for social protection is needed to strengthen public performance and to target the most disadvantaged populations, with an appropriate response for poor children and children in difficult living conditions. Based on an analysis of the existing programmes and policies in the country, and in light of international best practices in the field, this study will support the development of a child-sensitive and integrated vision for social protection in Morocco.

This study will inform the Government's efforts to reinforce and harmonize its social protection system for the most vulnerable groups, including children. It will also help to have evidence-based advocacy to cover certain gaps in terms of social protection and to enhance the protective role of social protection at the national and the decentralized level.



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## Roadmap for Implementation of Child-sensitive Public Works in Rwanda

In 2014, UNICEF Rwanda and the Ministry of Local Government identified key policy options with the potential to enhance the positive impacts of the Rwandan Government's social protection programme (Vision Umurenge 2020) on vulnerable households with children. This report is a follow-up to selected policy options, and sets out a roadmap for roll-out of the most prominent child-sensitive social protection options.

The roadmap describes initiatives prioritized by the Government of Rwanda for implementation, and provides a detailed, phased implementation plan, including design and implementation arrangements for expanded public works and child care for public works participants, the launch of UNICEF-funded pilots in selected sectors, and the launch of expanded public work in all priority social protection sectors. Additionally, the roadmap provides indicative costings for each of the phases of the expanded public works implementation plan.



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## South African Child Gauge 2016: Children and Social Assistance

The South African Child Gauge is a landmark publication that is released annually and is widely consulted by policy makers, researchers and practitioners. With a print run of 3,500 copies and wide dissemination through round tables, press reports, web portals and social media, this publication plays an important role in providing state-of-the-art analysis on the status of children's rights in South Africa. The Child Gauge 2016 will consolidate existing evidence to inform current debates on the way forward with regard to social assistance for South Africa's children. The report will seek to address these questions: What lessons have we learned from the design and implementation of social assistance for children over the past 20 years? How should social grants be designed and adapted to ensure equitable access to social assistance? What does the evidence say about the impacts of grants on the well-being of children? Would greater impacts be achieved if the value of the grants was increased? What are the budgetary implications and potential trade-offs of these options, given current fiscal constraints?



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## The Take-up Rates of South Africa's Child Support Grant and Other Children's Grants

Despite the impressive expansion in the coverage of South Africa's extensive child grants over the last 10 years, concerns remain that too many eligible caregivers and children are excluded from the grants due to misinformation, administrative hurdles and a host of access barriers that affect vulnerable families most severely.

A UNICEF study conducted in 2013 found that, despite a number of interventions by the South Africa Social Security Agency (SASSA), as many as 2.3 million eligible children were still unable to access the Child Support Grant. This study evaluates existing efforts to remove barriers to accessing child grants, and possible areas of improvement, with a view to expanding coverage and take-up rates of existing grants. The study explores the extent of exclusion from the Child Support Grant of children aged 0–1 and 12–17 years, and examines the effectiveness of existing outreach programmes for reducing exclusion among eligible children and caregivers. It serves to inform policy and administrative decisions geared to ensuring that all eligible children and caregivers can access the social assistance to which they are entitled by law.



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## Formulating a Business Case for Sustained Investments in Social Protection in Uganda

Social protection is a critical part of the Government of Uganda's strategy to fight poverty and create sustained economic growth. The goal of the business case is to support the Expanding Social Protection Secretariat and the Ministry of Gender and Social Development in developing policies that improve livelihoods among vulnerable groups in Uganda, thus supporting the Government with its poverty reduction strategy.

The analysis will present a clear business case for increased and sustained investments in social protection in Uganda. The Economic Policy Research Institute (EPRI) will conduct a rigorous analysis that will comprise three main pillars: (i) building global evidence on impacts of social protection; (ii) micro-simulation modelling of current programmes and the proposed social protection expansion; and (iii) a fiscal space analysis. The final analysis will provide realistic and actionable policy recommendations for designing, implementing and funding new programmes, as well as expanding existing social protection programmes.



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## Views, Experiences and Perceptions of Social Cash Transfer Programme Recipients and their Communities in Zambia: Final Report on Phase 2 of the Study – the ‘10% Inclusive’ Cash Transfer Scheme

This report is part of a three-year research project into the wider impacts of Zambia’s social cash transfer (SCT) programme. Using a mixed-methods approach, the study focuses on the perceptions and experiences of cash transfer beneficiaries and members of the wider community in areas covered by the ‘10% inclusive’ cash transfer scheme.

The study presents and discusses detailed findings on the three main themes of this phase of the research project: (i) relationships and community participation; (ii) impacts on children of recipient households now living as independent adults; and (iii) the role and functioning of the Community Welfare Assistance Committees.

The study enhances understanding of the social impacts of cash transfers and their impact (or lack thereof) on non-recipients living in the same communities. The findings can be used to design complementary programmes for cash transfer communities and assist the reflections on expanding cash transfer coverage.

## Zambia’s Child Grant Programme: 48-month Impact Report

This report is part of a longitudinal randomized controlled trial that analyses the impact of Zambia’s social cash transfer (SCT) programme. The SCT programme is the flagship intervention under the National Social Protection Policy and represents the Government’s expanding response to poverty and vulnerability.

This report presents findings from the Child Grant follow-up survey, 48 months after the baseline was conducted. The evaluation seeks to measure and understand the impact of Zambia’s Child Grant cash transfer on a range of socio-economic outcomes. The results show that cash transfers reduce the poverty gap between beneficiary households, help protect consumption during the lean season, enhance food security, and generate productive and economic impacts for families and communities. The cash grants also allow families to invest in the well-being of their children and to lay a foundation for improved health, nutrition, education and protection outcomes.

Apart from significantly enhancing the global knowledge base about the impact of social cash transfers, the report will provide a solid basis for in-country evidence-based advocacy to support further expansion of the cash transfer programme towards national coverage.



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## Zambia's Multiple Category Targeting Grant: 36-month Impact Report

This report is part of a longitudinal randomized controlled trial that analyses the impact of Zambia's social cash transfer (SCT) programme. The SCT programme is the flagship intervention under the National Social Protection Policy and represents the Government's expanding response to poverty and vulnerability.

This report presents findings from the Multiple Category Targeting Grant follow-up survey, 36 months after the baseline was conducted. The evaluation seeks to measure and understand the impact of Zambia's Multiple Category Targeting Grant cash transfer on a range of socio-economic outcomes. Results show that cash transfers reduce the poverty gap between beneficiary households, help protect consumption during the lean season, enhance food security, and generate productive and economic impacts for families and communities.

Apart from significantly enhancing the global knowledge base about the impact of social cash transfers, the report will provide a solid basis for in-country evidence-based advocacy to support further expansion of the cash transfer programme towards national coverage.

## Achieving Equity in HIV-treatment Outcomes: Can Social Protection Improve Adolescent ART-adherence in South Africa?

Low antiretroviral therapy (ART) adherence among adolescents causes morbidity, mortality and onwards HIV transmission. Reviews find no effective adherence-promoting interventions. This study examines associations of seven potential social protection factors with adherence, in the world's largest community sample of HIV-positive adolescents. All 10–19-year-olds who have ever begun ART in 53 government health care facilities in a health district of South Africa's Eastern Cape were traced and interviewed in 2014–2015. Potential social protection predictors were 'cash': food security, school fees/materials, clothing; and 'care': HIV support group, sports group, positive parenting and high parental supervision.

Results show that three cash and care social protection factors were associated with reduced non-adherence: (i) food security; (ii) high parental/caregiver supervision; and (iii) attending an HIV support group. Effects of combination social protection were additive in predicted probabilities, controlling for co-factors: with no protection factors, non-adherence was 52 per cent; with any one protection it was 37–40 per cent; and with all three social protections it was 18 per cent. Combination social protection 'cash plus care' improves adolescent ART adherence. Specifically, food security, parenting support programmes and expanded provision of HIV support groups have the potential to improve adherence, and subsequently adolescent HIV survival and HIV prevention.



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## Combination Social Protection for Reducing HIV Risk Behaviour among Adolescents in South Africa

Social protection has potential for adolescent HIV prevention. The study aimed to identify which social protection interventions are most effective and whether combined social protection has greater effects in South Africa.

In this prospective longitudinal study, 3,516 adolescents aged 10–18 were interviewed between 2009 and 2012. We measured household receipt of 14 social protection interventions and the incidence of HIV risk behaviours to assess the respective contributions of interventions and potential combination effects.

Results showed that child-focused grants, free schooling, school feeding, teacher support and parental monitoring were independently associated with reduced HIV risk behaviour incidence. Strong effects of combination social protection were shown, with cumulative reductions in HIV risk behaviours. In real-world, high-epidemic conditions, combination social protection shows strong HIV-prevention effects for adolescents and may maximize prevention efforts.



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## Delivering Sustainable Health and Development in South Africa: the Contribution of Social Protection

The first policy action outlined in the Sustainable Development Goals (SDGs) is the implementation of national social protection systems. This study assesses the extent to which social protection can impact five additional health and development SDG goals, focusing on adolescents in South Africa. A longitudinal survey of adolescents (10–18 years) was conducted between 2009 and 2012 to assess household receipt of 'cash' and 'care' social protection, and indicators within five SDG goals.

Results showed that social protection was associated with significant adolescent risk reductions in 11 of 17 gender-disaggregated SDG indicators. For tuberculosis and mental health, and for the sexual exploitation of boys and the perpetration of violence against girls, no effects were found; more targeted or creative means will be needed to reach adolescents on these challenging burdens.

National social protection systems are not a panacea, but findings suggest that they have multiple and synergistic positive associations with adolescent outcomes. Such systems may contribute to reducing impacts of poverty and inequality, and help us rise to the challenges of sustainable health and development.



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## Social Protection and HIV Prevention among HIV-positive Adolescents in South Africa

Each day, 440 new adolescent HIV infections happen in sub-Saharan Africa: preventing onward transmission presents a powerful challenge to HIV-positive adolescents. However, there is very limited evidence on interventions that reduce sexual risk-taking among HIV-positive adolescents. This study aims to fill this gap: 1,059 adolescents (10–19 years old) who embarked on antiretroviral therapy (ART) at 53 government health care facilities in South Africa were interviewed. Potential social protection predictors included: food security, access to school, high social support, positive parenting and strong parental supervision.

Results show that adolescents reported lower rates of unprotected sex if they received strong parental supervision, i.e. adolescents going out as agreed with caregiver, monitored time at home, access to school, and past-week food security. Receiving these interventions had an additive effect on unprotected sex rates, controlling for covariates. This effect was even stronger among adolescent girls: without any interventions, 31 per cent reported unprotected sex; with 1–2 interventions – 11–27 per cent; with all interventions; only 9 per cent reported unprotected sex.

These findings provide exciting new evidence that combinations of social protection intervention can increase safe sex among HIV-positive adolescents, particularly among HIV-positive adolescent girls. Single interventions may not suffice to address the sexual health needs of this highly vulnerable population as they transition from adolescence to adulthood.



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## **Social Protection: Potential for Improving Outcomes among Adolescents in Southern and Eastern Africa**

Advances in biomedical technologies provide the potential for adolescent HIV prevention and HIV-positive survival. However, while imperative, HIV treatment and testing will not be sufficient to address the epidemic among adolescents in Southern and Eastern Africa, where use of condoms and adherence to antiretroviral therapy (ART) remain haphazard, with evidence that social and structural deprivation is negatively impacting adolescents' capacity to protect themselves and others. This paper examines the evidence for and potential of interventions addressing these structural deprivations.

New evidence is emerging around social protection interventions that have the potential to reduce the social and economic drivers of HIV risk, improve utilization of prevention technologies and improve adherence to ART for adolescent populations in the hyper-endemic settings of Southern and Eastern Africa. Studies show that the integration of social and economic interventions has high acceptability and reach, and has a powerful potential for improved HIV, health and development outcomes.

There is now sufficient evidence to include social protection programming as a key strategy not only to mitigate the negative impacts of the HIV epidemic among families, but also to contribute to HIV prevention among adolescents. We urge a further research and programming agenda: to actively combine programmes that increase availability of biomedical solutions with social protection policies that can boost their utilization and potentially remove social and economic barriers to accessing treatment.



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## Structural Drivers and Social Protection: Mechanisms of HIV Risk and HIV Prevention for South African Adolescents

Social protection is high on the HIV-prevention agenda for youth in sub-Saharan Africa. But questions remain: How do unconditional cash transfers work? What is the effect of augmenting cash provision with social care? And can 'cash plus care' social protection reduce the risks for adolescents most vulnerable to infection? This study tackles these questions by first identifying mediated pathways to adolescent HIV risks, and then examining the potential main and moderating effects of social protection in South Africa.

Results showed that structural drivers were associated with increased onset of adolescent HIV risk behaviour, fully mediated by increased psychosocial problems. Both cash and care aspects of social protection were associated with reductions in HIV risk behaviour and psychosocial deprivations. In addition, cash social protection moderated risk pathways.

Adolescents with greatest structural deprivation are at higher HIV risk, but social protection has the greatest prevention effects for the most vulnerable. Social protection comprising unconditional 'cash plus care' was associated with reduced risk pathways through moderation and main effects respectively. Findings suggest the importance of social protection within a combination package of HIV-prevention approaches.



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# PART 4

## Child Protection

### Children's Birth Registration in Angola

UNICEF Angola manages a large programme in the area of birth registration. The programme, which is funded by the European Union, aims at increasing the institutional capacities of birth registration service providers, as well as at increasing demand for those services. In this context, this formative study intends to identify the level of knowledge, attitudes, practices, motivations, individual and social norms and barriers in relation to registration of the birth of children. It focuses on parents and caregivers, community leaders, children and service providers.

The study is expected to provide quantitative and qualitative data on behaviours (knowledge, attitudes and practices) related to the birth registration service and its processes. In addition, the study will provide an evaluation of the quality of the messages disseminated by this target group about the birth registration process and how it is perceived and received in the group of parents.

The study will provide insight and evidence to support the design and implementation of the Communication for Development strategy in the area of birth registration.



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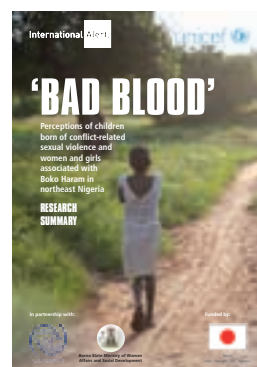
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### 'Bad Blood': Perception of Children Born of Conflict-related Sexual Violence and Women and Girls Associated with Boko Haram in North-east Nigeria

Sexual violence is a characteristic of the ongoing insurgency in north-east Nigeria, during which hundreds of women and girls have been raped by fighters belonging to the Jamaatul ahl al-sunnah li daawati jihad (JAS), globally known as Boko Haram. Many of the women were abducted, forcibly married to their captors and became pregnant as a result of rape.

UNICEF Nigeria and International Alert have carried out research in Borno in north-east Nigeria to understand the impact of the perceptions of communities and authorities about these women, girls and their children in terms of the question of safety, rehabilitation and reintegration opportunities.



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## Children's Rights and Justice for Children in Angola

This formative study aims at identifying the level of knowledge, attitudes, practices, motivations, individual and social norms and barriers to fulfilment of children's rights and justice for children, especially with regard to the application of regulations governing social/ educational measures for juvenile delinquents. The study focuses on children, families and, more broadly, the communities in which they live. The study includes a survey of knowledge, attitudes and practices (KAP) and also employs qualitative data collection methodologies.

The study is expected to: (i) shed light on the reasons for the behaviours surrounding children's rights and justice for children, through the use of KAP analysis; (ii) expose possible gaps in the existing messages with an emphasis on caregivers, children and the staff of services; (iii) provide conclusions and recommendations for the development of a strategy for Communication for Development and Behaviour Change Communication.

The results of the study will inform the design and implementation of clear and culturally appropriate messages promoting positive behaviours on the issues of justice for children and children's rights.



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## Mapping and Evaluation of the Child Protection System in Comoros

Comoros ratified the Convention on the Rights of the Child in 1991. Since then, a number of laws, policies and strategies have been adopted by the Government with the aim of improving the protective environment for children. However, neither a national child protection policy nor a systemic approach to child protection exists in Comoros. For the period 2015–2019, both the new National Development Plan (Stratégie de Croissance Accélérée et de Développement Durable (SCA2D)) and the Comoros/UNICEF programme of cooperation emphasize the nationwide provision of holistic, equitable and context-sensitive services and policies to protect children from violence, exploitation, trafficking and harmful practices.

With support from UNICEF, the Government has commissioned a comprehensive assessment of child protection in Comoros. The overall purpose of this mapping and evaluation exercise is to contribute to the development of a national child protection policy and of an action plan to implement it. This work provides national stakeholders with a profile of each of the child protection systems, whether formal or informal, currently in existence in Comoros. The report also identifies the key elements that are critical to the development of a national child protection system and that have achieved consensus among policy makers, service providers and users. For the first time, a unified and integrated child protection system is proposed, with clear priority questions, and roles and responsibilities for national stakeholders and communities.



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## Situation Analysis of Protection in Democratic Republic of Congo

In the Democratic Republic of Congo (DRC), for the 2013–2017 cycle, an innovation involving the situation analysis (SitAn) of women and children is under experimentation: the Rolling SitAn. The analysis intends to contribute to the country's efforts to tackle its development challenges by providing an evidence-based analysis of achievements to date, the factors that have helped or hindered progress, and the risks and opportunities in the Congolese context. Considering the complexity and size of the country, the thematic choices made for the current five-year Country Programme have been education and protection, around the focus 'Investing in children is building Congo'.

The goal of the protection SitAn is to present a situation analysis of child protection in DRC. Child protection is a large and complex field, which becomes even more challenging to analyse in a context like that in DRC, where multiple institutions, often quite weak, should interact in order to ensure the protection of the child. The focus will be on violence, abuse and exploitation, and through those lenses other hot issues in the country will be touched upon, such as child marriage, child labour, birth registration, justice for children, etc. The document will serve as reference material for government institutions, partner organizations, institutions and stakeholders interested in children's education in DRC.



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## Evaluation of Child Marriage Programme in Amhara, Ethiopia: Baseline Report

The Amhara Regional Government and UNICEF, in partnership with other stakeholders, are implementing a three-year programme to end child marriage. It is being run as a pilot, with the objective of scaling up a range of high-impact interventions to eliminate child marriage by 2025. This pilot programme will be evaluated throughout its three-year implementation, including through a baseline and an end-line survey. The baseline survey will assess in depth the situation of the Amhara Region, in line with the agreed logical frame indicators and operational modalities of the programme.

The purpose of the baseline survey is to serve as a knowledge basis against which the end-line results will be compared. In addition, it will identify any challenges in terms of kick-starting the programme. The report will be useful to ascertain the actual current situation in the Amhara Region with regard to child marriage/harmful traditional practices (HTP) prevalence/practice, as well as the capacity of the Government and community in implementing the programme. It will also provide recommendations on log-frame adjustments.



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## Baseline Study on Female Genital Mutilation/Cutting and Child Marriage among the Borana, Maasai, Pokot, Samburu and Somali Communities of Kenya

Female genital mutilation/cutting (FGM/C) and child marriage are harmful practices that pose a great risk to the health and well-being of the girls and young women who are subjected to these practices. These are violations of children's rights, a public health hazard and criminal offences in Kenya. In Kenya, the Prohibition of FGM Act 2011 prohibits the aiding, abetting and procuring of FGM/C in Kenya and provides for a range of punishments for violation. The Marriage Act 2014 establishes 18 as the minimum age of marriage for both boys and girls. Yet many marriages are secretly performed under customary or religious law, which does not have a minimum age limit. However, little is known about the prevalence rates, trends and attitudes towards FGM/C and child marriage among girls aged 0–14 years. The baseline survey aims to enhance understanding of the factors influencing FGM/C and child-marriage practices, prevailing trends, and people's attitudes in the target areas. Further, it will provide data on FGM/C and child-marriage prevalence rates in the selected age cohorts and will explore the role of cross-border points in influencing these harmful practices.

The findings will be used to provide baseline data on the target locations, in order to facilitate interventions that will speed the abandonment of FGM/C and child marriage in Joint Programme Phase II 2014–2017, and to assist in measuring progress in the next phase of the programme. Finally, the baseline survey will provide an overview of the current interventions in place, identify possible gaps and make recommendations on how to address these.



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## Civil Registration and Civil Identity in Africa: Recommendations and Way Forward

Many governments in Africa develop their civil registration and other legal identification systems in ways that do not follow the orthodox steps that other industrialized countries have taken towards universal coverage of their populations. This paper will suggest that the speculative 'leapfrogging' option that many African countries are following is costly and wasteful in terms of closing the 'identity gap' in Africa in the absence of a strong civil registration system.

Using South Africa as a case study, the paper will show how African countries can move from below 50 per cent civil registration coverage to completeness in just one decade, through a combination of practical steps: (i) political commitment and resources; (ii) systems integration, interoperability and optimal sequencing; (iii) judicious use of information and communications technology; (iv) strong incentives for registration (Child Support Grant, use of the old national ID for voting from 1999); and (v) innovation.



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## Violence against Children in Lesotho

Child vulnerability in Lesotho is alarming: the situation analysis of orphans and other vulnerable children in Lesotho 2012 estimated that 10,000 children had reported sexual abuse in 2011. The fact that there is limited information about the violation of children's rights poses a challenge in terms of developing sound programme interventions that can effectively address issues related to child protection. UNICEF, the Ministry of Social Development (MoSD) and other civil society organizations (CSOs) have indicated that there is a need to improve information on child protection, in order to inform their response. Therefore UNICEF is conducting an in-depth analysis of violence against the child.

The main purpose of the study is to generate evidence on child protection issues that need to be prioritized by decision makers. It aims to: (i) estimate the prevalence of child abuse, violence, neglect and abduction in Lesotho; (ii) examine the main risk factors and protective factors of child violence; (iii) investigate community understanding, knowledge and perceptions of child protection; and (iv) draw conclusions and recommendations for future interventions.

The findings will be used to redesign interventions targeting child protection and to assist the Government to revisit policies and legal frameworks in order to ensure that all issues are given adequate attention. In addition, findings and recommendations will be relevant to UNICEF, the MoSD and CSOs that play a role in child protection.



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## Violence against Children in Madagascar

In the programme of cooperation between the Government of Madagascar and UNICEF, one of the main objectives of the child protection component is to strengthen the child protection system through the development of a national policy and legal framework to better protect the children of Madagascar from all forms of violence and exploitation. The National Survey on the Millennium Development Goals (2012–2013) provides noteworthy data on just a few child protection indicators and needs to be complemented with a study that will give a more comprehensive picture of Violence against Children (VAC) for informed advocacy and programming.

The study will analyse the determinants of VAC, the circumstances of its occurrence, the knowledge or perception of communities, parents and children about VAC, and the utilization of existing protection mechanisms and structures by victims. The results of the study will be compiled and disseminated in 2016 and its findings and recommendations will inform the national child protection policy, child protection programmes and legal reforms.



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## The Situation of Children and Women Living in and around Mining Sites in Madagascar

Madagascar has rich and varied mineral resources. With the recent discovery of large gemstone deposits for the artisanal sector and the launch of the production phase of two large projects for the industrial sector, the mining sector is experiencing remarkable dynamism. The primary purpose of this report is to describe the situation of children and women living in and around artisanal and industrial mining sites in Madagascar. The report contains detailed observations on those situations, and measures them against the stipulations of two key human rights frameworks: the Convention on the Rights of the Child and the Maputo Protocol.

This report shows that, on artisanal mining sites, many children and women are living in a chaotic social environment, in conditions of severe economic vulnerability, deprived of basic rights such as medical care, education and food security. Currently, very little is being done to protect these people. On industrial mining sites, the rights and resources of local populations – in particular of children and women – are severely compromised by the inadequacies of current social policy and practice applied in industrial mining.

This analysis forms the basis of the report's recommendations for interventions and policy reform. As well as this specific focus on children and women, the report takes a general overview of the social conditions affecting all residents of mining sites, as this provides valuable context for the understanding of problems specific to children and women.

## Financial and Economic Costs of Disability to Households in South Africa: a Pilot Study

This report assesses the factors at play in reducing the economic vulnerability of households with children with disabilities. It presents the elements that need to be considered in planning, budgeting and implementing programmes to ensure that the hidden costs associated with disability do not become barriers to inclusion and full participation in society. Primary data were obtained for disability-related out-of-pocket costs associated with key areas, such as education, health and employment. The opportunity cost of family members forgoing work opportunities to take care of a family member is also evaluated. Taken together, these expenses have a profound impact on the economic independence of households with children living with a disability. The study provides valuable information to guide budget decisions to ensure more effective provision of services to families with children living with a disability. In this sense, it serves as an important input into the plan of action that the Government is putting in place to implement the White Paper on the Rights of Persons with Disability, approved by the Cabinet in December 2015.



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## Assessment of the Child Justice System in Morocco

In September 2013, the Ministry of Justice and Freedoms launched a charter outlining the justice reform, which aims to reinforce the protection of children in contact with the law. The legal protection of children and their access to justice are essential elements in the ongoing process of implementation of the public and integrated child protection policy.

This assessment aims to provide an overview of the current situation surrounding justice for children in Morocco. It includes reliable data and evidence to serve as a basis for improving the efficiency, sustainability and impact of the justice system. The assessment points out that, although Moroccan legislation is consistent with the key international norms and responds to the needs of children involved in legal proceedings, in practice there are several obstacles that limit its efficiency, sustainability and impact. The actual system of justice for children seems to place more emphasis on children who are in conflict with the law than it does on children who are at risk or who are victims. The assessment points out that there are still practices that are not aligned with the rights of children, such as the use of deprivation of liberty as a first option, the absence of an alternative to pre- or post-detention, and the lack of psychosocial support for children during judicial proceedings. The assessment identifies various structural bottlenecks in terms of the absence of specialized infrastructures, insufficient budget and limited qualified staff.

The assessment report will inform the process of reforming the justice system in Morocco. It will also be used by UNICEF for advocacy purposes, to develop more appropriate responses by reinforcing the access of children to an adapted and child-friendly justice system.



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## Child Online Protection in Namibia

Internet access is expanding rapidly in Namibia. However, there are currently no data on children's and young people's access to, use of and experiences of information and communication technology and social media. There is anecdotal evidence of online abuse and exploitation involving children, but there is a large data gap on children's attitudes and practices in engaging in online behaviour, experience of online safety risks, and strategies they put in place to manage these risks.

This research aims at gaining a better understanding of the knowledge, attitudes and practices of children and young people (and their caregivers) in four regions of rural and urban Namibia. It covers their use of online technology, their experience of online risks and the strategies they employ to manage these risks. The findings of the research will inform the drafting of the Cyber Crime Bill, as well as government programmes and strategies to ensure safe access to online technology by children.



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## Violence against Children Survey in Nigeria: Summary Report

This type of study is the first of its kind in Nigeria and in West Africa. It provides national estimates that describe the extent and magnitude, nature of sexual, physical and emotional violence experienced by under-18 females and males in Nigeria.

The survey consisted of a cross-sectional household survey of females and males aged 13–24, designed to produce national-level estimates of experiences of violence. A total of 4,203 individuals in this age group participated in the Nigeria Violence against Children Survey, with 1,766 females and 2,437 males completing the individual questionnaire.

The key findings show that violence against children is a significant problem in Nigeria, with approximately 6 in every 10 children experiencing some form of violence; half of all children experiencing physical violence; one girls in four and one boy in ten experiencing sexual violence; and one girls in six and one boy in five experiencing emotional violence. Furthermore, results show that violence is rarely an isolated incident (over 70 per cent of children who experience physical, sexual or emotional violence in childhood do so on multiple occasions) and that violence starts at a young age (over half of children first experience physical violence between the ages of 6 and 11). Perpetrators are overwhelmingly people whom the children know, with a parent or adult relative being the most common perpetrator of physical violence in childhood. Finally, children are not disclosing violence, seeking or receiving services.

This information is designed to help support efforts in Nigeria to develop and implement effective child-friendly violence prevention strategies, as well as to improve service provision for all Nigerians, especially for children who experience violence.



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## South Sudan Women-friendly Space Guidelines

UNICEF South Sudan commissioned HealthNet to conduct a rapid assessment of women- and girl-friendly spaces (WGFS) in South Sudan, in order to develop practical guidelines for implementation of WGFS. Though similar projects have been undertaken in other emergency-affected countries, due to the unique nature of the South Sudan context, all actors involved agreed on the need to have a set of guidelines specifically tailored to South Sudan. On completion, the guidelines will provide practical tips and resources for implementing WGFS in South Sudan, including: (i) guiding principles to inform all elements of the intervention; (ii) conducting assessments, activities and services; (iii) staffing roles and capacity building; and (iv) monitoring and evaluation. These guidelines will be a standard resource for the gender-based violence sub-cluster in South Sudan.



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## **Towards a More Comprehensive Understanding of the Determinants of Violence against Women and Children in South Africa**

The project's main objective was to provide the Inter-Ministerial Committee to Investigate the Root Causes of Violence against Women and Children, established by the Cabinet in 2012, with a critical analysis of the risk and determinants associated with physical, sexual and emotional violence against women and children in South Africa, as well as an in-depth understanding of the relationship between the relevant variables. Both qualitative and quantitative research methods were employed in order to address the research objectives and construct predictive models on the determinants of violence against women and children in South Africa using structural equation modelling. The study also includes a total of seven illustrative case studies and makes recommendations for more effective interventions to prevent violence against women and children in South Africa.



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## **Child Marriage: Determinants, Consequences and the Way Forward in Eastern and Southern Africa**

Although the literature on child marriage is increasing, empirical research on the causes and consequences of this phenomenon in sub-Saharan Africa is still limited. There are many lessons that can be learned from studies in other parts of the world; however, while child brides in Asia share many characteristics and consequences with those in sub-Saharan Africa, they differ in critical ways.

Through a secondary analysis of Demographic and Health Survey and Multiple Indicator Cluster Survey data, this paper focuses on the patterns, trends, risk factors and impact on women of child marriage in the East and Southern African countries served by the UNICEF Eastern and Southern Africa Regional Office. The report will show, among other things, that the level of education (partner and the family), religion and wealth of the family are contributing risk/protective factors for child marriage.

The findings of this study will inform the design of national strategies in countries with high numbers of child marriage. The report will also be used by civil society and the media for advocacy.



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## Evaluation of Gender-based Violence in Emergencies in South Sudan

UNICEF's gender-based violence (GBV) work in South Sudan includes three pillars: (i) strengthening systems for quality GBV service provision; (ii) promoting community-based prevention of GBV; and (iii) integrating GBV risk mitigation into other sectors' interventions. Capacity-building and monitoring and evaluation are cross-cutting elements of the strategy that reinforce the three pillars. UNICEF currently has 11 implementing partners for GBV, covering 20 counties across six of the ten states in South Sudan.

This work will be part of UNICEF's global evaluation of GBV in emergencies. The objectives of the evaluation are: (i) to assess the Gender-based Violence in Emergencies (GBViE) programme quality and generate learning that informs future UNICEF GBViE programming; (ii) develop recommendations to help UNICEF operationalize its organizational commitments to GBViE at headquarter, regional and country levels; (iii) contribute evidence- and practice-based learning to the development of the UNICEF GBViE resource pack; and (iv) develop a real-time GBViE programming evaluation methodology that can be used by UNICEF and, potentially, other GBViE actors.



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## Social Norms Study: Evaluation of the Communities Care Programme in South Sudan and Somalia

UNICEF has developed the Communities Care: Transforming Lives and Preventing Violence Programme (CC Programme) based on evidence and experience that show that changing collective beliefs and unspoken rules in communities can lead to a change in collective practices and behaviours. This innovative programme aims to prevent sexual violence against women and girls in communities affected by conflict, by working with these communities to transform social norms – reshaping norms that promote sexual violence into norms that promote dignity, equality and non-violence.

An evaluation of the CC Programme implemented in South Sudan and Somalia will be produced in 2016. UNICEF, in partnership with Johns Hopkins University, developed the study to measure social norms, and conducted baseline and mid-line surveys in 2013 and 2015. The 2016 evaluation will focus on whether the theory of change in the CC Programme worked and changed the negative social norms in the target communities. The primary purpose of the study is to evaluate the relevance of the CC Programme.



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## In-depth Analysis of Female Genital Mutilation and Child Marriage in Sudan

The Key Findings Report of the Multiple Indicator Cluster Survey (MICS) 2014 showed a high prevalence of female genital mutilation (FGM) in Sudan (86.7 per cent). Since 2012, Sudan has been implementing a joint UN programme with UNICEF, the United Nations Population Fund (UNFPA) and the World Health Organization (WHO), aimed at ending FGM among younger generations by 2018.

The purpose of this study is to provide an in-depth analysis of FGM and child marriage (CM) in Sudan, using MICS 2014 results and other recent studies. The study will identify: (i) trends of prevalence of FGM and CM practices in Sudan; (ii) the most affected groups by state, socio-economic profile, wealth quintile index, cohort/ generation, etc.; (iii) the effectiveness of Communication for Development programme – the Saleema Initiative – which aims to combat negative social norms and gender-based harmful practices.

This sound documented analytical evidence will be used in a timely way by the Government, international agencies, civil society and other development partners for policy advocacy, to leverage partnerships, to fine-tune strategies that seek to encourage the abandonment of the practice, and to support the development of evidence-based programmatic interventions that bring about positive social change related to FGM and CM.

## The Drivers of Violence against Children in Swaziland

The Research to Policy and Practice Process (R3P), also known as the Drivers of Violence against Children study, was launched in Swaziland in March 2015. The R3P is a user-friendly methodological roadmap to systematically review what is known (or not) about violence prevention and related issues in the national context, and helps countries prioritize best possible prevention and response interventions based on local evidence.

This study focuses on key caregiver–child relationships, in order to understand peer relationships in the house and key drivers of violence against children aged 13–15. The study: (i) collects and disaggregates data about the difference in drivers of violence for boys and girls, addressing a significant gap in the literature; (ii) incorporates questions to further understand protective factors in the home and community that help keep children safe; (iii) includes questions to better understand how the drivers may differ for violence against children with disabilities and children living in urban vs. rural areas, further building the evidence base to inform programming and policies for these groups of children.



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## Study on Drivers of Violence against Children and of Positive Change in Tanzania

Violence against children is a serious problem, affecting children of all ages in Tanzania. To deepen understanding of the key drivers of violence against children, a participatory action research was undertaken in 2014 to explore socio-cultural norms and traditions that contribute to violence against children and possible drivers of positive change. The findings confirm that children are living in fear, as they do not feel safe either at home or at school, resulting in emotional and psychological problems. The findings also indicate that while physical violence in the form of child beating is socially accepted as part of child rearing, sexual violence is widely condemned. However, the normative practice of keeping silent, compounded by socio-cultural factors manifested in gender norms, male entitlement and community power relations, makes it possible for sexual violence to continue. The report will inform the overall strategy for social and behavioural change communication interventions for child protection, laying the foundation for social transformation.



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## Uganda Female Genital Mutilation/Cutting Survey

Female genital mutilation/cutting (FGM/C) refers to all procedures involving partial or total removal of the external female genitalia, or any other injury to the female genital organs for non-medical reasons. Beyond the immediate health consequences, there are long-term health and psychosocial consequences associated with the practice, as well as socio-economic costs for society at large. According to the 2011 Uganda Demographic and Health Survey, the estimated prevalence of FGM/C among girls and women aged 15–49 years is 1.4 per cent. However, FGM prevalence is associated with only a few ethnic groups in Uganda.



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While there have been a number of interventions to address the problem of FGM/C in Uganda, there are no robust research data on the current trend of FGM/C that can inform future strategies. On the whole, the survey aims at filling the data gaps on FGM/C at the district and sub-county levels. The specific objectives of the survey are to: (i) determine FGM/C prevalence rates in the practising districts and communities; (ii) identify the age group most at risk of FGM/C and prevalence rates in different age groups; (iii) determine the impact of the practice on the health and well-being of girls and women; and (iv) determine community perceptions and attitudes towards the practice. At the national level, the line ministries will use the findings to inform the development of new strategies and the appropriate geographical focusing of interventions. At the district level, the data will be used to inform government planning and budgeting processes; and UNICEF and other UN agencies will use the data for advocacy and to guide programme development.

## Violence against Children Survey: a Retrospective Household Survey of 13–24-year-old Females and Males in Uganda

Studies and research on violence against children (VAC) undertaken in Uganda are fragmented and mostly focused on specific areas and sectors (e.g. VAC in schools). The lack of national estimates on VAC is a major barrier to the development of effective violence prevention and response strategies.

This study will yield nationally representative prevalence estimates of physical, emotional and sexual violence for girls and young women aged 13–24 years, and physical and emotional violence for boys and young men aged 13–24 years. In addition, the survey will yield: (i) prevalence estimates for girls and females in three clusters of high HIV burden districts; and (ii) regional estimates for males in each of four sub national regions of Uganda. The survey also aims to assess the knowledge and utilization of services available to children who have experienced sexual, emotional and physical violence. Finally, the survey will include recommendations for relevant ministries in Uganda, UN agencies and international and national non-governmental organizations on developing, improving and enhancing prevention and response strategies to address violence against children.



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## Addressing School-related Gender-based Violence in Zambia

School-related gender-based violence (SRGBV) describes physical, sexual and psychological acts of violence in and around schools, underpinned by norms, stereotypes, inequalities and exclusions. While there is increasing recognition of SRGBV as a major issue globally, evidence about effective ways to address it is lacking. Zambia is one of four countries for this research, along with Ethiopia, Togo and Côte d'Ivoire.

This study aims to build evidence that will allow better understanding of the process of policy enactment on SRGBV – and that will also inform and strengthen that process – by providing a detailed and up-to-date mapping of the situation in relation to SRGBV in Zambia. As well as acting as the baseline for the project as a whole, the study will act as the basis for reflection and development of the action research plans by identifying achievements and progress in policies and practices to address SRGBV, as well as gaps, including in relation to the other countries in the overall study. These findings will be used to identify themes and issues for future planning and discussions with the relevant stakeholders and ministries in Zambia to reduce the incidence and prevalence of SRGBV.



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## Assessment of Child Care Facilities in Zambia

Article 20 of the United Nations Convention on the Rights of the Child provides that a child temporarily or permanently deprived of his or her family environment, or who cannot – in his or her own best interests – be allowed to remain in that environment, shall be entitled to special protection and assistance provided by the state. The Government of Zambia has embarked on a process of reforming and strengthening the alternative care system. The Ministry of Community Development and Social Welfare commissioned a nationwide assessment of child care facilities to understand the situation of children in need of care.

The evidence and knowledge generated through this assessment will inform not only government policy and programmes, but also the programmes of other stakeholders working with children, such as Save the Children and CMMB Zambia (the former Catholic Medical Mission Board), in their efforts to strengthen community-based alternative care interventions. The report will provide up-to-date statistical information on children in need of care that will help improve the provision of family tracing, foster care and adoption services.



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## Evaluation of the UN Joint Project Protecting Migrant Children from Trafficking and Exploitation in Zambia

The UN Joint Project (UNJP) comprising the International Organization for Migration, the United Nations High Commissioner for Refugees and UNICEF, with support from the European Union, has been supporting the Government of the Republic of Zambia in implementing a three-year project called Protecting Migrant Children from Trafficking and Exploitation. The Zambian Government is confronted by a number of challenges in managing irregular mixed movements to and through the country generally, which impact on vulnerable children and persons of concern.

This evaluation will respond to the questions about the relevance, effectiveness, impact, efficiency and sustainability of the UNJP in protecting migrant children from trafficking and exploitation. The findings will be used to build a case for the protection of vulnerable children on the move and to enhance learning on joint programming in the context of the One UN in Zambia. It will contribute to understanding the effectiveness of current strategies and responses to combat trafficking in persons, with a secondary purpose of informing good practices in working as a UN joint programme.



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## Zambia Health and Well-being of Children Survey

The Zambia Health and Well-being Survey (H-Well), also known as the Violence against Children Survey, is the first national survey of violence against children in Zambia. The survey systematically measures the prevalence, nature and consequences of sexual, physical and emotional violence against children.

The survey aims to: (i) generate evidence on the national prevalence of violence perpetrated against boys and girls; (ii) identify risk and protective factors; (iii) identify health and social consequences associated with violence against children; and (iv) assess the knowledge and utilization of services available for children who have experienced violence.

Besides providing a solid set of findings on the scope of violence against children in the country, the results show that services in responding to cases of violence are poor and insufficient. The survey brings out important recommendations on developing, improving and enhancing prevention and response strategies to address violence against children as part of a larger, comprehensive, multisectoral approach to child protection.



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## Zambia National Disability Survey

The Government of Zambia, through the Ministry of Community Development and Social Welfare, has taken the initiative for a National Disability Survey. This survey is expected to make a significant contribution to the national evidence base on disability, by generating strategic information about the prevalence, type and severity of disabilities among adults and children, and about the main issues they face in terms of participation and use of basic social services.

The study is expected to shed light on the following: (i) disability prevalence among adults and children, disaggregated by sex, severity of disability, province and area of living; (ii) demographic and socio-economic characteristics of people with disabilities, including children; and (iii) critical issues and barriers faced by persons with disabilities, in terms of restricting their participation in activities and access to services.

The data and knowledge generated through this survey will inform the mainstreaming of the response to disability through relevant government policies and programmes, and will contribute to the effective implementation of the Persons with Disabilities Bill that was enacted by Parliament in July 2012.



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# PART 5

## Maternal, Newborn and Child Health

### **Circumstances around Maternal and Neonatal Mortality in Maternity Centres and Hospitals of Angola**

As part of the activities aimed at reducing maternal and neonatal mortality in Angola, the Ministry of Health, Agostinho Neto University, National Institute of Statistics, and UNICEF Angola are jointly conducting a study aimed at identifying the underlying causes of these deaths.

Carried out in provinces with a high risk of maternal deaths, the analysis will provide information on the main circumstances around maternal and perinatal deaths that occur in health facilities and communities in Angola. The results of this study will inform the Ministry of Health, other relevant government institutions, programme health managers, and maternal mortality audit committees' efforts to strengthen the quality of care and access to maternal/perinatal services.



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### **Social Construction of the Rumours, Debates and Practices Concerning the Ebola Virus Disease in Côte d'Ivoire**

The study was initiated as part of UNICEF's support for the national response to the Ebola virus epidemic that hit West Africa in 2014 and 2015. The project Ebo-Ci aims to undertake research activities to investigate rumours about the Ebola virus disease, as well as the perceptions, practices and debates concerning prevention and management measures. The purpose of this action research programme is to facilitate decision making by the Government on: (i) the control of rumours concerning the Ebola virus disease, with a focus on local information sharing, spatial analysis of the rumours (their origins, coverage and social efficacy) and impact analysis for the management of other infectious diseases; (ii) prevention measures to deal with the Ebola virus disease; and (iii) management of suspected cases of Ebola. The findings of the Ebo-Ci project will be used to enhance communication policy, and the prevention and management of the Ebola virus disease. The results will contribute to national planning in the field of communication, in particular finalization of a national communication strategy for the prevention of the Ebola virus disease and the elaboration of a guide to the prevention and management of the disease.



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## Democratic Republic of Congo Health Atlas

The Health Atlas for the Democratic Republic of Congo (DRC) presents available data from different surveys (Multiple Indicator Cluster Survey, Demographic and Health Survey) in the form of compelling and revealing graphics and maps. It provides an overview of challenges to health care access in DRC and visually shows in which provinces the needs are more serious and have to be addressed by policy makers and communities. The atlas includes key indicators of health outcomes, which describe the population health status of the country and provinces and factors that have the potential to influence health outcomes, such as health care access and quality, health behaviours and social factors.

The results will indicate where policy interventions can produce improvements by featuring in a single document visualizations displaying health indicators through graphs and charts, considering that a visual display of data makes comparisons across DRC provinces easier and promotes a better understanding of trends.



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## Integrated Community Case Management Project in Homa Bay County in Kenya: End-line Evaluation Survey

The 2015 Integrated Community Case Management (iCCM) end-line survey in Homa Bay was designed to provide data to evaluate the achievements of the iCCM project, which aimed to increase the proportion of children receiving rational and appropriate treatment for pneumonia, diarrhoea and malaria by 20 per cent over the baseline.

The findings show that 98.9 per cent of children had been breastfed at some point. Only 57.1 per cent were breastfed in timely fashion (put on the breast within an hour of birth). Eight in ten children aged 6–59 months had received a Vitamin A supplement at some point. Within the six months prior to the survey, 83.6 per cent of children aged 6–59 months had received a high-dose Vitamin A supplement. Some 69 per cent of children aged 12–23 months were fully immunized (BCG, three doses of polio, three doses of pentavalent, PCV and measles). Overall, 22.3 per cent of children aged 0–59 months reported diarrhoea in the four weeks preceding the survey, with the highest incidence being in children aged 12–23 months (31.3 per cent).

The findings will also be used to monitor progress towards reducing child mortality at the county level.



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## Integrated Community Case Management Project in Siaya County in Kenya: End-line Evaluation Survey

The 2015 Integrated Community Case Management (iCCM) end-line survey in Siaya County and its six sub-counties was designed to provide data to evaluate the achievements of the iCCM project, which aimed to increase the proportion of children receiving rational and appropriate treatment for pneumonia, diarrhoea and malaria by 20 per cent over the baseline. The iCCM survey was conducted using a sample of 1,688 households within 90 clusters.

Among key findings: 98.9 per cent of the children had been breastfed at some point, but only 43.9 per cent were breastfed in timely fashion (put on the breast within an hour of birth). Approximately 69.2 per cent of children aged 12–23 months were fully immunized. The overall pneumonia prevalence in the four weeks preceding the survey among children under five years in Siaya County was 4.7 per cent. Some 96.6 per cent of households had at least one mosquito net, while 62.8 per cent had an insecticide-treated net. About half (53.9 per cent) of children aged 36–59 months attended early childhood education; females were slightly more likely to attend (57 per cent).

The survey results provide data to evaluate the achievements of the iCCM project. The findings will also be used to monitor progress towards reducing child mortality at the county level.



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## Impact of the Ebola Virus Disease Outbreak on Sierra Leone's Primary Health Care System: Sierra Leone Health Facility Assessment 2015

At the end of May 2014, the first case of Ebola virus disease (EVD) was confirmed in Sierra Leone. Since then, the country had been grappling with an unprecedented Ebola epidemic that swept across all districts and disrupted patterns of daily life for over a year. Fearful of health system collapse and its potential impact on non-Ebola-related mortality, the Ministry of Health and Sanitation, in collaboration with UNICEF, undertook rapid assessments of all known peripheral health units (PHUs) nationally in March 2015.

The report reveals that most PHUs were open at the time of visit and that most health workers were in service, despite heavy losses suffered as a result of EVD. Also, notable improvements were identified in the facilities' infection prevention and control readiness, though gaps remained. Notwithstanding, many still lacked basic amenities, such as water and electricity, and issues of high rates of drug stock-out remained in our PHUs. The report also highlights weaknesses and gaps in the functionality of assessed PHUs that pre-date the Ebola outbreak, and it pinpoints necessary reforms in the country's primary health care system for consideration in the emerging health care recovery strategy, which requires further investment to strengthen health systems in Sierra Leone.



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## Setting the Foundation in the First 1,000 Days of Life – Accelerating Maternal and Child Survival in Kakamega County Programme in Kenya: Baseline Assessment

The OparanyaCare Programme is aimed at reducing maternal, newborn and under-five mortality, increasing health and well-being of beneficiaries, addressing high levels of malnutrition and reducing HIV/AIDS transmission from mothers to children. The programme is designed with a significant emphasis on the first 1,000 days of life. It supports pregnant mothers and children up until the age of two and delivers a cash subsidy of 12,000 Kenyan shillings (KSh) in a period of 26 months, in six tranches of KSh 2,000. A total of 769 households were covered, targeting pregnant or lactating mothers.

The baseline survey showed that 80.4 per cent of the women had access to health facilities within one hour. About 77.9 per cent of women had been tested for HIV and had received the results, while 20.4 per cent had never been tested. Overall, 68 per cent of children aged 12–23 months were fully vaccinated with BCG, measles, pentavalent, polio and pneumococcal vaccines. The majority of mothers (88 per cent) took their children for growth monitoring, while 11.7 per cent did not. Households in rural areas were slightly more likely to own an insecticide-treated mosquito net (61 per cent) than were those in urban areas (56 per cent). All the health facilities visited reported a shortage of equipment/inadequate equipment. There is an acute shortage of nurses and nutritionists, who are key in the running of the programme, according to the respondents. Most of the health facilities had information education communication material on the walls for health education.

The County Government of Kakamega and other implementing partners plan to use the findings to establish effective social transfers to address the barriers identified during the first 1,000 days in the life of children.

## Newborn Care Strategy and Costed Action Plan for Namibia

In Namibia, the proportion of under-five mortality attributable to neonatal mortality tends to increase as the under-five mortality rate (U5MR) decreases. In 2014, Namibia launched a costed child survival strategy and a country implementation plan to scale up nutrition under the umbrella of A Promise Renewed. Despite these high-level commitments, Namibia has not met the Millennium Development Goal 4 target on U5MR, due to high neonatal deaths. The Family Health Division of the Ministry of Health and Social Services, with support from UN partners and other key stakeholders, will conduct a situation analysis on newborn care gaps and the status of current interventions. This analysis will be used to develop a comprehensive costed newborn care action plan to accelerate the reduction in neonatal mortality.



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## Emergency Obstetric and Neonatal Care in Lesotho: Needs Assessment

Lesotho's maternal mortality ratio has been estimated at 1,155 per 100,000 live births in 2009; the neonatal mortality rate is estimated at 34 per 1,000 live births; infant mortality is put at 59 per 1,000 live births; and the under-five mortality rate is reckoned to be 85 per 1,000 live births. These indicators are worse than they were 10 years ago, and it is only in the past five years that they have shown some improvement.

Maternal and newborn morbidity and mortality are due to a number of factors, including a poor rate of safe delivery in health facilities, a poor referral system from health centres to hospitals, and few hospitals offering obstetric care. One of the key questions that need to be answered is whether the health system has the capacity to implement maternal health services.

The main objective of the assessment is to identify needs and gaps, and to inform programmatic efforts to improve the quality and utilization of Emergency Obstetric and Neonatal Care (EmONC) services, as well as critical support systems at all levels. The study will: (i) measure the availability of infrastructure to provide basic and comprehensive EmONC; (ii) establish progress assessment for monitoring the availability, geographic distribution, level of utilization and quality of EmONC; (iii) determine progress made in the policy environment for training human resources in life-saving practices; (iv) determine the availability of essential drugs, equipment and supplies for EmONC; and (v) measure knowledge and competency levels of human resources regarding obstetric and newborn care.

The assessment of the country's capacity for EmONC will determine the progress made since the 2005 assessment. In line with the roadmap for accelerating the attainment of Millennium Development Goals related to maternal and newborn health, the results will further guide policy and inform planning and re-prioritization of health systems, using EmONC as a point of entry. The findings of the assessment will be utilized by implementing partners to improve their programmes, and by the Lesotho Government to revise EmONC policies and focus on improving the situation.



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## Socio-cultural Determinants for the Adoption of Essential Family Practices in Madagascar

UNICEF Madagascar supports the Government and civil society partners in realizing the rights of children to survival, development, protection and education. However, because of socio-cultural factors, UNICEF's contribution to improving access to social services for parents and children does not always result in better child rights indicators. To address these factors, UNICEF supports its partners in implementing a Communication for Development strategy, aimed at promoting the adoption of essential family practices (EFP). Although some data are available on key family practices, they are not complete and do not provide sufficient information on specific vulnerable groups, key actors of influence and socio-cultural resources that can be used for mobilization and community participation, including culturally appropriate communication channels.

The study seeks to address this lack of evidence-based data and information using a mixed-method design. This consists of two quantitative surveys and a series of focus groups that deal with deeper issues. The study will shed more light on: (i) the socio-cultural determinants of attitudes and behaviours relating to each EFP and how they differ by region, location, gender, education level and other socio-demographic characteristics; (ii) which behaviours can be classified as individual or family level, and which as social norms; (iii) who are the key actors and/or sources of influence and networks; and (iv) which communication channels/media are available and trusted. Results from this study will lead to better-informed and targeted interventions that can contribute to measurable social and behavioural change.

## Evaluation of the Health Extension Programme in Namibia

The Health Extension Programme (HEP) in Namibia is designed to close the gap between communities and health facilities in a country with the second-lowest population density in the world. The programme has been scaled up to 11 of the country's 14 regions, with a total of 1,366 community-based health extension workers (HEWs) trained and deployed nationally. The HEWs are responsible for providing a standard set of integrated primary health care services to rural households, with a focus on improving maternal and child health. Over the years of implementation, an increase in the uptake of services has been observed, the programme has (largely) been integrated into the health system, and its supervision, monitoring and evaluation components have been strengthened. The evaluation of the first four years of the HEP will document lessons learned and best practices. The results will be used to address potential gaps in current programming.



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## Evaluation of Coverage and Use of Insecticide-treated Mosquito Nets in Zambezia Province in Mozambique

Mosquito nets impregnated with long-lasting insecticides (LLITNs) are one of the most cost-effective interventions in malaria-endemic areas. In Mozambique, LLITNs are part of the strategy to combat malaria and are distributed free of charge through mass distribution campaigns and routine distribution in antenatal care clinics. However, existing information on the coverage, quality and use of mosquito nets is limited and is generally based on programmatic data.

A household survey will be carried out on 710 households, using two-stage sampling. Using a mix of methods, the study will seek to measure the availability and use of nets, as well as the physical capability of available nets to provide adequate protection. The qualitative component will examine the barriers to access and use of LLITNs, as well as the factors that facilitate their use. The findings will identify the factors associated with LLITN accessibility, usage and maintenance across a number of key socio-economic variables, with the intention of informing Ministry of Health programming in the effort to reduce mortality rates from malaria.



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## Improving Immunisation Coverage in Uganda through Better Data, Plans and Budgets

According to the Uganda Demographic and Health Survey (UDHS) data, the infant mortality rate in Uganda declined by 39 per cent – from 88 per 1,000 live births in 2001 to 54 per 1,000 live births in 2011. The 2016 wave of the UDHS is pending, but increased immunization coverage remains a key factor for improving child survival rates. The proportion of children aged 12–23 months who are fully immunized has improved only slightly in the past two decades: from 47 per cent in 1995 to 52 per cent in 2011. Furthermore, only 40 per cent of children aged 12–23 months were immunized before their first birthday. Children living in urban areas are more likely to be fully vaccinated than are those living in rural areas (61 per cent and 50 per cent, respectively) and vaccination coverage decreases as birth order increases.

Examination of a key immunization indicator (DPT3 coverage) vs. primary health care (PHC) allocations shows that, even though it receives one of the highest PHC releases per capita, West Nile emerges as the sub-region with the lowest DPT3 coverage nationwide. This policy brief focuses on a case study of the West Nile sub-region, in order to provide a deeper understanding of district-level bottlenecks affecting the effective delivery of immunization services.



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## **Nigeria Maternal and Neonatal and Child Health Week Impact Evaluation**

In Nigeria, every 10 minutes a woman dies while giving life; almost two children under the age of five die every minute; more than 21,300 children are born each day; and the country accounts for nearly 30 per cent of the global burden of under-five malaria deaths. With a population of about 182 million, Nigeria is the largest country in Africa and accounts for near 50 per cent of West Africa's population.

It is in this context that UNICEF Nigeria supports the national integrated Maternal and Neonatal and Child Health (MNCH) Strategy, which aims to scale up a package of key maternal, neonatal and child survival interventions; the MNCH Week (MNCHW) is a package of high-impact interventions delivered twice a year (May and November) to target maximum coverage.

The impact evaluation's objectives are to: (i) assess the extent to which the MNCHWs have been implemented as intended; (ii) evaluate the extent to which the MNCHW has been adapted to the needs of intended target groups; (iii) assess whether the intended outcomes of the MNCHW were achieved, and whether there were unintended outcomes; and (iv) identify lessons learned, exploring what has worked well, what has not worked well and why.

Using a mixed-methods and participatory approach, the impact evaluation will use a theory-based framework to determine the actual contribution of the MNCHW to the stated objectives.

The results of the impact evaluation will inform both UNICEF Nigeria and the Government of Nigeria at the federal and state level, on the way forward with the weeks, and how better to implement and ensure sustainability of the high-impact interventions delivered within the weeks.

## **The 3 Feet Approach in South Africa: Strengthening District Health Systems: Every Life Counts!**

The 3 Feet Approach gives health care workers at every level of care the necessary tools to respond to the health needs of the community in a simplified way. Currently in its pilot phase in selected districts, the 3 Feet Approach supports health care workers to provide quality care for mothers and young babies, manage illnesses such as TB and HIV, and promote community engagement towards improving health care outcomes. After several months in operation, data confirm that the 3 Feet Approach is beginning to have a positive impact on the lives of clients, patients and health care providers, as well as on the health care system in general.

The booklet aims to provide health care workers at all levels (national, provincial and district) with an overview of the 3 Feet Approach for scale-up and implementation country wide.



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## Assessment of Quality of Maternal and Neonatal Care in Swaziland

Maternal mortality remains high in the sub-Saharan part of Africa. In Swaziland, the maternal mortality ratio increased from 110 per 100,000 live births in 1990 to 589 per 100,000 live births in 2010, and has remained high – as reflected in the 2012 figure of 593 per 100,000. The country has also continued to face a challenge with high neonatal mortality rates. The neonatal mortality rate has remained high at 20 per 1,000 live births (19 per 1,000 live births in 2010), and it contributes about 30 per cent to the under-five mortality.

It is against this background that the Ministry of Health, with financial and technical support from UN agencies, carried out a comprehensive national assessment of maternal and newborn quality of care to understand the facilitating factors, barriers and bottlenecks to the delivery of services.

Findings showed that: generally, the facility support systems were good and most health facilities have well-maintained buildings; however, there was a shortage of staff in terms of both their number and their type of training. Most essential drugs, equipment and supplies were available. Laboratory support was good and results for emergency tests were obtained in reasonably good time in most health facilities, even though chemists were not regularly available in nearly half of them.

Regarding case management of common maternal and neonatal diseases, there were gaps in case management of common maternal illnesses related to pregnancy; and protocols and guidelines on management of these conditions were mostly not available. Better practice was observed in the management of HIV-positive pregnant mothers, where there were guidelines and trained staff.

The findings will be used to evaluate the existing different aspects of maternal and neonatal care in 15 facilities, and to identify areas of improvement.



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## Assessment of the Child-sensitiveness of One-stop Centres in Zambia

One-stop centres (OSCs) are considered a successful approach for referring women and child victims of gender-based violence to appropriate and immediate support. Therefore, it was highly recommended to scale up the model and ensure the establishment of OSCs in all district hospitals nationwide. Since the current OSCs are project funded, there is a need for the ministries concerned – especially the Ministry of Health and the Ministry of Community Development and Social Welfare – to ensure sustainable support for these establishments.

The assessment will provide key findings, gaps and successes of the current one-stop centres. The findings will provide a solid basis for in-country evidence-based generation and knowledge management to support further expansion of the OSCs, and will inform recommendations to establish a standard OSC model, which can be scaled up to all district hospitals nationwide.

## Introduction of Inactivated Polio Vaccine (IPV) in Routine Immunization Schedule in Zambia

In Zambia, babies receive multiple injections during routine immunization sessions. Zambia will introduce inactive polio vaccine (IPV) in 2016, adding one more injection to the routine immunization schedule. Zambia has a paucity of studies on perceptions and concerns of mothers and health workers relating to multiple vaccination injections. Anecdotal evidence indicates possible resistance by caregivers to multiple injections in one vaccination session. Thus, prior to introduction of the IPV, a study was commissioned to understand the perceptions of caregivers, health workers and opinion leaders towards multiple injections, identify the potential fears of caregivers and health workers to the co-administration of IPV and oral polio vaccine (OPV), and explore possible solutions to address caregiver concerns.

The study found generally good acceptance of vaccination among respondents and a good understanding that vaccines prevent diseases in children. Parents and caregivers were not concerned about simultaneous administration of IPV and OPV, while health workers were more concerned about too many vaccines being given at the same time and about additional pain that babies will have. Results helped to identify communication processes and messages that could be used to encourage guardians to accept the additional (IPV) injection.



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## Documentation of Best Practices from the Introduction of New Vaccines in Eastern and Southern Africa and the Impact in Addressing Inequitable Delivery of Immunization Services

Over the last decade, Eastern and Southern African countries, with funding and technical support from Gavi, the Vaccine Alliance, have introduced a number of life-saving new and underutilized vaccines, which are contributing to a reduction in morbidity and mortality from vaccine-preventable diseases in the region. While post-introduction evaluations (PIE) provide generic insights into programmatic and management issues surrounding the introduction, there has not been any systematic documentation in the region of the actual impact on the overall immunization programme of the introduction of new and underutilized vaccines and the resources that come with it.

This documentation study will collate new vaccine introduction best practices from several countries in the region and try to link these to routine immunization coverage trends at sub-national level (districts). The study will review the impact of new vaccine introduction on routine immunization in hard-to-reach districts with large numbers of un-immunized children.

Findings from this study will complement those from PIEs in driving policy changes that will ensure that future new and underutilized vaccine introductions will help strengthen the immunization system and ensure equity in immunization service delivery in the region.

## Evidence-based Engagement of the Somali Pastoralists of the Horn of Africa in Polio Immunization: Overview of Tracking, Cross-border Operations and Communication Strategies

Building on the experience of the 2013–2014 wild poliovirus outbreak in the Horn of Africa, this study examines strategies for engaging pastoralists of the Somali cluster in supplementary immunization activities. The study synthesizes knowledge about Somali pastoralism in the Horn of Africa and elucidates approaches for tracking nomadic groups, creating dialogue and building trust to enable better vaccination opportunities for pastoralist children. Interventions across the three countries have included creating a network of informants and influencers, engagement with clan leaders, mapping of water points and livestock markets, partnership with the animal vaccination programme, cross-border coordination, and the establishment of permanent transit vaccination points. The study may be useful for a broad range of development professionals who are engaged in improving access to services for nomadic and pastoralist populations.



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## Multi-country Study to Identify the Determinants of Child Mortality Reduction and Understand Linkages between Fast Mortality Decline and Successful Strategies

The Eastern and Southern Africa Region (ESAR) has recorded improvements in the under-five mortality rate over the past two decades, but there is a wide range of decline between countries: this varies from -19 per cent to +72 per cent between 1990 and 2013, according to the Inter-agency Group for Child Mortality Estimation's 2014 report. Questions arise among policy makers and programme managers about the factors underlying the positive results. The main objective of this study is to investigate the relative importance of major improvements in levels of health interventions, social and environmental determinants of population health, measured as the under-five mortality rate in selected countries of ESAR.

Data from the Demographic and Health Surveys carried out since 2000 will be used to determine mortality among under-five children in the three years preceding the surveys. Multivariate analysis will be used to understand the influence of known factors on children's deaths. Additional information related to programme implementation will be collected in the selected countries to enrich the analysis around programmatic success factors.

The findings will: (i) clarify the number and causes of child deaths in selected countries; (ii) determine the profile of surviving infants; and (iii) identify types of successful high-impact interventions and appropriate key strategies, including information on the delivery platform. The study will also formulate recommendations to inform future programming.

## Polio Outbreak Mixed Migration and Mobile Population Report

Building on the 2014 Eastern and Southern Africa Regional Office studies that elucidated mixed migration movement in Somalia, Kenya and Ethiopia, this study examines mobile population movement in the Horn of Africa region, specifically in the context of applying flexible immunization strategies to reach the mobile population with immunization and other health services. The research evaluates the feasibility of applying special immunization strategies to reach the mobile population, including internally displaced persons, refugees, nomadic pastoralists and economic migrants in Somalia, Kenya and Ethiopia. The study also examines the extent of population movement and the influx from Yemen into Somalia, in relation to the possible importation of the poliovirus from endemic countries. The study is applicable to the work and interests of a broad range of development professionals who would like to engage with the mobile population on various development issues.



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## Case Study on Immunization Financing in Burkina Faso

Since 2006, countries have adopted the Global Immunization Vision and Strategy 2006–2015. Its goal is to protect more people against more diseases by expanding the reach of immunization to every eligible person, including those in age groups beyond infancy, within a context in which immunization is high on every health agenda. It aims to: (i) sustain existing levels of vaccine coverage; (ii) extend immunization services to those who are currently unreached and to age groups beyond infancy; (iii) introduce new vaccines and technologies; and (iv) link immunization with the delivery of other health interventions and the overall development of the health sector. In this context, countries are facing numerous challenges, including the issue of sustainable financing, especially regarding vaccine supply in a context marked by the increasingly high cost of new vaccines.

Most of the countries in the West and Central Africa Region (WCAR), despite having a budget line for vaccine in the national budget, continue to experience recurrent difficulties in actually accessing the programmed resources in the national budgets. Even when resources are available, they do not cover all the real needs of immunization services, or are only partially utilized (for various reasons). In most cases, budgets are automatically renewed without taking account of the introduction of new vaccines or the increase in the target population. All these financial difficulties inevitably lead to vaccines frequently running out of stock, which can lead to an increase in unvaccinated children.

Burkina Faso is one of the WCAR countries that are dependent on securing government funding for vaccines.

The purpose of this case study is to document the good practices in budgeting and securing the funds for vaccines procurement and to disseminate the results among WCAR countries to improve the visibility and sustainability of their immunization financing.



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## **DECIDE: a Cluster Randomized Controlled Trial to Reduce Non-medically Indicated Caesareans in Burkina Faso**

Since 2006, Burkina Faso has subsidized the cost of caesarean sections, in order to increase their accessibility. Caesareans are performed by obstetricians, general practitioners and nurses trained in emergency surgery. While the national caesarean rate is still too low (only 2 per cent in 2010), 12–24 per cent of caesareans performed in hospital are, in fact, not medically indicated. The objective of this study is to evaluate the effectiveness, and to analyse the implementation, of a multifaceted intervention to reduce the rate of non-medically indicated caesareans in Burkina Faso.

This study combines a multicentre cluster randomized controlled trial with an implementation analysis in a mixed-methods approach. The evidence-based intervention will consist of three strategies to improve the competencies of maternity teams: (i) clinical audits based on objective criteria; (ii) training of personnel; and (iii) decision-support reminders of indications for caesareans via text messages. The unit of randomization and of intervention is the public hospital equipped with a functional operating room. The intervention will cover one year. Every patient who undergoes a caesarean during a six-month period in the year preceding the intervention and the six months following its end will be included in the trial. The change in the rate of non-medically indicated caesareans is the main criterion by which the intervention's impact will be assessed. To analyse the intervention process, a longitudinal qualitative study consisting of deliberative workshops and individual in-depth interviews will be conducted.

## **Status and Challenges to the Introduction of a Second Dose of Measles-containing Vaccine into Routine Immunization Schedule in WHO African Region: Status Report 2015**

This article reviews the current status of the introduction of a second dose of measles-containing vaccine (MCV2) into routine immunization in countries of the World Health Organization (WHO) AFRO region and highlights key challenges to MCV2 introduction and update.



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## Determinants of Non-medically Indicated Caesareans Sections in Burkina Faso

Since 2006, Burkina Faso has subsidized the cost of caesarean sections, in order to increase their accessibility. Caesareans are performed by obstetricians, general practitioners and nurses trained in emergency surgery. While the national caesarean rate is still too low (only 2 per cent in 2010), 12–24 per cent of caesareans performed in hospital are, in fact, not medically indicated. The objective of this study is to identify factors associated with non-medically indicated caesareans in Burkina Faso. The study is a prospective six-month multicentre observational study on a cohort of 1,689 caesareans performed for foetal distress, prolonged or obstructed labour, previous caesarean section or pre-eclampsia.

Results show that the decision to opt for caesarean delivery was not medically indicated in 24 per cent of cases. Factors independently associated with non-medically indicated caesarean were: (i) spouse's occupation other than breeder or farmer; (ii) urban context of residence; and (iii) caesarean decided by general practitioner.

Findings imply that women from the upper class of society who are operated on by a non-specialist are more likely to have a caesarean without medical indication. Interventions are needed to improve the skills of health care professionals and the awareness of women about the risks associated with unnecessary caesareans.

## Evaluation of Drug Administration Errors in the Paediatric Wards of the Sylvanus Olympio Teaching Hospital

Paediatric patients are more vulnerable to drug administration errors, due to a lack of information on appropriate drug dosages and strengths for use with this group of patients. Medication errors can occur at any of the three steps of the medication use process: prescribing, transcription and administration. Therefore, the aim of the present study was to determine the extent and types of drug administration errors in the Sylvanus Olympio teaching hospital's paediatric wards, and to identify measures to reduce such errors.

A researcher was stationed in the paediatric wards to observe all prescription, transcription and drugs administered to paediatric patients. Of the 570 drug administrations observed, 290 had at least one error. The most common types of drug administration errors were incorrect rate of administration (26.24 per cent), followed by errors of time administration (28.8 per cent), omission errors (7.68 per cent) and incorrect dose (3.52 per cent). The recruitment of a clinical pharmacist and the use of new technology for information and communication could help to reduce drug administration errors in the Sylvanus Olympio teaching hospital.



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## District Management Teams 2.0 Mobilization Project for Response to Health Challenges in Benin and Guinea

In sub-Saharan Africa, health systems remain weak, despite the inclusion on the agenda of most organizations of strengthening health systems as a priority for action. Indeed, interventions to strengthen health systems are often implemented at the central level, which has more interaction with the global health initiatives.

To overcome these shortcomings, the community of practice on health service delivery has developed a project called Mobilization 2.0 of district management teams (ECDs), funded by UNICEF, to meet the needs of people in general, and those prone to epidemic diseases in particular.

The project is implemented in Benin and Guinea (Conakry) and started in January 2016. It consists of four parts. Component 1 involves the collection of data by the ECDs on their capabilities and the activities undertaken to respond to potentially epidemic diseases. This information is then entered on an electronic form. The data are analysed and the results are presented on the electronic platform.

Component 2 is the sharing of experiences and knowledge between peers (ECDs) on the results. This will help those who are struggling to improve. Component 3 is the use of social media: a Facebook page is used to inform the public about the health challenges through quality information and management of rumours. Component 4 is action research that accompanies the other components through a quick learning to manage uncertainty and adapt strategies and interventions to achieve optimal mobilization of the EDCs.

The approach is complementary to the efforts at the central level to bring greater accountability of the EDCs, a peer control, participation in team and greater accountability through viewing results online.



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## ENPEDIA: Childhood and Paediatric Care in Sub-Saharan Africa

Children are the largest patient group in the hospitals of sub-Saharan African countries.

Besides infectious diseases and injuries, advances in the management of chronic diseases (sickle cell disease, HIV, kidney disease) and new cancer treatments explain this situation. Yet we know almost nothing about how these children live with their illness or face the painful treatments. This is an 'action research' whose main assumption is to improve the quality of care by comparing speaking and actions of the medical teams to the ones of children. By changing the status of children in hospitals, and by making them care partners, we hope to change the attitudes of caregivers.

The programme of the action research aims to reduce mortality in paediatric services and improve the quality of care, but also to adapt paediatric services to such new care situations as chronic disease management, health education for young patients and their families, and implementation of palliative care for children who now die in hospital.

More specifically, the objectives of the programme are to: (i) analyse disease experienced by children; (ii) analyse quality of care in paediatric services in nine countries of Africa; (iii) analyse how these care interactions are perceived by children; (iv) sensitize health personnel by showing the way in which children talk about their disease and evaluate their care; (v) train caregivers in care techniques and in handling pain and suffering; and (vi) analyse with caregivers and children the effects of better management of pain and monitoring of diseases.

The research will contribute to an improvement in the quality of paediatric care by highlighting necessary changes in the status of children in the hospital and helping children to become partners in care.



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## Equity in Immunization in West and Central Africa Region

Third-dose diphtheria-tetanus-pertussis (DTP3) coverage has consistently been lower in the West and Central Africa Region (WCAR) than globally. In 2014, when global immunization coverage for DTP3 was 84 per cent, the coverage in WCAR was 73 per cent, indicating that at least one child in four was not fully vaccinated. As of 2014, only 9 of the 24 WCAR countries had reached the target of 80 per cent DTP3 coverage in 80 per cent of districts. The region has by far the lowest immunization coverage in the world. While 75 per cent of all un-immunized children lived in 10 countries in the world, Nigeria alone had 31 per cent of those children. Other low-performing countries are Central African Republic, Equatorial Guinea, Liberia and Mali, with less than 20 per cent of districts reaching 80 per cent DTP3 coverage.

The World Health Assembly endorsed a framework for universal access to immunization, in order to reach under-served populations and to reduce disparities in immunization both within and between countries. UNICEF, being a key partner in providing immunization, has refocused on equity in immunization in the countries of WCAR.

The study aims to undertake an analysis of inequities in immunization for each country in WCAR, to identify the communities suffering immunization inequities, identify bottlenecks in providing immunization services to those communities, and develop strategies to address bottlenecks in order to reduce inequity in immunization coverage in the under-served communities.

## Assessment of Logistic Management Information Systems in West and Central African Countries

In countries Expanded Programme of Immunization have adopted a plethora of tools to monitor activities and performance. Methods and practices of collecting and analysing data have placed a counter-productive burden on frontline health workers. There is a growing consensus that the burden not only leads to poor data quality, but also diverts critical health resources from their responsibility for patient care. To remedy this situation, there is a need for an in-depth analysis of existing systems, forms and tools used in the countries to identify those functions and activities of the supply chain that are covered by several systems in parallel, and those that are left with no tool for monitoring.

The study should lead to a global analysis of Logistic Management Information Systems, in order to define a comprehensive strategy for the region that facilitates the integration and interoperability of systems, rather than the integration of vertical systems.



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## Health Sector Operational Planning and Budget Allocation Processes in West Africa

The way in which African countries plan and budget their health sector is of great relevance in influencing the sector's ability to deliver quality and timely health services to its population. While health sector planning and budgeting is an important process that can determine and influence the overall performance of the health system, this field is one that has rarely been documented or studied, especially in sub-Saharan African countries.

This study aimed to shed some light on this field in three countries of West Africa, by examining the research question: How is the health sector of West African countries operationally planned and budgeted? The study was geared towards describing and understanding the 'processes' of annual operational planning and budgeting allocation of the health sectors of Ghana, Côte d'Ivoire and Senegal at the national level, in order to understand how they occur and what factors influence the way in which they occur, and to ascertain whether or not these processes are aligned in the aforementioned countries. It is hypothesized that the process of developing the annual operational plans of the health sector is not aligned to the process of allocating an annual budget to the sector in these countries.

This output will serve as a national knowledge-base tool for the ministries of health and other authoritative bodies in the respective countries, allowing them to consider the findings of the study and the recommendations to be made on strategies for improving these processes and their alignment for a more responsive and functional health system.

## Use of a Locally Adapted Calendar of Events with the 'Sandwich' Method to Determine Gestational Age via the Last Menstruation Date: a Case Study in Urban and Rural Mali

Accurate pregnancy dating is essential to reduce maternal mortality and to manage intrauterine growth restriction. This study aims to assess the determination of the last menstruation date, in conditions where echography is not available, using a simple method called 'sandwich', taking known events into consideration. The study will lead to the validation of this simple tool for pregnancy dating



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## Immunization Financial Bottleneck Analysis in Chad

Over the years, various countries' immunization programmes have grown in size and complexity, in terms of both service delivery and immunization financing. The immunization financing portfolio of countries has gained in importance, in terms of ensuring quality immunization services delivery, sustaining coverage and introducing new vaccines and available technologies. One area of concern for governments and partners alike is the sustainability of immunization programme financing, which is the ability of a country to mobilize and efficiently use domestic and supplementary external resources on a reliable basis to achieve current and future target levels of immunization performance – in terms of access, utilization, quality, safety and equity.

This report will document the Immunization Financing Review that is being conducted in Chad. It is an effort to identify current and potential challenges to the financing of immunization. The participation of international partner agencies in the mission will lead to an initiation of a robust dialogue process for concerted efforts to tackle the challenges.

The purpose of this assessment is to outline a framework to gather and analyse specific information concerning the ability of priority countries that face financial and programmatic difficulties to strengthen their immunization systems, and also to outline the prospects for financing their immunization programmes, including vaccines, operational costs and the Gavi Vaccine Alliance co-financing requirements.



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## Institutional and Professional Priorities Regarding Misoprostol in Benin and Burkina Faso: the Various Actors Caught between Social Risks and Health Risks

This paper describes and analyses the institutional priorities and the professional practices related to misoprostol in Benin and Burkina Faso. These data show that the official recognition of misoprostol is a process involving various actors and relations that reflects the sensitivity of publicly raising abortion issues. The institutional priorities are governed by the pressure of international non-governmental organization on policy makers, and vacillate between the need to provide care for women and the social risks arising from sensitivity concerning abortion. The perceptions of health care professionals regarding misoprostol reflect a fear of social risks when it is used for abortion, and a fear of health risks when it is used to induce labour.

Misoprostol raises questions among policy makers and health care providers regarding abortion and maternal mortality.



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## Initial Management of Post-partum Haemorrhage: a Cohort Study in Benin and Mali

The objective of the study is to determine the components of initial management associated with a decreased risk of severe post-partum haemorrhage (PPH) in Benin and Mali. A cohort study was carried out between May 2013 and September 2014, including all women who delivered vaginally in seven participating centres and who presented excessive bleeding after birth. Severe PPH was defined as PPH with surgical treatment (vascular ligation and/or hysterectomy) and/or blood transfusion and/or transfer to an intensive care unit and/or maternal death. A logistic regression model was used to identify components of initial PPH management that were associated with severe PPH, adjusting for case mix.

Results show that 223 women presented a primary PPH, presumably caused by uterine atony. Of those, 88 per cent had severe PPH. Nearly a third of women had a late injection of oxytocin (> 10minutes) after PPH diagnosis, or no injection. Oxytocin injection within 10 minutes of PPH diagnosis was significantly associated with a decreased risk of severe PPH. The decrease in the delay in oxytocin administration is a key determinant to improve maternal outcomes related to PPH in this context.



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## Medicated Abortion and Management of Unwanted Pregnancy in Benin and Burkina Faso: Viewpoints from Neighbouring Countries with Different Public Policy and Fertility Issues

The aim of this paper is to understand how women deal with unexpected pregnancy in Benin and Burkina Faso. The study will first compare the fecundity rate and contraceptive prevalence in the two countries, with a demographic point of view. Then, it will examine the affective situation of women and the way in which it influences the decision to have an abortion. Afterwards, it will compare the itineraries of abortion in the two countries and the way the uses of misoprostol are emerging. The paper will show the complexity of the situations that lead to abortion and the moral and ideological stakes that indeed surround abortion in the two countries, even though experiences in health public policies influence the context, which differs between Benin and Burkina Faso.



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## Using Routine Health Data and Intermittent Community Surveys to Assess Maternal and Neonatal Health Interventions' Impact in Low-income Countries: a Systematic Review

There is a need to provide increased evidence on effective interventions to reduce maternal and neonatal mortality in low- and middle-income countries (LMIC). This systematic review aims to summarize the breadth of knowledge on using routine data (Routine Health Information Systems (RHIS) and Intermittent Community Surveys (ICS)) for well-designed maternal and neonatal health evaluations in LMICs.

Of the 1,201 publications identified, 46 studies met the inclusion criteria. Most of these were carried out in Africa, using RHIS data, mainly extracted from health facility registers and non-controlled before-and-after design. The indicators, which were mostly reported, were related to the availability of health care facilities, the use of health care services and maternal or neonatal health outcomes. Few studies used ICS data for community-based impact evaluation or neonatal outcomes and indicators of severity to assess performance of care.

RHIS and ICS data should be increasingly used for impact studies on maternal and neonatal health in LMICs. Strengthening existing RHIS is often needed to ensure the quality of such data. Measuring community-based indicators, as primary outcomes, should favour ICS over RHIS. Efforts should be made to use controlled designs and indicators of severity when assessing the impact of these interventions.



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## Retention of Human Resources in Neonatal and Infant Maternal Health in Difficult Areas in Benin, Burkina Faso and Senegal: Lessons from an Exploratory Analysis and Documentary

In order to achieve the Millennium Development Goals 4 and 5 in Francophone Africa, the French-funded initiative Muskoka has offered its support since 2010 in carrying out projects aimed at strengthening human resources in maternal, newborn and infant health (HRMNIH). This research aims at identifying HRMNIH retention strategies, being adapted to the context of Benin, Burkina Faso and Senegal, and at improving retention in difficult areas.

The study seeks to analyse the situation regarding HRMNIH retention strategies – type of training, financial, regulatory and support – existing in difficult areas in these countries.

In Burkina Faso, HRMNIH retention strategies are lacking. Some transitional strategies that have been implemented (e.g. the regionalization policy) pose several challenges. In Senegal and Benin, the interventions implemented cover different types of incentives – training, financial, support – but they target certain professional groups and neglect others. No regulatory type of strategy has been recorded in the three countries.

The challenges of retention are not effectively taken into account in the target countries. Fostering retention requires facing different challenges: the process of HRMNIH assignment, working conditions, training (initial, continuing) and the regulatory framework to motivate staff to accept a position in a difficult area and the stay there.

The operational research will allow recommendations to be made to decision makers on guidelines for improving existing retention strategies, or even for developing policies to put in place strategies that are most likely to be accepted and lead to retention of maternal, newborn and child health professional staff in under-served areas.



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## Social Accountability in Primary Health Care in West and Central Africa: Exploring the Role of Health Committees

Social accountability has been emphasized as an important strategy to increase the quality, equity and responsiveness of health services. In many countries, community health committees (HCs) provide the accountability interface between health providers and citizens or users of health services. This article explores the social accountability practices facilitated by HCs in Benin, Guinea and Democratic Republic of Congo.

The paper is based on a cross-case comparison of 11 HCs in the three countries. The HCs were purposely selected on the basis of the (past) presence of community participation support programmes. The cases were derived from qualitative research, involving document analysis as well as interviews and focus group discussions with health workers, citizens, committee members and local authorities.

Results show that most HCs facilitate social accountability by engaging with health providers in person or through meetings to discuss service failures, leading to changes in the quality of services, such as improved health worker presence, the availability of nightshifts, the display of drug prices and replacement of poorly functioning health workers. Social accountability practices are, however, often individualized and not systematic, due to gaps in policy provisions, and election processes.

The potential role of HCs in facilitating social accountability should be assessed in relation to local contextual factors such as election processes and the presence of other non-facility-based accountability structures or interfaces, as well as the multiple roles that HCs are required to play in primary health care.



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## Study Report: Assessment of the Supply Chain of Home-based Records in Mali

A home-based record (HBR) is an individual document that keeps track of all immunizations received by a child or mother. The HBR is issued by a health care provider during the first antenatal visit (for the mother/pregnant woman) or after the delivery (for the newborn). The HBR should be brought to all immunization appointments (routine or supplementary immunization) to keep it up to date and so avoid unnecessary extra vaccinations. In some countries, immunization records may be required for school enrolment (nursery or primary school) or travel. The HBR is also important for: (i) recalling vaccination received and appointments for immunization; (ii) assessing the vaccination status of the individual or community; (iii) performance monitoring of the Expanded Programme on Immunization.

The introduction of new vaccines in low- and middle-income countries is another reason for ensuring that every child holds an HBR, which proves the right of every child to be fully immunized and of pregnant women and newborns to be immunized against tetanus.

The study aims to assess the procurement system for HBR in Mali.

The assessment will focus on: (i) the readiness of the supply chain to provide HBRs – from national to operational level; (ii) responsibilities and roles in redesigning, funding and printing HBRs; (iii) availability of HBRs at service delivery; (vi) importance of HBRs.

Lessons learned from the analysis will help to address bottlenecks/issues encountered in the country, where HBR prevalence is less than 50 per cent.



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# PART 6

## Child Nutrition

### Gambia National Nutrition Survey

The National Nutrition Agency, with technical support from UNICEF, has conducted a National Nutrition Survey using the Standardized Monitoring and Assessment of Relief and Transition (SMART) method to estimate the levels of malnutrition among children under five and pregnant and lactating women in the Gambia, as a follow-up to the 2012 National Nutrition Survey.

Specifically the survey assessed the following: (i) the prevalence of acute malnutrition among children aged 6–59 months; (ii) the prevalence of chronic malnutrition and underweight of children aged 6–59 months; (iii) the prevalence of low body mass index, obesity and acute malnutrition in women of reproductive age (15–49); (iv) the crude and under-five death rate.

The results of the survey showed that the national prevalence of global acute malnutrition was 10.3 per cent, and of severe acute malnutrition – 2.2 per cent; 22.9 per cent were stunted and 21.6 per cent were underweight. Additionally, the study estimated that 17.7 per cent of women aged 15–49 were underweight, 14.9 per cent were obese, and 3.7 per cent of pregnant women in this age group were wasted.

The survey estimated the under-five and the crude mortality rates at 0.85 deaths per 10,000/day and 0.67 deaths per 10,000/day, respectively.



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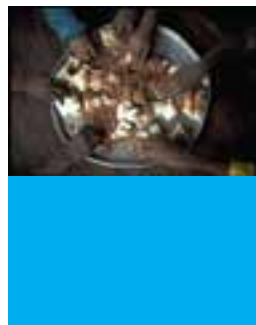
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## Promotion of Child Feeding in Marsabit County in Kenya: ProPAN Pilot Project Report

The first 1,000 days of life are referred to as the 'window of opportunity'. Undernutrition, and especially stunting, is best prevented at this age, as later it can be irreversible. In Kenya, 26 per cent of children under five are stunted, and one child in six is underweight. Marsabit County continues to have high levels of stunting – 27 per cent, a reflection of chronic dietary inadequacy during the first two years of age. This study has identified the current feeding practices of children below 23.9 months in Saku Sub-County of Marsabit. It has been guided by Process for the Promotion of Child Feeding (ProPAN) – a set of research tools used to improve the diet and feeding practices of children under 24 months, and thus prevent early childhood malnutrition. Quantitative data were collected using 24-hour recall, a caregiver survey and a market survey, complemented by semi-structured interviews, opportunistic observations and a food attributes exercise.

Key findings include: 74.9 per cent of children aged 0–23.9 months were breastfed within one hour of delivery; 65 per cent of caregivers practised exclusive breastfeeding; 77.8 per cent of caregivers had breastfed their children aged 20–23.9 months the previous day. The majority of caregivers (78.8 per cent) reported having fed their children on semi-solid foods at the age of six months. About 50.5 per cent of those children assessed through 24-hour recall met the recommended daily energy requirements. According to ProPAN assessment results, none of the children assessed using 24-hour recall was fed on nutrient- and energy-rich foods.

Using ProPAN, the findings will be used to address malnutrition among children under the age of two years, especially at the county level.



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## Report of the National Survey on Iodized Salt Utilization by Households and Pregnant and Reproductive-age Women in Senegal

Since 2009, national efforts have been deployed to achieve optimal iodine nutrition, through promoting the production of iodized salt by small producers, by facilitating their access to potassium iodate, improving production quality control, strengthening the monitoring of compliance with national regulations and standards on salt iodization. A comprehensive communication campaign targeting different partners involved has also accompanied the process.

The survey was conducted in order to quantify the levels of iodine in salt consumed by households. Thus, it provides valuable information on the progress made since 2009, when the previous survey was conducted, in improving households' access to quality iodized salt, following the interventions. The report makes recommendations regarding the production and consumption of quality iodized salt in Senegal, especially in rural areas.



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## National Survey on Iodine and Salt in Madagascar: ENISM 2014

Since the adoption of the salt iodization strategy in February 1996, national surveys (Demographic and Health Survey, Multiple Indicator Survey, etc.) conducted after 1997 have shown that iodized salt was available to between 73 per cent of households in 1997 and 72 per cent in 2008. In 2008, it was noted that 53 per cent of households to which iodized salt was available had salt with adequate iodine content. However, no representative data on the iodine status of the population of Madagascar has been available at the national level since the start of implementation of the programme against iodine deficiency disorders (IDDs).

Based on a representative sample at the national level, this study aims to evaluate the iodine status of the population of Madagascar after the establishment of the policy to combat IDD. Specifically, the investigation will: (i) determine the urinary iodine among the Malagasy population; (ii) measure the availability of iodized salt in Malagasy households and assess the iodine content of salt consumed; and (iii) determine the sodium intake in a specific sub-sample of individuals. This study will provide data on the iodine status – information that will identify areas of intervention to improve the salt iodization programme and control the consumption of salt in Madagascar.



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## Integrated, Multisectoral Nutrition Programming in Rwanda: Lessons Learned, Best Practices and Innovations

The UNICEF Rwanda nutrition programme is designed to tackle the issue of persistently high, chronic malnutrition levels, by focusing on improving the nutritional status of children under the age of two years and pregnant/lactating women. It aims to do so through a coordinated and aligned multisectoral approach that tackles underlying, intermediate and direct causes of stunting by building local capacity and implementing nutrition-specific and nutrition-sensitive interventions in 18 of the 30 districts of Rwanda.

This study will document lessons learned and innovations from the 18 districts supported by this initiative, to generate inputs to inform and improve programme implementation and outcomes. The case study aims to provide clear, applicable recommendations to partners working in the area of nutrition in Rwanda and beyond for improving future implementation practices for greater impact.



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## Report on the Nutrition and Health Situation of Nigeria

The Global Nutrition Report 2015 places Nigeria among those countries that display a commitment to reducing hunger and improving nutrition in children and women. Although it is still one of the five large low-middle income countries where more than half of under-five children are either stunted or wasted, the trends in meeting the global World Health Assembly Resolution targets are positive, and Nigeria is making 'some progress'.

The National Nutrition and Health Survey (NNHS) is a household survey conducted using Standardized Monitoring and Assessment of Relief and Transition (SMART) methods. NNHS provides up-to-date information on the situation of nutrition and health and measures key indicators that support the country in monitoring progress towards national and internal goals.

The survey contributed to: (i) determining the prevalence of acute or chronic malnutrition and underweight among children; (ii) determining the prevalence of acute malnutrition among women aged 15–49; (iii) estimating the coverage of vitamin A supplementation and deworming among children within the last six months; (iv) determining the proportion of under-five children with acute respiratory infection symptoms and the proportion of children with fever who have received treatment; (v) determining the ownership and universal access of mosquito nets; (vi) assessing the practice of skilled birth attendants, contraceptive prevalence rate and antenatal care coverage among women; and (vii) determining the proportion of women aged 15–49 who have received HIV testing and intermittent preventive treatment during antenatal care.

The National Strategic Plan of Action for Nutrition 2014–2019, highlighted the need to strengthen the Nutrition Information System in the country. The Federal Government of Nigeria extended the Saving One Million Lives (SOML) initiative for five years, as part of the National Strategic Health Development Plan 2016–2020. The Federal Government agreed a US\$500 million credit with the World Bank for a programme for results to support the SOML initiative. The objective of this programme is to increase the utilization of high-impact reproductive health, child health and nutrition interventions in the country. The programme for results will disburse funds to states, based on results, not inputs, using set disbursement-linked indicators based on the SMART survey.



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## Standardized Monitoring and Assessment of Relief and Transitions Survey with the Use of Smartphone-Assisted Interviewing in Senegal

Surveys and assessments of recent years have shown a precarious food security situation and a deterioration in the nutritional status of children in Senegal. The results of the national survey Standardized Monitoring and Assessment of Relief and Transitions (SMART) 2014 highlighted the continuing disparity in the nutritional status of children across regions. This triggered the development and implementation of a response plan to combat malnutrition and food insecurity in 2015.

In 2015, the main objective of the survey, which was conducted using the standard SMART methodology and, for the first time, a smartphone survey application, was to assess the nutritional status of children aged 0–59 months and women of reproductive age, and mortality among children aged 0–59 months in all regions of the country. The preliminary results of the survey confirmed the nutritional status disparities, with the highest rates of acute malnutrition in the regions of St Louis (14.7 per cent – especially the department of Podor, with 18.2 per cent), Matam (16.5 per cent), Louga (16.1 per cent) and Tambacounda (12.5 per cent); and the highest rates of chronic malnutrition in Sédhiou (29.6 per cent), Kaffrine (26.8 per cent) and Kédougou (25.4 per cent). The results will contribute to better understanding and management of the nutritional response to the nutrition crisis and food insecurity affecting Senegal on a regular basis.



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## 2016 Zimbabwe Food Poverty Atlas

Zimbabwe regularly experiences severe drought. With the climate change phenomenon, intermittent droughts are increasing, and they affect nearly 1.5 million Zimbabweans every year through food insecurity. The 2016 Food Poverty Atlas provides ward-level estimates of the number of households living in extreme food poverty.

These estimates are currently being used to identify and target poor households – especially children – with humanitarian assistance. They are used by the Ministry of Labour and Social Welfare (responsible for social protection), the Food and Nutrition Council (responsible for reducing stunting) and district administrators. The atlas is a pictorial book, with maps and figures that are useful as evidence in policy advocacy and as reference material in high-level decision making.



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## The Case for Investment in Nutrition in Sudan

Undernutrition is one of the country's most serious, but least addressed, socio-economic and health problems. Yet efforts to address the problem barely scratch the surface. In addition, the country's operational and financial capacity to develop and implement a comprehensive nutrition policy is extremely limited. Expenditure on nutrition is often too low to get sustainable results. Unsurprisingly, given the stage of the country's economic development, the nutritional status of children is particularly poor.

The purpose of the research is to identify and recommend how to scale up high-impact, cost-effective nutrition interventions within the National Nutrition Strategic Plan 2014–2018, which aims to reduce the very high undernutrition burden of Sudanese children, adolescents and women.

The research has generated evidence related to the costs and benefits of four scenarios with associated variations in nutrition interventions, coverage and geographical focus: (i) business as usual (maintaining the status quo); (ii) UNICEF/World Food Programme initial scale-up plan (starting in five states); (iii) medium coverage (50 per cent coverage nationwide); and (iv) high coverage (90 per cent coverage nationwide).

Scaling up a package of selected nutrition-specific and sensitive interventions to 90 per cent national coverage would ensure the most cost-effective returns in terms of reducing malnutrition and mortality in Sudan, together with the highest number of lives saved and cases of stunting averted in absolute terms. The additional cost of achieving 90 per cent national coverage would be US\$443 million per year, compared to the cost of maintaining the existing coverage levels, estimated at approximately US\$81 million annually.

The nutrition investment case has been used by UNICEF to leverage a high-level political engagement from the head of state and donors to reduce the high prevalence of stunting and wasting in Sudan for greater economic impact and child survival.



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# PART 7

## Water, Sanitation and Hygiene

### Lessons Learned and Best Practices in Strengthening Local Actors' Capacity in the Implementation of Community-led Total Sanitation in Angola

UNICEF has spearheaded the community-led total sanitation (CLTS) initiatives in Angola, and is now supporting the Government of Angola in institutional strengthening and capacity development of local governments (municipalities) to foster empowerment, ownership and sustainability of the aims and achievements of the programme. In this context, the study provides a critical analysis of capacity development and the accompanying processes to strengthen the capacity of local authorities in planning and budgeting for the implementation of CLTS interventions. The results of the study will be used to strengthen municipalities' capacity and leadership in the implementation of CLTS, and to reinforce the sustainability of achievements in eliminating open defecation from Angolan communities. The results of the study will also serve as a basis for the design and approval, by the Ministry of the Environment, of a national strategy for community-led total sanitation in Angola.



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### Handwashing with Ananse: Evaluation of an Innovative Intervention to Promote Handwashing with Soap in Ghana

Each year, some 12,000 children in Ghana die from pneumonia and diarrhoeal diseases. Handwashing with water and soap (HWWS) is proven to be the most cost-effective health intervention to reduce both the incidence of diarrhoea and pneumonia in children under the age of five years. However, less than one Ghanaian household in eight practises HWWS.

UNICEF Ghana, in collaboration with national and international partners, has developed an innovative, game-based intervention to teach children the importance of why, when and how to wash their hands with soap correctly. Using a combination of novel research methods, this evaluation assesses the effectiveness of the intervention, in terms of achieving knowledge retention and behaviour change. These methods include the use of sensor and camera technology to measure handwashing behaviour, and the involvement of children in the evaluation itself.



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## Evaluation of Community-led Total Sanitation Approach in Burundi

Of the world's population, more than 1 billion people, 15 per cent, engage in open defecation. And 2.5 billion people (40 per cent) still lack the basic human right of access to a toilet – something that undermines health, dignity and development globally. UNICEF is currently supporting millions to achieve the right to sanitation and hygiene, through global initiatives such as Community Approaches to Total Sanitation (CATS), Global Handwashing Day and Sanitation for All.

CATS aims to eliminate open defecation completely by changing people's behaviour and promoting the demand for sanitation across entire communities. In Burundi, Around 93 per cent of the population still engages in open defecation. In 2012, the Burundi Country Office started piloting CATS in three provinces. UNICEF Burundi would then support the Government to evaluate this approach with a view to scaling it up.

This evaluation aims to assess the successes, failures and constraints on CATS, as implemented in the three provinces since 2012. It will also highlight resources required and conditions for successful partnerships. The findings will be useful for scaling up the approach at the national level in a defined time frame. They will also inform the next Country Programme.

## Eritrea National Open Defecation Free Sustainability Assessment

The Government of Eritrea has adopted the community-led total sanitation (CLTS) approach to providing access to sanitation nationwide. CLTS has proved appropriate in addressing the sanitation challenge in Eritrea, especially in rural areas. Currently, CLTS is implemented in all six regions of the country. It has gained acceptability among communities, decision and policy makers and implementers. Since the inception of CLTS in 2008, 688 villages have declared their Open Defecation Free (ODF) status. Following this, a study on ODF sustainability was commissioned. Its overall objectives are to: (i) establish the levels of sustainability of the ODF status of ODF declared villages; (ii) assess the key motivators of households to stop open defecation; and (iii) identify the potential barriers that can hinder long-term behavioural changes.

The study shows that there is variation between the six regions in terms of latrine ownership, usage and the triggering process. It makes clear where the focus should be: each region will need a different strategy for future implementation of CLTS. Once validated by the Government, the study will be vital for informing CLTS programming and scale-up.



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## Annual Sustainability Check for the Dutch Ministry of Foreign Affairs Funded Programme on the Acceleration of Access to Potable Water, Hygiene and Sanitation in Côte d'Ivoire

The Government of the Netherlands/UNICEF/ Government Partnership for Accelerating Sanitation and Water for All in nine countries in West and Central Africa (WCAR) will help over 5 million people who are currently unserved to gain access to sustainable drinking water and sanitation, reach over 7 million people with hygiene promotion activities, and promote improved household water treatment and storage. The programme places particular emphasis on sustainability and aims to secure adequate functioning of the facilities, safe drinking water and implementation of behavioural change (use of latrines, handwashing) for a minimum of 10 years from the start date of the programme.

The purpose of the sustainability check is to: (i) determine the sustainability of intermediate outcomes of the Country Programmes, including the functionality and level of service, the quality of water and the sustainability of behavioural change (absence of open defecation, practice of handwashing with soap and safe water-handling practices); (ii) assess the key bottlenecks and barriers to sustainability of programme results to inform possible changes to programme design and course corrections; and (iii) monitor implementation of the sustainability compacts and propose changes, where necessary.

The results of the Sustainability Check will also inform and strengthen the framework for mutual accountability between policy makers, service providers and users around the sustainable provision of water services, sustained behaviours, and safe water consumption. In addition, it is expected that, in time, the sustainability compacts (including the annual checks) will feed into national water, sanitation and hygiene (WASH) sector processes, including programme implementation reviews, joint sector reviews and the tracking of progress on relevant commitments made under the Sanitation and Water for All partnership.



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## Exploring the Impact of Improved Water, Sanitation and Hygiene Services on School Enrolment, Retention, Transition and Learning Achievements in Kenya's Primary Schools

This study explored the relationship between water, sanitation and hygiene (WASH) in schools and learning achievements in schools, with specific focus on the impact of improved WASH services on school enrolment, retention, transition and learning achievements in Kenya's primary schools. While the Education Management Information System collects information on education indicators in schools, the unavailability of reliable national data on the status of school WASH in Kenya remains a challenge. This study aims to shed light on how WASH in schools affects learning achievements among boys and girls.

Of the 263 schools sampled, 145 (55.1 per cent) were found to be WASH improved, while 118 (44.9 per cent) were found to be WASH unimproved. The availability of urinals for boys, the adequate provision of latrines for girls and boys, and the availability of separate toilet facilities for boys and girls had a strong relationship with overall school performance. Furthermore, the provision of adequate water for drinking in day schools – by meeting the Ministry of Education standards of water provision (5 litres per pupil per day) – and in boarding schools (15 litres per pupil per day) had a strong relationship with overall school performance.

The results of this study are expected to inform the development of pro-child and gender-sensitive national policies and strategies for the next development phase of school WASH in Kenya.



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## 2014 Sustainability Check for Rural Sanitation Infrastructure in Tete, Manica and Sofala Provinces in Mozambique

Sustainability checks are an important part of the monitoring, evaluation and quality audit of water, sanitation and hygiene (WASH) programmes in Mozambique. They are done to ensure that appropriate structures are in place, so that facilities constructed do not easily fall into disrepair.

The mixed-method research used a random sample of 85 water points and 30 Open Defecation Free (ODF) communities, selected from 9 of 18 districts for WASH implementation year 2014. The study highlights some sustainability gaps in the area of sanitation, with an overall sustainability of 71 per cent and 63 per cent sustainability of sanitation facilities. Technical sustainability is reported as 89 per cent, with 83 per cent of communities still adhering to ODF principles. The main threat to the sustainability of water points was found to lie with the social systems within the communities. The study will be used to inform gaps in operation and maintenance that have affected the sustainability of the WASH infrastructure. In view of this, recommendations were formulated, to be followed up by UNICEF and at the national or provincial level.



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## 2015 Sustainability Check for Rural Sanitation Infrastructure in Mozambique

Sustainability checks for UNICEF in Mozambique are done in compliance with donor requirements to ensure effective monitoring, evaluation and quality audit for water, sanitation and hygiene (WASH) programmes in Mozambique. The annual sustainability checks are expected to serve as key assessment tools for ensuring sustainability of the WASH infrastructure, in terms of community ownership and responsibility for operation and maintenance.

The assessment will involve the use of semi-structured questionnaires and observation of water and sanitation facilities in a statistically representative number of Open Defecation Free communities in the provinces of Tete, Manica and Sofala. A management response will be prepared by UNICEF in response to the key findings and recommendations of the studies.



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## Evaluation of Design and Use of Infrastructure for Water, Sanitation and Hygiene in Primary Schools in Mozambique

The Ministry of Education and Human Development has been working hard for several years to improve the conditions for teaching and learning throughout Mozambique, including improving access to water, sanitation and hygiene (WASH) in school environments. While advances have been made towards this, the long-term management of the facilities continues to be a challenge that may jeopardize the sustainability of the interventions, if not addressed properly.

The Ministry of Education and Human Development and UNICEF have jointly initiated a large-scale evaluation of the design and use of WASH infrastructure in primary schools throughout Mozambique. The aim of the evaluation is to assess the efficiency of existing models of water supply, sanitation and hygiene in 100 primary schools in the country. Based on the findings, the study will recommend the most appropriate WASH models that should be promoted to ensure their long-lasting impact, taking into account design of the infrastructure, use and management, as well as local contexts and conditions.



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## Situation Mapping of Water, Sanitation and Hygiene in Schools in Mozambique

The importance of access to clean water, sanitation and hygiene (WASH) in schools for a healthy school environment and a healthy community has been widely documented and acknowledged. However, a large proportion of the population of Mozambique has inadequate access to safe water, sanitation and hygiene. The situation of WASH in the country at large is fairly well documented, but knowledge and documentation is lacking when it comes to WASH in schools.

In 2016, UNICEF will carry out a situation mapping of WASH in schools in Mozambique today, to collect, review and analyse available information in relation to existing global frameworks and guidelines on WASH in schools. The end result of the situation mapping should be a more exhaustive and up-to-date picture of what is known about WASH in schools in Mozambique, as well as forward-thinking proposals on how to move WASH forward on the schools agenda.



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## Water Supply Services within the Delegated Management Framework: Lessons Learned from Small Towns in Mozambique

In 1998, the Government of Mozambique introduced the Delegated Management Framework for water supply services. This framework is based on a public-private partnership, whereby assets are owned by the Government, and the operations are managed by the private sector, with a concession or a management contract.

UNICEF's Sanitation in Small Towns programme is currently contributing to sustainable poverty reduction by rehabilitating and expanding water supply systems and providing improved hygiene and sanitation services, while strengthening the capacity of institutions involved in operating, maintaining and regulating the water supply and sanitation services at decentralized levels in Tete, Manica and Inhambane provinces. Public-private partnerships are being implemented, supporting the decentralization process, and local regulatory councils, known as CORALs, are being organized and trained up to monitor and contribute to the regulation of water supply services at the local level. Overall, this intervention has demonstrated great effectiveness in expanding the Delegated Management Framework for water supply and sanitation services for small towns in Mozambique.



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## Formative Research for an Open Defecation Free Strategy in Namibia

Namibia is faced with a sanitation crisis: only one third of Namibians have access to improved sanitation, and more than half of the population has no alternative to open defecation, with consequent negative effects on public and child health. The aim of the formative research is to assess the knowledge, attitudes and practice of communities as they relate to sanitation, defecation habits and hygiene behaviour, in order to inform interventions to eliminate open defecation in Namibia.



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## Harmonization of Health and Hygiene Promotion Approaches in Namibia

Namibia has one of the highest open defecation rates in Southern and East Africa, with half of the population practising open defecation (49 per cent nationwide; 73 per cent of rural households and 20 per cent of urban, according to UNICEF and World Health Organization Joint Monitoring Programme data for 2014). While various approaches – largely supply driven – are being used by the Government to address this issue, it is evident that these are not effective.



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In the context of Namibia, there is a need to strengthen community demand for sanitation, in order to address the challenge of open defecation. In this regard, UNICEF will support the Government of the Republic of Namibia in reviewing the current range of strategies across government ministries and development partners, in order to develop a consensus on a harmonized approach to sanitation. The review will consider the socio-economic, political, cultural and historical characteristics of communities, and the occurrence/frequency of floods and drought in the country. This publication will develop a harmonized approach to health and hygiene promotion for the water, sanitation and hygiene (WASH) sector, as well as common messages and communication materials aimed at eliminating open defecation in Namibia.

## Social Marketing in the Sanitation Sector in Senegal

The community-led total sanitation approach supported by UNICEF in Senegal has resulted in an increase in the number of sanitation facility users, and consequently a reduction in open defecation. At the national level, the population using improved sanitation facilities increased from 45.9 per cent to 51.7 per cent between 2012 and 2014 (Demographic and Health Survey data).

The scaling-up of the community-led total sanitation approach requires a shift in paradigm, and an alignment with the rural sanitation strategy, which focuses on the development of sanitation product and service markets and a gradual shift from beneficiaries to consumers as a function of the evolving purchasing capacity of households, towards a gradual increase in coverage indicators. The social marketing study includes an analysis of the value chains in the rural sanitation sector. It will help identify the barriers to economic agents entering the sanitation market and proposes a strategy for an increase and diversification in the market supply of sanitation products and services and for private investment in the sector.



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## Understanding District-level Bottlenecks in the Provision of Safe Water in Uganda

According to the situation analysis of children in Uganda (2015), notwithstanding a reduction in the proportion of children without access to safe water (from 39 per cent in 2010 to 30 per cent in 2013), access to improved water sources remains a significant challenge. WaterAid estimates that every year over 8,000 Ugandan children die from diarrhoeal diseases caused by unsafe water and poor sanitation. Nationally, the percentage of people within 1 km of an improved water source stands at 65 per cent (Water Sector Performance Report, 2015), which is significantly below the 2014/2015 target of 77 per cent; and close to two-thirds of children live more than a 30-minute round trip from the nearest source of water. In addition, the El Niño episodes predicted to occur between October 2015 and February 2016 by the World Meteorological Organization and the Uganda National Meteorological Authority pose a real threat of contamination, further limiting access to safe water sources.

Whereas every other region in the country (including regions with similar or lower cumulative water releases per capita) witnessed an increase in access to improved water sources, between 2010/2011 and 2013/2014 the Western Region experienced a marked decline. This policy brief focuses on a case study of the Western Region, in order to provide a deeper understanding of district-level bottlenecks in the provision of safe water.



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## Advancing Girls' Education through Water Sanitation and Hygiene Programmes in Schools: a Study on Menstrual Hygiene Management at Schools in Mumbwa and Rufunsa Districts in Zambia

The expanding knowledge on menstrual hygiene management (MHM) issues has clearly identified the fact that girls' capacity to manage their periods at school is affected by a number of factors, including limited access to affordable and hygienic sanitary materials. This leaves many to manage their periods in uncomfortable and unhygienic ways. Because of these challenges, coupled with the fear of being teased at school should leakage occur, a number of girls miss classes during their periods. A study conducted by the Ministry of Education in 2013 revealed that 47 per cent of girls in some rural parts of Zambia miss up to 36 school days each per year.

The study aims at investigating challenges and cultural beliefs affecting girls' menstrual hygiene management at school. The findings show that: (i) water and sanitation amenities are broadly insufficient to facilitate effective MHM at school; (ii) the school curriculum does not adequately emphasize MHM; and (iii) female pupil absenteeism from school is accepted, without much regard to the implications for the academic progress of the pupils. The data and knowledge generated through this study will inform the development of national MHM guidelines and a toolkit for implementation of MHM in schools in Zambia.

## Impact Evaluation of the Zambian Sanitation and Hygiene Project

The Zambia Sanitation and Hygiene Project promotes handwashing practice and use of toilets at the household level, and seeks to improve school sanitation in 68 rural districts. Over 3 million people now have access to improved toilets as a result of the project.

The end-line evaluation will measure project sanitation outcomes and the health impact in terms of diarrhoeal disease. The study will also provide evidence of the effectiveness of some of the innovative approaches used in the project. Currently there is much evidence on health impact from sanitation interventions from small-scale studies, but little evidence of the same when done on a larger scale. The evaluation will potentially enhance the global knowledge base about the health impact of sanitation interventions at scale.



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## Monitoring Water Supply and Sanitation in Rural Zambia

Sustainability checks are conducted on an annual basis to monitor the status of the community water supply and school sanitation infrastructure, as well as household toilets, handwashing facilities and Open Defecation Free (ODF) villages in rural Zambia, where there have been UNICEF water, sanitation and hygiene (WASH) interventions.

The study aims to assess the sustainability of infrastructures that the programme helped put in place and the behavioural change brought about through the mobilization of communities and schools. Apart from providing useful information on the sustainability of WASH facilities, the report will provide guidance to the Government, non-governmental organizations and donors to inform remedial actions and institutional adjustments to improve the sustainability of water and sanitation services.



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## Zambia Post-Open Defecation Free (ODF) Sustainability Assessment

The Zambia Sanitation and Hygiene Project started in November 2011, in partnership with the Government of Zambia; it is in its fourth year of implementation. In July 2015, a costed extension of two years was introduced to allow for a seamless exit of UNICEF and partners, while ensuring sustainability of the programme at both the community and the institutional level.

This evaluation will focus on the length and type of exposure required to embed social norms related to latrine and handwashing usage in Zambia after Open Defecation Free (ODF) verification and certification. Currently, there is general understanding of the factors affecting initial uptake of hygiene and sanitation technologies, but little evidence exists about what is needed to maintain the respective behaviours. This necessarily requires assessment and analysis of the performance of key duty bearers in rolling out key interventions contributing to post-ODF sustainability in the framework of the national water, sanitation and hygiene programmes and the National ODF Strategy.



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## Zambia Water Quality Monitoring Study

The Government of Zambia, through the Ministry of Health and the Ministry of Local Government and Housing, intends to institutionalize regular water quality monitoring at source and household level.

This study aims to review the water quality monitoring protocols in Zambia and inform the development of comprehensive protocols that can be utilized for regular water quality monitoring at source and at the household level, and to generate information on sources or practices that need to be improved in order to avoid contamination. This will help ensure appropriate household water treatment and storage to minimize contamination. Non-safe drinking water sources will be easily identified and documented, and the necessary remedial measures recommended. Hence, the protocols will contribute to reducing the use of contaminated water and will reduce cases of water-borne diseases in Zambia.



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## Public-Private Partnerships for Rural Water Services: a Comparative Analysis in Burundi, Kenya and Rwanda

The majority of rural water supplies in sub-Saharan Africa rely on community-based management (CBM), and many deliver low levels of service sustainability. In recent years there has been increased interest in alternative management models, such as public-private partnerships (PPPs). This paper reports on a comparative multi-country study in East Africa to assess the successes, challenges and sustainability of PPPs for rural water service delivery in comparison with CBM. Interviews were conducted with key stakeholders to collect qualitative information on the performance of schemes and perceived changes in efficiency. A quantitative survey was also administered to assess the selected water schemes against standard performance indicators in five broad areas: investment, efficiency of supply, management, governance and user satisfaction.

While all stakeholders interviewed believed that PPPs had dramatically improved service delivery in the three countries, the analysis of performance data did not support this. The PPP schemes appeared to be performing slightly better than the CBM schemes; however, the difference was not as great as might be expected, and for key areas such as 'efficiency' the CBM schemes showed higher performance. The results indicate that it takes significant time to transition from CBM to PPPs, and that switching the management model will not immediately result in increased performance levels and sustainability. However, these improvements are likely to be observed over time with ongoing capacity building and the development of sustainable financing strategies. These findings will help countries in the region develop realistic strategies for PPPs for rural water services.



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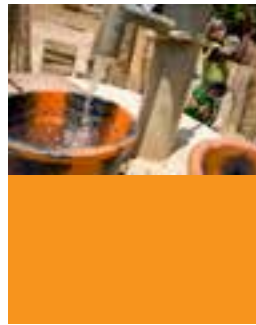
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## Sanitation Private Sector Engagement Manual

The purpose of this document is to guide UNICEF Country Offices through the process of working with the private sector to develop solutions to enable families to move up the sanitation ladder. It will enable users to: (i) identify the relevant sanitation stakeholders by mapping the current sanitation situation and pinpoint core bottlenecks and key demands (Step 1 – Sanitation Market Scan); (ii) analyse the causes and effects of the current sanitation issues and develop a roadmap of how UNICEF can support the solution development (Step 2 – Framing the Problem); (iii) prepare an estimate of the costs and risks involved in engaging the private sector to address bottlenecks (Step 3 – Costs and Risks in Private Sector Engagement); (iv) identify appropriate partners, engage with them and formalize and manage the partnership (Step 4 – Engaging the Private Sector); and (v) monitor and evaluate the partnership under a number of process criteria and manoeuvre UNICEF based on this learning (Step 5 – Monitoring and Evaluating the Partnership).



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## The Relationship between Sanitation and Water Supply in Schools and Girls' Educational Progression in Zambia

There is some anecdotal evidence that improved water, sanitation and hygiene (WASH) in schools supports the educational progression of girls. However, there is very limited rigorous analysis and hard evidence that can be used to advocate with decision makers. To address this gap, a comprehensive analysis of Education Management Information System data was conducted to explore linkages between WASH provision in primary and secondary schools and girls' educational progression in Zambia. Three stages of analysis were conducted, which included: female/male enrolment ratios; repetition rates; and drop-out rates. These factors were correlated with the sanitation and water supply situation in schools and disaggregated by gender and grade. Results showed that there was a strong relationship between improved sanitation in schools and high female/male enrolment ratios, and reduced repetition and drop-out rates, especially for girls. Significant gender differences were observed between Grades 5 and 8, when many girls start to experience the menstrual cycle. Improved water supply in schools, however, did not reveal a similar relationship.

The results confirm the education benefits of providing adequate WASH in schools and re-emphasize the fact that the provision of adequate toilets is crucial for an appropriate learning environment for girls. It provides important insights which can guide the design of effective WASH advocacy strategies, in order to foster an enabling environment for girls' learning in schools.



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## Access to Water and Sanitation in Obstetric Facilities in 14 Western and Central African Countries: Review of Emergency Obstetric and Newborn Care Needs Assessments

Water, sanitation and hygiene (WASH) services are critical in reducing sepsis among mothers and newborns around birth in health facilities. Facility utilization and the retention of mothers and newborns after birth require water supply and sanitation that meet the necessary standards. In spite of that, very little information is available on maternity units in Western and Central Africa.

The study uses data from National Emergency Obstetric and Newborn Care Needs assessments from 14 Western and Central African countries, carried out since 2010, to analyse the available WASH information.

Results show that on average, 82 per cent of maternity units had water available. A sub-analysis from seven countries showed that on average water was not available in 35 per cent of delivery rooms and in 82 per cent of post-partum rooms. Furthermore, data from six countries indicated that water was not available in 35 per cent of operating theatres. Information on sanitation was very limited, with only three countries reporting.

This is ongoing work based on the latest available data. The results are alarming, with regard to infection prevention and control. They reveal the need for this essential component of quality maternal and newborn care to be better addressed. Furthermore, there is no evidence that the available water meets World Health Organization minimum WASH standards in health care facilities.



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# PART 8

## Education and Early Childhood Development

### Burundi Country Status Report for Education Sector (RESEN)

In 2012, the Government of Burundi developed an Education Development Plan (PSDEF 2012–2020), with the aim of achieving universal school completion and promoting a sustainable and balanced development of the whole education system, from preschool to higher education. This strategy is implemented through a three-year action plan 2013–2015. The research is proposed to help Burundi develop the PSDEF action plan between 2016 and 2020.

The goal of this research is to: (i) assess the overall education system performance; (ii) develop a multi-year action plan; and (iii) set a financial model to simulate the financial gap in achieving planned results. The study aims to provide a detailed snapshot of the education sector up to 2020.

It takes advantage of administrative data, information from household surveys (Enquête sur les Conditions de Vie des Ménages au Burundi - ECVMB) and demographic data to document key dimensions of the sector, focusing on costs, finance and service delivery, and their impact on learning achievement, in order to identify challenges and opportunities for further policy development.

### Study on Effective School Time in Burundi

Learning outcomes are linked to quality learning materials, the teaching environment and (mainly) teacher attendance. The general objective of this study is to provide a thorough analysis of the problem of school time, by assessing the actual number of hours of instruction (learning time) in primary schools in Burundi, and to formulate recommendations to address identified barriers and improve school management.

The study aims to: (i) assess the number of hours of instruction in primary school (cycle 1 to 4); (ii) analyse the correlation between real learning time and academic performance; (iii) analyse the quality of the use of this learning time; (iv) identify and analyse the factors governing the reduction in school time and propose recommendations accordingly. By providing accurate information on real school time, the study will guide future policies and programmes to reduce the drop-out and repetition rate in Burundi.



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## School Readiness Assessment in Egypt

Literature on early childhood development (ECD) stresses the importance of pre-primary education in developing children's characters and improving their performance throughout their education and their future life generally. However, quality-assurance efforts for pre-primary education in Egypt are scarce – particularly in terms of assessing the level of readiness of Egyptian children to start school at age six.

In the framework of the 2030 Sustainable Development Goals and the increasing emphasis on equitable access to quality education for all children, this publication is an attempt to assess children's readiness – in linguistic, psychomotor, interpersonal/ social and cognitive skills – to start school, and it offers evidence-based recommendations for improving the quality of pre-primary education in Egypt.

Using the assessment tools developed in 2014 by the National Center for Examination and Education Evaluation and UNICEF, the assessment will support pre-primary education quality assurance by mapping children's readiness to start school. At the national level, the results will help guide pre-primary education reform efforts to increase access to quality services. At the local level, the results will assist teachers in better addressing children's specific developmental needs.

## Out-of-school Children Study (OOSC) in Eritrea

In spite of the advances made towards attaining universal primary education and the continued rise in enrolment, the magnitude of the issue of out-of-school children remains a challenge in Eritrea. Because the country has not conducted a population census since independence, population estimates and inadequacies in other national statistical data from studies offer little comfort in assessing the scale of the OOSC phenomenon.

In this context, the Ministry of Education in Eritrea is conducting an out-of-school children study, the aims of which are to: (i) document reliable disaggregated data on OOSC; (ii) analyse factors contributing to OOSC; and (iii) identify existing policy gaps and provide viable policy recommendations to respond to the OOSC challenge. The findings of the study will inform future national OOSC interventions.



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## Evaluation of the Back to School Allowance in Gabon

The Back to School Allowance (ARS) is a family benefit granted to government employees, private sector employees and economically weak Gabonese. Each category of beneficiaries is governed by specific conditions: the different categories give rights to receive different amounts per child.

The evaluation of the ARS has aimed at improving its understanding and appreciating its various uses in providing answers to certain issues. The evaluation method was a mixed method, combining a qualitative and a quantitative approach. The main source of information was a document review, which examined the literature and databases. Semi-structured interviews with institutional managers helped towards a better understanding of the content of the texts and databases exploited. A qualitative appreciation and satisfaction survey was then conducted among 3,000 parent beneficiaries from five provinces.



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## Evaluation Strategy for the Entertainment-Education Radio Intervention 'Ouro Negro' in Mozambique

UNICEF considers entertainment-education to be one of the key Communication for Development (C4D) strategies to move beyond an awareness-generation model, with the aim of changing perceptions of efficacy and social norms. In 2014, UNICEF partnered with Radio Mozambique, PCI Media Impact and the World Food Programme to produce and broadcast the first national long-running entertainment-education drama *Ouro Negro* (Black Gold), launched in July 2015. *Ouro Negro* seeks to reach over 1.5 million people with compelling stories that revolve around nutrition (including infant and young child feeding), hygiene and sanitation, HIV prevention, maternal and child health, prevention of violence and child marriage.

Drexel University and Intercampus-GFK were contracted to conduct an in-depth baseline and evaluation to assess the impact of this large-scale entertainment-education programme. The overarching research questions that this study is designed to answer are whether the programme is effective, and what behaviour and social change can be attributed to *Ouro Negro*.

Results from the impact evaluation will determine whether *Ouro Negro* has been successful in reaching its target audience, reinforcing interpersonal communication and achieving behaviour and social change that helps reduce stunting.



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## Evaluation of Provision of Teaching and Learning in the Non-formal Education Sub-sector in Lesotho

One of the policy directions declared within the five-year development plan in Lesotho is promotion of continuing education through non-formal education. Though free and compulsory education improves the situation – with net enrolment reported at 80 per cent and a completion rate of 87.5 per cent in 2010 – most vulnerable groups, such as disabled children, herd boys and young female domestic workers, are left out of the formal education system or have limited access to it.

In an effort to address the ever-growing demand for education, and in response to the challenges faced by children out of school, the Lesotho Government has initiated the out-of-school programme known as non-formal education. Non-formal education will supplement and complement formal educational institutions, in an effort to make education available to everyone in society, while ensuring quality in the process.

The main purpose of the evaluation is to assess the effectiveness and impact of the non-formal education programme in improving the lives of out-of-school children. The evaluation will make a contribution to: (i) estimating the number of children who access the non-formal education programme; (ii) producing a mechanism to deliver non-formal education; (iii) estimating the proportion of children out of school who have attained a good-quality learning ability; and (iv) assessing how the programme improves the ability of individuals to participate in economic activities.

The findings will be used by the Ministry of Education and Training and the civil society organization managing the programme.



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## Evaluation of Accelerated School Readiness Programme in Benishangul, Ethiopia: Assessment and Interim Report

Ethiopia's Ministry of Education is implementing an accelerated school readiness programme as a pilot within public schools in Benishangul-Gumuz Region, in partnership with UNICEF. The purpose of the evaluation is to assess the effectiveness of the programme in developing children's school readiness and in promoting their successful completion of Grade 1. The report will assess the situation of children, both in the intervention and control group, with regard to social and behavioural readiness to develop literacy and mathematics competencies. This will be useful for generating baseline information, with which the impact of the programme can be systematically analysed.



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## Improving the Quality of Education and Learning in Zambezia and Tete in Mozambique: Baseline Study

In light of low student learning outcomes among primary students in Mozambique, UNICEF will be supporting a new intervention called Improving the Quality of Education and Learning in Zambezia and Tete. This aims to strengthen the teaching of basic reading/writing and maths in Grades 1 and 2. In collaboration with UNICEF education and monitoring and evaluation staff, CAPRA International will carry out the baseline study for the intervention.

The baseline is expected to address a range of issues in the following areas: teacher capability, teaching behaviour, teaching and learning environment, school environment /decentralized education system and student learning. The baseline study will enable effective mid-line and end-line evaluation of the intervention, and will allow for evidence-based programmatic adjustments to achieve improved learning outcomes for children in Zambezia and Tete.



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## 2015 Namibia Fifteenth School Day Report

The Fifteenth School Day report features all the vital information about schools in the country, as recorded on the fifteenth school day every year. The report is part of the Education Management Information System. It also comprises the Annual Education Census, which is a comprehensive survey of all state and private schools in Namibia. The report includes information on facilities, teachers, learners and school governance.

The data featured in the report are essential for education planners throughout the country, enabling them to develop plans responsive to the needs of Namibian children in their given context and to improve the quality of service delivery in education.



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## Community Mapping of Integrated Early Childhood Development Systems and Services in Namibia

This community mapping study will: (i) identify existing government and informal structures, mechanisms, referral and coordination mechanisms at the constituency level for effective and efficient service delivery of integrated early childhood development (IECD); (ii) identify gaps and bottlenecks in access to services; and (iii) recommend key components of the package, service delivery mechanism and integration of the IECD model in selected regions. This study supports UNICEF Namibia's advocacy on the expansion of integrated early childhood development services, which are inclusive of the child protection, health and nutrition and early stimulation needs of young children.



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## Namibia National Safe Schools Framework

The Ministry of Education, Arts and Culture, in partnership with UNICEF Namibia, has embarked on the development of a Safe Schools Framework. This framework will provide guidance for all school communities and education and health professionals on how to create and maintain a positive and safe school climate that is likely to increase the probability of students succeeding academically, while protecting them against engaging in high-risk behaviours.

The framework is informed by global evidence showing that a key determinant of a successful 'quality school' is a culture that promotes safe and effective learning. Promoting and providing a supportive learning environment, in which all learners can expect to feel safe, is an essential function of all schools. In the context of this work, 'a safe and supportive school' refers to the provision of an environment that promotes and protects the emotional, psychological and physical well-being of learners and staff.



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## Report of the Positive Deviance Study in Namibian Schools

Namibia introduced universal primary education in 2013, removing most of the bottlenecks to access; yet performance remains low when set against international benchmarks on learning. This study is designed to identify good practices from schools which perform unusually well – the ‘positive deviants’.

The study uses a case study approach, informed by positive deviance inquiry methods, with a predominantly qualitative methodology supported by quantitative data. The sample to be studied is made up of 14 schools, two of which will be control schools. The regions and the schools were purposely selected, based on levels of performance and relatively weak social and economic indicators.

The study will learn lessons from those schools which perform exceptionally well, despite their resource constraints. Good practices will be identified and recommendations drawn up on how these can be put into practice by all schools in the country, in order to improve learning outcomes nationwide.



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## School Drop-out and Out-of-school Children in Namibia: a National Review

The global Out-of-School Children Initiative (OOSCI) aims to significantly reduce the number of children out of school. In 2015, the Namibian Ministry of Education, Arts and Culture, with the support of UNICEF, decided to launch its own OOSCI study, in order to understand why, despite progressive policies and increased access to education, 41,900 children at primary school are at risk of never completing their primary education; why about 34,500 would be at risk of never completing Grade 10; and why a third of senior secondary-aged children are out of school. For more affluent schools, only 58 per cent of children complete Grade 12, while in the poorest and most remote areas only 1 per cent of learners complete Grade 12.

The objective of this study is to identify and consolidate the main issues facing out-of-school children in Namibia, in order to inform national policies and programmes to respond to the situation. In addition, the study will inform the direction for further research into the problem of out-of-school children in the country. The report features a detailed description of the at-risk children, followed by a quantitative breakdown of the dimensions of exclusion as they apply to the Namibian context. Analysis of bottlenecks and barriers that keep children out of school will be complemented with a comprehensive set of recommendations designed to ensure that all children complete at least a full course of quality basic education.



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## Study on Out-of-school Children in Niger

In Niger, several school-age children are outside the system due to poor access to school, quality education and equity issues. There are children who have never had access to any school opportunity, and the flow of children and adolescents excluded from the system as well as those who may be excluded will hardly decrease if adequate measures are not taken.

Through various education options, including non-formal ones, the Government has been trying to address the issue, but it lacks an appropriate formulated strategy. An assessment undertaken in 2012 on out-of-school children and early school drop-out among those aged 9–12 years estimated that there were 589,459 such children nationally, of whom 338,032 were girls (57 per cent of the total).

The study on the situation of out-of-school children and adolescents, which covers all five exclusion dimensions, is expected to provide concrete solutions to the educational exclusion of children and adolescents of school age in Niger. It will identify the profile of out-of-school children and adolescents, the major reasons for this phenomenon, and obstacles to the implementation of appropriate educational policies that address the issues.



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## Impact Evaluation of Cash Transfer Programme in the Niger and Sokoto states in Nigeria: Girls' Education Programme

An impact evaluation is being commissioned by UNICEF to determine the impact of the cash transfer project in two states of the northern part of Nigeria, as part of the Girls' Education Programme (GEP).

The objective of the impact evaluation is to determine what works – and where, why and how – with respect to the cash transfer component of the GEP. This is mainly to determine the impact on the planned outcomes as per the theory of change of the GEP – and more particularly whether or not there is an increase in household income and consumption, an increase in women's control over household income, and an increase in the value placed by the household on the education of girls. This impact evaluation will lead ultimately to an increase in female enrolment and retention, and to a reduction in disparities between boys and girls for these two states.

The purpose is to feed UNICEF advocacy strategy and support the efforts of the Government and UNICEF in scaling up the cash transfer programme and strengthening the social protection system in the north.



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### **Access to Education for Children with Disability: Rwanda Country Study**

This study forms part of a wider regional study aimed at generating evidence on the status of the fulfilment of the education rights of children with disabilities in Eastern and Southern Africa. Rwanda was one of three countries chosen for more in-depth analysis. The study examines the systems available to support the development and education of children with disabilities. From the supply and demand sides, it identifies initiatives already in place, what the gaps are, and what can be done to provide education and other learning and development opportunities to children with disabilities.



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### **Early Childhood Development and Family Services: Baseline Evaluation in 20 Sites in Rwanda**

Support for early childhood development (ECD) and family services has emerged as a key priority area for development in Rwanda. To respond to this, UNICEF Rwanda and the Imbuto Foundation, under the leadership of the Ministry of Gender and Family Promotion, have entered into a partnership to bring together multiple ECD interventions, combining centre-based and home-based interventions.

UNICEF has commissioned an ECD baseline evaluation, with the key objectives of assessing the health and well-being of young children and families in targeted intervention and control sites. This report provides an overview of several domains included in the baseline that are critical to children's health and development, including: caregiver characteristics, children's achievement of developmental milestones, opportunities for learning and stimulation, access to health and water, sanitation and hygiene (WASH) services, nutrition and child protection. An end-line evaluation is planned for late 2016, to assess the impact of the ECD programme.



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## Early Childhood Development in Rwanda: Lessons Learned from Case Studies

The objectives of the early childhood development (ECD) mapping and case study research were to document ECD services and programmes currently being provided in Rwanda, and to develop recommendations for policy and practice in the scaling-up of ECD intervention.

A key study finding is that addressing 'supply' factors alone is not sufficient for optimal utilization of ECD services. In order to reach scale and quality, particular attention must be paid to creating an enabling policy environment that promotes the principle of 'integrated ECD service delivery' and strategic partnerships across various ministries and stakeholders. Furthermore, the study finds that effective community ownership that promotes continuity in use of ECD services occurs when communities are seen as the resource base of interested parties or stakeholders, rather than as beneficiaries or consumers of services. Finally, the quality of ECD outcomes is directly proportionate to the breadth and depth of investment made in capacity development of caregivers; the creation of resource-rich stimulating environments for children and families; and the level of awareness and commitment on the part of parents and communities to ECD.



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## Children Out of School or on the Margin of the Formal Education System in Senegal

The out-of-school study combines secondary quantitative analyses with qualitative analysis on the basis of observations and interviews conducted in several regions of Senegal. This has allowed the identification of actors, processes and determinants of the out-of-school phenomenon in Senegal.

The study answers the questions: (i) Who are the children out of school and how many are there?; (ii) Why are they out of school?; (iii) What are the family educational strategies that can justify or explain the out-of-school phenomenon?; (iv) What are the warning signs of drop-out?; and (v) How are drop-outs managed or stopped?

The recommendations of the study essentially anticipate the formulation of an action plan to help mitigate the phenomenon not only at the national level, but also in the worst-affected geographic regions.



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## Standards for Learning Spaces as Zones for Peacebuilding in South Sudan

South Sudan is one of the 14 countries that has been implementing the 4 year (2012-2016) Peacebuilding, Advocacy and Educating (PBEA) programme in close collaboration with the Ministry of Education, Science and Technology and the Ministry of Culture, Youth and Sports. The programme was anchored on: (i) mainstreaming peacebuilding and conflict sensitivity into education policies, plans and programs; (ii) increasing institutional and human capacity to deliver education services with peacebuilding outcomes; (iii) increasing the capacity and motivation of children/youth, parents, teachers and community members to prevent and manage conflict, build peaceful relationships and feel a sense of belonging to the 'nation'; (iv) providing education that is inclusive, conflict sensitive and adheres to key child-friendly school standards in schools and youth centers found in target post-conflict districts; (v) generating and share evidence and knowledge from peacebuilding and conflict sensitive interventions in education.

The aim is to release three publications documenting: (i) lessons learnt in the four year programme to inform mainstreaming peacebuilding and conflict sensitive when working with children and adolescent across the education sector; (ii) The standards towards Learning Spaces as Zones for Peacebuilding (LSaZoP); (iii). The end-line results from the Knowledge, Attitude and Practices (KAP) survey showing perceptions of adolescents (10 years above) on social cohesion and resilience building from the pilot schools. This is part of the 2014 commitment towards protection of education from violence in reducing vulnerabilities and shocks by informing mainstreaming PBEA across the education and other sectors to strengthen safety and resilience.



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## Zambia Gender Scorecard 2015

As the Millennium Development Goals (MDGs) come to an end, it is important to take stock of what has been achieved in Zambia, particularly through a gender lens. The study will focus on assessing the progress that Zambia has made in achieving Education for All and the MDG goals on gender equality in education.

The scorecard is expected to give a detailed understanding of how Zambia performs on key indicators in education, with a particular focus on gender gaps and the differences between boys and girls at different education levels, in terms of how they access, stay in, learn and complete their education. The findings will be used to identify successes and challenges, and to inform policy dialogue on how to close any existing gender gaps in the education sector. It will determine areas that the Government and education stakeholders should focus on in order for Zambia to meet its goals and commitments on gender equality.



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## Identifying Key Factors in the Delivery of Quality Education in Uganda

The introduction of universal primary education in 1997 rapidly became associated with close to universal net enrolment rates and gender parity in Primary 1. Progress notwithstanding, the quality of education continues to experience significant challenges. According to the situation analysis of children in Uganda (2015), only one primary school teacher in five is competent in English and mathematics, and 60 per cent of school teachers are not engaged in school teaching. Similarly, according to the National Assessment of Progress in Education (NAPE, 2012), just 53.8 per cent of Primary 3 pupils and 40.8 per cent of Primary 6 pupils satisfy predefined proficiency levels in literacy and English. Notably, the evidence points to no significant gender disparity in literacy achievement levels, although more boys than girls attain the desired rating in numeracy.

Spatial analysis of budgetary allocations and pre-selected education indicators suggest that, despite receiving a higher budgetary allocation than nine of the fifteen sub-regions, Lango accounts for a Primary Leaving Examinations (PLE) pass rate below the national average and has the lowest level of Primary 3 competence nationwide. This policy brief presents a case study of the Lango sub-region to provide a deeper understanding of the importance of investing in the quality of education to improve key sector outcomes.

## Evaluation of the Interactive Radio Instruction (IRI) Pilot Programme in Early Childhood Education in the Eastern Province of Zambia

Less than 15 per cent of children in Zambia enter Grade 1 with early childhood education (ECE) experience. The challenges include limited infrastructure, inadequate materials, insufficient teachers and limited funding. Interactive radio instruction (IRI) was piloted in four districts of Eastern Province in Zambia to determine its suitability as an alternative form of ECE provision to rural areas.

The evaluation aims to assess the extent to which IRI methodologies constitute an effective and alternative approach to delivering ECE services and to identify lessons learned. The study found that: (i) the project created an opportunity where education could be accessible to all children; (ii) IRI contributed to positive learning and developmental outcomes in areas such as language, fine motor skills and problem solving; (iii) ECE centres, enrolments and human resource capacity increased in the targeted districts; and (iv) more continuous training and a greater community involvement is needed to ensure long-term sustainability.

The study provides insights into the effectiveness of IRI methodology that will inform future dialogue with the ministry over ECE provision, especially to rural communities. The report also provides a number of recommendations that will support the delivery of the ECE curriculum, particularly around quality delivery and community engagement.



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## Improving Quality of Education and Children's Learning Outcomes in the Eastern and Southern Africa Region

Despite considerable progress made in the education sector in Eastern and Southern Africa, the quality of education and children's learning outcomes remain poor. While several initiatives in the region are taking place to improve the quality of education and student learning outcomes, evidence-based analysis of what makes a difference in learning has been limited.

The report reviews the existing data on student learning outcomes in the region, analyses the existing measurement systems and methodologies, and examines practices that have proven effective in improving students' learning outcomes at the level of primary education. It is intended to help the governments and partners to focus on areas and measures that will improve learning outcomes, especially among disadvantaged children, in literacy and numeracy in primary education. The report will also provide advice on how to improve assessment systems and methodologies.

## Regional Study on Education and Children with Disabilities

Children with disabilities are often excluded from society and deprived of their rights to education, health, care, protection and participation. There is a shortage of evidence and analysis on the situation of the education right of children with disabilities in Eastern and Southern Africa. Data scarcity is a major challenge that leads to and perpetuates the invisibility of children with disabilities.

The report will provide evidence on the status of the realization of the right to education of children with disabilities of preschool, primary and lower secondary school age, in 21 countries of Eastern and Southern Africa. In particular, it will analyse the status of the Convention on the Rights of Persons with Disabilities and provide an analysis of specific solutions implemented to support the education of children with disabilities. It will also include an in-depth analysis of the status of children with disabilities in relation to their right to education in three countries of the region: Comoros, Madagascar and Rwanda. The study aims to inform government policies and sector planning to make them more relevant and responsive to the education right of children with disabilities.



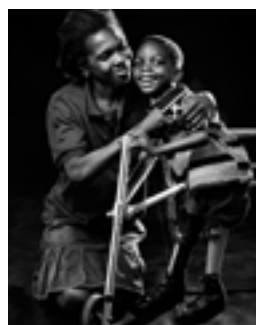
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## The Impact of Language Policy and Practice on Children's Learning: Evidence from Eastern and Southern Africa

Learning is dependent on a number of factors, such as the readiness of a child; the school environment; teachers' qualification, training, commitment and motivation; the availability and quality of teaching and learning materials; learning contents; and the engagement of parents and community. Language of instruction is also a critical factor that affects the child's learning. According to a number of research studies worldwide, first-language instruction results in: (i) increased access and equity; (ii) improved learning outcomes; (iii) reduced repetition and drop-out rates; (iv) socio-cultural benefits; and (v) lower overall costs.

The report will present the latest knowledge on the link between language policy and education quality. It will review language policy and practice in relation to education in 21 countries in the region and will include three case studies in Ethiopia, South Africa and South Sudan. Recognizing that language plays a key role in defining the quality of education and supporting children's learning, the report is designed to provide evidence on language policy and practice to governments and other stakeholders, with the aim of improving the quality of education for disadvantaged children in the region.



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## School Exclusion, Social Protection and Resilience in West and Central Africa

The Out-of-School Children Initiative launched in 2010 by UNICEF and the UNESCO Institute for Statistics aimed to achieve universal primary education by 2015, by improving the information system and statistical analysis, the identification of schooling bottlenecks and existing strategies. Barriers to education in West and Central Africa are presented as a combination of demand for schooling, supply and context factors. In the search for solutions, many strategies put forward social protection tools, without discussing their linkages with sectoral policies or providing the keys for a programmatic use.

This paper discusses the operationalization of the global initiative and provides a roadmap to introduce technical and policy dialogue for creating the cross-sectoral space needed for effective programmatic use of social protection tools to fight school exclusion.



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# PART 9

## HIV/AIDS

### **Situation Analysis on the Management of Paediatric HIV and Adolescents Living with HIV/AIDS in Côte d'Ivoire**

Despite the decentralization of treatment and care for paediatric HIV, the antiretroviral therapy (ART) coverage for children aged 0–15 years is still very low in Côte d'Ivoire, with only 16 per cent of eligible children actually receiving treatment (43,000 children are in need of ART).

The purpose of the study is to identify and analyse the bottlenecks and challenges, and propose a strategy to improve access to ART for exposed and infected children. The findings identify several bottlenecks: lack of health centres providing HIV care and treatment services for children; lack of linkages between prevention of mother-to-child transmission (PMTCT) and paediatric HIV services, leading to women and children lost to follow-up; children potentially infected with HIV not being tested at nutrition and hospitalization point of entry to the health system; lack of community interventions to follow up on women living with HIV; delay in applying new World Health Organization recommendations to put all children aged 0–10 years on treatment; few health workers trained to treat children living with HIV; strong linkage between the involvement of community health workers and the retention of children in care; package of services different from one site to another one.

The publication will help elaborate a roadmap to improve on HIV paediatrics in Côte d'Ivoire.



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## Acceptability and Feasibility of Early Infant Male Circumcision in Malawi

It is demonstrated that medical male circumcision reduces the risk of female-to-male sexual transmission of HIV by roughly 60 per cent. In 2007, the World Health Organization (WHO) issued recommendations to implement voluntary medical male circumcision (VMMC) and early infant male circumcision (EIMC) in settings with high HIV prevalence and low prevalence of male circumcision. Malawi has high HIV prevalence (10 per cent) and low VMMC prevalence (20–26 per cent), qualifying it as a country ripe for the introduction of VMMC – and of EIMC in particular.

This qualitative study is being conducted in specially selected districts that reflect differences among Malawians. The specific objectives of the study are: (i) to determine social factors that influence EIMC, in order to inform EIMC implementation; (ii) to describe the degree of support for EIMC among traditional leaders and health care workers; (iii) to describe the acceptability of EIMC among men and women; (iv) to determine the feasibility of introducing EIMC through the public sector in Malawi, given the current context; (v) to review current clinical and traditional practices; and (vi) to identify the themes and issues that should be taken into account in developing a demand creation strategy for EIMC. The results of the study will be used to inform development of EIMC protocols in 2016 and the introduction of EIMC in pilot sites in 2017.



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## Assessment of Regional Capacity to Programme and Monitor for Adolescents Living with HIV Programmes in Namibia

The purpose of this exercise is to support the Ministry of Health and Social Services in assessing data quality in the reporting of adolescents living with HIV (ALHIV) in Namibia, with a focus on children aged 10 to 19.

The key steps in this process will be to: (i) identify the key indicators for age groups 10–14 and 15–19, to be collected by gender, region, prevalence of teenage pregnancy, and educational attainment; (ii) identify the possible and most reliable sources of data in particular for those indicators for which data are not currently collected by any sector; and (iii) undertake an assessment in eight regions of their level of capacity to implement their roles and responsibilities in the monitoring, reporting and evaluation of ALHIV. This assessment will contribute to improving the national data management system, in order to respond better to the needs of ALHIV.



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## Cost-effectiveness and Feasibility of Using Unmanned Aerial Vehicles to Transport Laboratory Samples for Early Infant Diagnosis of HIV in Malawi

An estimated 8,000 new paediatric HIV infections occurred in Malawi in 2014. Successful management of these patients depends on early infant diagnosis. However, access to life-saving treatment is hindered by an expensive and slow system for sample transportation. Unmanned aerial vehicles (UAVs) may be a cost-effective way to reduce the turnaround time between testing and results.

The study will examine the use of UAVs for sample transportation in Malawi. Phase 1 will achieve the following objectives: (i) to optimize the design of a UAV to serve as a robust sample transport vehicle; (ii) to demonstrate the capability of the UAV to safely transport simulated laboratory samples from the site of collection to the site of testing; and (iii) to estimate the cost of this form of sample transportation and compare it to current standard forms of sample transport.

If the study results demonstrate that UAVs are a cost-effective and feasible alternative to the current road-based transportation system, UNICEF will conduct Phase 2 of the study, which will: (i) determine the acceptability of UAVs among clinic staff, patients and communities; (ii) identify training, operation and maintenance issues; and (iii) determine the impact on timeliness of testing, delivery of results, and clinical care. Both phases of this study will also inform the Government of Malawi's regulatory framework for UAVs for development and humanitarian purposes.



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## Rwanda ALL IN Rapid Assessment Report: Adolescent HIV Programme Context Analysis

ALL IN is a collaborative platform, conceived to accelerate the campaign to end adolescent AIDS by 2030. It aims at achieving quicker results among adolescents (aged 10–19 years) and young adults (20–24) by identifying and addressing bottlenecks at the programme and policy levels.

This report highlights the key findings of a rapid assessment of the National Adolescent Programme conducted in Rwanda, with the objective of defining who is most affected, where they are located, and what interventions have the largest coverage gap and are most critical to improve HIV and sexual and reproductive health results for adolescents. The data available demonstrate, among other things, inadequate access and low utilization of HIV prevention services by adolescents, an increase in the number of new HIV infections among adolescents, and huge gaps in access to antiretroviral treatment among HIV infected adolescent girls and boys. These findings require attention as key areas of intervention for future HIV adolescent programming.



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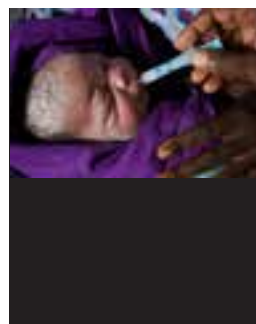
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## Pilot Point of Care for Early Infant Diagnosis of HIV in Malawi

An estimated 8,000 new paediatric HIV infections occurred in Malawi in 2014, but the capacity to identify these children in a timely way through central DNA Polymerase Chain Reaction (DNA PCR) remains limited. To simplify the process and provide timely early infant diagnosis (EID) of HIV, Malawi has implemented a pilot study to assess the operational feasibility and effectiveness of the use of point of care (PoC) for EID by multiple health cadres in different types of health facilities.

Interim analysis of data from six sites shows that 80 per cent of tests were accurate; 85 per cent of children tested were identified through mother–infant pair clinics, while the remainder were identified in paediatric wards, under-five/immunization/wellness clinics, and outpatient departments. In all, 22 children (6 per cent) tested HIV positive, and results were provided to caregivers within 60 minutes of testing; 86 per cent of the 22 children diagnosed with HIV commenced antiretroviral treatment (ART) that day.

The results show that PoC EID can be successfully performed at health facilities, and that paediatric wards provide a key opportunity to identify HIV-positive children. Dramatic simplification of EID testing and timely diagnosis of sick children resulted in same-day ART initiation for the majority of HIV infected children, greatly reducing their risk of morbidity and mortality.



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## ALL IN to End Adolescent AIDS in Mozambique – Phase 2: In-depth Analysis

In Mozambique, adolescents and young people are the population group with the highest rates of HIV infection in the country. Mozambique is one of 18 countries in sub-Saharan Africa to adopt the ALL IN platform to accelerate results for adolescents. Following ALL IN Phase 1 (a rapid country assessment), the second phase of ALL IN involves an in-depth analysis of programmatic bottlenecks and gaps that limit the impact of priority interventions for adolescents. The study will also look at existing social norms as potential determinants of risk of HIV infection among adolescents. Results of this research are intended to further orient policy and programming at both the national and the sub-national level towards accelerating results for adolescents.



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## Effectiveness of Task Shifting From Clinical Officer to Nurses for Delivery of Paediatric Antiretroviral Treatment in Beira in Mozambique

The Ministry of Health and its development partners are trying to address issues of access to and quality of paediatric antiretroviral treatment (ART) in Mozambique, and retention rates. The coverage rate for paediatric ART is only 48 per cent, compared to 67 per cent for adults. In terms of treatment and follow-up care and support, the retention rate for HIV-exposed children in the health system is also very low. This study has been designed to assess the effectiveness of a new package of interventions to improve the delivery of ART in Mozambique. Central to this new package is the initiation, treatment and follow-up care of HIV-infected infants by mother and child health (MCH) nurses. Shifting the responsibility for paediatric ART to MCH nurses is expected to provide better access, treatment outcomes and retention rates.

This 12-month prospective cohort study will compare the effectiveness of a new intervention package with a standard package (based on historical data). The study outcomes include (but are not limited to): HIV identification rates, initiation and retention rates, defaulter risk profiles, and a number of quality-related outcomes, such as the proportion of HIV-infected children who have received nutritional assessment.

Positive findings from this study will be used to revise operational guidelines on the delivery of paediatric ART. Scale-up of this task-shifting approach would then be promoted. This study will form an important part of the evidence in country on effective ways of addressing retention in HIV treatment services.

## Evaluation of Namibia's Prevention of Mother-to-child Transmission Programme

The purpose of this evaluation is to provide an overview of the Prevention of Mother-to-child Transmission (PMTCT) programme in Namibia, in order to support the operationalization, accountability and learning in response to the efforts by the Ministry of Health and Social Services to scale up Option B+ and to document its contribution to elimination of mother-to-child transmission of HIV. By looking at the past 10 years of the ministry's PMTCT engagement, the evaluation will provide evidence and adduce lessons learned to enhance understanding of Namibia's current situation in eliminating mother-to-child transmission of HIV (e-MTCT). The findings will be used to inform the PMTCT technical working group on the current status of Namibia's e-MTCT efforts. In addition, the products of this evaluation will be used to operationalize cohort monitoring in Namibia.



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## Rapid Assessment of the MomConnect Cell Phone Text Alert SMS Project in South Africa

The KwaZulu-Natal Department of Health, with technical and financial support from UNICEF, piloted a mobile health (m-Health) project, using an electronic medical record linked to short message service (SMS) for pregnant women attending services at public sector clinics and hospitals. Some 5,044 women received a tailored SMS depending on their HIV status and the timing of their pregnancy. The project aimed to improve retention in care and prevention of mother-to-child transmission outcomes for HIV-positive women who received the intervention.

A rapid assessment evaluation of the Mom-Connect SMS pilot project implemented in two districts of KwaZulu-Natal was undertaken, and after 36 months the preliminary results are overwhelmingly positive. HIV-positive women found that the SMS were useful in reminding them to attend appointments and take their antiretroviral medicines. They also provided information on breastfeeding and getting their babies tested. Although some clients were concerned about accidental disclosure, no cases were reported. Most women would recommend the SMS to someone else, and many had told other people about the SMS. SMS are an acceptable and simple way of providing pregnant women with information and reminders about HIV and immunization services. Women reported an increase in their knowledge and said that the SMS resulted in them attending clinic appointments on schedule.



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## Technical Implementation Series on the Prevention of Mother-to-child Transmission Impact in South Africa

The South African Medical Research Council has conducted three national surveys and one national prospective observational study to evaluate the short-term (six-week post-delivery) and long-term (18 months post-partum) impact of national prevention of mother-to-child transmission interventions since 2010.

The results of these studies have been reported to the South African National Department of Health, UNICEF and provinces. The technical implementation series will bring together a series of short papers highlighting the key learnings in designing, preparing, implementing and disseminating results from a study of this magnitude. The series will be useful at the global and other-country levels, where similar studies are being planned/executed.



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## Accessing HIV Services during Flooding in Malawi

In January 2015, the southern part of Malawi experienced sudden, heavy rainfall that caused flooding, affecting more than half a million people. Due to the widespread impact of the floods, the President of Malawi declared a state of disaster in 15 of Malawi's 28 districts. Given the high number of people living with HIV in this region, the floods had the potential to interrupt access to treatment, care and support services. UNICEF supported the Government's rapid response, and mobilized funds, resources and partners to deliver health, nutrition and HIV services to affected areas.

This publication shows how having adaptable programmes and preparing in advance are crucial to a robust humanitarian response and to mitigating disruptions to the delivery of health services during an emergency. Lessons gathered from this experience will inform future HIV programming and may provide insight for other countries affected by similar crises, particularly as the effects of climate change become more pronounced and impact the health and well-being of children.



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## A Family-centred Approach to Addressing Equity Gaps Faced by Children Affected by HIV in West and Central Africa

West and Central Africa (WCA) is the region with the world's highest rate of new HIV transmissions to children and the lowest proportion of children (0–14) starting treatment: almost 90 per cent of children living with HIV do not receive the treatment they need. Family-centred approaches (FCAs) have great potential to address the equity gap, since 90 per cent of HIV transmissions are from parents to children, and that family dislocation plays an important part in children's access and adherence to treatment.

UNICEF is promoting an FCA in WCA with two critical goals: early identification of HIV-positive children, and the retention of children in HIV treatment through family-support interventions. Efforts are specifically focused on: (i) active identification of children living with HIV at community levels; (ii) joint mother and child care management; (iii) linking up social protection schemes (cash, food, etc.) to vulnerable HIV-affected families; (iv) disclosure of children's HIV status through health and parental support; and (v) men's engagement in supporting their families in relation to HIV.

This article sets out a framework for a comprehensive FCA with five key areas of interventions. It documents how small-scale FCA interventions can bridge children's equity issues in West and Central Africa at three levels: (i) children born free of HIV; (ii) child access to antiretroviral treatment; and (iii) child and adolescent AIDS-related death.



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## **ALL IN: Creating the Momentum for Accelerating the Response to HIV/AIDS among Adolescents in West and Central Africa**

Despite overall progress in the AIDS response, and a decrease both in mortality rates (40 per cent in 14 years) and in the incidence of new infections, the epidemic in adolescents aged 10–19 is still on the rise in terms of mortality. And around 72 per cent of new infections occur among adolescent girls. As a result, in 2015 there were 430,000 adolescents living with HIV/AIDS, as against 390,000 in 2014. Factors behind this situation include: (i) limited knowledge about HIV risks among adolescents, in particular among girls; (ii) early sex debut and multi-partnership: in 10 countries, 15–29 per cent of adolescents declare having had sex before the age of 15; (iii) insufficient use of condoms for those sexually active; and (iv) poor uptake of testing and counselling services.

In 2015, with the launch of the ALL IN initiative, a global coalition co-led by UNICEF and the Joint United Nations Programme on HIV/AIDS (UNAIDS) Secretariat set an agenda for action to end the AIDS epidemic among adolescents aged 10–19, as part of the global fast-track process of the HIV/AIDS response.

Six countries built coalitions of key stakeholders on adolescents and HIV and developed roadmaps for programming, using the ALL IN tool and approach. The process was launched with high-level political involvement, and new programming streams are being implemented, with innovative interventions and meaningful involvement of adolescents and young people.

This article presents a summary of ALL IN introduction in the region, key findings from the country assessment phases, and key innovations in programming with and for adolescents.

## **Synthesis of the Situational Analysis of the Management of Paediatric HIV in West and Central Africa**

West and Central Africa (WCA) has 38 per cent of new HIV infections among children aged under 15 years and is the second most affected region in the world. This region has one of the lowest coverage of paediatric HIV, with only 10 per cent of those children in need receiving treatment. To help WCA countries to develop specific plans for accelerating the elimination of mother-to-child transmission and improving paediatric care, a situation analysis was conducted in 11 countries of the region. The main objective was to identify and analyse the important bottlenecks affecting the performance of services in support of paediatric HIV and to propose corrective actions to strengthen them. To have a general view of the experiences of all countries in this area and to facilitate sharing within the WCA region, a synthesis of national reports of situational analysis was commissioned.



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## Integration of HIV Testing and Care into Nutrition Programme in Chad: Lessons Learned

While the effectiveness of antiretroviral therapy (ART) for the prevention of mother-to-child transmission of HIV (PMTCT) is clear, PMTCT remains a facility-based initiative, which may result in missed opportunities in settings with low access to health facilities, such as in Chad, where only half of pregnant women have access to antenatal care. In order to accelerate the elimination of paediatric HIV, HIV testing and treatment of under-five children should go beyond the PMTCT point of care.

This study aims at documenting lessons learned from an initiative on the feasibility of integrating HIV testing and care into a nutrition programme in regions with high malnutrition. A retrospective case study was conducted in 11 hospitals from the Batha, Guera and Salamat regions of the Sahel belt. Routine monthly facility data were collected for a period of 11 months (December 2014 – October 2015). In addition, key informant interviews were conducted to examine the success and challenges faced during implementation of the initiative. The results show a 35-fold increase in the number of children tested for HIV in the nutrition treatment units, and a 73 per cent uptake of HIV testing among children seen in the treatment units; of these, 1 per cent (26 cases) tested positive and all were all started on ART. This initiative demonstrates the feasibility and acceptability of integrating HIV testing and care into a nutrition programme in this setting, and have shown the viability of initiating ART for all identified HIV-positive cases. Therefore, this intervention could be scaled up to areas with high malnutrition and HIV prevalence for early identification of HIV cases in children and linkage to ART.



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## Feasibility and Acceptability of Routine HIV Counselling and Testing in Health Care Settings in Togo

Despite the importance of the prevention of mother-to-child transmission of HIV (PMTCT) programme, not all HIV-positive pregnant women and exposed infants in Togo benefit from the elimination of mother-to-child transmission of HIV (eMTCT) interventions. Without exploring better ways of identifying HIV-exposed children beyond the PMTCT point of care, a majority of children at risk will remain undiagnosed and will die from HIV complications.

This paper highlights the lessons learned from a pilot project on HIV case-finding in routine child health care settings in Togo. A retrospective case study was conducted from 2012 to 2014 in 20 hospitals from Togo's six administrative regions, which include document reviews of national paediatric HIV care policies and technical guidelines. This was supplemented by key informant interviews with programme and facility managers and health care providers to examine the operational successes and challenges across sites.

Findings from the study show a three-fold increase in the uptake of HIV testing among children in the period from 2012 to 2013/2014, and a 2.5-fold increase in the number of children tested positive in the same period. Of the five identified testing platforms for the period 2013–2014, paediatric outpatient (56 per cent), family-centred approach (18 per cent) and early infant diagnosis/PMTCT (14 per cent) accounted for 88 per cent of the total volume of HIV-positive children in the selected hospitals, and 82 per cent of the total number of children screened for HIV over the same period.

The paediatric HIV case-finding intervention has demonstrated the feasibility and acceptability of providing routine HIV testing to children outside the PMTCT programme, and has created a platform for extending HIV testing to siblings and other family members through the family-centred approach. Findings from this study could serve as evidence to close the gap in policy on HIV testing for children.



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# PART 10

## Adolescents

### **Egypt Country Assessment of the Adolescent Component of National Health and HIV/AIDS Programmes**

ALL IN to #EndAdolescentAIDS is a global initiative convened by a leadership group including UNICEF, the Joint United Nations Programme on HIV/AIDS (UNAIDS), United Nations Population Fund (UNFPA), World Health Organization (WHO) and adolescent leaders. The initiative focuses on: (i) engaging, mobilizing and supporting adolescents as leaders and agents of social change; (ii) sharpening adolescent elements of national AIDS programmes; (iii) fostering innovative approaches to improve contact with adolescents and increase the impact of prevention, treatment and care programmes; and (iv) advocating at global, regional and country-level to firmly position the issue of adolescent AIDS.

UNICEF and partners will use the ALL IN to #EndAdolescentAIDS initiative as an entry point to understand better the wider context of national policies and programmes focused on adolescents' health. The process is guided by evidence generation, including: (i) completion of a rapid assessment of the adolescent programme at the national and sub-national level to define who is most affected, where they are located and what interventions have the largest coverage gap and are most critical in improving the HIV situation among adolescents; (ii) an in-depth analysis of bottlenecks and gaps that limit effective coverage of priority HIV interventions; and (iii) evidence-informed planning to accelerate agreed remedial action to address bottlenecks and gaps in data, and to improve intervention coverage, quality and impact.

The assessment will contribute to the development of an adolescent health profile in Egypt, as part of the ECO's new adolescent strategy and HIV/AIDS planning. It will also inform future advocacy efforts and programme planning.



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## Adolescents and Youth in Botswana

Despite impressive economic progress, adolescents and youth remain vulnerable in many respects. The prevalence of HIV/AIDS, a top challenge for the country, is rising faster in this age group than in any other. The unemployment rate among this population is also much higher than the average. In this context, UNICEF and the United Nations Population Fund (UNFPA) have jointly conducted this study to gain a better understanding of the adolescents and youth in Botswana, in order to improve the policies and programmes that are meant to benefit this population.

The study constructs the profiles of adolescents and youth in Botswana, identifies their characteristics and the challenges they face, maps the policies and programmes that affect them and identifies gaps between their needs and government policies and programmes. The findings are expected to be used in advocacy with the Government and other partners to improve the policies and programmes that affect adolescents and youth in the country.



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## Assessment and Lessons Learned from the Building Young Futures and Wheels for Change Initiatives in Zambia

UNICEF has partnered with Barclays Bank and the Ministry of Youth, Sport and Child Development under the Building Young Futures (BYF) programme, aimed at promoting young people's businesses through entrepreneurship skills training. To enable trained youths to start their own business/expand their business, the ministry and UNICEF, with financial support from Barclays Bank, created a grant support programme called Wheels for Change (WFC) to provide seed money to eligible beneficiaries of the BYF project.

The study aims to assess and learn lessons on the impact of the BYF and WFC grant support programmes on youth-led business enterprises. The assessment is expected to provide lessons concerning the impact of entrepreneurship training, WFC small grants and mentorship programmes on the beneficiaries of the BYF programme, in helping them to start or expand their own enterprises. The assessment will also shed light on the impact of the two programmes on the out-of-school, marginalized and unemployed youth, in terms of whether they venture into income-generating projects. Finally, the assessment is expected to provide the Government and partners with recommendations and a way forward on youth-empowered initiatives. The findings of the publications will be used not only to inform better planning and implementation, but also to help scale up government youth-empowerment programmes.



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## Study on Early Pregnancy at School in Gabon

The latest Demographic and Health Survey (GDHS) in 2012 showed that 28 per cent of girls aged 15–19 have already begun childbearing: 23 per cent have had at least one child, and 5 per cent are pregnant for the first time. The same survey revealed needs in terms of information on sexual and reproductive health and contraceptive use. The GDHS also highlighted the phenomenon of precocious sexuality in Gabon. Indeed, more than two girls in ten girls (21.9 per cent) and nearly seven in ten (68 per cent) have already had their first unprotected intercourse before the age of 15 and 18 years, respectively.

The general objective of this study was to obtain data on teenage pregnancy in schools in Gabon. Both quantitative (questionnaire for girl students) and qualitative (interviews and focus groups with managers, support staff and non-governmental organizations) approaches were used for the collection of information.

The study found that 49 per cent of girls interviewed had had their first pregnancy before the age of 18. The main causes and determinants of early pregnancy are early sexual intercourse, low contraceptive use, family and school environment and the economic situation. The consequences, on the school side: (i) repetition, (ii) exclusions, and (iii) drop-out; on the health side: (i) the weak health of the offspring, and (ii) the increasing number of pregnancies; on the socio-economic side: poverty.

The study also revealed a lack of policy in this area, a lack of health facilities and qualified staff for teenage pregnancy care, and a lack of teaching materials for the prevention of pregnancy in school.

## Situation Analysis of the Needs, Aspirations and Youth Services in São Tomé and Príncipe

The United Nations defines youth as people aged 15–24 years. In São Tomé and Príncipe, 35.8 per cent of the population is aged 15–35 years. Over 45 per cent of them live in urban areas, and approximately 62.4 per cent reside in the two most populated districts. This high concentration of urban youth often brings various social problems, such as unemployment, which often leads to crime, drug use, smoking and other risk situations. Exclusion from basic services, such as access to education and health, is also associated with these situations.

This study, which is being conducted in partnership with the Ministry of Education, Culture, Youth and Sports, will allow better understanding of the challenges that youth face. This could facilitate the identification of possible answers, in terms of protection programmes for youth that target the most affected areas.



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## Impact Evaluation Report of the Galz and Goals Sports for Development Programme in Namibia

Galz and Goals was the first Sports for Development (S4D) programme of its kind in Namibia. It was established in 2008 to increase the empowerment of adolescent girls aged 10–18 through participation in football leagues and the promotion of healthy lifestyles, under the motto 'Young Girls Changing Lives'. The programme integrates HIV/AIDS education, life skills and healthy lifestyle components into its sporting activities, in order to create a platform through which adolescent girls can gain skills and knowledge.

The purpose of this impact evaluation is to assess how the implementation of the Galz and Goals S4D programme has led to positive outcomes for the participating adolescent girls and their families, and how its Sport2Life tool has fostered the development of life skills.

Results of the evaluation will inform the development of an institutionalized school-based S4D programme and the future of the Galz and Goals programme. The evaluation will thus be central to the school sports policy review by the Ministry of Sport, Youth and National Service, and the revival of physical education curriculum in schools by the Ministry of Education, Arts and Culture.

## End-line Survey of the Mabinti Tushike Hatamu (Girls, Let's Be Leaders) Programme in Tanzania

The Mabinti Tushike Hatamu Programme (MTH) was established in 2012 in the three regions of Iringa, Dar es Salaam and Mbeya. Its main thematic areas of focus are HIV/AIDS, pregnancy and gender-based violence, with the aim of reducing out-of-school girls' vulnerability.

A quantitative survey was conducted to assess the likely effect of the programme on out-of-school girls' economic and social well-being, civic participation, sexual and reproductive health, HIV behaviours, and access to services. Findings from the quantitative assessment indicated that most outcomes were much better for MTH girls than the control group. Findings from the in-depth interviews with the girl group leaders indicated major gains for the leaders, including confidence to voice opinions, respect from family and community, civic participation, entrepreneurship skills, income through self-employment, better access to health services and HIV protection skills.

The report includes lessons learned and key recommendations to inform future interventions for out-of-school adolescent girls, with a focus on scale and sustainability.



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# PART 11

## Humanitarian Action, Resilience and Peacebuilding

### **Action Research on the Intergenerational Transmission of Violence through Caring Practices in Burundi**

While many of the peace-consolidation activities of other partners focus on macro drivers of conflict and fragility, UNICEF aims to support conflict transformation, seeking to address the underlying structural and cultural factors that drive fragility and conflict. To do this, UNICEF applies a child-centred approach that recognizes children as agents who are affected by, and who in turn affect, the society and institutions around them, as they progress through the life cycle; who inherit and replicate conflict, fragility or resilience, depending on their environments. The Peacebuilding, Education and Advocacy (PBEA) programme in Burundi indeed focuses on reducing the transgenerational transmission of violence and fragility.

The objective of this project is to enhance our understanding of the role that community-based groups play in promoting social cohesion in communities, and of the role they have in influencing outcomes towards children's pro-social behaviour in a protective environment. The project also seeks to build the capacities of individuals and groups in the communities to facilitate social relationships and to deal with conflict in a transformative manner that contributes to lasting social cohesion. Capacity-building among individual and community based groups is a key component of the education and peacebuilding programme "Increased capacity of children, parents, teachers and community members to prevent, reduce and cope with conflict and promote peace". This project will contribute directly to that outcome.

This research will be a valuable resource for Burundi's fragility assessment, and with continued investment will inform ongoing monitoring of progress against the Peacebuilding and Statebuilding Goals, an experience which could inform efforts in other fragile states.



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## Population-based Survey on Peace and Education in Burundi

This research is based on a comprehensive survey conducted in December 2014/early 2015, before the outbreak of the 2015 political crisis. The survey was designed to provide an in-depth yet rapid method of understanding the context of peacebuilding interventions and to inform their evaluation. Furthermore, the data provide insight into differences between adult and youth perceptions; this enables a life-cycle perspective and helps to identify areas that require attention with regard to the intergenerational transmission of violence and resilience.

For the survey, interviews were conducted with a total of 2,991 randomly selected youth and adult residents in all 17 provinces of Burundi, to provide nationally and regionally representative statistics.



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## Measuring Peacebuilding Education and Advocacy Strategic Level Results and Beyond in Côte d'Ivoire

The purpose of this study is to measure the results of the peacebuilding, education and advocacy approach (PBEA) and to provide a baseline for future country planning and programming across sectors. The study will reconstruct baseline data from self-reported information and existing sources, and will measure a set of social cohesion outcome indicators from a sample of PBEA target groups in selected locations of PBEA intervention. This will have an evaluative purpose, but it is mainly a learning process for UNICEF, allowing it to gain a better understanding of how and where change happens, so that it can improve the tailoring of its interventions and use the data generated for high-level programme advocacy with the Government and other partners.



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## Evaluation of Humanitarian Action Related to Child Survival in North Darfur in Sudan 2010–2015

Sudan is facing a protracted emergency crisis due to the Darfur conflicts, with the loss of a generation of youth, which has been living in internally displaced person camps for 12 years.

The evaluation is expected to generate evidence of the strengths and weaknesses of UNICEF's interventions to address the protracted crisis in Darfur, and factors that can explain them, and to aid in the improvement of interventions.

The evaluation findings, conclusions and recommendations will be used by the Government, donors, UN agencies/UNICEF, civil society organizations, state authorities and communities as key elements for enhancing the humanitarian strategies and investments for greater impact in Sudan.



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## Civics and Ethical Education for Peacebuilding in Ethiopia: Results and Lessons Learned

In Eastern and Southern Africa, the Peacebuilding, Education and Advocacy programme has been piloting interventions in six countries that are classified by the Organisation for Economic Co-operation and Development (OECD) as fragile contexts (Burundi, Ethiopia, Kenya, Somalia, South Sudan and Uganda). The low quality and relevance of formal education services have been identified as important factors that reflect historical patterns of alienation toward minority groups in the developing regional states of Ethiopia, which continue to experience the lowest development indicators in the country and that undermine the consolidation of a peaceful state. Low quality and access to formal education for indigenous children in Benishangul Gumuz are critical factors fuelling ethnic divisions and undermining the emergence of a sense of national identity among minority ethnic groups. This case study explores the role of co-curricular school clubs in addressing patterns of exclusion and marginalization that impact negatively upon social cohesion for young people in the Benishangul Gumuz Region of Ethiopia. This document is intended to be used by UNICEF staff, implementing partner organizations and other interested practitioners in the education and peacebuilding fields. It is hoped that the study will contribute to discussion and planning to strengthen peacebuilding through education initiatives.



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## Eastern and Southern Africa Peacebuilding, Education and Advocacy Bulletins Editions 5 and 6

In Eastern and Southern Africa, the Peacebuilding, Education and Advocacy (PBEA) programme has been piloting interventions in six countries that are classified by the Organisation for Economic Co-operation and Development (OECD) as fragile contexts (Burundi, Ethiopia, Kenya, Somalia, South Sudan and Uganda). This quarterly publication of the Regional Office highlights key stories and achievements of PBEA-supported programming in fragile and conflict-affected states in the region. These documents are intended to be used by UNICEF staff, implementing partner organizations and other interested practitioners in the education and peacebuilding fields. It is hoped that the study documents will be used for advocacy and awareness-raising purposes, to strengthen peacebuilding through education.



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## Evaluation of UNICEF's Response to the Nutritional Crisis in Mauritania

UNICEF Mauritania has evaluated its response to the recurrent nutritional crisis in Mauritania. This reflection aims at improving the link between the emergency response, rehabilitation and development, in order to build resilience in both systems and communities. In the course of 2016, UNICEF Mauritania will develop the new 2017–2021 Country Programme. This strategic process will be an important moment to take stock of the achievements and progress in the fight against child malnutrition, and to identify constraints and opportunities, including in humanitarian situations. Similarly, the new post-2015 national development strategy is being formulated; hence the importance of producing evidence to move towards the inclusion of community and system resilience and the problem of climate change globally.



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## Eastern and Southern Africa Regional Office Peacebuilding, Education and Advocacy Technical Review Outcome Document: Programming for Sustainable Results in Fragile and Conflict-affected Settings

In the Eastern and Southern Africa Region, the Peacebuilding, Education and Advocacy programme has been piloting interventions in six countries that are classified by the Organisation for Economic Co-operation and Development (OECD) as fragile contexts (Burundi, Ethiopia, Kenya, Somalia, South Sudan and Uganda). The conditions and characteristics of these countries range from a context of chronic conflict-induced humanitarian emergency, to an acute humanitarian emergency induced by conflict, to settings of post-conflict recovery, to one of vulnerability to violent conflict due to internal and external pressures. The technical review outcome document identifies lessons learned for how peacebuilding through education has contributed to strengthening resilience and social cohesion, and is supporting the achievement of regional development priorities in fragile and conflict-affected settings through early childhood development, child protection, adolescent programming and humanitarian action. This document is intended to be used by UNICEF staff, implementing partner organizations and other interested practitioners in the education and peacebuilding fields. It is hoped that the study will contribute to discussion and planning to strengthen peacebuilding through education initiatives.



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## Education and Resilience in Kenya's Arid Lands: Summary Document

In Eastern and Southern Africa, the Peacebuilding, Education and Advocacy programme has been piloting interventions in six countries that are classified by the Organisation for Economic Co-operation and Development (OECD) as fragile contexts (Burundi, Ethiopia, Kenya, Somalia, South Sudan and Uganda). The study is a research summary document that aims to highlight key findings and recommendations of a major study on resilience and education in the arid and semi-arid lands of Kenya for UNICEF and government partners. This document is intended to be used by UNICEF staff, implementing partner organizations and other interested practitioners in the education and peacebuilding fields. It is hoped that the study will contribute to discussion and planning to strengthen peacebuilding through education initiatives.



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## Education Sector Governance, Inequity, Conflict and Peacebuilding in Kenya

In Eastern and Southern Africa, the Peacebuilding, Education and Advocacy programme has been piloting interventions in six countries that are classified by the Organisation for Economic Co-operation and Development (OECD) as fragile contexts (Burundi, Ethiopia, Kenya, Somalia, South Sudan and Uganda). This study, which aims to identify the linkages between education and peacebuilding, examines the hypothesis that management of the education sector, as a reflection of the broader political economy of a society, can either work exacerbate cultural and structural forms of violence that fuel intrastate conflict, or promote peacebuilding. It looks at ways in which education services in Kenya can be delivered in a manner that addresses underlying factors of political economy to promote social inclusion, equity and resilience to support peacebuilding processes in the country. This document is intended to be used by UNICEF staff, implementing partner organizations and other interested practitioners in the education and peacebuilding fields. It is hoped that the study will contribute to discussion and planning to strengthen peacebuilding through education initiatives.



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## Peace Education and Peacebuilding in Dadaab Refugee Camp in Kenya: Results and Lessons Learned

Over the years, Somali refugees in Dadaab have been viewed both as a threat to regional security (due to the risks of radicalization and recruitment by Al-Shabaab) and as a security risk for Kenyans living close to the border of Somalia. This case study explores whether recreational and sporting activities can contribute to the strengthening of positive social bonds, to increased tolerance and understanding between the Somali refugee communities and the host communities, and to positive behavioural changes for constructive dispute resolution that will break with the history of violence in Somalia. This document is intended to be used by UNICEF staff, implementing partner organizations and other interested practitioners in the education and peacebuilding fields. It is hoped that the study will contribute to discussion and planning to strengthen peacebuilding through education initiatives.



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## Education Sector Governance, Inequity, Conflict and Peacebuilding in South Sudan

In Eastern and Southern Africa, the Peacebuilding, Education and Advocacy (PBEA) programme has been piloting interventions in six countries that are classified by the Organisation for Economic Co-operation and Development (OECD) as fragile contexts (Burundi, Ethiopia, Kenya, Somalia, South Sudan and Uganda). This study, which aims to generate evidence on the linkages between education and peacebuilding, examines the hypothesis that management of the education sector, as a reflection of the broader political economy of a society, can either exacerbate cultural and structural forms of violence that fuel intrastate conflict, or promote peacebuilding. It looks at ways in which education services in South Sudan can be delivered in a manner that addresses underlying factors of political economy to promote social inclusion, equity and resilience to support peacebuilding processes in the country. This document is intended to be used by UNICEF staff, implementing partner organizations and other interested practitioners in the education and peacebuilding fields. It is hoped that the study will contribute to discussion and planning to strengthen peacebuilding through education initiatives.



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## Pastoralist Education and Peacebuilding in Ethiopia: Results and Lessons Learned

In Eastern and Southern Africa, the Peacebuilding, Education and Advocacy programme has been piloting interventions in six countries that are classified by the Organisation for Economic Co-operation and Development (OECD) as fragile contexts (Burundi, Ethiopia, Kenya, Somalia, South Sudan and Uganda). This case study on UNICEF programmatic interventions explores the role of adaptive education programming through nomadic education for pastoral communities in addressing patterns of exclusion and marginalization that impact negatively upon social cohesion for pastoral communities in the Somali Region of Ethiopia. It explores how adaptive education programming is promoting access to education and addressing inequities experienced by pastoral communities in a way that promotes sustainable peacebuilding in the Somali Region of Ethiopia and thus reduces vulnerability to radicalization and recruitment by groups such as Al-Shabaab in neighbouring countries (e.g. Somalia). This document is intended to be used by UNICEF staff, implementing partner organizations and other interested practitioners in the education and peacebuilding fields. It is hoped that the study will contribute to discussion and planning to strengthen peacebuilding through education initiatives.



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## The Impact of Armed Conflict on Children in Africa: Children's Voices

Africa continues to witness armed conflict and the devastating impact on children. Simultaneously the African Union (AU) is increasingly playing a role in preventing and responding to conflict, representing a potential mechanism to positively influence and improve outcomes for children.

This study, which is led by the African Union Committee of Experts on the Rights and Welfare of the Child (ACERWC), is using a mixed methodology of desk study and country site visits. Recommendations will be developed at the policy level to improve reporting and accountability for member states and to strengthen protection of children affected by conflict. This would enhance the effectiveness of the AU in providing technical guidance to member states, as well as in advocating for compliance with relevant norms and standards.



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## The Role of Conflict-sensitive Education and Peacebuilding in Fragile and Conflict-affected Contexts in Eastern and Southern Africa

In Eastern and Southern Africa, the Peacebuilding, Education and Advocacy programme has been piloting interventions in six countries that are classified by the Organisation for Economic Co-operation and Development (OECD) as fragile contexts (Burundi, Ethiopia, Kenya, Somalia, South Sudan and Uganda). This policy brief outlines the role of conflict-sensitive education and peacebuilding in achieving the Strategic Development Goals in fragile and conflict-affected settings. This document is intended to be used by UNICEF staff, implementing partner organizations and other interested practitioners in the education and peacebuilding fields. It is hoped that the study will contribute to discussion and planning to strengthen peacebuilding through education initiatives.



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## Youth Education Programming and Peacebuilding in Dadaab Refugee Camp in Kenya: Results and Lessons Learned

Over the years, Somali refugees in Dadaab have been viewed as either a threat to regional security (due to the risks of radicalization and recruitment by Al-Shabaab) or as a potential resource for building peace through effective return to Somalia, especially if equipped with skills and competencies to contribute to effective state building and societal transformations. This case study explores how adolescent and youth programming through livelihood and life-skills training is equipping young Somali refugees to return to Somalia, in order to contribute to peacebuilding processes in Somalia, and whether UNICEF support is helping to address the risks of radicalization among young Somali refugees who have been caught between two worlds for the past two decades. This document is intended to be used by UNICEF staff, implementing partner organizations and other interested practitioners in the education and peacebuilding fields. It is hoped that the study will contribute to discussion and planning to strengthen peacebuilding through education initiatives.



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# PART 12

## Climate Change

### Climate-related Hazards and Child Welfare in Uganda

Vulnerability to climate change in Uganda is high, due to a heavy reliance on climate-dependent resources, such as rainfed agriculture, increased frequency and intensity of natural disasters and persistent poverty. At the same time, adaptive capacity is low, due to shortages of human capital, economic resources and technology. Children make up a large group that is one of the most vulnerable to climate change in Uganda. It is therefore important to quantify the possible impact of climate-related hazards on children in Uganda.

The objective of the study is to explore the impacts of climatic shocks on child welfare in Uganda and investigate the mechanisms underlying child welfare following climatic shocks. The study combines household and/or individual surveys with climate-related data. The surveys are used to measure child welfare and investment in children, while the climate-related data are used to identify climate variability that can create income shocks. Findings from the study are relevant to the national response to climate-related hazards. A key area of programming that will benefit from it will be targeted efforts aimed at alleviating the burden of climate variations on vulnerable populations.



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### Operational Research on Environmentally Sustainable Energy Access for Children in Zimbabwe

UNICEF designed this research to gather evidence on the root causes and barriers associated with energy access, and to empower communities to address the negative impacts of those barriers using innovative solutions.

Of the sampled population, a mere 20 per cent uses clean energy sources/ carriers, leaving a potential market of 80 per cent of the sampled population. Root causes and barriers associated with energy access in Zimbabwe include: limited awareness; lack of technical knowhow; financial resource constraints; and lack of a reliable and secure supply of power for institutions connected to the grid. The business case presented as a final output of this research identifies key areas for potential interventions, which address the energy poverty challenges faced by communities and tackle these challenges in a more environmentally sustainable manner.



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## Zimbabwe Child-friendly Climate Change Booklet

There is currently no strong global institutional framework to specifically address children's unique vulnerabilities to climate change. At the national level, climate-related plans in Zimbabwe rarely address the specific needs of children to adapt and or address climate change. The curriculum in the schools has been reviewed to incorporate climate change, but it does not orient the students to all the issues related to climate change. To respond to the needs of children, this booklet aims to make all children aware of climate change and start to think about ways of becoming resilient to the impacts of climate change. Climate change education is a key component of improving the adaptive capacity, the knowledge and skills needed to adapt lives and livelihoods to the ecological, social and economic realities of a changing climate.

The child-friendly manual booklet seeks to contribute to quality education for children by interactively creating and raising their awareness of climate change issues. The improved awareness and action on climate change by children will help make sure that children are heard and that child-sensitive climate-related policies are considered by policy makers.



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# PART 13

## Miscellaneous

### **Evaluation of the Effectiveness of Capacity-building Efforts by UNICEF in Supporting Nigeria**

UNICEF Nigeria's Country Programme has an important capacity-building aspect that comes across all the programme components. Indeed, most of the programme provides support for capacity development at the individual level (mainly as training activities). Given the significance of investment made in individual capacity development, it is important to find out the extent to which this capacity-building effort is relevant, effective, efficient and sustainable in implementing the Country Programme, and also to identify the lessons that can be learned in implementing them in Nigeria.

The main purpose of the evaluation is to provide performance information on the capacity-development supporting activities, more particularly on the supported training activities provided within the context of the implementation of Nigeria's Country Programme 2014–2017.

The evaluation aims to determine how relevant and effective the results achieved are, and how sustainable UNICEF Nigeria's capacity-building efforts at the individual level (i.e. training) are in helping realize children's rights in Nigeria.



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## End-line Evaluation of the Eastern and Southern Africa Regional Initiative on Programme Monitoring and Response

Results from UNICEF's Monitoring and Response formative evaluation in 2014, as well as various lessons learned from several district-level health-systems strengthening programmes in Africa and Asia, indicated the need for more frequent data gathering on programme performance to identify and remove barriers to service delivery in a timely way. In addition, decentralization of essential health service delivery is an increasing trend within the Eastern and Southern Africa Region (ESAR) countries, including responsibility for planning, budgeting, service provision and monitoring of programmes. However, most monitoring systems at the sub-national level do not provide real-time data and feedback loops to signal whether programmes are effective or not. Data gaps related to intermediate results and bottlenecks need to be addressed, so that sub-national decision makers in the health sector can be effective in implementation and delivery of results.

The end-line evaluation will assess progress against baseline indicators for results expected in four countries in the areas of real-time monitoring of routine health/nutrition data; monitoring of citizen feedback information; and evidence-based decision making and action. In addition, sustainability, replicability, scaling and knowledge-management measures will be evaluated.

The evaluation will categorize the contextualized approaches demonstrated by the four participating Country Offices into anticipated models and analyse the conditions necessary for a particular model, or component of a model, to be replicated, scaled up and sustained. Various innovative solutions and approaches integrated into the models (both technological and non-technological) will also be assessed.

The evaluation is intended to help UNICEF Country Offices and counterpart government offices across the world have access to well-documented, externally evaluated information on the extent to which UNICEF was successful in the four pilot ESAR countries participating in the regional initiative; what worked and what didn't; and what conditions are required for replication, scaling-up and sustainability. ESARO and corporate UNICEF will also utilize the findings to determine the feasibility and value of potentially extending this initiative (or parts of the initiative), so that technical and financial support could be provided in a focused manner to other Country Offices that meet the criteria for future work in programme monitoring innovations.



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## Independent Review of Innovations in Malawi, Rwanda, Uganda and Zambia

UNICEF is seeking ways to mainstream and scale up the use of innovations for effective programme delivery and greater impact. Since 2008, UNICEF has been developing and applying technological innovations to achieve results for children, with Country Offices in the Eastern and Southern Africa Region pioneering many of the solutions. While there has been significant progress in the development and application of innovations, a comprehensive assessment had not been conducted. In January 2015, UNICEF Field Results Group, the Global Innovations Centre and the Eastern and Southern Africa Regional Office decided to undertake a review of innovations in Malawi, Rwanda, Uganda and Zambia, given their experience of developing and their maturity in deploying initiatives.

The review intends to showcase successes and impact, to assess the business case, and to identify characteristics of an enabling environment, in order to refine the strategy for mainstreaming and scaling up innovations in programme delivery within the Eastern and Southern Africa Region and globally.

The preliminary findings conclude that investments in innovations are worthwhile, and that the initiatives are relevant and effective in contributing to programme results for children. Specifically, technological innovations have enabled UNICEF and partners to: (i) capture information continuously over time, providing a real-time picture; (ii) synthesize and relate very large, complex volumes of data quickly via dashboards; (iii) include users in the validation process of information pertaining to them; and (iv) reveal trends and flag anomalies to decision makers in an actionable way.

The findings identify innovations that are ready for global scale-up, those that require additional investment to be fit for purpose, and those that the organization should cease investing in.



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