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Item 6 (a) of the provisional agenda*

Draft country programme document**

Syrian Arab Republic

Summary

The draft country programme document (CPD) for the Syrian Arab Republic is presented to the Executive Board for discussion and comment. The draft CPD includes a proposed aggregate indicative budget of \$4,442,000 from regular resources, subject to the availability of funds, and \$42,250,000 in other resources, subject to the availability of specific-purpose contributions, for the period 1 July 2022 to 31 December 2024.

^{*} E/ICEF/2022/9.

In accordance with Executive Board decision 2014/1, country programme documents (CPDs) are considered and approved in one session, on a no-objection basis. This draft CPD, and a costed evaluation plan, will be presented to the Executive Board for review from 22 March to 11 April 2022. The final CPD will be posted to the Executive Board web page in English six weeks in advance of the 2022 annual session and in the other designated languages four weeks in advance.

Programme rationale¹

- 1. The Syrian Arab Republic is facing one of the world's most complex emergencies, with unparalleled humanitarian needs, significant internal and external displacement, the widespread destruction of civilian and social services infrastructure and disastrous impacts on development gains. In 2021, 13.4 million people in the Syrian Arab Republic, including 6.08 million children, were estimated to be in need of humanitarian assistance, an increase of 27 per cent for children compared with 2020, with needs increasingly exacerbated by economic decline.²
- 2. The Syrian people, particularly children, continue to suffer immensely from a crisis that is now protracted and compounded in nature, although "a relative calm now exists, at least in terms of front lines not shifting for a year now." Since 2011, countless lives have been lost, the economy has experienced an unprecedented downturn, and widespread damage to physical infrastructure, particularly the social service sectors, and water resources and sanitation services, severely decimating the availability of and access to basic services. The crisis has had a profound impact on society, with continued high levels of internal displacement, while according to the United Nations, 5.6 million people, including 2.5 million children, are registered refugees. 4
- 3. The Government continued to subsidize basic commodities and services for a majority of the population (subsidies started to be rationalized in February 2022), particularly bread, food supplies, electricity and drinking water, and sought to maintain subsidies for all components of household support despite the economic effects of the crisis, the impact of external factors and the higher costs.
- 4. The protracted situation caused damage to and deficiencies in public services in two ways: the quality of services and the gaps in coverage. The Government aims to prioritize these two dimensions in future national plans. At the same time, accredited humanitarian actors continue to provide direct assistance to a considerable number of the people in need, across different sectors.⁵
- 5. Before 2011, the Syrian Arab Republic had achieved progress in gender equality. However, these gains have retreated, and a gender gap has deepened in terms of results and development indicators. Young women and girls have become particularly vulnerable, with increases in child marriage reported.
- 6. Social protection expenditure was only 1.9 per cent of the gross domestic product in 2010.8 With a reduction in oil and non-oil revenues and an increasing budget deficit, expenditure has fallen by 52 per cent in real terms since 2010.9 Meanwhile, the socioeconomic crisis has triggered the expansion of humanitarian social protection measures.

¹ The Government of the Syrian Arab Republic has expressed its reservations on the data from non-government sources used in this document.

² United Nations Office for the Coordination of Humanitarian Affairs (OCHA), Humanitarian Needs Overview: Syrian Arab Republic, 2021.

³ Remarks by the United Nations Special Envoy for Syria at the Briefing to the Security Council on Syria, 15 March 2021.

⁴ www.humanitarianresponse.info/en/operations/stima/idps-tracking, accessed 17 February 2022.

⁵ United Nations Strategic Framework 2022–2024.

⁶ Government of the Syrian Arab Republic, The First National Report on the Sustainable Development Goals, 2019.

⁷ Ibid, Executive Summary.

⁸ ilo.org/ilostat, accessed 23 February 2020.

⁹ Abu-Ismail, K. et al., Syria at War: Five years on, United Nations Economic and Social Commission for Western Asia and University of St. Andrews, 2016.

- 7. The health system has suffered from the destruction and degradation of infrastructure and the attrition of staff. Costs and safety concerns point to lower rates of access to antenatal and postnatal care and increasing numbers of births occurring outside of health facilities. Between 2008 and 2019, the under-5 mortality rate increased from 17.8 to nearly 23.7 deaths per 1,000 live births, and the neonatal mortality rate increased from 9 to nearly 12 deaths per 1,000 live births. ¹⁰ The coronavirus disease 2019 (COVID-19) pandemic is putting extra burdens on the already affected health-care system with additional emerging repercussions.
- 8. Coverage for the diphtheria/tetanus/pertussis-containing vaccine declined from 99 per cent in 2008 to 66 per cent in 2018, and there have been frequent measles outbreaks. Additional contributors to worsening child morbidity and mortality are diarrhoea, acute respiratory infections and food and waterborne diseases. Other adverse health conditions among children are physical injuries, disabilities and poor mental health.
- 9. Neither the rates of severe acute malnutrition (0.4 per cent), moderate acute malnutrition (1.3 per cent) nor stunting (12.6 per cent) were at emergency levels in 2019, although an increase from survey data from previous years was reported. ¹² Iron-deficiency anaemia affects 27 per cent of children aged 6–59 months and 31 per cent of pregnant and lactating women. Infant and young child feeding practices remain suboptimal, as 42 per cent of children receive minimum dietary diversity, 29 per cent of infants are exclusively breastfed for the first six months and 25 per cent of children do not benefit from the timely, appropriate introduction of complementary feeding. ¹³
- 10. The potable water system, which served more than 95 per cent of the population before the crisis, has suffered considerable destruction and damage. An estimated two thirds of water treatment plants, half of pumping stations, one third of water towers, one quarter of sewage treatment plants and one sixth of wells have been damaged, with significant differences across the country. ¹⁴ Infrastructure for water, sanitation and hygiene (WASH) in schools and health centres has been similarly affected. Close to 36 per cent of surveyed households in 2020 are relying on alternative, often unsafe, water sources. ¹⁵ Moreover, droughts have led to a reduction in water reserves and renewable groundwater resources.
- 11. While before the crisis improved sanitation facilities were accessible to 78 per cent of the population, including 70 per cent who benefited from sewage treatment plants, at least 70 per cent of sewage was untreated in 2020, ¹⁶ exposing the population to serious health risks. Public revenue and expenditure on water and sanitation have decreased, and significant numbers of technicians have been displaced.

¹⁰ Government of the Syrian Arab Republic, UNICEF, World Health Organization (WHO) and Ministry of Health, Study on the Causes of Under-5 Mortality, 2019.

¹¹ Syrian Arab Republic, Ministry of Health, 2019.

¹² Syrian Arab Republic, Ministry of Health, and UNICEF, Standardized Monitoring and Assessment of Relief and Transitions (SMART) Final Report, 2019.

¹³ Ibid.

¹⁴ World Bank Group, "The Toll of War: The economic and social consequences of the conflict in Syria", 2017.

¹⁵ OCHA, Humanitarian Needs Overview: Syrian Arab Republic, 2021.

¹⁶ Syrian Arab Republic, Ministry of Water Resources, 2020.

- 12. Estimates of the number of out-of-school children range between 1.1 million (6–14 years)¹⁷ and 2.5 million (5–17 years),¹⁸ among a school-age population of about 5.52 million. Kindergarten enrolment declined from 12 per cent in 2011 to 8.9 per cent in 2021.¹⁹ Partial evidence from some governorates points to net attendance rates decreasing with age. Among the students who passed the ninth-grade exam in 2018, only 81 per cent registered for the tenth grade. Furthermore, 11 per cent of students attending school were not in the correct grade for their age.²⁰ The gender parity index for the gross enrolment ratio in secondary education was 1.03 in favour of girls in 2018/19, compared with 0.97 in 2017/18.²¹
- 13. Only 55 per cent of the 19,663 schools registered pre-crisis were functional by June 2018. ²² High student-teacher ratios are common where education facilities have been destroyed; in 2018, 63,000 of the pre-crisis teacher and education personnel workforce were no longer in service. ²³ The remaining teachers face the diverse and complex learning needs of children who have lost months or years of education. The proportion of expenditure on pre-university education decreased from 15 per cent of the national budget in 2010 to 8.3 per cent in 2018. ²⁴
- 14. The prolonged crisis has widened the scope and scale of protection issues affecting children: frequent exposure to violence and death; family separations; and the depletion of family assets and coping capacity. Separated children and refugees, and internally displaced or returning children, are more vulnerable to gender-based violence and sexual exploitation. Fear, anxiety and grief affect their mental health. The limited social workforce is insufficient to tackle emerging issues.
- 15. The crisis has had a dramatic impact on children and adolescents directly affected and exposed to violence and abuse. Explosive remnants of war are a major risk to an estimated 10.3 million people, including 5.5 million children. ²⁵ More than 1.5 million children are living with disabilities; these children are more likely to experience psychological distress. ²⁶
- 16. In a recent community assessment, 80 per cent of participants reported child labour as a coping mechanism; 45 per cent reported child marriage; and 51 per cent said family violence was a concern²⁷ (pre-crisis, 8.3 per cent of girls were married before the age of 18 years). ²⁸ There was a high prevalence of violent discipline before the crisis. ²⁹ Laws regarding birth registration and children living without parental care need to be updated.
- 17. Adolescents (10 to 19 years) account for over 20 per cent of the population. Many have been deprived of learning, decent job opportunities and civic engagement; they report feeling disengaged from society. Boys are particularly vulnerable to exploitative child labour and to being killed or injured, while girls are at risk of child

¹⁷ Government of the Syrian Arab Republic estimate for children aged 6–14 years in areas under government control, 2020.

¹⁸ OCHA, Humanitarian Needs Overview and Humanitarian Response Plan: Syrian Arab Republic, 2020.

¹⁹ Syrian Arab Republic, Ministry of Education, 2021.

²⁰ Ibid.

²¹ Ibid.

²² Ibid.

²³ Ibid.

²⁴ Ibid.

²⁵ OCHA, Humanitarian Needs Overview: Syrian Arab Republic, 2021. It is estimated that one out of four recorded victims is a child.

²⁶ Ibid.

²⁷ Ibid.

²⁸ Government of the Syrian Arab Republic, The First National Report on Sustainable Development Goals SDGs (Executive Summary), 2019.

²⁹ OCHA, Humanitarian Needs Overview: Syrian Arab Republic, 2019.

marriage, trafficking and other forms of gender-based exploitation and violence. It has been reported that adolescents are adopting risky behaviours as coping strategies. Young people (15 to 24 years) accounted for 32.7 per cent of total unemployment in 2015.³⁰

- 18. The Government's fifth periodic report submitted to the Committee on the Rights of the Child under article 44 of the Convention identifies priority actions, including to adopt the child rights bill; amend the criminal code, the Nationality Act and the Personal Status Code; and to conduct a comprehensive assessment of public budgets considering the needs of Syrian children.
- 19. In March 2020, the Government and the United Nations agencies started to coordinate to ensure that the required preventive measures were put in place and to respond to COVID-19. Active control, mitigation and response measures to the longer-term impact of the pandemic will be a priority in the implementation of the United Nations Strategic Framework (UNSF) 2022–2024. Relevant specialized assessments would have to be undertaken to understand the nature and extent of the impacts on critical needs and longer-term assistance.
- 20. The country programme was developed considering the evolving situation, progress made and lessons learned. Preparatory analytical work with relevant partners included programme reviews, risk analyses, consultations to develop theories of change and priorities, and an analysis of the situation of children.
- 21. A key lesson is the need to ensure the cost-effective delivery of basic services at scale, given the protracted nature of the crisis. Hence, the country programme will emphasize the linkage between the needs-based response and essential service restoration, socioeconomic resilience and social cohesion to achieve sustainable results for children.
- 22. Another lesson highlighted the need to review the efficiency and effectiveness of social and behaviour change communication, including risk communication and community engagement. The country programme will therefore scale up integrated, convergent social and behaviour change communication to empower people to adopt improved household practices and to increase the demand for basic services, including mine risk education.
- 23. The country programme aims to respect, protect and fulfil children's rights, supporting the commitment by the Government and UNICEF to the Convention on the Rights of the Child. The programme is aligned with the UNSF 2022–2024, ³¹ the UNICEF Strategic Plan, 2022–2025, the UNICEF Gender Action Plan, 2022–2025, the Convention on the Elimination of All Forms of Discrimination against Women, the Convention on the Rights of Persons with Disabilities and the Sustainable Development Goals. The national standards and principles that the Government included in its first voluntary national review of progress towards the Sustainable Development Goals for the year 2020 will be applied to the Strategic Framework on the basis of, and together with, the relevant "Parameters and Principles of United

³⁰ Government of the Syrian Arab Republic, The First National Report on Sustainable Development Goals SDGs (Executive Summary), 2019.

³¹ The priority areas and structure of the United Nations Strategic Framework (UNSF) 2022–2024 reflect the areas of major needs and vulnerabilities for the people in the Syrian Arab Republic that the United Nations intends to contribute to address, based on independent vulnerability assessments, and they are congruent with the national priorities included in the national Strategic Plan "Syria 2030".

Nations Assistance in Syria"³² to ensure the implementation of the paragraphs related to early recovery projects contained in Security Council resolution 2585 (2021).

- 24. The UNICEF contributions to the UNSF and humanitarian response plans are based on its child rights mandate and comparative advantage and its leadership role in the social services pillar and the three humanitarian coordination sectors and child protection area of responsibility. The guiding principles are the best interests of the child, non-discrimination, equity, gender equality, inclusion, humanity, impartiality, neutrality and independence. The vision of change is that all children, regardless of their sex, socioeconomic status, geographic area, level of ability and other dimensions, gain increased access to resilient services, and that no child is left behind for humanitarian relief and the achievement of the child-centred Sustainable Development Goals.
- 25. UNICEF, the United Nations Population Fund and the United Nations Development Programme will implement joint programmes for improved maternal and adolescent health, the empowerment of women and girls, integrated education programming, addressing gender-based violence, and promoting the availability and use of disaggregated data.
- 26. The country programme promotes expanded, equitable, uninterrupted and inclusive access to basic services and social protection, contributing to resilience and social cohesion. It is underpinned by six programmatic theories of change that are risk-informed, shock-responsive and adaptive, and provide opportunities for innovation.³³
- 27. The country programme will apply the following change strategies:
- (a) Coordinated and convergent programming for improved effectiveness and quality, and at a larger scale;
- (b) A social and behaviour change communication strategy that addresses the interrelated causes of social norms and practices that are harmful to children's health, education, development and participation;
- (c) Partnerships under the UNSF that apply best practices in country and from global communities of practice, including South-South and triangular cooperation;
- (d) Harnessing the power of evidence to inform equitable policies, plans, strategies and programmes;
- (e) Gaining support from decision makers and stakeholders for children's causes and participation;
- (f) Gender equality across all programmes as well as gender transformative programming.
- 28. While continuing to fulfil the Core Commitments for Children in Humanitarian Action, the country programme will shift towards:
- (a) Stronger multisectoral programming for children and adolescents, who have missed access to learning and other opportunities to thrive and develop to their full potential, due to years of crisis and displacement;
 - (b) Linking humanitarian, social cohesion and resilience programming;

³³ In line with the UNSF, the engagement of UNICEF is guided by Security Council resolution 2254 (2015).

³² The Government of the Syrian Arab Republic does not accept the document titled "Parameters and Principles of United Nations Assistance in Syria", since this document was developed internally within the United Nations Secretariat and was not consulted with the Government.

(c) Resilience approaches that enhance equity and address the multiple vulnerabilities experienced by the poorest children and their families across the life cycle, using a gender lens, including supporting the design and implementation of equitable, risk-informed, harmonized and coordinated social protection systems.

Programme priorities and partnerships

Health and nutrition

- 29. The programme will increase children's equitable access to and use of quality, resilient and gender-sensitive health and nutrition services. The programme will address key selected barriers: limited data, evidence, policies, strategies and guidelines; insufficient demand for services; weak intersectoral linkages for early childhood development; and inadequate quality and capacity of service delivery and systems, the criticality of which has been underscored by the COVID-19 pandemic.
- 30. Strategies to address these barriers include evidence generation and use, technical support, advocacy and the leveraging of resources to create a more enabling policy and budget environment. Technical support and supplies will be provided for vaccinations prevention and treatment of malnutrition and to revitalize primary health care across the continuum of care. An integrated, multisectoral social and behaviour change communication strategy will seek to positively influence the norms and practices of parents and caregivers. The programme will address humanitarian needs and the need for shock-resilient primary health care, while transitioning from a supply-driven model to more sustainable solutions to improve children's health care and rebuild community trust.
- 31. The programme will identify measures to strengthen services and improve the effectiveness of communication interventions, focusing on areas of greatest need and paying special attention to children with disabilities. Immunization support will be provided countrywide. Resilience-building at the community and health-facility levels will be key to scaling up coverage and improving programme sustainability.

Education

- 32. The programme will strengthen learning effectiveness in safe school environments that include WASH and that are gender- and disability-sensitive. The programme will counter violence in schools and facilitate psychosocial counselling and referrals to specialized mental and physical health and nutrition services. The enrolment of out-of-school children in non-formal and formal learning (including preschools) will be prioritized, as will life-skills development to facilitate social participation and contribute to a more cohesive society.
- 33. The programme will address barriers to equitable enrolment, retention, learning and development, including insufficient school and grade readiness; humanitarian disruptions (including those related to the COVID-19 pandemic); large numbers of children out of school and overage for grade; gaps in gender, policies and information management; suboptimal quality and relevance of formal education; poor school environments; the limited engagement of parents and communities; and pupils and teachers who are traumatized, disabled and/or suffering from poor health and nutrition.
- 34. Key strategies are evidence-based, risk-informed advocacy and technical support; strengthening shock-responsiveness of the education system and reinforcing the Education Management Information System; leveraging partnerships and community support networks to improve the quality of learning (including remote and self-learning); and promoting social cohesion. Also supported are context-relevant

and inclusive school and district improvement plans; teacher development programmes; and integrated school and centre-based services. Services and supplies for humanitarian responses will remain an important strategy.

Child protection

- 35. The programme will strengthen systems at all levels to protect at-risk girls, boys and women from all forms of violence, neglect, abuse and exploitation. The barriers include outdated policies and laws; suboptimal monitoring and information management; an insufficient social workforce; and the prevalence of harmful norms and practices, including gender inequality and violence. UNICEF will fulfil its core commitments for child protection and for monitoring and reporting on grave violations against children.³⁴
- 36. The programme will link emergency responses with system strengthening. Strategies include technical support and advocacy for legislative and policy changes, including the development of a national child protection policy and strategic plan to strengthen the social service workforce to provide preventive, responsive and promotive services at scale. System strengthening and capacity development³⁵ for critical social services will be aimed at addressing children and community needs and vulnerability and enhancing their resilience as well as promoting social cohesion and strengthening protection and child rights. It will also shift towards a more integrated and localized approach that responds to the multiple obstacles hampering children's resilience and building on local systems for recovery. There will be a focus on preventing and responding to violence against children; gender-based violence; juvenile justice; social welfare and child labour, through quality case management and an integrated package of quality child protection services at the national, governorate and community levels. Family tracing and reunification, and family and community-based care for children deprived of parental care (including unaccompanied and separated children) will be supported. Psychosocial support and referrals to specialized mental health services will also be key.
- 37. An integrated strategy addressing negative social norms and behaviours will be essential. Through cross-sectoral synergy, the scope and scale of education on mine risks, as well as parenting skills and safe learning in and around formal and nonformal spaces will be expanded. Focused services will be provided to crisis-affected children and other extremely vulnerable children, including those with disabilities, in rural and vulnerable regions.

Water, sanitation and hygiene

- 38. The programme will address the barriers to accessing safely managed water, basic sanitation and good hygiene practices, including a lack of timely and complete data for decision making; the limited availability and skills of sector workers for resilient, sustainable operational management and maintenance; damaged water and sanitation systems; and low prioritization of hygiene among families.
- 39. Programme strategies include capacity building and technical advice for evidence generation and analysis, planning and coordination, implementation and management; cost-effective service delivery though repairs and rehabilitation of critical infrastructure; and procurement of goods and services. The integrated social and behaviour change communication strategy will promote good hand-washing

³⁴ Under Security Council resolution 1612 (2005).

³⁵ National institutions' capacity development will focus on the capacities that are strictly necessary to improve the direct provision of essential services to people and children in need and to support adherence to international commitments.

practices, menstrual hygiene and health, and the cleanliness of infants. It will also include the maintenance of WASH facilities in schools, health facilities and households, with special attention to girls and the most vulnerable children, including those with disabilities, as well as a response to the additional needs generated by COVID-19.

40. The programme will continue to support the coordination of the humanitarian sector and humanitarian response in an impartial, neutral and inclusive way. System and capacity restoration and rehabilitation strategies will link humanitarian and resilience objectives by emphasizing equity and inclusiveness in investments, and local participation in decision-making, maintenance and developing climate-resilient systems.

Adolescent development and participation

- 41. The programme will capitalize on existing systems to reach adolescents aged 10 to 19 years, especially those who are vulnerable (including those with disabilities), and is aimed at reducing their vulnerability and stress, improving their resilience and increasing their opportunities for participation and the acquisition of learning and skills.
- 42. Strategies focus on integrating an adolescent-focused agenda throughout policies, plans and services to ensure equitable, inclusive access to mechanisms and platforms for participation, learning and skills development, thereby contributing to social cohesion. Existing structures, such as integrated learning centres, will be strengthened. A cross-sectoral strategy will also enable the social, civic and digital engagement of adolescents and promote co-creation with young people on issues that affect them. Coordination will be made with various sectors for increased access to physical and mental health, education and protective services. Innovative approaches and the greater use of peer-to-peer groups, especially for girls, will enable adolescents to create their own opportunities.

Social inclusion

- 43. The programme will be aimed at strengthening institutions and mechanisms to effectively address the multiple vulnerabilities faced by the most disadvantaged children through the generation of evidence and policy advocacy for more inclusive, equitable and quality social services, as well as a humanitarian social protection response. The main barriers include the fragmentation of the existing social protection system at the policy, programme and administrative levels; inadequate and inefficient investments in children; a lack of relevant data and analysis to inform policy design; the lack of standardized methodologies to measure child poverty; and the lack of a child poverty monitoring system. The programme coordinates UNICEF evidence-generation and advocacy on public finance management across all programme areas.
- 44. Strategies include technical support for the design and implementation of a national child poverty monitoring system and of child-centred, inclusive and integrated social protection programmes; the transfer of global knowledge and best practices to strengthen national capacities in public finance management and child-friendly budgeting; the provision of humanitarian social protection for children who are most affected by the crisis, in particular children with disabilities; and technical assistance to enhance the shock-responsiveness of the national social protection system in light of such impacts as the economic downturn and COVID-19. The programme will support effective investment in children and enhanced monitoring and evaluation capacity of relevant national partners. The generation of evidence on child poverty and gender inequality will inform advocacy for coherent, multisectoral investments in social protection.

Emergency capacity and field coordination

45. Emergency capacity, coordination and response are mainstreamed in programmes, with dedicated capacity for overall coordination. The country office's emergency preparedness platform will be kept updated. UNICEF will contribute to the annual Humanitarian Needs Overview and the Humanitarian Response Plan, led by the Humanitarian Coordinator and the Office for the Coordination of Humanitarian Affairs, while continuing to lead the nutrition, WASH and education sectors and the Child Protection Area of Responsibility. UNICEF will fulfil the Core Commitments for Children in Humanitarian Action across sectors and across the intersectoral priorities of social protection, social cohesion and gender equality, while adhering to the humanitarian principles of humanity, impartiality, neutrality and independence.

Summary budget table^a

	(In thousands of United States dollars)				
Programme component	Regular resources	Other resources	Total		
Health and nutrition	709	13 250	13 959		
Education	709	10 750	11 459		
Child protection	756	1 415	2 171		
Water, sanitation and hygiene	488	13 250	13 738		
Adolescent development and participation	535	835	1 370		
Social inclusion	669	1 250	1 919		
Programme effectiveness	576	1 500	2 076		
Total	4 442	42 250	46 692		

^a Emergency funding is not included in this table; it is expected to be \$453 million distributed across all programmes.

Programme and risk management

- 46. The country programme is coordinated by UNICEF with the relevant national authorities and the Planning and International Coordination Commission. The present document serves as the primary unit of accountability to the Executive Board for the alignment of results with resources allocated to the programme at the country level. Accountabilities of managers at the country, regional and headquarters levels with respect to country programmes are prescribed in the organization's programme and operations policies and procedures.
- 47. Risks will be assessed at least twice a year given the complex programming environment and the unpredictability of the humanitarian situation. A risk reduction plan will be implemented through the enterprise risk management system and the emergency preparedness platform. Mitigation measures combine capacity strengthening with monitoring, oversight and corrective actions. The primary external risks include continued hostilities and crisis; hyperinflation and economic recession; the limited capacity of partners; complexity in delivering support and assistance; epidemics; climate change and weak natural resource management; and conditions that restrict humanitarian access.
- 48. Mitigation measures also include strengthening preparedness and the resilience of local systems and communities while continuing humanitarian coordination,

assessment, monitoring and response and risk communication and community engagement. UNICEF will engage directly, to the extent possible, with communities and households so that programmes are implemented according to needs, while upholding humanitarian principles. Those principles will also be applied in undertaking assessments, prioritizing needs and determining population groups and geographic locations for the provision of assistance. Inter-agency due diligence will be conducted if assistance is being considered in locations in which there are credible allegations of violations of human rights or of the Staff Regulations and Rules of the United Nations.

49. Internal risks, such as under-resourcing, will be addressed through a resource mobilization strategy that includes funding from diverse sources. Risks related to management and accountability for cash and supply transfers will be mitigated through the use of the harmonized approach to cash transfers. This includes training, along with vigilant oversight and use of the UNICEF global procurement system. The risks of sexual exploitation and abuse will be mitigated through an annual prevention and response plan for staff and relevant partners.

Monitoring, learning and evaluation

- 50. Monitoring and evaluation will be based on the results and resources framework and aligned with the UNSF and the costed evaluation plan. Accurate current and nationally representative data are difficult to obtain. UNICEF will therefore make investments to increase the availability of data and to measure progress towards achievement of the Sustainable Development Goals and the Goal Areas of the UNICEF Strategic Plan. Humanitarian indicators consider the Core Commitments for Children in Humanitarian Action and are aligned with the Humanitarian Response Plan; the three-year targets are necessarily provisional.
- 51. Strengthened monitoring systems will continue to assess changes in the situation of children and increase the use of real-time technology. UNICEF works in coordination with the Government, under the UNSF, on approaches to data collection, analysis, monitoring and the use of evidence to promote equity. Data sources include rapid assessments, surveys, administrative data, relevant national partners' information systems, and research and evaluation. Monitoring mechanisms include those of UNICEF and its partners, independent third-party systems, community feedback and accountability to affected populations.

Results and resources framework^a

Syrian Arab Republic – UNICEF country programme of cooperation, 1 July 2022–31 December 2024

Convention on the Rights of the Child: Articles 1–3, 6–10, 12–15, 17, 19, 23, 26, 29, 31, 34, 36, 39, 40

National priorities: Strategic Plan "Syria 2030"

Sustainable Development Goals: 1.3, 1.4, 1.b, 2.2, 3.2, 3.8, 3.b.1, 3.2, 4.1, 4.2, 4.5, 4.7, 4.a, 5.1, 5.c, 5.3, 6.1.1, 6.2, 6.3, 6.b, 16.1, 16.2, 16.3, 16.7, 17.3, 17.6, 17.18

United Nations Strategic Framework (UNSF) outcomes involving UNICEF:

By the end of 2024:

- 1. Improved, equitable, inclusive and safe access to quality basic services.
- 2. Better access for people, especially the most vulnerable, to social protection services, sustainable livelihoods, and inclusive and equitable socioeconomic recovery.
- 3. Improved living conditions of displaced people, returnees and affected communities.
- 4. Vulnerable people's resilience is enhanced through increased institutional responsiveness in planning and providing services.

Related UNICEF Strategic Plan, 2022–2025 Goal Areas: 1–5

UNSF outcomes	UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resource (RR), other resources (OR) (In thousands of United States dollars) RR OR Total		ar resources (OR) (In es dollars)
1, 2, 3 and 4	1. More newborns, young children and adolescents, especially those most at risk, benefit from equitable, resilient health and nutrition services	Percentage of children 0–11 months vaccinated with three doses of diphtheriatetanus-pertussiscontaining vaccine/or pentavalent vaccine, nationally B (2020): 68% T (2024): 90%	Ministry of Health (MoH) reports	1.1 Child-friendly and gender responsive health and nutrition policies and strategies are adopted. 1.2 Primary and referral health and nutrition services are enhanced to provide equitable, high-impact	Ministries of: • Health • Higher Education and Scientific Research • Information	709	13 250	13 959

^a The country context has made it difficult to obtain up-to-date and reliable data for the entire country. The baselines and targets provided are therefore provisional or still being determined.

	B (2018): 23.7 per 1,000 live births T (2024): 21 per 1,000 live births Percentage of children under 5 years who are stunted B (2018): 12.6% T (2024): 7.6% Number of children aged 6–59 months who receive micronutrient powder B (2019): 462,863 T (2024): 850,000		continuum of care. 1.3 Parents and other caregivers have the required knowledge and motivation to seek health and nutrition services. 1.4 Children and women in humanitarian situations have access to health and nutrition services.	Coordination Commission (PICC) Syrian Commission for Family Affairs and Population (SCFAP) Relevant United Nations agencies Syrian Arab Red Crescent (SARC) Relevant non- governmental organizations (NGOs)/ international non- governmental organizations (INGOs) Relevant private sector Relevant research organizations Relevant research organizations Relevant media				
2. More girls and boys, especially the most	Primary school gross enrolment ratio (by sex and governorate) *	Education Manageme nt	2.1 Education systems and institutional capacity are	Ministries of: • Education • Culture	709	10 750	11 459	

Indicative country

programme outputs

and high-quality child

services across the

continuum of care.

Means of

verification

Key progress indicators,

baselines (B) and targets

children under 5 years*

Mortality rate for

Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In

thousands of United States dollars)

RR

OR Total

Major partners,

Planning and

International

Coordination

partnership

frameworks

1, 2, 3 and 4

UNSF outcomes

UNICEF outcomes

continuum of care.

across a

UNSF outcomes	UNICEF outcomes	Key progress indicators, baselines (B) and targets NICEF outcomes (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	programme (RR), or	ve resources by outcome: regulater resources of United States.	ar resources (OR) (In
		Number of girls and boys who have experienced violence reached by health, social work or justice/law enforcement services supported by UNICEF B (2021): 0 T (2024): 20,000 (of which 10% are children with disabilities) (50% girls)		violence against and abuse, exploitation and neglect of children. 3.2 Girls, boys, and women at risk of violence and exploitation have equitable access to quality integrated child protection and gender-based violence (GBV) prevention and response services. 3.3 Children, parents and communities have increased knowledge, motivation and capacity to promote and apply practices to protect themselves and reduce violence. 3.4 Girls, boys and women affected by humanitarian crisis are protected from all forms of violence and receive quality child protection and GBV services.	• Interior PICC SCFAP Relevant United Nations agencies SARC Relevant NGOs/INGOs Relevant private sector Relevant research organizations Relevant media			
1, 2, 3 and 4	4. Children and their families use safe, affordable and sustainable water and sanitation services	Proportion of the population using basic safe drinking water services* B (2020): 93% T (2024): 95%	Governme nt, UNICEF and partners' reports	4.1: Mechanisms and systems are strengthened to plan, budget, coordinate and implement gender-responsive, equitable,	Ministries of: • Water Resources • Local Administrati on and	488	13 250	13 738

UNSF outcomes	UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resour (RR), other resources (OR) (In thousands of United States dollars RR OR Total		
	productive and resilient Syrian society.	Number of adolescent girls and boys participating in age-and gender-sensitive learning and innovative skills-building programmes and opportunities * B (2020) (F): 0 B (2020) (M): 0 T (F): 150,000/year (6% are girls with disabilities) T (M): 150,000/year (6% are boys with disabilities)		capacities and employability. 5.3 Adolescents are increasingly aware of their right to participate and have opportunities for meaningful engagement and systematized participation. 5.4 Young people are protected, supported and mobilized in humanitarian settings and participate in resilience-building programmes.	Relevant United Nations entities SARC Relevant NGOs/INGOs Relevant private sector Relevant research organizations Relevant media			
1, 2, 3 and 4	6. Children, especially the most vulnerable, benefit from enhanced evidence-based, inclusive and shock-responsive national integrated social protection and poverty-reduction policies and programmes.	Number of children with disabilities benefiting from integrated social protection systems B (2021): 11,000 T: 12,000 per year	Integrated Social Protection Manageme nt Informatio n System and MOSAL reports	6.1 National capacities are strengthened for regular measuring, monitoring and reporting on child poverty. 6.2 National and subnational capacities for designing and implementing integrated and child-sensitive social protection programmes and public finance management are strengthened. 6.3 The most vulnerable children are reached by equitable	MoSAL PICC Relevant United Nations entities SARC Relevant NGOs/INGOs Relevant research and academic institutions	669	1 250	1 919

UNSF outcomes	UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resource (RR), other resources (OR) (In thousands of United States dollars) RR OR Total		
				humanitarian social protection schemes.				
	7. The country programme is efficiently designed, coordinated, managed, and supported to meet quality programming standards in achieving results for children	Performance scorecards meet organizational benchmarks B (2021): 92% T: 100%	inSight	Programme coordination, communication, advocacy, partnerships and operations support.	PICC	576	1 500	2 076
	Total resources						42 250	46 692

^{*}Outcome indicator aligned with the United Nations Strategic Framework indicator.