

REGIONAL ANALYSIS REPORT 2010

EU Strategy Status



REGIONAL OFFICE FOR CENTRAL AND EASTERN EUROPE AND COMMONWEALTH OF INDEPENDENT STATES (CEEICIS)

GENEVA, FEBRUARY 2011

GENEVA, FEBRUARY 2011**TABLE OF CONTENTS**

1. Executive Summary
2. Trends and Progress in the Region as affecting Children and Women
3. Analysis of programme strategies and results in the region
4. Management and Operations
5. Studies, Surveys, Evaluations and Publications completed in 2010
6. Innovations and Lessons Learned
7. Special Report: South-South Cooperation
8. Report on UN Reform and Inter-Agency Collaboration

LIST OF ACRONYMS

AIDS	Acquired Immune Deficiency Syndrome
ARV	Antiretroviral treatment
CDC	Center for Disease Control and Prevention
CEECIS	Central and Eastern Europe and Commonwealth of Independent States
CEDAW	Convention on the Elimination of All Forms of Discrimination against Women
CERF	Central Emergency Response Fund
CFS	Child Friendly Schools
CO	Country Office
CRC	Convention on the Rights of the Child
CSR	Corporate Social Responsibility
C4D	Communication for Development
DFID	Department for International Development (of UK Government)
DIPECHO	European Commission's Disaster Preparedness Programme
DPP	Division of Policy and Practice
EC	European Commission
ECD	Early Childhood Development
EECA	East Europe and Central Asia
EFA	Education For All
ENP	European Neighborhood Policy
EU	European Union
EU-SILC	EU Survey on Income and Living Conditions
EVA	Especially Vulnerable Adolescents
FTI	Fast Track Initiative
GAVI	GAVI Alliance (formerly Global Alliance for Vaccines and Immunisation)
GDP	Gross Domestic Product
GER	Gross Enrollment Rate
GFATM	Global Fund to Fight AIDS, Tuberculosis and Malaria
GTZ	Gesellschaft für Technische Zusammenarbeit
HIV	Human Immunodeficiency Virus
HQ	Headquarters
H1N1	Influenza A (H1N1) virus type

IDU	Intravenous Drug Users
IMCI	Integrated Management of Childhood Illnesses
IMF	International Monetary Fund
IMR	Infant Mortality Rate
LBD	Life Birth Definition
LSHTM	London School of Hygiene and Tropical Medicine
MARA	Most At Risk Adolescents
M&E	Monitoring and Evaluation
MCH	Maternal and Child Health
MICS	Multiple Indicators Cluster Survey
MMR	Maternal Mortality Ratio
MoH	Ministry of Health
NER	Net Enrollment Rate
NGO	Non Governmental Organisation
NSO	National Statistical Office
ODA	Official Development Assistance
OSCE	Organisation for Security and Cooperation in Europe
PMTCT	Preventing Mother-To-Child Transmission of HIV
RDT	Regional Director's Team
RHDR	Regional Human Development Report
RO	Regional Office
STI	Sexually Transmitted Infections
TOR	Terms of Reference
TransMONEE	Transition Monitoring In Eastern Europe
UN	United Nations
UNAIDS	The Joint United Nations Programme on HIV/AIDS
UNCT	United Nations Country Team
UNDP	United Nations Development Programme
UNECE	United Nations Economic Commission for Europe
UNESCO	United Nations Educational, Scientific and Cultural Organisation
UNFPA	United Nations Population Fund
UNODC	United Nations Office on Drugs and Crime
USAID	United States Agency for International Development
USI	Universal Salt Immunisation
U5MR	Under 5 Mortality Rate
WASH	Water Sanitation and Hygiene
WB	World Bank
WHO	World Health Organisation

SECTION ONE - Executive Summary

The key achievements of the Regional Office in 2010 included:

- Placing the equity and social inclusion on top of the regional agenda within the UN agencies,
- Increased focus on minorities and socially excluded and marginalized children, especially the Roma, and children with disabilities;
- Effective advocacy revealing the true nature of challenges in the region through the publication “Blame and Banishment: the underground HIV epidemic affecting children in Eastern Europe and Central Asia;
- Defining UNICEF’s regional strategy for strengthening health systems in the region; and
- Effective and timely response to the polio outbreak in Central Asia and support to the Kyrgyzstan emergency during the summer 2010.

The most significant shortfalls in the achievement:

- The use of the external monitoring and evaluation facility is well below optimal level with corrective action to be undertaken in 2011;
- The collaboration on issues related to UN coherence has not been optimal;
- The discussion on different models of engagement within the region has not yet led to wider organization wide discussion.

The most important collaborative partnerships in which UNICEF has been involved to achieve results for children:

- The cooperation with the European Union and the European commission in leveraging resources for children and influencing EU/EC policies for children;
- The collaboration with the Council of Europe on Building a Europe For and With Children strategy, including the campaign to stop sexual violence against children, in child friendly justice, social inclusion of Roma children, and child and youth participation. The collaboration with Council of Europe has included close cooperation and support by UNICEF at regional and country level to the Council of Europe High Commissioner for Human Rights;
- UNICEF has initiated substantive engagement with a number of national parliaments. This work will be further strengthened and expanded to the regional level in 2011.

Headlines 2010

- National averages in MDG progress are masking serious disparities within the countries;
- Ethnic minorities, especially the Roma, children with disabilities, and other marginalized groups face considerable disparities, stigmatization and other forms of exclusion;
- The only region where HIV prevalence is still increasing;
- 75 per cent of world’s polio cases were in the region in 2010. The re-emergence of polio is a clear sign of failure of health systems to reach all children;
- Highest rates of children growing up without parental care - institutionalization of children is a key form of discrimination of minorities and of infants and children with disabilities;
- Forced child labour remains a key challenge in Central Asia;
- Extremely low learning outcomes due to low quality of education and teacher quality.

SECTION TWO - Trends & Progress in the Region affecting Children & Women

Harmonization with International Standards as per CRC and CEDAW

All countries have reported continued harmonization with international standards as mandated by the CRC and CEDAW. It was reported that effective **implementation of domestic legislation and policies** have some way to go. There is also a need to strengthen public administration and monitoring of Child Rights through Ombuds Offices and similar independent mechanisms. In Montenegro and Croatia, the Council of Children is involved in the monitoring of the CRC. In Bosnia and Herzegovina, this is further expanded in a decentralized context, through CRC implementation and monitoring in 20 municipalities and NGOs. Romania has made some efforts but encountered difficulties in finding an appropriate home for their CRC monitoring system. Civil society and the media have slowly advanced their roles as independent agenda setters, especially in the neighboring countries of Europe. Some countries in the region, though, continued to face challenges in their relations with the independent press.

Uncertainty about the potential for recovering from the Financial and Economic Crisis

It is now widely acknowledged that the Region was severely hit by the global financial crisis¹. According to joint IMF/WB analysis², expected real GDP levels in 2010 and 2011 are respectively 15% and 17% below pre-crisis rates. GDP recovery has been strong over 2010 in Belarus, Moldova, Russian Federation, Ukraine and Turkey, led by a rebound in exports, while domestic demand has remained weak in most countries, but especially in Bulgaria, Croatia and Romania. Higher fuel prices are leading growth recovery in oil and gas exporting countries³, while importing countries⁴ still face higher burdens on their energy bills and higher current account deficits. Similarly, food prices hikes are benefiting some countries like Kazakhstan (a net exporter of wheat), but are likely to have negative effects on food security in other countries like Tajikistan. Moreover, if higher international prices are passed on to domestic consumers, in Armenia, Georgia, Kyrgyzstan, Tajikistan and Uzbekistan poor households that heavily on wheat and wheat-related products will bear the brunt. Strong trade and investment linkages with the Eurozone continue to make South-Eastern countries particularly vulnerable to developments in European economies.

In the aftermath of the crisis, the need for fiscal consolidation was putting renewed pressure on public expenditure in many countries. Of the eight⁵ countries in CEECIS that experienced at least a 5% contraction in real GDP in 2009, the fiscal deficit increased by on average 4.1% of GDP in 2009 because of the decline in revenues. **Fiscal consolidation** has occurred as a result largely of cutting expenditure in 2009. Russian Federation—rich in hydrocarbon revenues—was an exception, continuing its fiscal expansion in 2009 and 2010. Some countries increased or protected social expenditure in 2010 (Armenia, the former Yugoslav Republic of Macedonia, Moldova, Russian Federation, Tajikistan, Belarus, Kazakhstan). Other countries cut public sector wages or social benefits to reduce their budget deficits (Croatia) sometimes in order to meet the IMF's budget deficit criteria and qualify for additional tranches of Fund aid (Bosnia and Herzegovina). These strategies may lead to decreasing imports and consumption thus reducing tax revenues (Croatia, Montenegro). As UNICEF research⁶ has shown, low pay or wage arrears are a key factor behind teacher absenteeism, informal fees and brain drain, which in turn is a cause for poor child outcomes, especially in rural areas. Countries in the Region present comparatively large drops in education and health spending during 2009–10, with substantial impact on human capital and future growth prospects. Expenditure reforms on the financing of education, health and child protection services have been initiated or boosted in several countries in CEECIS and it will be critical to ensure that savings are invested to achieve better outcomes for children and vulnerable families.

¹ International Monetary Fund 2010, *Regional Economic Outlook . Europe Building Confidence*, October 2010. International Monetary Fund 2010, *Regional Economic Outlook . Middle East and Central Asia*, October 2010. World Bank and International Monetary Fund 2010. *How Resilient have Developing Countries been during the Global Crisis?* Background paper prepared in September 2010.

² World Bank and International Monetary Fund 2010. *How Resilient have Developing Countries been during the Global Crisis?* Background paper prepared in September 2010.

³ Azerbaijan, Kazakhstan, Russian Federation, Uzbekistan and Turkmenistan

⁴ Armenia, Georgia, Tajikistan

⁵ Ukraine, Armenia, Russian Federation, Romania, Montenegro, Moldova, Croatia and Bulgaria

⁶ Ortiz et al-UNICEF 2010. *Prioritizing Expenditures for a Recovery for All*. UNICEF Social And Economic Policy Working Paper. October 2010. Ronald Mendoza-UNICEF 2010. *Inclusive Crises, Exclusive Recoveries and Policies to prevent a double whammy for the poor*. UNICEF Social And Economic Policy Working Paper. May 2010.

The EU Lisbon Treaty which entered into force in December 2009, provides for the first time concrete policy framework for Child Rights within the EU, specifying objectives for Member States internally and externally. In addition, the **European Charter of Fundamental Rights** became binding and the EU became a party to the European Convention on Human Rights which has many articles relevant to children. The EU appointed its first EU Commissioner for Justice, Fundamental Rights and Citizenship and the European Fundamental Rights Agency further strengthened its work on child rights indicators. A public consultation on Child Rights took place in the summer; UNICEF participated and provided key inputs underlining global issues as well as those specific to regions/countries. This will feed into the development of an EU strategy on children's rights expected in early 2011⁷. While clearly positive and demonstrating developments in the right direction, much remains to be seen on how much further children's rights can be advanced through strengthened EU mechanisms.

In CEECIS, Country Offices and the Regional Office remained fully engaged in processes related to **EU accession** and the **European Neighbourhood Policy** (ENP). UNICEF successfully advocated on general child rights issues and to put these on EU-supported country agenda, in particular, issues related to **Roma children, children in institutions** and other vulnerable children, the reform of **juvenile justice** systems and **Early Childhood Development**. In 2010, the Commission produced its Opinion Reports on the application for membership. Montenegro received a positive review, subsequently upgrading its status to a candidate country, joining Croatia, the former Yugoslav Republic of Macedonia and Turkey. Enlargement is one of four priorities of the Hungarian Presidency of the Council during the first half of 2011 which is expecting to conclude accession talks for Croatia during this period. Serbia has also applied for membership and 2011 is a crucial year leading up to the review of its application. Under ENP, progress was achieved in 2010 in negotiations of Association Agreements for ENP countries (Moldova, Ukraine in particular, but also in Armenia, Azerbaijan, and Georgia), which strengthened the process of economic and political integration of partner countries into Europe, notably through enhanced mobility of citizens, economic/trade agreements, as well as strengthening the dialogue on human rights and the rule of law. UNICEF is contributing to the strategic review of the ENP. Uzbekistan also successfully sustained a strategic engagement with the EU on reform of MCH.

Humanitarian situation in the region

April and June witnessed the violent overthrow of the Kyrgyzstan government, which was followed by several days of communal violence in the south of the country, resulting in the internal displacement of 300,000 people and an outflow of 75,000 refugees seeking shelter in Uzbekistan⁸. The violence resulted in the destruction of schools, clinics, houses and businesses, and disruption of essential services, such water and electricity, and food supplies.

Of particular concern is the 458 cases of **polio** reported in Tajikistan, some 89% of them in children under 15 years of age⁹. There were also reported cases in neighboring countries in Central Asia and in the Russian Federation. It is the first outbreak since the European Region was certified polio-free in 2002¹⁰.

In addition to chronic situations in Central Asia, such as vulnerability to new energy crises as electricity cuts and dropping water levels in dams, in CEECIS **earthquakes, flood/mudslides**, and **extreme weather** emergencies pose the most acute hazards. In January, a combination of floods and earthquakes in the Pamir Mountains and in southern Tajikistan resulted in displacement of families, destruction of schools and public health facilities, and loss of life. Severe heat waves sparked forest fires and caused the widespread destruction of property and crops in parts of Central Europe and Russian Federation. The smog caused worsening health conditions, such as respiratory problems, severe dehydration and heat exhaustion. In late 2010, a number of countries in South Eastern Europe, including Albania, Bosnia and Herzegovina, the former Yugoslav Republic of Macedonia, Montenegro and Serbia, were affected by severe floods.

⁷ In February 2011, the EC published An EU Agenda on the Rights of the Child and while indicating a number of key priority actions by the EU, it fell way below the expected strategy.

⁸ "UN Kyrgyzstan Flash Appeal, June 2010"

⁹ Global Polio Eradication Initiative, 'October/November 2010: Facts & Figures', World Health Organization, Geneva, 9 November 2010, <www.polioeradication.org/MediaRoom/Monthlysituationreports.aspx>, accessed 1 December 2010.

¹⁰ World Health Organization, 'Polio in Central Asia and the North Caucasus Federal Region of the Russian Federation', WHO, Geneva, 13 November 2010, <www.who.int/csr/don/2010_11_13/en/index.html>, accessed 30 November 2010.

Concerns remained with regard to the complex **security and humanitarian** situation in many parts of the Caucasus. Frozen conflicts exist over territorial disputes between Azerbaijan and Armenia, along with the situation in two territories of Georgia - South Ossetia and Abkhazia.

Challenges and Opportunities in achieving MDGs and the Millennium Declaration

- **Millennium Development Commitments relating to children and women**

Child Care

Several countries report that the global economic crisis has had a particular negative impact on **Roma children**. Family break-down in its different forms (baby **abandonment and relinquishment** as well as **deprivation of parental rights**) continues to highlight the failure of child and social systems to re-focus their intervention on supporting poor families in order to prevent family separation. The Region continues to record the highest rates in the world of **children placed in formal care**, with over 1.3 million children placed in any type of formal care, while the flow of children going into formal care continue to increase¹¹ as a direct consequence of the economic crisis. Currently, due to increasing poverty new trends in patterns of **adult migration** appear in the region, particularly in Central Asia, leaving more **children left behind** unprotected and ignored by social services unable to develop outreach capacity.

Due to heavy financial constraints governments are not in a position to finance the development of new services (i.e. family and child support services) and it has remained a challenge for them to reallocate financial resources locked into residential care institutions. Consequently, progress can be noticed only in countries where external donors, mainly the European Commission, have substantially contributed to the reform of child care services; this has been the case in Bulgaria where a major de-institutionalisation programme has been launched in 2010, and similar trends can be noticed in Georgia and Moldova. Georgia is one of the few countries receiving substantial funding from external sources, such as bilaterals and UNICEF National Committees, for supporting its reforms of the child care system. This has led as well to significant advances in the child protection agenda during the reporting period.

Juvenile Justice

Most juvenile justice systems throughout CEE CIS are to different extents undergoing reforms providing better protection for minors and gradually improving their compliance with international standards. Due to lack of capacity, adequate resources and sometimes political will, **alternatives to deprivation of liberty** are still poorly developed throughout the region and deprivation of liberty remains the norm. Some countries have achieved important progress in this respect though, as in Moldova, for example, where the numbers of children in jails decreased by 60% in 2010 as compared to 2006¹². The system of “protective custody” by administrative bodies that operate outside the justice system with few legal guarantees for children under the age of criminal responsibility or having committed petty offenses remains a serious issue in several countries of our region including Bulgaria and Ukraine. In general, data related to juvenile justice continues to be difficult to access and is often unreliable, especially in Central Asia. There are some concerns that the rate of crime committed by minors in South-East Europe might be on the increase and could lead to an increase to the number of minors placed in detention in forthcoming years.

Only a few justice systems in the region have child-sensitive procedures for dealing with child victims and witnesses of crime. In general, police, prosecutors, judges, lawyers, social services and health professionals have not been trained in how to guarantee children’s rights. The court environment is rarely adapted to children’s needs; it is often intimidating and can be dangerous (e.g. requiring a child victim to directly confront the accused). **Access to justice for children** whose rights have been violated also remains a challenge due to legal, social, cultural and practical constraints.

Violence against children

¹¹ UNICEF, TransMONEE 2009

¹² Ministry of Justice of the Republic of Moldova, 2010

Children in CEECIS continue to be affected by **violence in homes, schools, communities and institutions**. In the region, violence is often linked with social exclusion and multiple, compounding vulnerabilities – poverty, lack of parental care, HIV infection, drug use, homelessness and ethnicity. These vulnerabilities are still poorly addressed as benefits and services remain inaccessible for these children, as well as children from minority groups and socially marginalized families (such as poor single mothers). Even if data are missing, **migration of children** and **child labour** seem to be increasing as well in the Region.

- **Millennium Development Goals**

MDG 1 (Eradication of Extreme Poverty and Hunger)

Overall Poverty¹³: In CEECIS, the magnitude and depth of poverty continues to differ substantially across its subregions and countries. To varying degrees, countries still have pockets of extreme poverty, with segments of the population who suffer from insufficient caloric intake and micronutrient deficiency, and are usually unemployed, deprived of decent shelter and inadequately covered by basic social protection schemes. The highest absolute numbers of the poor are in the middle-income economies, notably in large countries such as Russian Federation, Turkey and Ukraine, but it is the lower-income economies of the region that show the highest proportion of population living in a situation of extreme poverty. Ethnic and **gender discrimination** are also significant factors explaining poverty in the region. The **Roma population** in central and southern Europe suffers from multiple acute forms of social exclusion. In Serbia, Romania and Albania, the percentage of the population living on under \$2.50 per day is between 20 and 40 per cent in Roma communities, while the same indicator is below 5% for the rest of the population.¹⁴ In central Asian rural societies, customary law and societal norms tend to discriminate against women, severely limiting women's rights to own land and to access land-related resources.

Poverty also has an uneven spatial distribution, mostly affecting rural areas and small towns, especially those that grew around industrial enterprises suffering from decline owing to the economic crisis. A substantial number of the poor in countries with transition economies live in rural households for whom **labour migration** represents the main coping strategy. In the region, 31 million people have migrated to work in another country. Remittances sent by migrant workers to their families are a major source of livelihood for large parts of the population in Central Asia, South Caucasus, the Republic of Moldova, Ukraine and the Western Balkans. In 2009-2010, poverty was increasing in Armenia, Bulgaria, Croatia, the former Yugoslav Republic of Macedonia, Montenegro, Serbia and Turkey while in Belarus, Kazakhstan, Moldova, Russian Federation and Tajikistan there has been some apparent improvement in poverty rates¹⁵. The rate of improvement in Kazakhstan, however, has been slowed down by the crisis; in Moldova poverty is still increasing in rural parts of the country and in Russian Federation poverty is expected to rise again as a result of the recent drought.

Child poverty¹⁶ rates in CEECIS countries vary with household characteristics, such as the number of children and age of the youngest child, the number of working age and pension age adults in the household, the characteristics of the household head and whether the household is in a rural area. In countries for which data are available, the poverty rates for children, or for households with children, in 2009-2010 were disproportionately high. In only three of these countries (Belarus, the former Yugoslav republic of Macedonia and urban areas of Moldova) is there any indication that the situation may be improving. Even in these countries however, the position of children is far from secure. In Armenia, Bulgaria, Montenegro, Romania, Russian Federation and Uzbekistan child poverty is at least persistent and the data provided for Croatia, Serbia and Tajikistan indicate that it is increasing. In Kosovo¹⁷, **Roma Ashkaeli and Egyptian** children (3.4% of Kosovo's children) have higher risk of poverty than children of Serbian and Albanian ethnicity.

¹³ United Nations European Commission for Europe 2010 The MDGs in Europe and Central Asia: Achievements, Challenges and the Way Forward.

¹⁴ The poverty line of PPP 2.50 per person per day is considered by UNICEF and the World Bank as more appropriate than the international poverty line set at PPP1.25 for measuring and comparing extreme poverty in the region, taking into account additional costs for heating and calories intake in this part of the world. Innocenti Social Monitor 2009:

¹⁵ UNICEF Regional Office CEECIS Forthcoming in 2011. Analytical *Report on Child Poverty and Wellbeing during the financial crisis. One year later*. Based on the second round of questionnaires to monitor the impact of the crisis on children in 22 countries of CEECIS.

¹⁶ UNICEF Regional Office CEECIS Forthcoming in 2011. Analytical *Report on Child Poverty and Wellbeing during the financial crisis. One year later*. Based on the second round of questionnaires to monitor the impact of the crisis on children in 22 countries of CEECIS.

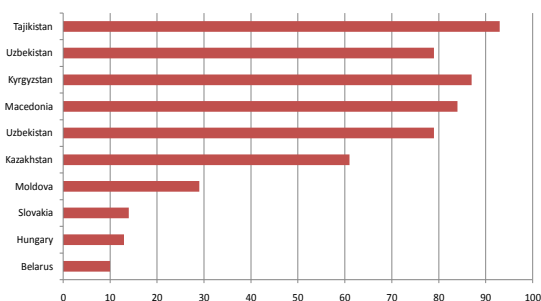
¹⁷ UNSCR 1244

Employment¹⁸ rate has continued to fall in 2010 in all countries of the region but Belarus, Kazakhstan, Russian Federation and Turkey. Although little statistical information is available, in the countries where employment rates continued to fall, increasingly reliance on informal employment to replace or supplement incomes was reported by UNICEF offices. Women are generally under-represented in the workforce and **women's employment rates are lower** than those of men. In countries where employment rates are recovering or increasing, the reduction in unemployment is more marked for men. In most countries it is people in the youngest age who are most affected by formal unemployment. This is largely attributed to a fall in job vacancies while the number of school and college leavers remains unchanged.

MDG 2 and 3 (Completion of, and Gender Equality in, Education – including EC Education)

The principal challenge with respect to **early education** continues to be limited provision which favours the privileged strata of society. Children from the lowest wealth quintiles, children living in rural areas, children with disabilities and children from ethnic minorities such as the Roma, continue to be excluded from pre-school opportunities. **Access** (all figures refer to GER¹⁹) to preschool education at 28% for Central Asia and 64% for Central and Eastern Europe continues to be low; average figures mask the wide range in access e.g. less than 10% in Bosnia and Herzegovina as compared to near universal coverage in Belarus or less than 9% in Tajikistan as compared to 39% in Kazakhstan.

**% Children Not Enrolled in
in Pre-primary Education**



Based on Net Enrolment Ratios. Source: EFA Global Monitoring Report, 2010

Despite the fact that the quality of preschool education continues to be hampered because of a variety of reasons - visible progress in the sector has been made in 2010. Governments have worked to widen access through formalizing one-year of pre-primary education. In Serbia and Albania, and through amending legislation and regulations to accommodate alternative cost-effective forms of provision e.g. through community-based centres and through half-day programmes e.g. in Kyrgyzstan and Moldova. Ministries of Education and Local Authorities have improved their capacities for early education governance and provision, as is evident from examples from Azerbaijan, Bosnia and Herzegovina, Moldova and Serbia. Early learning and development **standards** and improved, child-centered **curricula** have been developed and/or adopted in a number of countries including Azerbaijan, Georgia, the former

Yugoslav Republic of Macedonia, and Moldova among others.

According to the 2010 UNESCO Global Monitoring Report²⁰, **primary school enrolment** rates in CEECIS remain high, with most countries showing primary school NERs higher than 90% and therefore nearing realization of MDG 2. Between 1999 and 2007, primary school enrolment rates increased by 1% in Central and Eastern Europe and by 4% in Central Asia; the number of children out of primary school fell from an estimated 2.5 million in 2004 to 1.8 million in 2007. However, this figure does not include out-of-school adolescents of lower secondary age (which is estimated at about 1.5 million across the region) and secondary school age. In eleven countries, primary school enrolment actually **decreased** in 2007, which is likely a result of the deteriorating quality of education systems. Indeed, the results of the 2009 PISA²¹ assessment of 15 year-old students' learning achievement in 11 CEECIS countries confirm that students in the region continue to perform well below their peers in OECD countries, with Kyrgyzstan, Azerbaijan, Albania, Kazakhstan and Montenegro at the bottom of the ranking.

The relatively high average participation rates and the recent progress achieved in CEECIS in reducing their out-of-school population hide deepening sub-national disparities in **access** to, and **completion** of, basic education. There are **gender disparities**²², in favor of boys in Turkey and Tajikistan, which are not on track to achieve MDG 3, and in favor of girls in

¹⁸ UNICEF Regional Office CEECIS Forthcoming in 2011. Analytical Report on Child Poverty and Wellbeing during the financial crisis. One year later. Based on the second round of questionnaires to monitor the impact of the crisis on children in 22 countries of CEECIS.

¹⁹ EFA Global Monitoring Report. *Reaching the Marginalized*, UNESCO, 2010

²⁰ EFA Global Monitoring Report, *'Reaching the Marginalized'*, UNESCO, 2010

²¹ PISA 2009 Results – What Students Know and Can Do – Students Performance in Reading, Mathematics and Science – Vol.1, OECD, 2010

²² *Learning Achievements in the CEECIS Region – A comparative Analysis of the Results of the 2006 PISA*. UNICEF, 2009

some other countries, such as Armenia. In addition, specific groups of children continue to be excluded from school, particularly children who are affected by conflict, from economically disadvantaged families, from marginalized **ethnic** and/or linguistic groups (especially the Roma in Central and South-Eastern Europe) or those who have special educational needs. Educational enrolment among primary school age **Roma children** in Central and South-Eastern Europe is on average a quarter of the corresponding rate for non-Roma children and less than 1% attend university²³.

In CEECIS the majority of **children with disabilities** and special learning needs are systematically excluded from mainstream education, being segregated into special schools, residential institutions or their homes. Stigmatization and negative perceptions of disability as a defect have added to the obstacles faced by children with disabilities in getting access to education.

MDG 4 and 5 (Child and Maternal Mortality – including ECD)

The CEECIS Region is overall on track in achieving MDG 4 and is making some progress towards MDG 5. Four countries in the region – Albania, Serbia, the former Yugoslav Republic of Macedonia, and Turkey – have already achieved the MDG 4 target. However, Under 5 Mortality Rates are particularly high²⁴ in Central Asia and Southern Caucasus. In addition, in most countries U5MR is 50% to over 100% higher in families in the **poorest wealth quintile** compared to the richest. Similar inequalities occur by **gender**, level of maternal education, urban/rural residence, and **ethnic** or language group. Of particular concern is the situation of **Roma communities** in South-Eastern Europe, where the child mortality is often two times higher than national averages.

Infant and child mortality, as well as **maternal mortality** indicators, still suffer from incomplete recording and misclassification and therefore may underestimate deaths in some CEECIS countries, as shown by an increase in MMR and U5MR after correct classification is applied. Both Kyrgyzstan (in 2004) and Kazakhstan (in 2008) introduced the LBD which resulted in an increase of the official reported IMR in these countries. **Neonatal causes** contribute to over 60% of U5MR in all CEECIS countries²⁵, while the **main causes of maternal mortality** in CEECIS are haemorrhage, obstructed labour, sepsis and eclampsia, which means that in most countries the maternal mortality profile is still similar to that of developing countries.

Many CEECIS countries are witnessing a re-occurrence of **vaccine-preventable diseases**. Regional average for measles immunization coverage rate in under-one children has been consistently high in the past several years, however, MICS data reveals in-country **inequalities by wealth**, settlement, gender and mother's education. The **poliomyelitis outbreak** which erupted in Central Asia in April 2010 revealed the underlying weaknesses in immunization systems resulting from declined levels of population immunity. This was the first importation of wild poliovirus in the European Region since the occurrence of the last case in 1998 and certification of the region as polio-free in 2002. The disease burden became overwhelming particularly in Tajikistan, constituting 70% of the global case load at the peak of the epidemic.

More countries in the Region are moving towards addressing the high levels of **stunting** and the increase in **obesity** rates, among children and assessing young child feeding practices which impact on mortality rates. Such countries include Armenia, Albania, Azerbaijan, Bosnia and Herzegovina, Uzbekistan and Tajikistan. **Exclusive breast feeding** rates in Turkmenistan have increased by three-fold²⁶. In Romania a great achievement has been made in getting more hospitals certified as baby friendly with a total of 25 out of 41 hospitals as opposed to none just two years ago.

In the area of **young child survival, growth and development**, families play a critical role together with the health system, which through home visiting, outreach services and routine health contacts can support families with information and skills to promote positive health seeking behavior, improve infant and young child feeding, prevent accidents and injuries as well as provide a safe and stimulating physical and psycho-social environment. However, numerous factors curtail the health system's capacity to provide such services; some of these are the over-medicalized view of health and well-being, unrealistic and deteriorated home visiting/outreach provision, and inadequately skilled health service providers. Other issues related to impaired child development and social protection such as child abandonment, maltreatment and institutionalization are far from being effectively addressed and health systems are not doing enough to address these phenomena. A range of sources suggest that in many countries in the region **children are being abandoned in health facilities and institutions** by their parents – informally or formally, temporarily or permanently. Care for **children with**

²³ 'The Right of Roma Children to Education', UNICEF, Regional Office for CEECIS, 2011

²⁴ Levels & Trends in Child Mortality, Report 2010. UNICEF

²⁵ UNICEF SOWC 2010

²⁶ From country office reports

disabilities remains sub-standard. Poor professional qualifications of staff to tackle disability, including early intervention and referral, lack of community based services and rehabilitation facilities still result in widespread institutionalization and social exclusion.

Beyond the specific targets set by the Millennium Declaration, the CEECIS region is facing new or re-emerging phenomena which need to be addressed. **Mortality rates among children aged 5 to 18** represent a new challenge in the Region. **Injuries, violence, substance abuse** and death due to external causes, including transport accidents and suicide are major causes of morbidity and **mortality in adolescents and young people**.

Overall, poor access to health services negatively impact the wellbeing of children and contribute to child poverty. **Low public expenditures in health** persist in the region being below 50% of Total Health Expenditures in many countries, with particularly low expenditures²⁷ in Georgia, Tajikistan and Azerbaijan representing less than 5% of total government budgets. In most countries out-of-pocket expenditures represent about 40-50% of Total Health Expenditures, and is as high as 60-70% in Tajikistan, Azerbaijan, Georgia. Being by nature regressive and inequitable, out-of pocket expenditures expose families to poverty and catastrophic health expenditures.

MDG 6 (Combating HIV/AIDS)

The HIV/AIDS epidemic in CEECIS remains the **fastest-growing in the world** and it is unlikely that the HIV and Universal Access targets will be achieved. In fact, this is *the only* MDG that the Region may not be able to meet. Two countries, Russian Federation and Ukraine, have the largest HIV epidemics²⁸, and while **transmission rates** have stabilized over the last few years, the absolute number of people, including children, living with HIV continue to increase. Globally, five out of the seven countries with the highest HIV incidence rates (new infections) are in CEECIS: Armenia, Georgia, Kazakhstan, Kyrgyzstan and Tajikistan (with Bangladesh and the Philippines)²⁹. The epidemic is driven by **drug-related** and sexual transmission among young people socially excluded and **stigmatized populations** and, increasingly, women. Women now account for almost half of newly reported HIV infections.

According to the UNAIDS overview of the global³⁰ AIDS epidemic for 2010, an estimated 110 to 160 thousand people were newly infected with HIV during the year and regional prevalence is now estimated at 0.8%. Up to 1.6 million people were living with HIV in this region in 2009, approximately 600 000 more than in 2001 – a 66% increase (UNAIDS, 2009). A key concern for the future of the epidemic is the extraordinary levels of IDU in the population with 3.7 million people injecting drugs, a quarter of the world total. In the Russian Federation alone the number of IDUs per capita is twice as high as in the USA and eight times as high as China. Available estimates indicate that in Eastern Europe and Central Asia only 30% of people living with HIV are aware of their HIV status. This is also the only region in the world where AIDS-related deaths have been **continuously on the rise since 1990**, mostly as a result of unacceptably low access to ARVs (less than 18% of those in need).

Access to antiretroviral treatment is still among the **lowest in the world**, a dismal performance given the level of income in the Region. Stigma and discrimination that violate rights and dignity of people living with HIV, including affected children and families, are hampering progress in prevention, care and support. Government service providers often lack the capacity to address the needs of the most marginalized, yet in many countries there is a continued mistrust towards civil society organizations, many of which have been supported mostly thorough international financing, including Global Fund grants. During 2010 there have been numerous examples of tensions between civil society organizations working on social mobilization and rights-based approaches and official government policies and positions including on issues such as repeated interruptions of ARV treatment, policies related to HIV prevention, sexual health and harm reduction.

Although there has been important progress in the reduction of rates of Mother to Child Transmission of HIV in the Region, as more and more women become HIV infected, the absolute numbers of children born to HIV positive mothers is increasing, particularly in the most affected countries and amongst the most excluded and marginalized women. Among HIV positive women up to 50% of pregnancies were unplanned or unwanted, contributing towards high rates of abortion and child abandonment into institutional care. In Central Asia there have been no new reports of outbreaks of HIV infections in pediatric hospital settings in 2010, but important weaknesses in injection safety and within health systems

²⁷ Health for All Database, WHO

²⁸ Global Report, UNAIDS Report on the Global AIDS Epidemic, 2010

²⁹ AIDS Scorecards, Overview on the Global AIDS Epidemic, UNAIDS, 2010

³⁰ AIDS Scorecards, Overview: UNAIDS Report on the Global AIDS Epidemic, 2010

remain. Although UNICEF supported swift action to address the outbreaks that occurred in Kazakhstan, Uzbekistan and Kyrgyzstan, there have been numerous reports among development partners indicating refusal by health workers to conduct further HIV testing in children for fear of punitive action against them.

Adolescents and young people in the Region face increased risks and vulnerabilities as a result of social and economic pressures linked to increasing **unemployment**, lack of opportunities and gender disparities further accelerated by the economic crisis. Unemployment rates in the CEECIS region are second highest in the world. The feelings of hopelessness and lack of support structures among young people is reflected in the **extremely high suicide rates** that the Region faces. Nine out of 12 countries in the world with the highest suicide rates are in the Region.

For **children living and/or working on the streets** HIV rates are extremely high. HIV prevalence close to 40% was found in 15-19 year old street children in St Petersburg, Russian Federation and close to 30% in Odessa, Ukraine.

MDG 7 (Environmental Sustainability)

There is a clear link between addressing environmental challenges and making progress in achieving MDGs on poverty and health. Decline in the **quality of water** is becoming an urgent issue that needs to be addressed. While official sources³¹ state that in 2007, 93% of the population had access to potable water, this figure masks serious problems with water supply, particularly in villages. Rural areas of Kyrgyzstan³² now obtain 70% of their drinking water from often unsafe surface sources. This is a sharp contrast to Soviet times when 90% was abstracted from groundwater aquifers. In Georgia³³, 60% of water facilities and 50% of wastewater networks and sewers are estimated to be beyond their service lives. Approximately 25% of the rural population does not have access to safe water, mainly due to problems with water quality and irregularity of supply. Of the centralized systems it is estimated that about 15% does not have access to safe water using these same (non-MDG) criteria. Thus, about 40% of the population can be considered to not have access to sustainable safe water. The situation in rural areas of Tajikistan is especially worrying: official³⁴ water supply coverage rate of 61% is significantly lower than the rates in neighboring Central Asian countries, and 15% lower than the developing country average. Water quality problems inherited from Soviet-era agriculture and industrial practices threaten water sources. And on the horizon is the increasing impact of climate change, which is already affecting water supplies and is likely an underlying cause of the extreme weather events that plague the country.

According to a 2009 Tufts University study³⁵, the number of people affected globally by disasters has been increasing by an estimated 50,000 to 60,000 people per decade, since the early 1970s, with 250 million affected per year over the last decade. This global trend has been witnessed in the CEECIS region in the past few years, with the increasing frequency of disasters like floods, landslides and extreme weather conditions.

MDG 8 (Partnership for Development)

The **EU** remained a key partner in the region, driving much of the reforms in the social sector. In 2010, this was underlined by the upgrading of the status of Montenegro to candidate country following a positive Opinion from the Commission. Albania's application was not so favorably assessed despite extensive efforts of the Government to fully meet requirements at this stage. The current Hungarian Presidency of the Council has made enlargement a priority and confidently declared that the period of "enlargement fatigue" is over. In this regard, it is expecting to close accession negotiations with Croatia in the first half of the year which will pave the way for it subsequently acceding into the EU. **The Lisbon Treaty** which came into force in December 2009 is providing further legal framework for stronger EU action in the area of fundamental rights, including child rights, as well as the development of an EU child rights agenda. In 2010, UNICEF strongly collaborated with the EU, including the Presidency of the Council, to raise child rights violations and exclusion of Roma children. In particular, access to education and ECD services and forced repatriation of Roma children from EU

³¹ United Nations, *Second Periodic Progress Report on the Millennium Development Goals in the Kyrgyz Republic*, 2009, p27

Economic Commission for Europe, *Second Environmental Performance Review*, 2009, p124

³⁷ Georgia Water, Sanitation and Hygiene Vulnerability, Risk and Capacity Mapping for Emergency Response; James Shepherd Barron, 2009

³³ Economic Commission for Europe, *Second Environmental Performance Review*, 2009, p124

³⁴ Strategic Repositioning of the UNICEF Supported WASH in Schools Programme in Tajikistan; Greg Keast, Oct 2010

³⁵ Humanitarian Costs of Climate Change, Tufts, 2009

member states to third countries. A particular event case was the forced repatriation of Roma children to Kosovo³⁶, which was effectively documented by UNICEF and the German National Committee.

With regards to the **Council of Europe**, cooperation in the areas of **child-friendly justice, violence against children, Roma children** and **child participation** continued and potential for further progress on the ground was created with the adoption of the Council of Europe guidelines on violence against children and child-friendly justice. The Council of Europe remains a strong inter-governmental organization setting European standards and guidelines on democracy and fundamental rights.

Funding for development in the region continued to be dominated by the EU, especially in enlargement and ENP countries, but also significantly, grants and loans from the **World Bank/IMF** and to a lesser degree and in selected countries, from the **Asian Development Bank (ADB)**. EU funding continued to account for a big proportion of UNICEF other resources but in 2010, a significant increase of funding through UN joint mechanisms and funding modalities, was also observed. The few, mostly European, bilaterals also remained engaged in the region, such as Sweden, Netherlands, Norway and Switzerland which were key donors to UNICEF. The US, through USAID and CDC, remained major partners. UNICEF National Committees were also providing support to selected development programs for children as well as a number of small but growing International NGOs. Owing to specific characteristics and conditions, including classification as middle income, oil-rich, lack of democracy, etc. several countries faced **difficulties in accessing ODA for development**.

How have these trends influenced UNICEF strategic positioning in the Region and focus of its future work?

Throughout the region the economic crisis, as well as the polio outbreak in Central Asia, have uncovered specific institutional weaknesses, often lying just below the surface, interacting with legacies of the earlier systems, and complicating national responses. Several issues have emerged as highly relevant for UNICEF's child rights agenda and will need to be taken into account in planning UNICEF's future engagement in the region.

Decentralisation of mandates related to child rights

In a region characterized by different patterns of decentralization, the crisis has created the conditions for central governments to further push down responsibility to lower administrative levels with insufficient attempts to ensure that matching resources are in place. Meanwhile, in the context of the crisis local governments have been hit hardest with lower revenues and transfers. **Overall, the way in which decentralization has been interpreted and put in practice in the region so far risks leading to 'unfunded mandates', exacerbated disparities and loss of entitlements for children due to lack of data at local level, weak coordination and harmonization and unclear and ineffective mechanisms of accountability.** A critical understanding of decentralization processes in each national context in CEE CIS will need to underpin UNICEF's actions at the local level to better support decentralized mandates in education, early childhood development, child and social protection and health efforts to protect and guarantee child rights, especially for the most vulnerable and difficult to reach groups.

Moves towards more targeting in social protection and school-optimization

A regional analysis³⁷ on **minimum social protection packages** concluded that state support for families in the CEE CIS is, with some exceptions, extremely low, much below what would be expected in countries that are concerned about developing modern social protection systems, tackling demographic decline and building their future around investing in human capital. In addition, the crisis has put pressure on governments to cut pension benefits and salaries of public service workers (Romania) and to move towards more targeted social assistance for families and children (Moldova). This has major consequences for child poverty and social exclusion, especially where systems were already weak and ineffective before the crisis. Furthermore, the issue of **rising food and energy prices** continues to be crucial for countries in the region (Moldova, Turkmenistan). A further complicating factor is the decentralization of government responsibilities in social protection to local levels without adequate resources and administrative capacity (Romania and Bosnia and

³⁶ UNSCR 1244

³⁷ Bradshaw J., Mayhew E. and Alexander G. 2010. *Minimum Social Protection for Families with Children in the CEE CIS countries in 2009*. A report for UNICEF.

Herzegovina). UNICEF needs to continue to bring out its distinctive approach to social protection vis-à-vis partners, by monitoring and evaluating the performance of current programmes, and by generating and costing alternative policy models adapted to local contexts, which should integrate different sectors and combine universal with targeted measures, and supply with demand-side interventions.

School optimization (SO) is being currently debated in several CEE CIS countries (Armenia, Bulgaria, Kazakhstan, Moldova and Serbia) as a measure to achieve more efficient public spending in a context of budget constraints. It poses a number of challenges related to securing the provision of quality education as well as the necessary investments for including **disabled, minority, rural and poor children**. UNICEF will need to actively contribute debates around SO by shifting the attention from cost saving and efficiency to the need of investing in equity, social inclusion and quality.

Transparency and accountability

Governance issues vary widely across countries, underscoring how segmented the region is and that diversified solutions and types of engagement are needed. From a child rights perspective, it is clear that well-functioning oversight institutions and improvements in technical, financial, and managerial capacity within central and local governments can help to increase a country's capability and flexibility to deliver public investments and core social spending for children. Civil society capacity to contribute to mechanisms for monitoring child rights is nascent but still very modest.

The growth of information and communication technology (ICT) in the region has been remarkable. Share of households with computers has risen rapidly in the period of economic growth and range from 30% -70 %. A similar picture exists regarding internet users. Considerable disparities exist however between countries and within countries. This has wide-ranging implications for child rights advocacy, children and young people's right to access information and express themselves. Russian Federation is leading in Internet penetration³⁸ with 48%, Belarus 46%, Turkey 45%, Kyrgyzstan 39% - though lower than European Union countries, which average at 60%. The average user in Turkey is one of the most engaged globally. They spend more time online and consume more pages than any other users in the world, particularly in social media³⁹. ICT policies and market liberalization are important factors for widening access, however, the CIS region is leading the world in the evolution of third-generation information controls⁴⁰.

SECTION THREE - Analysis of programme strategies and results in the region

3.1 Overview of programme strategies

Capacity Development

In CEE CIS capacity development is understood and operationalised through what is known in the Region as the 'Systems Approach'. This includes a strong emphasis on various elements of capacity development, from institutional, to societal to individual change. Some examples are given below, however, in order to appreciate the full breadth and scope of capacity development in CEE CIS please refer to the text in Section 3.2 under each MTSP Focus Area.

In terms of **institutional capacity development** the RO supported capacity development for quality and inclusive preschool **education** in UNICEF COs in CEE CIS through, for example, the organization of knowledge sharing events, held in conjunction with a regional conference on **Inclusive Education** organized by the International Step by Step Association and other notable partners. This was mirrored at country level, in the former Yugoslav Republic of Macedonia and Romania, where national consultations were held to discuss policies and ways forward to include Roma children in early childhood services including preschool education. The RO-EU Joint Management project, the **Roma Good Start Initiative**, initiated in 2010, includes a comprehensive capacity development component targeting policy makers, local authorities and service providers. The Regional Office organized a study tour in Estonia during which **education reforms, successful policies and best practices** from Estonia, Poland, Slovenia and Finland were shared with UNICEF Country Offices and government

³⁸<http://www.internetworldstats.com>.

³⁹<http://www.newmediatrendwatch.com/markets-by-country/10-europe/87-turkey>

⁴⁰<http://opennet.net/research/regions/cis>

representatives from 15 CEE/CIS countries. A client satisfaction survey revealed that almost 70% of participating country delegations will build on the lessons they learned from the study tour; more than a third of them have used or intend to use the contacts they made to network with the Estonian Ministry of Education or other Baltic States (Lithuania) and learn from their reforms. In addition, in close collaboration with Teachers College, Columbia University, the Regional Office steered a research and capacity development initiative on **teacher shortage and teacher quality** in six countries; this initiative resulted in improved national capacities to conduct research in the field of education, and in some countries (such as Kyrgyzstan) helped UNICEF Country Office to support reform of the status and working conditions of teachers.

In terms of capacity development to support **societal change**, Country Offices placed a strong emphasis on supporting the capacity development of governments and partners in **media and communication for behaviour change**, particularly for **health workers** in Kyrgyzstan, Ukraine, Uzbekistan and Georgia. Building C4D capacity within the **Child Friendly Initiative** in Kazakhstan proved to be a sustainable way to strengthen local governance system.

Effective Advocacy

Please, refer to Section 3.2 for advocacy work under each MTSP Focus Area.

The publication ***"Blame and Banishment: the underground HIV epidemic affecting children in eastern Europe and Central Asia"*** which was launched during the International AIDS Conference in July 2010, served as the single most important advocacy instrument for the region in 2010.

In the area of **Juvenile Justice**, with the support of the French National Committee, advocacy visits on juvenile justice were organized to Bulgaria, Moldova and Ukraine together with high-profile European human rights advocate, Robert Badinter. These joint visits were important advocacy opportunities allowing the situation of minors in detention to be brought to the forefront of media attention in these countries. The visits and the follow-up are expected to accelerate reforms aimed at improving the legal framework and the conditions of minors in pre-trial detention in these countries.

The Regional Office continued to support the country visits of the Council of Europe High Commissioner for Human Rights, Thomas Hammarberg, by providing him with relevant information and briefing materials.

Several countries in the region (Armenia, Kazakhstan, Serbia, the former Yugoslav Republic of Macedonia, Turkey) have made good progress working with **parliamentarians** who are central to policy advocacy in the region. Collective effort was initiated in 2010 to prepare for a regional meeting of Parliamentarians to be co-organized by UNICEF and IPU in mid-2011.

Strategic Partnership

Critical partnerships in cross-cutting areas are provided below. Please refer to Section 3.2 under each MTSP Focus Area for more details.

UNICEF work with the **European Commission** in its capacity to finance transitional costs for reforms and mobilize governments around key priorities was the main focus on our efforts for reinforcing strategic partnership in 2010. The first target was to reinforce UNICEF's visibility in juvenile justice. A publication on assessing juvenile justice systems in ENP countries was prepared and launched at the European Commission in Brussels in June 2010. In the mean time, the UNICEF Regional Office in partnership with **UNODC and EuropeAid** organized a training workshop for government officials and professionals from East European Neighbourhood countries, EC and UN staff to enhance their knowledge of juvenile justice information mechanisms and share experiences in data collection and management and evidence-based policy making. A similar workshop took place in Sofia in October 2010 for South Eastern European countries. Altogether, delegations from eleven countries of the region participated and prepared national action plans on how to improve their juvenile justice information management mechanisms. In the area of Roma early childhood inclusion, UNICEF began in 2010 to work jointly with the EU DG EMPL to facilitate policy dialogue, boost research and data gathering, support capacity development, and address stereotyping and prejudice. UNICEF also advocated for and gained concurrence to make early childhood development the theme of the EU 4th Roma Platform Meeting in December 2010; as a result of this

and the issues raised by UNICEF, Roma early childhood inclusion is likely to be included in all future deliberations and actions of the Platform.

The Regional Office worked with the **EU working group on de-institutionalization**, a lobby group with the European Commission advocating for the use of EC Structural Funds for the reform of child care systems in the region. Lessons learned from UNICEF experience in Eastern Europe were shared during events organized by the working group and the **OHCHR office in Brussels**, including a specific training day for the European Commission staff in April 2010. Bulgaria has been the first country selected for the use of structural funds and close monitoring of progress is undertaken with the country office.

The Regional Office made as well a significant contribution to the development of the child-friendly justice guidelines developed by the **Council of Europe** and will contribute next year to the dissemination of these standards in the region.

UNICEF National committees and the Regional Office have a mutually beneficial relationship in promoting region's advocacy priorities through their media, advocacy and fundraising networks. This was well reflected in the preparation and launch of the report on the return conditions of repatriated Roma, Askali and Egyptian children in Kosovo⁴¹ done jointly by the German National Committee for UNICEF and UNICEF Office in Kosovo⁴². This was also effectively seen at the launch of the publication **"Blame and Banishment"**, which generated the biggest press response for the German National Committee in 2010.

UNICEF together with the UN partner agencies contributed to the development of a regional report on the progress towards the MDGs and participated at the MDG Regional Meeting in Istanbul, preparatory to the MDG Summit organized under the auspices of the Government of **Turkey**, **UNECE** and **UNDP**.

In 2010 with the arrival of the new M&E advisor the first step was to establish contacts with the most relevant partners in the region: evaluation networks such as the **UN Geneva Evaluation Network**, the **European Evaluation Society** and the **International Program Evaluation Network (IPEN)**, where UNICEF RO is an active board member. Such partnerships constitute potential resources when looking for evaluation expertise. They provide unique opportunities to learn about developments in evaluation, and they are also venues where UNICEF can share its experience and knowledge in evaluation. In 2010 the RO also established contacts with various **EC (DG Regio, DG Employment and EuropAid) offices of evaluation** active in the region to be aware of their priorities and their approach to evaluations which is given a lot of importance by government partners.

Corporate alliances were pursued in Serbia contributing to the work of Roma Health Mediators through IT equipment and training provided by a **phone service provider**, but also setting the ground for promoting child focused CSR practices with the Serbian Global Compact Network. In Albania such alliances moved beyond the traditional fundraising objectives, allowing UNICEF to influence hiring policies in favor of disadvantaged adolescents and making the connection between **employment and community service** orders for juvenile offenders. Georgia has begun to engage with **private health insurances** as part of the efforts to tackle the extremely high out-pocket-payments for health and the deterioration of health care quality in the country.

Noteworthy are also partnerships with the **Association of Outdoor Advertising** and top advertising agencies initiated in 2010 in Ukraine which has benefited UNICEF in financial savings as well as expanding impact. Croatia has forged an innovative sporting partnership with a major hockey club, which have become a highly influential advocate for child rights. RO was also able to leverage funding from the private sector, for example IKEA for ECD in four CEECS countries including, Georgia, Moldova, Serbia, and Turkey, and many more in Croatia.

Knowledge management

⁴¹ UNSCR 1244

⁴² UNSCR 1244

Some examples of Knowledge Management in cross-cutting areas are given below, please refer to Section 3.2 under each MTSP Focus Area for more details.

In the area to **Disaster Risk Reduction**, the Regional Office has established a dedicated e-platform to facilitate exchange of information, strategies and tools between the different country offices implementing disaster risk reduction activities in Central Asia and South Caucasus. In addition, this web-based platform serves as a repository for all the advocacy and programmatic materials developed under the disaster risk reduction programme, which will benefit not only be a resource for the CEE CIS region, but also for other regions within UNICEF.

Launches of knowledge products, situation analyses, studies, surveys developed with governments and other partners have garnered substantial international and national media attention. Albania has aligned their media work pegging it to the launch of the **Demographic Health Survey**, which is a highly strategic way to contextualize newsworthy child rights issues. Turkey is showing commendable progress through its **web-based repository** with a well-laid out plan for greater stakeholder acceptance and knowledge sharing. There is mixed performance of the usage of country offices' websites: those which do not have a dedicated website such as Belarus or those that use them minimally should identify what can be done with current available resources and what investment are needed to reach optimum influence.

In 2009 the responsibility to maintain, update and develop TransMONEE database according to evolving needs has been transferred from IRC to the Regional Office. The main database contains more than 800 lines of time series data regarding child rights, mainly received from the National Statistical Offices (NSOs) of the region. These data are carefully verified and checked when received from the focal points in the NSOs. The MONEE database manager contributes to a high degree of credibility and comparability of consistent time series data. In 2010 the RO conducted a secondary analysis of children issues related statistical, economic and social reports received from correspondents in the MONEE on youth, which was presented at the TransMONEE meeting. The database was updated on the internet and user-friendly version MONEE info developed, including a set of graphs and key messages based on the analysis of the latest data available.

The M&E micro-site within the RO website and the regional M&E Community of Practice have been regularly used to support sharing of knowledge and experience among COs and with the RO. These have been very useful to provide specific tips and technical guidance to the M&E colleagues in the region to strengthen their capacity to manage evaluation processes and improve their understanding of M&E concepts. In addition, the Region benefited from the newly developed systemic management function of the EO which provided unique opportunities to CO colleagues to benefit from capacity development possibilities through webinars organized around various evaluation issues and for Regional M&E Advisors the possibility to interact regularly around key evaluation issues. In order to improve the identification and documentation of lessons learned the RO will undertake a regional analysis of evaluation conducted in 2010 in the course of 2011 and share the lessons learned with colleagues at various levels.

Plans were initiated for building a **regional web platform** to disseminate to UNICEF and wider audiences research and knowledge generated on economic and social policy in the region. The microsite, administered by the RO, will be launched in the second quarter of 2011.

Communication for Development

The RO is undertaking a more strategic approach to C4D to better integrate C4D into public health systems to undertake preventative health messaging, crisis communications and C4D. The need for this reform was most recently seen in Tajikistan following the **world's biggest outbreak of polio** cases in 2010. A C4D specialist based in the Regional Office will start in early 2011 to focus on strengthening the capacity in this area in the Ministries of Health in Ukraine, Bosnia and Herzegovina, Kazakhstan, Moldova and Georgia.

2010 proved to be a year when Albania, Azerbaijan, Belarus, Georgia and Kazakhstan embarked on efforts to ground their work with solid baseline **research** to sharpen the equity focus, to finalize **capacity gap and stakeholder analysis** as well as **strategies** which will harness the power of C4D to better achieve advocacy objectives.

The Georgia office has advanced remarkably in C4D work undertaking a sophisticated approach ranging from a comprehensive **Health Communication Capacity Assessment** to a more focused ECD programme, culminating in the development of the Baby Parent Book with the Ministry of Health and Civil Registration Agency. Qualitative focus group

discussions were included in the **“Barriers to Access to Social Services”** encouraging people living with the lowest income to engage in a meaningful dialogue. A comprehensive social mobilization campaign mixes new and mass media tools as well as interpersonal communication to support supplementary polio activities in Abkhazia.

Azerbaijan and Bosnia and Herzegovina have recruited a C4D officer after a long gap. Azerbaijan has successfully supported the government in developing a C4D situation analysis on **child marriage**, a national communication framework for 2011–2015 and manual for advocacy and social mobilization tools to promote the updated **Facts for Life**.

Human Rights-Based approach to Cooperation

The HRBA was reinforced through the drafting of **five new CPDs** (Albania, Croatia, Kyrgyzstan, Montenegro and Ukraine) which will be presented to the Executive Board in 2011, building on current cooperation engaging in an open discussion with governments focusing on disparity reduction and linkages to local, national and regional levels. Of significance are UNICEF's forms of engagement in **small offices operating in middle-income countries**; it was also again noted that the EU constitution does not preclude UNICEF's work in these countries as UNICEF is seen as a rights-based organization.

Cooperation which underlines the importance of giving voice to children is seen in continued support for **One Minute Juniors** for the whole region, youth-led TV programming in Albania and Turkmenistan, and creative use of social media to institutionalize child participation in development planning processes in Armenia.

In 2010, the **Child Rights Syllabus** for journalist students, developed by the Regional Office with the Dublin Institute of Technology, was further rolled out in universities in Turkey (8), Azerbaijan (3), Georgia (5), the former Yugoslav Republic of Macedonia (3) and Romania (1).

Gender Equality and Mainstreaming

With the continued technical and financial support from HQ (DPP), the Regional Office adopted a comprehensive approach to operationalize the **corporate Strategic Priority Action Plan** for organizational transformation on gender equality in CEECIS. This took the form of: (i) development of adapted capacity development support on gender mainstreaming in Kosovo⁴³ and Montenegro (to be rolled out in a least two countries in 2011); (ii) additional gender assessments bringing the total number of countries who conducted a gender assessment in 2009/10 to 18; (iii) sensitization sessions in regional meetings and with counterparts in the region; (iv) discussions of the regional highlights emerging from the country gender assessments at deputy representatives meeting and at the RMT; (v) introduction of the gender marker to all M&E colleagues in the region; (vi) draft concept paper on *‘Engaging Boys and Men’* presented and discussed with the regional team; (vii) support to the development of corporate minimum gender package; (viii) several sessions on gender mainstreaming for RO staff including the regional Staff Association meeting; and (ix) the 2010 NSO Country Analysis Reports on gender monitoring trends focused on assessments of trends and issues related to gender equality in national data has been supported by providing guidance on gender as well as a sensitization session on gender during the regional TransMONEE statisticians' meeting.

3.2 Overview of each MTSP Focus Area

▪ FA1 - Young Child Survival and Development

Major initiatives and key results

The major result achieved by UNICEF in CEECIS was to **contain the polio outbreak**. A total of 24 mass immunization campaigns were conducted in 7 countries in 2010, targeting children up to 15 years of age. More than 50 million doses of oral polio vaccine costing approximately USD 8 million were supplied for these campaigns. Another USD 1.2 million was

⁴³ UNSCR 1244

invested on communication and social mobilization activities. This effort required reprioritization of activities and substantive staff time in both country and regional offices. Tajikistan, Uzbekistan and Kyrgyzstan offices were particularly effective and efficient in providing response to the polio outbreak. UNICEF offices in Kazakhstan and Turkmenistan also provided support to Governments in conducting Supplementary Immunization Activities (SIAs), and the UNICEF office in Georgia organized SIAs in Abkhazia. Close communication and coordination was maintained with WHO at regional and country level and resource mobilization activities were closely coordinated with UNICEF HQ and WHO Euro. UNICEF mainly focused on vaccine supply, communication/social mobilization and field monitoring support for the mass immunization campaigns. The response by the countries at-risk has been rapid and of high quality as confirmed by the Global Polio Eradication Initiative.

There was also important progress made in ensuring sustainability of immunization programmes. Thirteen countries had multi-year **immunization plans in 2010**, while 16 reached self-sufficiency to finance all immunization programme costs from domestic resources. GAVI has been a major donor for immunization since 2000 in the region but in view with the increase their GNI, five of the remaining 8 **GAVI-eligible countries** terminated their eligibility. Graduating and eligible countries were supported to update multi-year strategic plans on immunization for the upcoming five-year period from 2011-2015, including a comprehensive costing and financing analysis to ensure financial affordability and sustainability of national programmes, and provided with guidance on available options in GAVI exit strategy, which still allows one-time application to introduce new vaccines.

A number of important achievements were made by country offices in further **ensuring equitable access to life-saving interventions** for women and children. Roma Early Childhood Inclusion [RECI] studies in the former Yugoslav Republic of Macedonia, Romania and Serbia examined Roma children and women's access to mother and child health services. UNICEF in Armenia assisted the Ministry of Health in designing and implementing a **child health certificate and passport** which, supported by increase allocations to child health care services, constituted a major step towards increased access to health services and reducing informal payments. In the former Yugoslav Republic of Macedonia UNICEF supported the MoH in designing an MCH programme to address disparities and improve quality of MCH care and leveraged USD 8 million from the Dutch Government and USD 15 million co-funding from the MoH. Another large scaling up of newborn and child health packages is implemented with UNICEF and EC support in Uzbekistan, showing already the impact on the quality of care and improved indicators of maternal and child health. Moldova completed a national study of inequities in Maternal and Child Health which resulted in policy recommendations to the Ministry of Health on improving the delivery of the Basic Benefit Package of Health Services with special focus on women and children. Turkey, as the country which achieved one of the most spectacular progress in MDG 4 and 5, was supported by UNICEF to conduct a comprehensive analysis of progress and determinants of reducing infant and child mortality, thus contributing to regional and global knowledge building. In response to a request by the Government of Georgia, UNICEF assisted in developing a master plan for Strengthening MCH/perinatal services.

With the exception of two countries (Russian Federation and Ukraine), high impact nutrition interventions, especially **salt iodization and flour fortification**, are being scaled up, with 58% of salt being iodized. Belarus has reached USI with 90% of HH consuming iodized salt in the past year and the Government committing to include iodine deficiency biological monitoring into the national monitoring system. In 2010 the Russian Federation Government adopted "Fundamentals of Public Policy in Healthy Foods and Nutrition in the Russian Federation until 2020" with one expected outcome being increased production of bakery products fortified with micronutrients. In Ukraine, the sale of iodized salt has increased three fold and local iodine deficiency disorders prevention programs were established in 6 Chernobyl-affected oblasts. In Uzbekistan, the Parliament adopted the law on "Preventive measures to address micronutrient deficiencies". The international Reference Laboratory on IDD for CEE/CIS was established as a center of excellence in the region, in collaboration with the US Centers for Disease Control and Prevention (CDC) and the Kazakh Academy of Nutrition. Ten countries⁴⁴ have initiated activities towards the implementation of Flour Fortification to address Iron and Folic acid Deficiencies. In Kazakhstan and Kyrgyzstan, **flour fortification** laws were operationalized and capacity of flour millers and regulatory bodies was developed. In three countries, Albania, Kosovo,⁴⁵ and the former Yugoslav Republic of Macedonia,

⁴⁴ Armenia, Azerbaijan, Bosnia and Herzegovina, Georgia, Kosovo, Kyrgyzstan, the former Yugoslav Republic of Macedonia, and Moldova

⁴⁵ UNSCR 1244

flour milling industry assessments have been conducted and in two countries (Kazakhstan and Kosovo⁴⁶) training of trainers for millers and food inspectors were conducted.

The Micronutrient Powders Project (Gulazyk) to address **Iron Deficiency Anemia** in children under two in Talas Province in Kyrgyzstan incorporated a substantive ECD component and has resulted in the reduction of anemia by 29% after one year of its implementation. This success has leveraged additional funds to scale up the program to a national level. **Vitamin A supplementation** in high mortality/vitamin A deficient countries still remains at high coverage levels (>90%), while comprehensive nutrition budgeting approaches continue to be advocated for in Uzbekistan and Azerbaijan, with initial resource allocations seen in Uzbekistan. After intensive collaboration, the Ministry of Health in Kazakhstan is ready to supplementation for children from 6-59 month and women after delivery. The funds will be allocated within the new State Program for Health System. In order to strengthen the evidence base for micronutrient deficiencies Albania, Georgia, the former Yugoslav Republic of Macedonia, Turkey, and Tajikistan conducted **national nutrition surveys**, supported by UNICEF.

In Georgia, **water and sanitation** infrastructure and community based hygiene promotion was supported in 41 newly built settlements that house 19,000 IDPs displaced by the 2008 conflict. Some funding has been secured for 4 countries (Georgia, Kyrgyzstan, Tajikistan, and Uzbekistan), to begin work on WASH especially in schools and health facilities as well as funds to the Regional Office to provide guidance and support.

Support for better parenting through the health system and/or other channels continued in nine countries⁴⁷. UNICEF supported the establishment of a Centre for the Research of Childhood and Parenthood in Romania and a National **Early Childhood** Intervention Resource Centre in Belarus. In Turkey, parenting programmes were fully institutionalized in existing systems. Communication material for care providers on the health and development of young children was distributed widely in Belarus, Croatia, Georgia, Montenegro and Turkmenistan. In Moldova (Transnistria) IMCI was implemented and included a strong C4D component targeting medical staff and parents on danger signs with respect to child health and development. Bosnia and Herzegovina was successful in developing a truly inter-sectoral pilot model of convergent services to address young children's survival and development. Patronage or home visiting nurses in several regions of Uzbekistan were trained and provided health and development counseling services to pregnant mothers and families with children under five years of age. In Ukraine the focus on fathers' involvement in early development resulted in the establishment of an All Ukrainian Papa School Network.

Major partnerships

The UNICEF Regional Director participated at the **WHO** Regional Committee Meeting to reinforce regional commitment to keeping CEE/CIS as polio free region and re-emphasize the priority of measles-rubella elimination. A resolution on both topics has been approved by the WHO Regional Committee. A technical briefing on MDGs was also provided during the WHO Regional Committee meeting. UNICEF has also partnered with WHO in organizing a regional conference on children with intellectual disabilities which resulted in a Declaration signed by representatives of European states on the "Health of Children and Young People with Intellectual Disabilities and their Families". The declaration represents a call for action and political commitment to improve the health system performance in providing care to children with disabilities.

European Immunization Week was observed from 26-30 April 2010 in close partnership with WHO and European CDC with the aim to create awareness among the public and medical professionals towards the benefits of immunization, focusing on measles and rubella elimination. UNICEF COs supported MoHs and other partners to conduct communication, awareness and vaccination activities during the week. As indicated in other sections very close cooperation was maintained with WHO Europe on responding to the **polio outbreak** including participation of the UNICEF Deputy Regional Director with WHO Regional Director in the launch of the second round of the polio immunization in Uzbekistan.

UNICEF continues to work closely with **GAIN** with focus on Russian Federation and Ukraine to achieve tangible progress in USI. Partnership with the Flour Fortification Initiative has resulted in the completion of milling industry assessments in five countries (Albania, Kazakhstan, Kosovo⁴⁸, Kyrgyzstan, and the former Yugoslav Republic of Macedonia) to support flour fortification. Partnership with **CDC Atlanta** in the area of micronutrients resulted in the "Gulazyk" (sprinkles) initiative, has resulted in 29% reduction in anemia prevalence in Children under 2 in Talas region and has leveraged funds from the

⁴⁶ UNSCR 1244

⁴⁷ Armenia, Belarus, Croatia, Georgia, Kazakhstan, Romania, Turkey, Ukraine and Uzbekistan.

⁴⁸ UNSCR 1244

Soros Foundation and the **World Bank** to scale up to national level. Also, partnership with the CDC has resulted in the establishment of the IRLI lab for iodine nutrition.

Common constraints

Maintaining the interest of governments in MDGs for maternal and child health issues becomes more challenging as mortality rates go down. Past achievements of high immunization rates resulting in lower incidence of vaccine preventable diseases led to **complacency** in the region, contributing to the emergence of anti-immunization voices and less priority given to immunization programmes. **Declining public trust** to immunization, coupled with the weakness of governments to respond to crises, led to worrying drops in coverage rates particularly in Ukraine and Bosnia and Herzegovina. Weak routine immunization is also one of the contributing factors to the continuing risk of further polio transmission in the region as demonstrated in the risk analysis by WHO. Additional efforts will be required to mobilize governments around the UN Secretary General's Strategy on Women and Children's Health.

Validated good practices and lessons learned

Please, refer to Innovations and Lessons Learnt Section

Value Added of Regional Office Support

The role of the RO during the polio outbreak was instrumental in ensuring timely flow of support to the countries in line with their needs. Intensive communication was maintained with HQ, Supply Division, and UN CERF secretariat for mobilization of vaccine supply and funding, and to guide COs on technical and fund-raising issues. The Regional Office played an important role in developing, in a highly consultative manner engaging with Country Offices, headquarters and external partners, UNICEF regional strategy for strengthening health systems.

▪ **FA2 - Basic Education and Gender Equality**

Major initiatives and key results

In order to ensure that all children, especially the most disadvantaged, come to school ready and eager to participate in formal education, the majority of UNICEF offices in the region have supported initiatives in **early childhood education**: to expand access, improve quality and reach conventionally excluded groups, such as the **Roma**, children in rural areas and **children with disabilities**. UNICEF has continued to support the development and amendment of **policy, legislation and national strategies**, and the formulation and adoption of early learning and development **standards**. Major efforts have been made to expand access through exploring **alternative high quality and low cost early education** provision through community-based centres, half-day arrangements, home-based school readiness programmes and educational television. Quality improvement has been pursued through devising new curricula, training preschool teachers and reviewing early education management capacity within the government. UNICEF has also supported for the first time in 2010 **disaster risk reduction capacity in preschools** in disaster prone countries.

As of result of these efforts, Moldova reported an increase to 75% of **children's participation in preschool** education; Serbia reported a 50% increase in Roma children's participation in some areas. National policies, legislation and/or strategies to improve access to quality early education services have been adopted/revised or drafted in six countries⁴⁹. **Early learning and development standards** have been developed, validated, formally adopted or incorporated into national preschool curricula in five countries⁵⁰. In 2010, **alternative arrangements to deliver early education** were institutionalized in Moldova and Serbia and a public commitment by the government to do so has been made by the former Yugoslav Republic of Macedonia.

In spite of the financial crisis, a number of governments in CEE/CIS have kept up with education reforms addressing access to education for the most marginalized and improving the quality of basic education. Concrete results have been achieved at the policy level in the area of **inclusive education (IE) for children with disabilities**. Ten countries have now adopted laws or developed policies in support of inclusive education for children with disabilities. In the Russian Federation, UNICEF documented and disseminated IE good practices from 7 Russian Federation regions: an IE toolkit providing

⁴⁹ Bosnia and Herzegovina, Georgia, Moldova, Montenegro, Romania, and Serbia

⁵⁰ Azerbaijan, Bulgaria, the former Yugoslav Republic of Macedonia, Georgia, and Moldova

organizational guidelines, normative provision and best practices was developed; a policy paper was produced and a coordinating council for inclusion established in the Republic of Karelia; IE resources were developed in 6 other regions of the Russian Federation, improving the capacities of parents, educators, institutions, NGOs and disability activists to monitor the implementation and progress of inclusive approaches. In Montenegro, UNICEF supported a broad coalition of partners to launch a successful **public awareness campaign “It’s About Ability”** aimed at changing social norms and behaviours towards children with disabilities. In Armenia and the former Yugoslav Republic of Macedonia, the inclusiveness of education systems was assessed and, as a result, normative frameworks are being revised. In Serbia, the **costing** of a progressive law on inclusive education is being supported. In Romania, the most important achievement of the year was the launch of school attendance campaign aiming at the inclusion of **Roma children** in mainstream education. In addition, UNICEF steered a sub-regional initiative to promote the right of Roma children to education.

Following the participation of several CEE/CIS countries in the 2006 and 2009 PISA assessments, governments are showing a growing interest for learning outcomes as an indicator of the quality of education systems. Building on the recent work carried out by the Regional Office on CFS, a regional initiative resulted in the review of existing education standards in 7 countries and an analysis of the issue of **teacher shortage** and **teacher quality** in six others. The adoption of a conceptual framework and road map for the development of **standards of quality basic education** in the region was a major achievement.

Major partnerships

Throughout the region, UNICEF has maintained strong partnerships with the **World Bank**⁵¹, with the **European Commission**⁵², with **UNESCO** and with **USAID** (in Kyrgyzstan and the former Yugoslav Republic of Macedonia) which helped to further the early childhood education agenda and make funds available for the expansion of quality services. UNICEF works closely with the World Bank in the countries that have received a second tranche of **FTI funding** (Kyrgyzstan and Tajikistan); the two organizations co-lead the education donor group in Tajikistan. In Kyrgyzstan, UNICEF additionally has enjoyed robust partnerships with the **Soros** and **Aga Khan Foundations** and in Serbia, UNICEF has been successful in partnering with the **OSCE** and the **Roma Education Fund**. Regional level partnerships between UNICEF the **Open Society Institute**, the **Roma Education Fund** and the **International Step by Step Association** have had the effect of strengthening similar partnerships at national level in the former Yugoslav Republic of Macedonia, Romania and Serbia.

Common constraints

The biggest constraints to the expansion of early education are **limited national and international expertise** to guide reform and enable the rapid expansion of high quality provision in countries of the CEE/CIS region. Education **funding for the early years** continues to be limited despite compelling evidence of the importance of investing in the preschool years. Decentralization of early childhood services has not been accompanied by **capacity development at local level**; this contributes to sharpening disparities in access. In many cases, legislation and regulations prevent or hamper diversified provision.

In 2008, countries such as Armenia, Azerbaijan, the FYR of Macedonia and Kyrgyzstan had committed to increase their **spending on education**. However in several countries the economic downturn has begun to affect the progress made in the region: Kazakhstan, the former Yugoslav Republic of Macedonia, Kyrgyzstan, Romania, the Russian Federation and Turkey are facing budget education cuts. There is a real danger that the budgetary pressure and rising poverty caused by the global financial crisis will stall or even reverse the progress made in recent years in education.

Validated good practices and any lessons learned

The public awareness campaign **‘It’s about Ability’** (see section 6) supported by UNICEF and a wide range of partners in Montenegro represents a successful model of how to change social norms and behaviours towards children with disabilities, and promote inclusive education on a large scale.

Based on global evidence, a **costing and financing study of preschool education**, “Fair Play” in the former Yugoslav Republic of Macedonia demonstrated that effective early education can be delivered at low cost. Based on the results of

⁵¹ in Albania, Armenia, Azerbaijan, Bosnia and Herzegovina, Kosovo (UNSCR 1244), Kyrgyzstan, Moldova, Serbia, Tajikistan

⁵² in Bosnia and Herzegovina, Kyrgyzstan, Russian Federation, Montenegro and Turkey

the study, the government has committed to introduce necessary legislative amendments to allow for diversified service provision, new funding formulae, prioritization of young children and accreditation of institutions and programmes associated with early education. Similar studies were conducted earlier on in Armenia, Kyrgyzstan, Moldova and continue to influence planning and programming in the preschool sector. The role of progressive legislation has been vindicated in Serbia, where legislation that prioritizes **Roma and other excluded groups**, and the establishment of Development Education Centres, resulted in a steep increase of Roma children's participation in early education.

The RO led *Roma Early Education Inclusion* series of studies in the former Yugoslav Republic of Macedonia, Romania and Serbia demonstrate that **bilingual classrooms, child-centred teaching methods, the engagement of Roma classroom assistants and the active involvement of parents** can result in major improvements in children's participation in preschool and their parents' attitude to education. These findings continue to be disseminated through national policy round tables as well as regional forums to change thinking around the *how* of including Roma children in early education. A qualitative **study on Women, Motherhood and Early Childhood Development in Roma Communities** conducted in Romania and the former Yugoslav Republic of Macedonia, demonstrated the important linkages between the status and situation of Roma mothers and the health, development and participation in education of their children. The study revealed major gaps in information and made important recommendations for future research.

The mutually reinforcing benefits of **conducting upstream and downstream activities *simultaneously*** were confirmed in Bosnia and Herzegovina's experience of advancing the ECD agenda. It was found that efforts to advocate for investing in early childhood and comprehensive social inclusion policies were strengthened through the establishment of convergent Integrated Parent-Child Centres at municipality level. At the same time, the policy discussion enabled the innovative bringing together of services at local level.

Value Added of Regional Office Support

RO's close partnerships with OSI and the Roma Education Fund at regional level has enabled and strengthened advocacy, research and knowledge sharing at country level. In turn, country level work has effectively reinforced UNICEF's role and credibility as a regional voice for **preschool education**. Furthermore the partnership has allowed for increased efficiencies in the use of human and financial resources. Country offices have been supported regularly in the identification and recruitment of expertise; UNICEF Turkey was supported closely in designing and executing a milestone conference in partnership with the World Bank. UNICEF COs have been provided with state of the art information, research and good practice in ECD e.g. in the areas of early childhood intervention and ECD and governance.

Likewise, **RO's partnership with the EU around Roma young children** not only had a visible influence in CEECIS but also in Western Europe. UNICEF RO was invited by the Belgian Presidency of the Council of the European Union to prepare a discussion document on *Preventing Social Exclusion through Europe 2020: Early Childhood Development and the Inclusion of Roma Families*. The paper was presented at the 4th European Roma Platform in Brussels and is poised to be a foundational document for ECD and Roma Inclusion in all countries where the Roma live. RO was also able in 2010 shine a light on the importance of including young children in disaster risk reduction efforts; this resulted in at least two countries, Armenia and Kyrgyzstan, receiving DIPECHO funds to focus their DRR efforts on preschools.

As a result of RO's technical support and guidance over the past years, most Country Offices have now exited small CFS projects and have now adopted the **Child Friendly School approach as the overall framework** for their programming in education. As a result, education programme components in the region are less fragmented and have become focused on fewer priority issues – such as the inclusiveness of education systems and the quality/relevance of the provision of education in CEECIS. Several countries have adopted a system approach to improving the quality and relevance of their education system, and have embarked into the revision/development of **quality education standards**. With the production of key knowledge products such as the position paper on Roma education and the overview of inclusive education for children with disabilities, the Regional Office accompanied and added value to the efforts made at country level to improve the **inclusiveness of education systems**. With the work initiated two years ago on learning outcomes, the Regional Office has supported the emergence of national debates on the quality of education, and more specifically on the issue of equity in the outcomes of education.

▪ **FA3 – HIV/AIDS and Children**

Major Initiatives and key results

The CEECIS Region is positioning itself to become the **first in the world** to achieve the global goal of eliminating Mother to Child Transmission of HIV by 2015 despite the rise in absolute numbers of women infected with HIV. Practically all countries of the Region have revised/adopted **PMTCT protocols** and issued national regulations/guidance requiring universal access to PMTCT. Countries have achieved at least 70% **HIV testing** in pregnancy and many have exceeded the 90% access to ARVs for those tested. In some countries, e.g. Central Asia, the **scaling up of universal opt-out testing** in pregnancy resulted in an almost doubling of the numbers of **HIV positive women** diagnosed during pregnancy. However, given the limited access to early infant diagnosis, measuring the transmission of HIV to children and provision of adequate follow up to these children remains a challenge.

UNICEF CEECIS took the lead on advocating for global policy dialogue on the controversial and often forgotten issues related to **pregnancy and HIV among drug dependent women and their newborns** and brought it onto the agenda of the Inter-Agency-Task-Team on PMTCT. In **pediatric AIDS**, in Central Asia, building on the “momentum” generated by the outbreaks of HIV in children, UNICEF supported health sector reforms and built long-term responses by the health system and advocated for quality control in injection safety. UNICEF also provided direct support to affected families by facilitating a regional “parents-to-parents” network aimed at strengthening social support for affected children and families and sharing of information and materials such as the “Vitaminka” child-friendly adherence support package developed by UNICEF. In Ukraine resources and political support were mobilized and site assessments were undertaken for initiating a model that would identify best approaches to integrated ante-natal and post-partum care to **drug-using pregnant women** and their infants. It is becoming increasingly clear that although issues such as opioid substitution treatment remain controversial in the Region, the sharing of international experiences and evidence on the impact of maternal substance use on the health outcomes of the newborn child and ways in which good health outcomes can be achieved is an excellent entry point to increase commitment to the policy and programming changes that are required to facilitate service provision.

In the area of **pediatric AIDS**, capacity was built related to improving early infant diagnosis of HIV in several countries, including Belarus and Ukraine. UNICEF also addressed the importance of **appropriate infant feeding** in the context of HIV by organizing a regional seminar on this issue which brought together HIV and breastfeeding experts from five countries⁵³ leading to a review of national policies. Similarly, a regional seminar was organized to update PMTCT protocols in line with the latest WHO recommendations. UNICEF also developed a training package, including an electronic learning course on the Integrated Management of Childhood Illnesses (**IMCI**) in the context of HIV, providing guidance to primary care practitioners on clinical care for children with HIV.

In **HIV prevention** as a large multi-year programme on Most At-Risk Adolescents (MARA) involving seven⁵⁴ countries was completed, UNICEF continued to support the collection of key information gleaned from over four years of intensive programming. This generated important lessons and the development of a range of resource materials, including a toolkit for researchers, and guidance on ethics, programming and gender, which were shared with other countries through regional and international forums and through journals and other publications. UNICEF **programming for MARA** laid a foundation for sustainable responses through advocacy, strategic planning and capacity building to integrate MARA into national strategies, work plans and budgets. This led to the **revision of legislation/policies** and development of **referral mechanisms** to link health and social services, thanks also to partnerships with local and national government and civil society to plan and implement interventions for MARA/EVA, including outreach, HIV testing and counseling, STI, Hepatitis B and C diagnosis and treatment, community mobilization and adaptation of youth-friendly health and drug-related services to reach and serve MARA.

Major partnerships

Collaborative work with **WHO** resulted in two Regional seminars addressing important policy gaps in the Region in the areas of revisions of PMTCT and Pediatric AIDS protocols and standards as well as revision of national infant feeding policies in the context of HIV. Collaboration with the Institute of Child Health of the **University of London** resulted in a review of the evidence on the progress of the HIV epidemic and implications for programming in Central Asia. This work

⁵³ Kazakhstan, Kyrgyz Republic, Tajikistan, Turkmenistan and Uzbekistan

⁵⁴ Albania, Bosnia and Herzegovina, Moldova, Montenegro, Romania, Serbia and Ukraine

led to a publication entitled *“Central Asia: the new hotspot in the AIDS Epidemic”* in the prestigious Lancet Infectious Diseases Journal right before the International AIDS Conference in Vienna. Collaboration with the **London School of Hygiene and Tropical Medicine** (LSHTM) resulted in continued technical support to countries to collect and analyse strategic information on MARA and dissemination of findings at international conferences and in international, peer-reviewed journals. UNICEF also continued engaging with Civil Society Organizations, in particular the **Eurasian Harm Reduction Network, Open Society Institute**, and the **Eurasian Union of People Living with HIV** as key partners advocating for the rights of children and families living with HIV. Support was also provided to the establishment of a **regional network of parents and caregivers** of HIV positive children.

Common constraints

A key obstacle for the Region continues to be the **widespread and generalized stigma** and negative societal attitudes towards people affected by HIV and those who are vulnerable to HIV infection and engaging in risky behaviors such as drug use, sex work and male-to-male sex. However, it is also becoming increasingly apparent that the HIV/AIDS response in many countries of the Region represents a challenge to government authorities.

Women and children affected by HIV continue to be **segregated into separate maternities**, specialized day care centers or **orphanages** rather than integrated into regular service provision. Abandonment of **children born to HIV infected parents** is still on the rise. Infected and affected children are often not prioritized for de-institutionalization, fostering or other family based care. Fragmented and vertical health care systems providing highly specialized care are another obstacle to ensuring universal access to prevention and care services. In many countries, the **data** collection and the use of evidence to inform policy making and programming needs further improvement. Most countries fund the bulk of their national AIDS responses using external funding, especially the Global Fund. As GFATM investments in the Region decrease and countries cease to be eligible for further funding, governments will need to ensure continued support to HIV care, treatment and prevention, and to civil society organizations providing services to those who are most vulnerable to HIV.

Validated good practices and any lessons learned

UNICEF has been promoting systemic changes in the HIV response by the health sector through advocacy work, technical assistance and capacity building for countries to develop comprehensive and **integrated models of PMTCT**. UNICEF has promoted the development of functional linkages between HIV and MCH programmes and integrating HIV care and counseling into existing safe motherhood and maternal and child health programmes. A review of the available data and experiences from the region in implementing PMTCT programmes was undertaken.

Evidence-based programming contributed to global lessons learned about the barriers and opportunities for reaching and intervening among **MARA/EVA**. In particular, MARA programming showed that HIV is an excellent strategic entry point for learning about and addressing the varied and complex needs of at-risk adolescents. In partnership with LSHTM strategic information and lessons learned were published in international journals and publications. UNICEF RO advocated to promote and strengthen the work among MARA at regional and global conferences and meetings, including Vienna International AIDS Conference; Moscow EECA Regional AIDS Conference and the Fifth Balkans Regional AIDS Conference.

Value Added of Regional Office Support

The International AIDS Conference in Vienna with its special focus on the epidemic in Eastern Europe and Central Asia represented an important opportunity for advocacy. UNICEF prepared and launched a regional report ***“Blame and Banishment: the underground HIV epidemic affecting children in Eastern Europe and Central Asia”***. The report was launched by the Executive Directors of UNICEF and UNAIDS together with representatives of the affected communities. It received widespread media coverage in international and national journals, radio, TV and web-based publications. The report resulted not only in greater visibility and understanding of how HIV affects children in the Region, but also in increased funding for country and regional programmes.

The RO played a coordination role by representing UNICEF at key meetings with the UNAIDS secretariat and cosponsors as well as in meetings at the EU. The RO provided support and guidance to country offices on complex technical issues like early infant diagnosis, revision of PMTCT and infant feeding protocols and policies. The IMCI course and the e-learning

package developed by RO were available broadly to all Russian Federation speaking countries for their use and adaptation. The RO approach to programming for MARA contributed critical technical expertise, leadership and coordination and kept attention of government and civil society partners applied to the challenging issues related to further development of sustainable programming for MARA.

An innovative course for capacity building of primary health care workers in the management of pediatric HIV infections has been developed using electronic learning approaches. The e-learning materials were introduced in 10 countries of the Region and their use will be scaled up in 2011.

▪ **FA4 - Child Protection**

Major Initiatives and Key results

In strengthening child protection systems in 2010, UNICEF in CEE CIS has continued to focus on two pillars – **child care** system reform and **juvenile justice** system reform/building – hence capitalizing on investments made by UNICEF in the region over the past ten years. In doing so, and building on lessons learned over the years, UNICEF continued to promote comprehensive changes in these two systems including through legislative reform, evidence-based policy development, strengthened data collection and management, increased institutional and professional capacity, as well as modeling new services for improved coverage, quality and targeting of services for children and families at risk or already affected by family separation.

Implementation of **de-institutionalisation** plans was pursued in most countries with significant progress in Georgia, Moldova, Russian Federation and Serbia. Alternative services were further developed in Belarus where de-institutionalization strategies resulted in placement of 74% of new cases of children deprived of parental care in family-based alternatives. In Croatia, UNICEF's advocacy led to a ministerial decision to prioritize placement of children under three in foster families, this has decreased the number of youngest children in institutions by 205 in one year. In Moldova, the number of children in residential care declined by 14% in 2010. Nevertheless a few private/NGO orphanages have recently opened, and more effort are required to ensure national commitments are not sidestepped. In Georgia, reforms led to the closure of one large scale children's home and five boarding schools for **children with disability** and special needs. Official data reveals a continued decrease in the number of children in institutional care: from approximately 5,000 children in 2005, to 1,221 in 2010, although it must be noted that data related to children in private institutional care are still not accounted for in national statistics. Development of **foster care**, expansion of **small group homes**, social work capacity on family reunification have also been strengthened to support the process.

Albania adopted the **law** on the "Protection of the Rights of the Child" translating the CRC into domestic law and providing for the office of the Child Rights Commissioner. In Turkey, **constitutional amendments** were made including child rights and especially the right to protection. This made possible the establishment of a (child) **ombudsperson**. In Kazakhstan, the **Hague Convention** on inter-country Adoption was ratified.

In Moldova, **Children in conflict with the law** were significantly less likely to receive punitive treatment, i.e. get sent to jail, especially for non-violent crimes. There were 60% less children in jails compared to 2006. The number of children in pre-trial detention decreased by 40% in 2010 compared to 2009. As many as 70% of sentenced children received alternative sentences. In Albania, over 40% of sentences for juveniles use alternatives to detention. A new draft **law on mediation** extends discretion for mediation referral to judges and prosecutors and makes it an obligatory option for consideration before court session. Police diverted 22% of juvenile offences to victim-offender mediation in piloted cities.

With the notable exception of a successful campaign on the **inclusion of children with disability** in Montenegro (see Section 6), initiatives aimed at social change are limited in the region. Social change therefore features prominently in the regional Child Protection strategy for the 2011-13. To promote large-scale national de-institutionalisation, UNICEF in Bulgaria successfully engaged in a highly visible advocacy and awareness raising campaign, including TV shows, social media, outdoor and print media, including also mobilization of support and funds from corporate sector, individual citizens and engaging school children.

In June 2010, a **child protection emergency response** was developed in Kyrgyzstan and Uzbekistan. In Kyrgyzstan, the opening of 45 child-friendly spaces allowed to provide support to more than 5,000 children and allowed launching a major campaign on sexual violence.

In view of improving UNICEF's capacity for evidence-based policy advocacy, country offices support government partners in collecting a list of **17 core child protection indicators** developed by the Regional Office and endorsed during the regional CP meeting.

Partnerships

Please refer to Section 3.1 on Strategic Partnerships. In addition, several country offices in the region have reinforced partnership with the **European Commission** and were seen as being key in providing the right expertise for supporting governments in implementing necessary reforms, as in Georgia, Moldova, Montenegro, Serbia and Turkey.

Challenges

Lack of support to juvenile justice reforms in some countries such as Belarus, Azerbaijan and Ukraine has obviously slowed down progress. As a consequence of the economic crisis, several governments in the region introduced significant **budget cuts in major social protection programmes** at central and local levels which prevented the development of new alternative and support services. **Lack of data**, especially in Central Asia, continues to represent a challenge to proper policy advocacy and programming, as well as to providing in-time measurement of impact on the most vulnerable children.

Validated good practices and lessons learned

With the support of the French National Committee, advocacy visits on juvenile justice were conducted in Bulgaria, Moldova and Ukraine with high profile European human rights advocate, Robert Badinter. These visits allowed bringing the situation of minors in detention at the forefront of media attention in these countries and to accelerate some reforms for improving the legal framework and the conditions of detention of minors in pre-trial detention.

The **Child Protection regional network meeting** in October 2010 was a key event to redefine joint regional priorities and renew consensus on an outcome document outlining priorities in joint work for the next two year and common indicators of progress. An agreed upon approach for addressing equity issues in relation to child protection in our region were defined in order to **address equity** through closer monitoring of access provided to benefits and services to most vulnerable families as well as to better measuring impact of these measures on key child protection such as prevention of family separation.

▪ FA5 Policy Advocacy and Partnerships for Children's Rights

Major initiatives and Key results

With the crisis still looming large across the region and a more consolidated body of knowledge on child poverty now available in more than half of the countries, the focus in 2010 was on supporting knowledge generation and advocacy on **social protection** in response to the crisis and mainstreaming **budgeting for children** to improve the effectiveness of sectoral work at regional and country level, particularly in child protection and health. The Equity agenda was translated in the scaling up of the region's attention to **Roma children inclusion**.

Information on the impact of the crisis on children was compiled by all 22 countries and support was given to UNDP's ad-hoc survey to capture the main aspects of social exclusion in five countries⁵⁵. In Belarus UNICEF supported the disaggregation of data from *Belarusinfo* and contributed to spreading the use of the platform in planning and monitoring work at oblast level. Municipal authorities in the former Yugoslav Republic of Macedonia have been using UNICEF provided *Makinfo* software to monitor the situation of children at the local level and plan child rights activities

⁵⁵ Kazakhstan, Tajikistan, Ukraine, Moldova, Serbia, and the former Yugoslav Republic of Macedonia.

in 11 pilot municipalities. The inclusion of a **child poverty** chapter in the 2010 Social Snapshots report of Armenia enabled to secure long-term commitment from the State to monitoring the issue. In Russian Federation, a statistical yearbook on children with disaggregated data was launched. Based on the evidence provided by UNICEF Child Poverty Study, the Ukrainian government added child poverty as a national MDG indicator for the first time in 2010. Similarly in the former Yugoslav Republic of Macedonia, the State Statistical Office reported on child poverty for the first time in 2010. In Albania and Turkmenistan UNICEF contributed heavily to generation of new data on child-related indicators. Serbia managed to include a sub-sample on Roma in MICS4, which will provide much needed data on this vulnerable group. Also in Serbia UNICEF contributed to strengthening administrative data collection systems through supporting the development of social protection indicators.

UNICEF contributed to analytical efforts of UNDP (*Regional Human Development Report on Social Inclusion*) and EC (Child Rights consultation and 'ECD, social inclusion and child poverty' paper), ensuring appropriate attention was paid to issues affecting children and women. Policy briefs linking **budgeting for children** to social protection and to **decentralization** helped clarify challenges and opportunities for UNICEF's engagement at country and regional level in these areas. This was reflected in increased engagement of UNICEF at decentralized level on promoting local action plans including children and improving local service delivery in seven countries⁵⁶ and prompt engagement on **school optimization** reforms in Kazakhstan and Serbia. In Georgia, Moldova and Armenia, UNICEF pioneered advanced thinking and analytical work around the **integration of social and child protection systems** to reach most vulnerable children and adolescents. Tajikistan produced new analysis on the issue of the impact of labour migration on children left behind which will help government define adequate responses. In Serbia UNICEF commissioned an analysis of the **impact of proposed taxation changes on vulnerable families and children**, raising public attention to implications of policy reforms in the revenue collection domain. The findings of a **study on barriers for accessing benefits** and services for disadvantaged and socially excluded groups in Romania highlighted lack of implementation capacity, improper costing and allocation of resources, lack of information by beneficiaries about their entitlements as the main bottlenecks that will need to be addressed.

UNICEF's joint work on ECD, Education and Economic and Social Policy across the Region contributed to **ECD** increasingly being recognized by governments and partners as a strategic entry point for breaking the cycle of deprivation and exclusion of **Roma children**. Evidence on child poverty and social protection generated by UNICEF in the region was used to offer policy recommendations at a Conference on **Poverty and Social Inclusion** in the Western Balkan organized by the WB, EC and DFID and attended by academics and state officials. The findings of the Georgia Welfare Monitoring Survey were effectively used to achieve a compact with MoLHSA and USAID to study and tackle barriers that prevent lowest quintiles from accessing **social benefits**. Timely and high-profile intervention of UNICEF Moldova with Parliament bodies ensured that a winter index was added to calculations of **social aid transfers**, allowing more families with children to receive higher compensations during winter times. Evidence generated in 2009 was used by UNICEF in Serbia to support high level policy makers in the Ministry of Labour and Social Policy to ensure that the new draft **law on Social Welfare** expands the coverage and increases the nominal value of the family allowance. In Tajikistan, UNICEF support resulted in the government approving a resolution to provide social assistance to **HIV-positive children**. In Turkey, UNICEF's long term contribution led to the recognition of child rights in the **national constitution** generating a commitment of the Parliamentary committee on child rights monitoring to establish a child ombudsperson and monitor consistency of legislation and budget allocations for children in the annual budget. UNICEF Armenia was able to use knowledge generated by child poverty study and facilitate a **parliamentary hearing** to focus attention of government and development partners on the need for expansion of social protection programmes. By doing so, the country office ensured UNICEF's value added in policy debates alongside traditional donor agencies (WB, IMF) and set the foundations for other collaborations with these agencies to ensure inclusion and special needs of children are taken into account in reforms of integrated services.

Findings from the model family analysis were disseminated at the World Bank conference on Western Balkans. Case studies from Moldova and Armenia were widely shared with the rest of the organization (through ICON and the Economic and Social Policy Community of Practice) and contributed to global knowledge on how UNICEF can leverage international financial institutions to support governments in mitigating the impact of the crisis on vulnerable families and children.

Major partnerships

⁵⁶ Armenia, Moldova, Bosnia and Herzegovina, Bulgaria, the former Yugoslav Republic of Macedonia, Romania, Serbia and Uzbekistan.

Global Programme Partnerships: UNICEF's strengthened its relations with the **World Bank** through initial dialogues on ECD and school optimization. In the former Yugoslav Republic of Macedonia UNICEF supported the first electronic data system to register interventions by the Centres for Social Work was linked to a World Bank sponsored database on social transfers. In Tajikistan UNICEF engagement with the **IMF** was instrumental in protecting critical social spending for children during the crisis.

In Kyrgyzstan UNICEF was recognized as key leader on social protection reform, grounded in providing analytical insights and engaging with other developmental partners (**EU, GTZ, World Bank**). In Moldova UNICEF successfully partnered with the EU and the government to institutionalize monitoring around child poverty and inclusion, and to expand social protection provisions. UNICEF ensured that the EU progress reports on Croatia, Serbia, Montenegro and the former Yugoslav Republic of Macedonia 2010 reflected the areas for improvement in child rights. UNICEF is contributing to improved coordination and coherence in approaches and actions around Roma inclusion among **UN agencies** in the region as convenor of the **RDT Roma Task Force** created in 2010. UNICEF secured a focus on children by participating in the Advisory Board for UNDP's upcoming Regional Human Development Report.

Common constraints and factors

The **economic crisis** was used as an opportunity to promote comprehensive and child-oriented reforms in social protection and services only in very few countries; in most others, fiscal and macro-stability constraints prevailed over considerations to protect the welfare of the most vulnerable children, children with multiple siblings, with disability, living in institutions, from ethnic minorities and living in rural areas. The expulsions of Roma migrants to their countries of origin and widespread discrimination continue to hinder progress toward Roma integration in CEE countries.

Limited access to data and information on public social expenditure in a number of countries, especially in Central Asia, continues to hamper the provision of evidence-based analysis and policy options to partners and policy-makers. However, the 4th round of MICS, the extension of EU-SILC survey to the former Yugoslav Republic of Macedonia, the projected revision of TransMONEE and CO initiatives in data collection offer important opportunities.

Validated good practices and any lessons learned

Case studies from Moldova and Armenia were widely shared with the rest of the organization (through ICON and the ESP Community of Practice) and contributed to global knowledge on how UNICEF can add value to the work of International Financial Institutions to support governments in mitigating the impact of the crisis on vulnerable families and children.

Value Added of Regional Office Support

The Regional Office facilitated and drove Public Finance Management in CEE CIS and established clear operational **links between public finance, social policy and child-wellbeing** as the specific value that UNICEF can bring to discussions with international partners, line ministries and Ministries of Finance. This was done, for example, by focusing school optimization processes not exclusively on cost-saving and efficiency but rather on the need of investing in equity, social inclusion and quality.

In the work around **Roma inclusion**, the RO provided the necessary linkages between various parts of the organisation and external partners to ensure that such a complex and transnational issue is approached consistently and appropriately by all actors that have a stake and can make a difference in the issue.

Among growing pressures towards narrow targeting of benefits and use of Proxy Means Testing in social protection, the RO provided **solid counter-factual evidence** to show the ineffectiveness of these tools for child poverty reduction and continued to make the case for all children, and especially those currently excluded, to be covered by expanded social protection systems combining universal with targeted measures, as well as supply with demand-side interventions.

Core Corporate Commitment for Children in Emergencies

UNICEF provided timely response to humanitarian and post-crisis situations during and following the conflict in southern Kyrgyzstan. The crisis triggered a massive response by the Country Office, supported by the Regional Office and Headquarters. In addition, UNICEF Uzbekistan also responded to the influx of refugees fleeing from the violence. UNICEF's response was guided by the revised Core Commitments for Children and the inter-agency Cluster Approach. Other countries in the region, such as Tajikistan, Montenegro, Albania, Bosnia and Herzegovina, Moldova and Serbia, also experienced emergencies, but these were primarily small-scale disasters. UNICEF supported the national counterparts, especially line ministries, in conducting rapid assessments, coordinating sectoral response and providing relief assistance to affected children and women.

UNICEF country offices continued to provide effective support to national capacity development for governments in early warning and emergency preparedness plans. At the regional level, the Regional Office updated its own emergency preparedness planning, which included a review of emergency risks and potential scenarios as well as specific procedures to support COs in responding to disasters. In particular, modalities for the continuation of essential business processes in the event of an emergency were tested. The exercise involved all critical staff in the Regional Office as well as common services such as IT/telecommunications and human resources.

In line with its accountabilities under Cluster Approach and Core Commitments for Children, UNICEF continued to strengthen its partnership with key agencies working on **emergency preparedness and response capacity**. For instance, inter-agency preparedness and contingency planning exercises were conducted with **Office of the Coordination of Humanitarian Affairs (OCHA)** in Armenia, the former Yugoslav Republic of Macedonia, and Montenegro. During the response to the conflict in Kyrgyzstan, the Regional Office closely collaborated with key regional humanitarian organizations such as **United Nations High Commissioner for Refugees, World Health Organization and World Food Programme**.

UNICEF cooperated with the **UN Secretariat for International Strategy for Disaster Reduction** in high-lighting disaster risks in the region and advocating for risk reduction policies and strategies. The Regional Office successfully negotiated the second round of funding from European Commission Disaster Preparedness (**DIPECHO**) programme for disaster risk reduction programmes in Central Asia and South Caucasus. The Regional Office guided the overall design, planning and development of the programme. In August 2010, a special meeting was organized in Istanbul-Turkey which brought together project focal points from all seven implementing countries⁵⁷ in the two regions. The meeting introduced the participants to the scope and objectives of the programme and established modalities for the coordination, management, monitoring and reporting of the programme. The results will be discussed and shared in a knowledge management workshop in March 2011, which will further contribute to discussions in the global platform for disaster risk reduction to be organized by International Strategy for Disaster Reduction in May 2011.

The RO also maintained networks with selected academic/research organizations, including **Geneva Center for Security Policy, Oxford Analytica** (based in London) and **Internal Displacement Monitoring Centre** to support capacity building and thematic inputs on political and security analysis for the region.

SECTION FOUR - Management and Operations

4.1 Overview of 2010 achievements against the Regional Office Management Plan (ROMP) for the biennium 2010-2011 & the 2010 Annual Work Plan

Summary of Regional Office results by BSB function

- Representation and advancement of the core mandate (function 2): As children have been largely left out in reform of social protection systems over the last decade, ensuring that child rights are centrally placed in the debate informing national priorities, has been the guiding principle for the guidance, support and advocacy by the Regional Office. Cooperation with the **European Commission** has been directed towards ensuring children's

⁵⁷ Armenia, Azerbaijan, Georgia, Kazakhstan, Kyrgyzstan, Tajikistan and Uzbekistan

priorities are well reflected and incorporated in the principles guiding EC's priorities for the region. The **Regional MDG Meeting** held in Istanbul in June 2010 provided a good opportunity for UNICEF to highlight the equity agenda and call the attention of Governments on the importance of addressing disparities and inequities within their countries as the only way to achieve the MDGs and Millennium Declaration. Participation by the Regional Director in the **WHO Regional Committee for Europe**, a forum bringing together all Ministers of Health from the region, was an important opportunity to advocate for the necessary changes and measures required to prevent further spread of polio in the region.

- Programme guidance, management and oversight (function 4): To review progress on timely and enhanced technical support and programme guidance for enhanced quality and effectiveness of UNICEF-supported programmes of cooperation please refer to Annex 2 which provides details of progress against each "high-level" Target, and the end-2010 status of each performance Indicator of the RO Management Plan for 2010-2011.
- Emergency Management (function 6): The regional office regularly disseminated corporate emergency policy guidance to the country offices in the region. RO provided intensive support to the country office through staff deployments, resource mobilization, business continuity management, inter-agency coordination, technical advice (e.g. in rapid assessment), cluster leadership, early recovery and peace promotion. Significant management results include UNICEF's timely response to humanitarian and post-crisis situations during and after the conflict in southern Kyrgyzstan, which triggered a massive response by the Country Office, supported by the Regional Office and Headquarters. UNICEF's response was guided by the revised Core Commitments for Children and the inter-agency Cluster Approach. At the regional level, the Regional Director activated the Crisis Management Team which ensured close coordination with the Country office, EMOPS, other HQ divisions and the Supply division. At the regional level, the Regional Office updated its own emergency preparedness planning, which included a review of emergency risks and potential scenarios as well as specific procedures to support COs in responding to disasters. In particular, modalities for the continuation of essential business processes in the event of an emergency were tested. The exercise involved all critical staff in the Regional Office as well as common services such as IT/telecommunications and human resources. Overall, country offices in the CEECIS region are now much more engaged in and committed to emergency preparedness planning compared to a few years ago. For example, the majority of the country offices update their emergency preparedness plan at least every two years. In line with the global approach to the management of emergency preparedness processes, RO will be increasing utilizing and relying on the global Early Warning and Early Action (EW-EA) system to monitor and support country-level emergency preparedness planning. According to a recent study conducted by EMOPS Geneva, CEECIS is one of the regions that most actively use the EW-EA system. The region is therefore well positioned to rapidly shift the preparedness planning process to the global platform—a priority of RO in 2011. The RO is not only actively contributing to the global roll-out, but is also sharing its experience and lessons learnt with EMOPS to further strengthen the global system.
- External Relations and partnerships (function 7): The Regional Director represented UNICEF in the **High-level Conference convened by the Council of Europe and the Government of Italy to stop sexual violence against children**. The launch of the report "Blame and Banishment: the underground HIV epidemic affecting children in Eastern Europe and Central Asia" at the International AIDS Conference in Vienna in July 2010 was a culmination point in effective advocacy. The Conference co-organized by UNICEF and the **World Bank** on Investing in Early Childhood Development held in Ankara in October 2010 was another key forum for advancing the agenda for early childhood development and harnessing the commitment of the World Bank and of the Government of Turkey in this respect.
- Internal and external communications (function 8): Two key **internal and external communication** mechanisms are the **intranet** and the **CEECIS internet sites**. In 2010, internal communication was focused on providing a Russian Federation language consultants list based in Moscow for all COs. The CEECIS website acts as both a public platform for communication and also an internal one by allowing all COs to see what other country activities are. A concerted effort was also undertaken to inform global audiences of CEECIS issues through ICON and the launch of the *Blame and Banishment* report, including development of a UNICEF "microsite" featuring the report, human interest stories and other supporting documents. The report "Blame and Banishment The Underground HIV epidemic affecting children in Eastern Europe and Central Asia" was a perfect example of leveraging communication resources in support of quality results for children, MTSP organization targets and child related

MDGs. Its launch has made UNICEF the “Go to Place” for global knowledge on children and HIV by increasing outreach to and engagement with key media, advocacy players and governments. Serbia, Georgia and Russian Federation have highly developed and successful **media outreach** and its impact is visible through the 8,500 UNICEF mention in the press and blogosphere (Russian Federation). COs budding work in **social media** should be further guided through a media landscape study and strategic support by the RO planned in 2011.

- Staff security (function 16): Although the region does not have a dedicated UNICEF staff security professional on its roster, the RO has been able to ensure uniformly comprehensive coverage by attention to MOSS and MORSS, and reliance on DSS and UNDP security officials to provide guidance and incident coverage. Moreover, Security Management Teams under the Resident Coordinator provide the governance framework for security maintenance and response. Security and staff safety issues were addressed as a component of setting up emergency operations in southern Kyrgyzstan, and the office in Osh was assessed and rendered MOSS compliant early in the response midyear. Work and travel security risks in the highly volatile North Caucasus region remains the dominant concern. To-date, risk has been mitigated to a large degree by adherence to strict security protocols (convoys, curfews, radio coverage, etc.) and augmented by the acquisition of two armored vehicles based in the Vladikavkaz zone office. The catastrophic January earthquake in Haiti served to heighten awareness of seismic risk to UNICEF premises and houses. One benefit was a joint RO-HQ assessment of the Tajikistan office’s proposal to move premises to what was thought to be a more secure building. The assessment concluded that a change of premises was unwarranted on the basis of seismic integrity.

Analysis of factors supporting achievement of results

The Regional Office supported the IRC by seconding the Regional Advisor for Social and Economic Policy as interim Director for most of the time during the latter half of 2010. It is clear that the absence of the Advisor for such extended period had an adverse impact on the achievements in economic and social policy. Also the coordination work related to UNICEF policy and approach in supporting the inclusion of Roma children suffered as a result of this sustained absence.

The position of P4 level manager focusing on public finance management remained vacant during the 2010. Meantime however work on this important area continued through training and support provided by Oxford Policy Management to the Country Offices and the Regional Office. The P3 communication specialist position remained vacant for several months during 2010, however the Regional Office continued the good practice of providing the staff from Country Offices an opportunity to join the Regional Office for a 4-6 week assignment.

Two Regional Office staff members were deployed for emergency support missions to Haiti, which increased the workload of the staff remaining in the office. The successful response to the polio outbreak in Central Asia was made possible thanks to major investment of staff time from the Regional and Country Offices. A total of 10 weeks were spent by three Regional Office staff on mission to the affected countries to support the response to the polio outbreak, without counting for the major staff time allocated to coordinating and supporting the response from the Regional Office. The emergency in Southern Kyrgyzstan in June 2010 also required immediate response and support from the Regional Office. Nine Regional Office staff members supported the Country Office on the ground for a total staff time of 17 weeks. This again does not include the support provided through the Regional Office Crisis Management Team and by different staff members from the Regional Office, as well as staff deployed from other offices in the region. Despite the excellent support provided by EMOPS in mobilizing standby partners, the clear lessons learned is that UNICEF would not have been effective in its emergency response without the staff deployed from the region.

Management practices, systems and structures

A number of offices in the region are going through significant changes, whether to meet the demands of a new country programme or to cope with an emergency. For example, high levels of recruitment have been noted in Georgia (20 posts), Uzbekistan (21 posts) and Kyrgyzstan (31 posts mostly emergency related), and in other offices e.g. Russian Federation where there is a high turnover of staff. Training of key CEECIS staff in competency-based interviewing has been a good support to the hiring process. Extra efforts have been made to support these offices in transition, with career transition

and individual counseling. It is also noteworthy that staff in all offices remains at frontline in meeting demanding challenges and achieving results within tight deadlines and under pressure of dealing with multiple priorities.

The chief concerns of CEECIS staff are also those of the global UNICEF workforce – work/life balance and career development. All offices have taken good notice of this and are implementing initiatives such as individual ‘learning days’ and flexible working practices. The global training initiatives e.g. Leadership Development Initiative and Supervisory Skills are valued. Most offices have been able to run a number of local trainings. Career development is supported primarily by offering short-term assignments in other offices in the region. Two workshops were conducted for staff in Russian Federation and Romania covering skills needed to make the next career move.

National staff calls for expansion of development opportunities and initiatives to both staff categories, national professional and support, as well as creation of internal talent surge allowing gradual career growth of national staff, from GS to NP and NP to IP.

Communication with staff seems to be effective, with formal communication via the CMT, JCC and informal communication via the Staff Association and Peer Support Volunteers. Several offices have developed knowledge/information sharing initiatives e.g. briefings when staff return from trainings or network events and all offices reported at least one staff retreat in 2010. HIV/AIDS in the workplace is highlighted by all the offices. The Local Staff Association Chairpersons were briefed during the 2010 CEECIS Regional Staff Association Meeting on available resources to deal with HIV/AIDS in workplace and coping with stress related to HIV pandemic. Stress counseling is not so widespread in the region, possibly due to lack of resources, but a particular point has been made to support staff in difficult situations e.g. Kyrgyzstan during the emergency.

The Regional office organized two office retreats in 2010 with the objective of improving communication, information sharing, and to ensure a common vision for the Regional Office and for the region as a whole. Monthly Regional Office meetings were reinstituted in 2010.

Procurement Services

Procurement Services have increased four-fold since 2006 to USD 23.6 million in 2010, which places PS value above that of programme supplies (USD 20.8 million). Practically all PS in the region was for vaccines and pharmaceuticals (92%). In the absence of a Regional Supply Officer, Procurement Services consultations are conducted directly between country offices and Supply Division and experience has shown that not only does this direct relationship work well but that a permanent supply capability at the regional level is unnecessary except during relatively short periods of emergency response.

4.2 Oversight function and oversight-related accountabilities

In prior years, the RMT continuously monitored 5 indicators on a quarterly basis to present an overview of CO risk in the following areas: (i) Expenditure rates were used to indicate the risk of weak programme planning and management practices; (ii) late cash requisitions described the risks related to adverse incentives to prioritise spending deadlines and the demonstration of high year-end financial performance ahead of programme results achievement; (iii) the late endorsement of work plans was a proxy for low national ownership; (iv) the proportion of donor reports not submitted on time reflected on the ability of country offices to fulfill reporting obligations and thus avoid reputational risk; and (v) the percentage of Other Resources fundraised and available for use during subsequent year indicated the likelihood of fully achieving planned programmed results.

With the wide availability of the Office Management Reports (OMR) in 2010, the RO made use of the automated and standardised data in the OMR as a source of information for a more descriptive quarterly risk report for the region. The RO is now proposing to use of the OMR to feed data on 11 variables (calculated using 18 OMR indicators) for its Quarterly CEECIS Office Management Risk Report.

The RO provided significant support to Country Offices in the region to implement the UNICEF Risk Management Policy (CF/EXD/2009-006). COs were supported to identify risks to the achievement of country programme objectives, to assess the significance of the risks and prioritise specific actions to align the perceived risks with local risk tolerance levels.

Majority of the Country Offices submitted the Risk and Control Self Assessments to HQ by the deadline and for the few remaining one HQ granted extended deadline. The RO also undertook a risk and control exercise in 2010, focusing on risk to the achievement of ROMP results. A number of lessons learned from the roll-out have helped inform thinking on ERM in the region. One clear lessons learned from 2010 is the importance of dedicated capacity and resources for performance monitoring, and management of the follow-up action. The risk and control self assessments has resulted in a follow-up action plan which will require significant input and investment of staff time at all levels of the organization. It is critically important that the organization manages to balance between the pressure to achieve and demonstrate results and between the time and investment required for managing risks.

Monthly monitoring reports on Regional Office performance were circulated each month during 2010 to all Regional Office staff with reminders for those lagging behind in fund utilization and travel claims, and alerting those responsible on the upcoming deadlines for donor reporting. Further effort was made in 2010 to strengthen the quality of donor reporting in the region. Building on the external auditors' recommendation (from April-May 2010) to conduct systematic sampling on donor report quality, the RO re-examined the threshold of USD500,000 that was used to identify contributions requiring RO support. The 2010 risk analysis by the RO on donor reporting identified a relatively low reporting risk for most COs. The region has a total reporting obligation of 200 reports per year, with Five COs accounting for half of them while 16 COs receive contributions over USD 500,000. The ROs focus on donor reporting in 2011 will therefore to sample reports from those offices with greater reporting burden and will continue to review CO's reporting on contributions over USD 500,000. In 2011 the RO will also strengthened its processes for sampling the quality of donor reports, incorporating a knowledge component on reported programme activities with a view to establishing the progress of demonstration modelling that enhance equity and social inclusion.

In general, the 2010 country annual reports have accurately reported on the programme and emergency events that took place in their respective countries during the course of the year. Country Offices have well described the activities and their intended impact on children and women. Country offices involved in the DIPECHO programme in South Caucasus and Central Asia have reported on their disaster risk reduction activities. However, most offices were not able to adequately highlight the existing/structural issues in programming or the security and emergency risks, which pose a constant threat to the survival and well-being of children. This may be in large part due to the limitations of the new on-line reporting system.

OIA findings for the four countries audited in 2010 (Bosnia and Herzegovina, Bulgaria, Croatia, and Tajikistan) were generally satisfactory (75% of all audited areas). Governance was rated Satisfactory in all countries, whereas Programme Management was rated Partially Satisfactory in two countries (Croatia and Tajikistan), and Operations Support Partially Satisfactory only in Tajikistan. Bulgaria and Bosnia and Herzegovina were rated Satisfactory in all audited areas. The key weaknesses were mostly in Medium Risk areas and related to issues of planning and programme implementation with an emphasis on HACT (discussed under UN Coherence), the management of supplies, and procurement. The RO works closely with offices in preparation of audits, particular with operations pre-audit peer reviews and close involvement in developing post-audit action plans.

On behalf of the UN Board of Auditors, the China National Audit Office (CNAO) audited the Regional Office from 7 April to 1 May 2010. No high risks were identified and the ten low risk observations the external auditors did identify focussed primarily on management issues ranging from performance indicators, monitoring, OR-funded recruitment constraints, travel planning and reporting to feedback from Country Offices on RO performance. The Regional Office did not conduct a formal client satisfaction survey in 2010. In order to receive feedback on the support provided by the Regional Office to Country Offices, a session attended only by the Regional Director and Deputy Regional Director, is regularly organized as part of the RMT. This mechanism seems to have worked quite well. Plans are however underway to conduct an independent client survey during the second quarter of 2011. It is noteworthy that following consultation within the Regional Office and with the Country Representatives, the system of requesting the Country Offices to submit their technical assistance requests to the Regional Office was discontinued in 2010. There was an overall agreement that the process had added another unnecessary layer of requests and had been too limiting in its definition of technical assistance. Instead it was agreed to proceed with a more flexible approach of requests to be made as they emerge and the Regional Office attempting to maintain adequate flexibility to provide support in all areas of RO accountability. The 2011 client satisfaction survey should be a useful exercise to take stock of this experiment and learn from the results.

The region achieved a fundamental efficiency gain with attendant cost savings when it successfully implemented a region-wide video conference capability by which every office was equipped with monitors, cameras, and transmission units in the fourth quarter. The entire cost was funded from regional reserves amounting to USD 120,000 for 22 offices. While it is too early to confirm a precise amount saved, if that is ever possible, it is nonetheless clear that the immediate adoption of the medium has decreased the need to travel for face-to-face meetings and, even when travel was not envisioned, increased the quality of meetings simply by seeing and hearing as opposed to only hearing over telephone lines.

SECTION FIVE - Studies, Surveys, Evaluations and Publications Completed in 2010

Please, refer to Annex 1 for a list all studies, surveys and evaluations which were completed by the Regional Office in 2010, as well as other publications issued.

Management of the evaluation function in the region

In 2010 the RO supported COs to ensure that their evaluation plans are consistent with their strategic shift towards **system strengthening and normative role**. In this perspective the RO engaged actively with COs when preparing their new CPDs and IMEPs plans. The RO in line with the EO guidance on **prioritization of major evaluations**, has put the accent on: (i) the alignment of evaluation activities with the focus of UNICEF support in the country, (ii) the positioning of evaluations at the level of programme components rather than activities, and (iii) on **country led evaluations** which some countries have decided to include in their plans. The RO has provided direct support to the **DAO evaluation in Albania** and shared lessons learnt from this exercise, following this evaluation it also provided technical support to the UNCT M&E working group when developing its M&E framework and its outcome for the new Common CPD.

Quality assurance of evaluation is also supported by the **Regional M&E Facility** created early 2009, which is operating in a timely manner and, according to feedback provided by users and it is highly appreciated. In view of the results of a corporate meta-evaluation issued in May 2010 rating on average evaluations in the region between poor and satisfactory, further guidance was provided at various time of the year on the utilization of the facility. Still at the end of 2010 the level of utilization of the facility is below than 20% of the TOR and evaluation reports reviewed. The RO undertook a further analysis of the Facility to identify potential bottlenecks (time, capacity, budget, evaluation management processes, etc.) with the M&E colleagues.

Contributing to the quality of any evaluation is the expertise recruited to undertake the assignment. In complement to the **regional evaluation roster** RO relayed requests for experts in relevant evaluation networks to enlarge the pool of consultants available to the COs and provided regularly information regarding relevant evaluation events and training. It also connected COs with emerging **national evaluation societies** (for instance in [Romania](#)). Further work needs to take place in 2011 to enlarge the regional roster through vacancy announcements related to evaluations planned for the year.

The main objective of RO support is to ensure that the quality of evaluations is such that their main stakeholders can be **confident to act upon the recommendations** provided. During the M&E meeting held in September, the RO organized a training session to support COs to develop their action plan following evaluation recommendations. At the end of the year a few countries reported having developed an action plan following an evaluation.

There is also a need to engage openly with COs Senior Management through the RMT in 2011 to see how to provide more support to strengthen the quality and utilization of evaluations in the region. The RO will also use the Regional M&E Workshops to address these issues and will reinforce understanding of the importance of strategic country led evaluations, the timely implementation of evaluations to inform decision making processes, quality standards for evaluations necessary to ensure their credibility with stakeholders, and lessons learned from past evaluations.

At regional level, after limited evaluation activities in 2009 and 2010 the RO decided to undertake **regional thematic evaluation** of UNICEF delivery on the **rights of Roma children** in 2011 whose TOR have been drafted in 2010. In 2011 an evaluation plan for the next three years will be developed.

SECTION SIX- Innovations and lessons learned

***"It's About Ability"* campaign in Montenegro**

A three-month social and behaviour change campaign was conducted in Montenegro following the C4D guidelines and it was highly successful. It can be used as a C4D good practice model for replication in other countries facing the same issue and the communication material can be easily adapted. This is already proven to be the case as the campaign key messages and TV spot were adapted from originals from Croatia.

A key innovative element was that the campaign did not only speak about "Ability", it demonstrated it. It was also important that the campaign featured children with disability who were recognisably 'Montenegrin'. Children and young people with disabilities became the "stars" of the campaign, appearing on billboards showing them as active and happy members of society; they were invited onto TV shows to speak about inclusion, their rights and wishes (a result of a roundtable organized through the campaign where children with and without disabilities met with media representatives to discuss media for, with and about children with disabilities); they made one-minute films about inclusion that were aired widely; they participated in sports events, together with other children as part of partnership with Special Olympics; they spoke out in public fora including in an intergenerational dialogue with Government, ambassadors and other senior figures from the international community in Montenegro. Children spoke in all of the local sessions of parliaments devoted to the campaign, and a visually impaired boy who played at the campaign launch was invited to play at the opening of the concert given by La Scala who played in Podgorica in a concert aired live on national television and watched by thousands of the Montenegrin public.

Audience research showed that the average Montenegrin watches 5 hours of television per day. Therefore, having children with disabilities speak out about inclusion and inclusive education on TV proved to be a highly effective communication channel for the general public, influencing people's perceptions of inclusive education and friendships with children with disabilities as it gave the children an extraordinary opportunity to challenge the stereotypes that many people had about them as helpless and/or incapable.

The breadth and depth of the partnerships in the campaign were notable. There is no doubt that the leadership of the then Prime Minister was instrumental in getting the campaign onto the right foot. Having tangible evidence contributed to effective high level advocacy, and keeping up momentum with numerous activities and events involving a broad range of partners, including influential national and international figures contributed to the campaign's success.

The programme faced a roadblock when efforts to move children with disabilities from institutional to family-type care were thwarted by discriminatory attitudes and threats. UNICEF gathered more evidence and turned this situation into a campaign to address social norms towards children with disability. A UNICEF KAP confirmed the need for urgent action: almost two-thirds of parents said it was unacceptable for a child with disabilities to attend the same class as their child. Almost every second person said that children with disabilities should go to special educational institutions and it is in their best interest to live in institutions, not families.

Based on the KAP results, a three month social and behaviour change campaign titled *"It's About Ability"* was implemented to address the discriminatory attitudes. 100 billboards and city lights with images of children with disabilities were posted all over the country; a 30-second TV commercial showing a child with disability in a loving family environment was broadcast on all TV stations for three months; UNICEF publications for students and teachers *"It's About Ability"* were published in Montenegrin and distributed to all primary schools who began organizing sessions of the school parliaments on inclusion; special sessions on building inclusive local communities were held in 8 municipal parliaments together with representatives of school parliaments and parents' associations; One minute juniors produced by Montenegro's children with disabilities were shown on national TV stations and at municipal parliaments' special sessions on inclusion; an inter-generational dialogue on inclusion was held between more than 30 children from school parliaments, ambassadors, senior diplomats, and government; more than 150 children with and without disabilities played basketball together at an event organized with the Special Olympics; a study visit to UK centres for children with disabilities and inclusive schools was organized for high government officials.

Media coverage of UNICEF reached its highest with the “*It’s About Ability*” campaign. More than 160 reports were made on the campaign on the evening news of all Montenegrin TV stations and more than 130 articles were published in three dailies during the three month period. One hour talk shows on the two most watched national TV stations were dedicated to the campaign and had children with and without disabilities discuss live about inclusion.

According to the KAP evaluation survey conducted immediately after the end of the campaign, social distance towards children with disabilities decreased by 10%. ***The percentage of people who find it acceptable that a child with disability goes to the same class with their child increased from 36% to 46%. The percentage of people who find it acceptable that a child with disability is best friend of their child increased from 23% to 33%. The number of people who believe that children with disability should only be in special institutions almost halved.***

SECTION SEVEN - Special Report: South- South Cooperation

Issue related to Public Finance Management and Roma Inclusion have supported exchanges of experiences among several between COs on what works in promoting Roma inclusion through ECD and Education, and on strategies and entry points with national and local governments and international partners for promoting an adequate allocation of resources to ongoing reforms in social protection, ECD, education, child care and health.

The first meeting of UNICEF country offices from South and Eastern Europe to promote Roma children inclusion, through the creation of internal coordination mechanisms to exchange information and coordinate UNICEF actions across CEECIS and EU, HQ, PFP, NatComs and Brussels Office. The scaling up of the Critical Mass Initiative on Public Finance Management (PFM), through a joint training CEECIS-MENA, a second meeting of COs involved, technical assistance to selected country offices in the form of missions and drafting of policy briefs.

The Regional Office organized a Study Tour in Estonia during which education reforms, successful policies and best practices from Estonia, Poland, Slovenia and Finland were shared with UNICEF and government representatives from 15 CEECIS countries. A client satisfaction survey revealed that almost 70% of participating country delegations will build on the lessons they learned from the study tour; more than a third of them have used or intend to use the contacts they made to network with the Estonian Ministry of Education or other Baltic States (Lithuania) and learn from their reforms.

SECTION EIGHT - Report on UN Reform and Inter-Agency Collaboration

The region has one **Delivering as One** pilot, Albania. In addition Montenegro and Kyrgyzstan have benefited the DaO funding window. The experience from Albania has not been particularly successful from a UNICEF results perspective. The common fund led to a steep increase in the number of UN agencies becoming active in Albania, many of them non-resident. This contributed to the UN Country Team in Albania devoting substantial time to consensus building processes with priorities within individual agencies’ mandates given similar weight. The Delivering as One pilot in Albania has not facilitated UNICEF, or the UN Country Team as a whole, to place child rights and human rights at the centre of the development agenda. Rather the process may have led a diminished independent voice which is essential for promoting the child rights agenda. While the evaluation of the Albania DaO pilot in 2010 provided a relatively positive assessment, UNICEF evaluation experts and as well as an independent M&E Facility rated the quality of the evaluation less well.

UNICEF Country Offices in the region in many instances continue to witness a blurring of the lines between the roles of the Resident Coordinator and the UNDP Resident Representative, contrary to the Management and Accountability Framework approved by the UNDG which calls for a clear separation and “firewall” between the two functions. UNICEF CEECIS shared its concerns related to UN coherence with Headquarters, which led to the global consultation on UN Coherence in November in Istanbul. The consultation confirmed that most Country Offices around the world are facing the same challenges, with the situation exacerbated in countries with small UN resident presences. The conclusion was that UNICEF globally should take a bolder position advocating for a stronger focus within UN coherence for achieving results, instead of

focusing on coordination processes. UNICEF at the regional level has raised its concerns in the Regional UNDG (Regional Directors Team) with some results. Nonetheless some other agencies – often non-resident or represented at the country level by junior national staff - do not necessarily share the same perspectives.

The Regional Directors Team met in 2010 three times, in March, June and October. A smaller group also met in June 2010 to review the performance of the Resident Coordinators. The Regional Director also attended in December 2010 a meeting of all RC/RRs of the region, together with other Regional Directors and the Chair of the UNDG/UNDP Administrator, and presented UNICEF's equity refocus. The planning and management of the Regional UNDG/RDT meetings saw some improvements by October 2010 with a more structured agenda, which in turn should help to ensure a more substantive work plan for 2011. One factor which may be contributing to the performance of the Regional UNDG is the uneven representation of key resident agencies in the Regional UNDG. UNHCR and WFP, which have an international presence in some countries in the region but have different regional configurations, are not regularly participating in the Regional UNDG/RDT meetings. On the other hand, non-resident specialised agencies or those with national level representation participate energetically.

The Regional UNDG/RDT meetings in March and October were back to back with the meetings of the Regional Coordination Mechanism (RCM) chaired by the Economic Commission for Europe (UNECE). UNECE participates in the Regional UNDG (RDT). The UNECE shared in March 2010 a draft concept paper prepared by the Regional Commissions globally on the roles of the two mechanisms, RDT and RCM, but the draft is still to be developed further. A key achievement within the RCM mechanism was the preparation of the Regional MDG Report and the convening of the Regional MDG meeting in Istanbul in June 2010. Both the preparation of the report and the meeting enabled the RCM members to develop the common messages and priorities of promoting social inclusion in the region.

On behalf of the Regional UNDG/RDT, UNICEF assumed the role of Convening Agency for and Chair of the Regional Peer Support Group (PSG) for Europe and Central Asia in 2010. UNDAF and UNDAF-related processes in four countries were supported by the PSG, namely in Albania (One UN Programme), Kyrgyzstan, Montenegro (One UN Integrated programme) and Ukraine, as well as an integrated plan for Kosovo⁵⁸; each UN team had different support needs from the PSG.

UNCTs indicated satisfaction with the timing and quality of substantive support received from the Regional PSG in 2010. In most cases, PSG engaged with UNCTs earlier in year, which ensured UNCTs had substantive comment to inform their negotiations with governments. The UNCT in Albania was the exception as it did not engage with the PSG until its preparation of the Common Country Programme Document. The PSG also undertook in-country support missions that helped the drafting processes, which were highly appreciated by UNCTs. While the overall quality of UNDAFs has improved, it continues to be uneven. The revised UNDAF guidelines enabled UNCTs to consider focusing results frameworks strategically at outcome level, which all UNCTs elected to do. This focus on outcomes encouraged the UNCTs to articulate the UN's contribution to national development outcomes and the relevancy of this contribution was well received by national governments. However there is concern that UNDAF results matrices continue to convey non-strategic support from UN agencies. Notably, the expansion of UNDAFs to include non-resident agencies is perceived to lead difficulties in the prioritisation within UNDAFs.

Since January 2011, sixteen COs in the Region have started or are in the second year of new CP cycles. Each of these offices can clearly link their PCRs and IRs to specific UNDAF outcomes. However, while all COs in the region can link their work to UNDAFs, the variable quality of UNDAFs, including the articulation of results, and the continuing widening of UNDAFs to more agencies and low level results, presents a serious challenge. This appears also to be the case for other agencies: as noted though the PSG, UNCTs struggled to keep UNDAFs at a strategic level while individual agencies continued to propose stand-alone, low level indicators during UNDAF finalisation.

Overall, the PSG worked efficiently, with feedback on CCAs and UNDAFs provided to UNCTs within one to two weeks. The earlier engagement of UNCTs by the PSG was high appreciated and useful. As Chair, UNICEF convened a meeting of the PSG in June to ensure awareness of the ToR and roles of the PSG. The meeting was attended by the UNICEF Regional Director (representing the RDT) and Deputy Regional Director, who facilitated a discussion on UNDAF processes, their

⁵⁸ UNSCR 1244

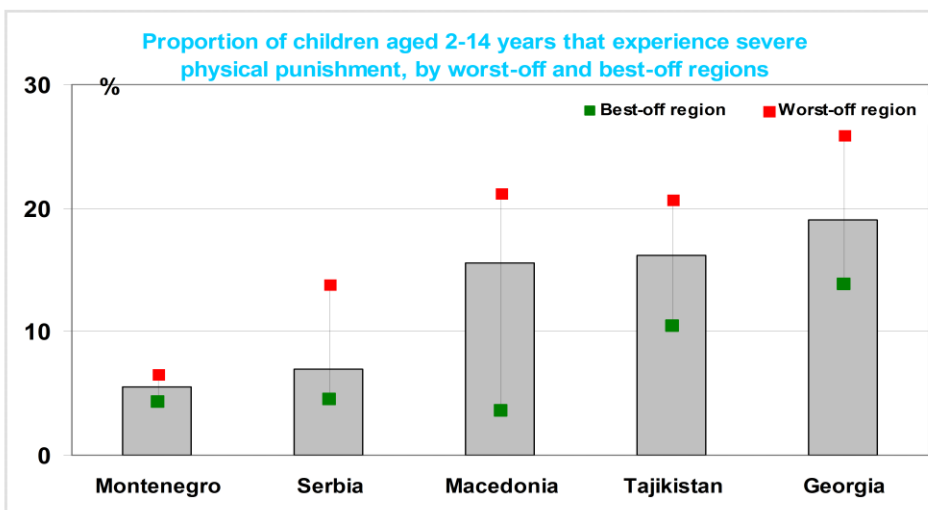
relevancy and strategic focus. There was consensus that UN agencies at country and regional levels need to be engaging in discussion on how they can best contribute to key development issues, rather than propose stand-alone projects. The direct link between the PSG and the Regional Directors Team was maintained and, in addition to timely quality assurance provided remotely, the PSG also organized in-country support missions to participate for Strategic Prioritization Retreats and to help UNCTs both formulate and finalise UNDAFs.

Cooperation with UN agencies on joint programmes continued in 2010. Most country offices had participated in joint programmes and in 2010, nine offices were implementing joint programmes under the MDG-Fund, the Multi-Donor Trust Fund (MDTF) and the UN Trust Fund for Human Security (UNTFHS). Areas of cooperation focused on those where there was strong added-value on joint UN engagement such as MDG reporting, DHS, addressing needs of vulnerable communities, **domestic violence** and promoting **inter-ethnic dialogue**.

Six countries in the region are implementing joint projects funded through the Spanish *MDG-F* and UNICEF is involved in four of them, namely Albania, Bosnia and Herzegovina, the former Yugoslav Republic of Macedonia and Serbia. Programmes included, promoting **youth employment** and healthy lifestyles, **inclusive education**; and reducing **child malnutrition**, which was a USD 4 million programme implemented jointly by WHO, FAO and UNICEF.

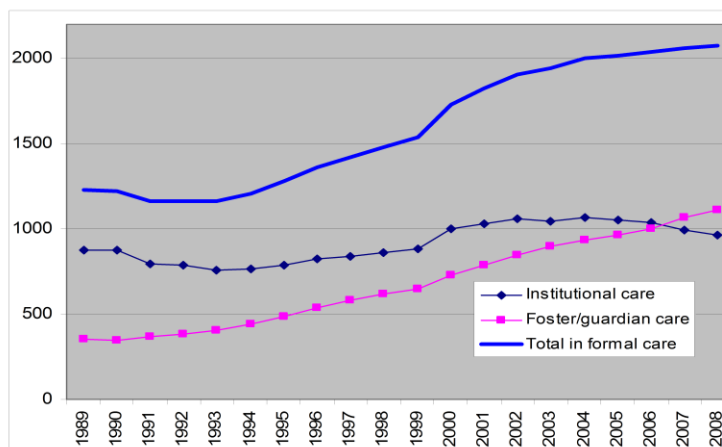
HACT is a recurring unresolved audit issue and relates to the fact that UNDP is less interested in pursuing the approach because its business model in implementing for government is dissimilar from UNICEF's cash transfer approach to government. Since 2008, however, the RO has guided country offices to adopt the HACT methodology (e.g. risk assessment and assurance measures) without necessarily waiting for adoption by the whole UN Country Team.

Severe punishment of children



Note: For Kyrgyzstan age group is 3-14 years

The number of children placed in all forms of care continues to increase, but more in alternative care than in institutional care



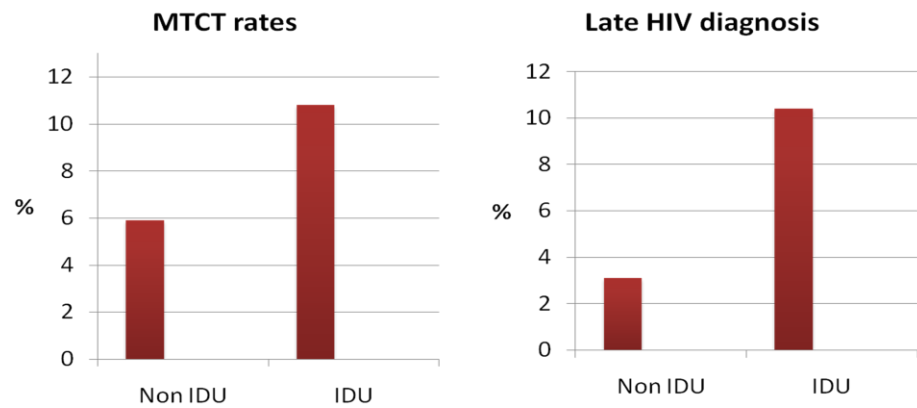
Source: TransMONEE database. Notes:

a) Countries included: Western CIS, TFYR Macedonia, Azerbaijan, Kyrgyzstan and Uzbekistan.

b) Data on institutional care: for 1989 for Kyrgyzstan and for 2007-2008 for Uzbekistan are estimated by UNICEF RO for CEE/CIS.

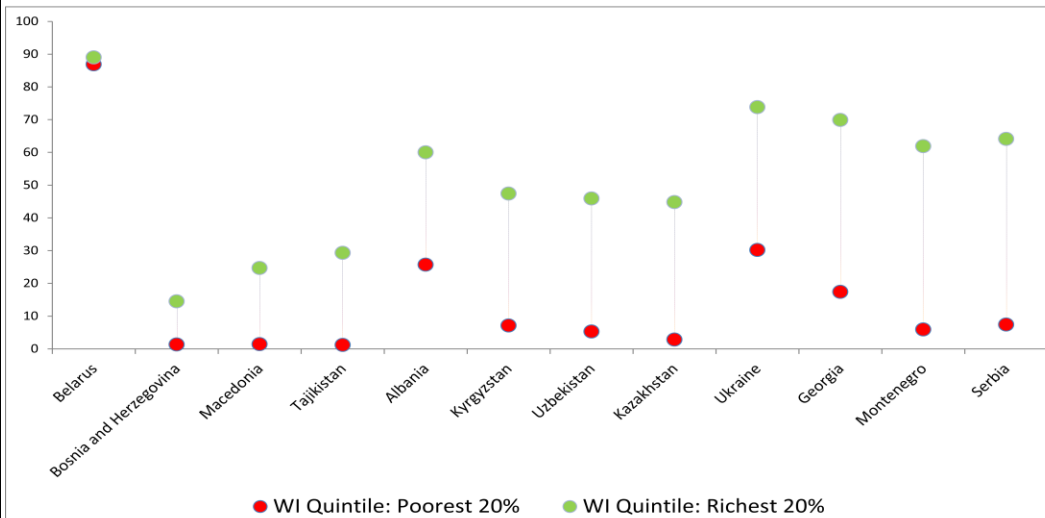
c) Data on foster/guardian care: for 1989-1990 for Moldova, for 1989 and 2004-2005 for Kyrgyzstan, for Uzbekistan for 1989-2001 and for 2007-2008 are estimated by UNICEF RO for CEE/CIS.

Inequities in access to care and higher MTCT rates among drug using women



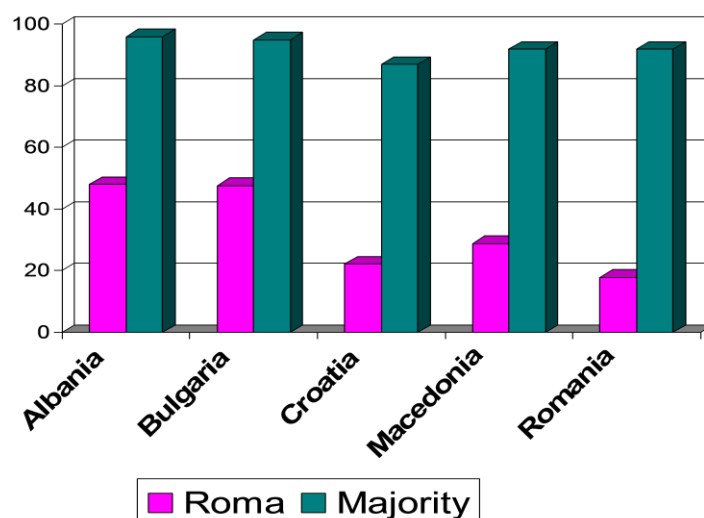
Source: "Prevention of mother-to-child transmission of HIV among pregnant women using injecting drugs in Ukraine, 2000-2010" European Collaborative Study, 2011

Wealth Disparities in Access to Preschool



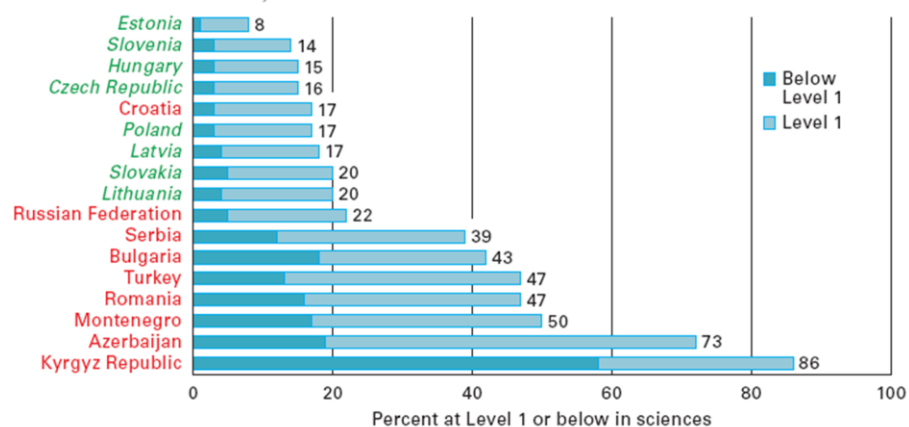
UNICEF Regional Office CEE/CIS_MICS_2007

Roma children: Low Primary School NER



Education Quality affects Demand and Youth Employment

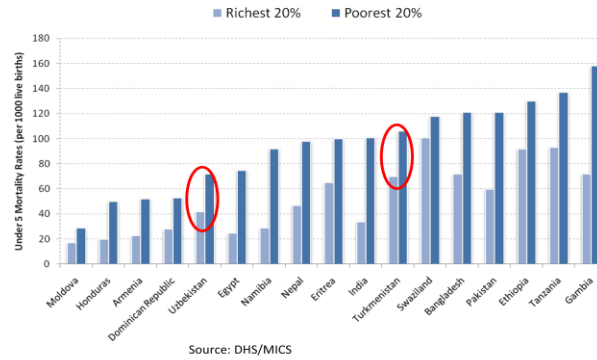
Figure 1 Percentage of 15-year-old students scoring at Level 1 or below in science, PISA 2006



Source: OECD 2006, Table 2.1a.

Under 5 Mortality Rate - Overall Good Progress in the Region but Persisting Disparities

Wide inequities comparable in some countries to the situation in Africa or South Asia:



Source: State of the World Children, 2010

Detention remains the norm in the region

