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**United Nations Children's Fund** 

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# **Country programme document**

## Eritrea

Summary

The country programme document (CPD) for Eritrea is presented to the Executive Board for discussion and approval at the present session, on a no-objection basis. The CPD includes a proposed aggregate indicative budget of \$14,560,000 from regular resources, subject to the availability of funds, and \$87,900,000 in other resources, subject to the availability of specific-purpose contributions, for the period 2017 to 2021.

In accordance with Executive Board decision 2014/1, the present document reflects comments made by Executive Board members on the draft CPD that was shared 12 weeks before the second regular session of 2016.

\* E/ICEF/2016/13.





### **Programme rationale**

1. The population of Eritrea was estimated at 3.6 million in 2015, up from 3.2 million in 2010, of which approximately 65 per cent of live in rural areas. The population is predominantly young, with 58 per cent under 19 years of age. Women account for 55 per cent of the population.<sup>1</sup>

2. Since the end of the liberation war in 1991 and formal attainment of independence in 1993, the country has experienced good progress in social development and the realization of children's and women's rights. The proportion of people living in poverty declined from 70 per cent in 1995 to 58 per cent in 2015.<sup>2</sup> In rural areas, where poverty levels are higher, poverty rates fell from 82 per cent to 72 per cent, while urban poverty levels fell from 36 per cent to 30 per cent during this period. The country experienced an average annual gross domestic product growth rate of 3 per cent over the last decade.<sup>3</sup>

3. Remarkable progress has been recorded in the health sector. Eritrea successfully met Millennium Development Goal 4: the under-five mortality rate was reduced from 136 per 1,000 live births in 1995 to 63 per 1,000 live births in 2010 and 50 per 1,000 live births in 2014.<sup>4</sup> Similarly, the country reached the Goal 5 target when the maternal mortality ratio was halved from 998 deaths per 100,000 live births in 1995 to 486 deaths per 100,000 live births in 2015.<sup>5,6</sup> Under Goal 6, Eritrea recorded a reduction in HIV and tuberculosis incidence, and malaria cases and deaths. The country is now at the malaria pre-elimination phase with a projected malaria mortality rate estimated at 0.002 per cent in 2015.<sup>7</sup>

4. Considerable progress in reducing under-five child mortality masks challenges in lowering the neonatal mortality rate, which marginally improved from 25 per 1,000 live births in 1995 to 23 per 1,000 live births in 2010. Neonatal mortality accounts for half of all deaths in the first year and around a third of deaths in the first five years of life. About 70 per cent of neonatal deaths in Eritrea occur within one week of birth, mainly owing to prematurity, complications during childbirth and infections. The latest available estimates suggest that 57 per cent of pregnant women attended at least four antenatal care appointments and 32 per cent gave birth in the presence of a skilled birth attendant.<sup>8</sup>

5. Undernutrition contributes to nearly half of under-five deaths. According to Eritrea Population and Health Survey (EPHS) 2010 data, 39 per cent of children under five years of age are underweight, 15 per cent are wasted and 50 per cent are stunted. The Southern Red Sea and Northern Red Sea regions have the highest stunting rates, at 57 per cent and 58 per cent, respectively. Stunting hinders a person's lifelong ability to reach their full potential and is a threat to human capital development. Approximately 18 per cent of children live in households that use inadequately iodized salt, and 42 per cent of children

<sup>&</sup>lt;sup>1</sup> Eritrea Population and Health Survey (EPHS), 2010.

<sup>&</sup>lt;sup>2</sup> UNICEF, Women and Children Situation Analysis, UNICEF Eritrea Country Office, November 2015.

<sup>&</sup>lt;sup>3</sup> African Development Bank, African Economic Outlook 2016.

<sup>&</sup>lt;sup>4</sup> Eritrea National Statistics Office/Fafo Institute for Applied International Studies (Norway), Eritrea Population and Health Survey 2010 (EPHS 2010).

<sup>&</sup>lt;sup>5</sup> World Health Organization (WHO), *Global Health Observatory Data Repository 2015*.

<sup>&</sup>lt;sup>6</sup> WHO/UNICEF/UNFPA/World Bank Group and the United Nations Population Group, *Trends in Maternal Mortality: 1990-2015*. The report estimated the 2015 maternal mortality ratio at 501 per 100,000 live births.

<sup>&</sup>lt;sup>7</sup> Eritrea Ministry of Health, Health Management Information System 2015 (HMIS 2015).

<sup>&</sup>lt;sup>8</sup> EPHS, 2010.

aged 6 to 59 months have vitamin A deficiency. The prevalence of anaemia among children aged 3 to 5 years stands at 43 per cent. Iron deficiency affects 12 per cent of pregnant women and 14 per cent of non-pregnant women.<sup>9</sup>

6. Other factors impacting children's health in Eritrea include pneumonia and diarrhoeal diseases, linked to limited access to safe drinking water and poor sanitation and hygiene practices. While the proportion of people with access to an improved source of drinking water increased from 47 per cent in 1990 to 58 per cent in 2010 and access to sanitation improved from 9 per cent in 1990 to 16 per cent in 2015,<sup>10</sup> access rates are still low, with approximately 90 per cent of people practising open defecation in rural areas.<sup>11</sup> The community-led total sanitation programme is estimated to have extended access to basic sanitation to around 30 per cent of the rural population,<sup>12</sup> and the importance of continued hygiene and sanitation promotion is underscored by a recent UNICEF-supported assessment, which confirms the real risk of communities slipping back into unsafe open defecation practices.

7. Great strides have been made in improving access to education. Net primary enrolment increased from 42 per cent in 1995 to 82 per cent in 2014.<sup>13</sup> At the same time, significant numbers of children remain out of school, particularly at pre-primary and secondary levels. Only 17 per cent of four to five-year olds attend preschool,<sup>14</sup> and approximately three quarters of children lack access to formal early childhood development activities – especially in the Southern Red Sea and Northern Red Sea regions. The gender parity index stands at 0.96 at primary level, 0.94 at middle level and 0.86 at secondary level. The remoteness and pastoralist nomadic and semi-nomadic lifestyles of some communities remain barriers to accessing essential services, including education.

8. Children enrolled in school also have low educational attainment levels across all grades.<sup>15</sup> A recent national assessment on monitoring learning achievement revealed declining performance at Grade 5, with only 25 per cent of students attaining the minimum mastery level in 2015, compared with 50 per cent in 2008.<sup>16</sup> Among factors contributing to low learning attainment are limited early learning opportunities, traditional gender norms, and high rates of attrition among teachers.

9. As noted in the concluding observations of the fourth periodic report of Eritrea, State Party obligations regarding reporting on the Convention on the Rights of the Child are being met. At the same time, additional work is required for Eritrea to consolidate and further accelerate sustainable gains in children's rights, building on progress made. The Government demonstrated its commitment to the eradication of harmful traditional practices by enacting and enforcing legislation against female genital mutilation/cutting (FGM/C) in 2007.<sup>17</sup> A 13 per cent point reduction in FGM/C was recorded between 1995 and 2010, with evidence that fewer younger girls are being subjected to the practice. Approximately 20 per cent of women aged 20 to 49 were married by age 15, and 41 per

<sup>&</sup>lt;sup>9</sup> EPHS, 2010.

<sup>&</sup>lt;sup>10</sup> UNICEF/WHO Joint Monitoring Programme for Water Supply and Sanitation, 2015.

<sup>&</sup>lt;sup>11</sup> EPHS, 2010.

<sup>&</sup>lt;sup>12</sup> UNICEF, Open-Defecation-Free Sustainability Assessment 2015.

<sup>&</sup>lt;sup>13</sup> Eritrea Ministry of Education (EMIS), Education Management Information System 2013/14 (EMIS 2013/14).

<sup>&</sup>lt;sup>14</sup> EMIS, 2013/14.

<sup>&</sup>lt;sup>15</sup> EMIS, 2013/14.

<sup>&</sup>lt;sup>16</sup> EMIS, Monitoring learning achievement 2015.

<sup>&</sup>lt;sup>17</sup> UNICEF/UNFPA, Female Genital Mutilation/Cutting (FGM/C) Monitoring Report 2015.

cent by age 18. Child marriage was cited as the main reason for dropping out of school for 69 per cent of women and 39 per cent of men.<sup>18</sup>

10. Eritrea is vulnerable to environmental degradation, with adverse effects on the agricultural and pastoralist livelihoods of the largely rural population.<sup>19</sup> Recurrent dry spells, and seasonal and multi-year droughts are becoming more frequent, and associated with an increase in torrential rainfall and flooding.<sup>20</sup> Poverty, climate change and environmental degradation, as well as food insecurity and migration, are increasing the vulnerability of poor households, particularly those in rural areas. The most affected *zobas* (regions)<sup>21</sup> are Anseba, Gash Barka, Northern Red Sea and Southern Red Sea – the same regions that have the poorest child-related indicators.<sup>22</sup> These regions require priority attention.

11. The limited availability of timely, reliable government-approved data disaggregated by age and gender is a major constraint for equity-sensitive programming in Eritrea. Such data is essential to guide targeting, prioritization, monitoring and course correction of programmes. To further improve the environment for the realization of child rights in Eritrea, child-related policies such as the Comprehensive Child Policy and Education Sector Policy should be adopted and implemented, and similar policies should be developed to cover areas such as adolescent participation in order to harness the potential of adolescents as agents of change and development.

12. Key lessons learned during the 2013-2016 country programme cycle have informed the design of this country programme. Strong community engagement has been elemental in achieving results for children. Community-based programmes have expanded coverage of social services and brought about clear results in immunization, increasing school enrolment of nomadic children, expanding the number of open-defecation-free communities, improving access to safe water, progress toward eradication of FGM/C, and prevention of injuries from mines and unexploded ordnance. Programme convergence has created opportunities for better cross-sectoral coordination and stronger results for children, especially in vulnerable *zobas*. Collaboration with other United Nations organizations has helped to reduce management costs. Investments in evidence generation, dissemination and use help to accurately assess interventions, demonstrate progress made, identify bottlenecks and guide prioritization of strategies and actions.

## **Programme priorities and partnerships**

13. The overall goal of the 2017-2021 country programme is to support efforts of the Government to realize the rights of children progressively, with a focus on the most disadvantaged. The country programme is based on the life-cycle approach that focuses on realizing a child's right to survival, development, education, protection and participation from pregnancy through adolescence. The programme will contribute to the implementation

<sup>22</sup> EPHS, 2010.

<sup>&</sup>lt;sup>18</sup> UNICEF/UNFPA, Female Genital Mutilation/Cutting (FGM/C) Monitoring Report 2015.

 <sup>&</sup>lt;sup>19</sup> UNICEF, Women and Children Situation Analysis, UNICEF Eritrea Country Office, November 2015.
 <sup>20</sup> The State of Eritrea Ministry of Land, Water and Environment, Eritrea's Second National

*Communication under the United Nations Framework Convention on Climate Change*, February 2012, 
 <unfccc.int/resource/docs/natc/erinc2.pdf>.

<sup>&</sup>lt;sup>21</sup> Eritrea is divided into six regions called *zobas*: Maekel/Central, Anseba, Gash Barka, Debub/Southern, Northern Red Sea and Southern Red Sea. According to EPHS, 2010, the Anseba, Gash Barka, Northern Red Sea and Southern Red Sea *zobas* had the poorest child-related indicators.

of the Convention on the Rights of the Child, including support to the Government to implement the concluding recommendations of the Committee on the Rights of the Child; the Convention on the Elimination of All Forms of Discrimination against Women; and the Convention on the Rights of Persons with Disabilities; as well as the UNICEF Strategic Plan, 2014-2017; the UNICEF Eastern and Southern Africa regional priorities; and remaining work to be done to complete the Millennium Development Goals agenda while striving to meet the Sustainable Development Goals.

14. The country programme is aligned with the draft Government–United Nations Strategic Partnership Cooperation Framework (SPCF) – the Eritrea equivalent of the United Nations Development Assistance Framework. The SPCF is framed within the Government National Indicative Development Plan, 2014-2018 and the 2030 Agenda for Sustainable Development. The four thematic pillars of the SPCF – (a) basic social services; (b) environmental sustainability, resilience and disaster risk management; (c) public sector capacity development; and (d) inclusive growth, food security and sustainable livelihoods – are the result of a consultative process between the Government and the United Nations, including policy-level consultations to incorporate the Sustainable Development Goals in the national agenda.

15. The country programme balances upstream and downstream work. At the national level, the programme focuses on upstream policy dialogue, advocacy and strengthening institutional capacity for management oversight and monitoring for results. At the level of the four most vulnerable *zobas*, the programme focuses on supporting community-based scalable and sustainable interventions targeting the most disadvantaged groups, addressing key bottlenecks and constraints, and promoting cross-sectoral coordination and programme convergence. The programme will apply available tools and strategies to reach the most disadvantaged populations, and empower duty-bearers to perform their duties and rights-holders to claim their rights.

#### **Programme strategies**

16. In order to achieve its goal of supporting government efforts to realize the rights of children progressively, with a focus on the most disadvantaged, the country programme will utilize the following strategies:

(a) *Capacity development* to strengthen national institutions and systems for improving coverage and sustainability of basic social services, with a focus on reaching children who are disadvantaged, as well as capacity in monitoring and evaluation, including evidence-based planning and monitoring and knowledge management;

(b) *Evidence-based advocacy and technical support* to promote rights-based, equity-focused policies and laws;

(c) *Communication for development* to promote social and behavioural change to support the realization of child rights;

(d) Promotion of *child and youth participation* in decision-making processes that affect their lives;

(e) Promotion of *innovations*, including those based on mobile phone and communications technology to increase the effectiveness and efficiency of programme results; and

(f) *South-South learning and cooperation*, especially among countries from the region with similar human development indicators.

17. The country programme will consist of three components: (a) child survival and development; (b) basic education, child protection and participation; and (c) programme effectiveness. The country programme will mainstream risk-informed emergency preparedness and response in all programme areas in line with the UNICEF Core Commitments for Children in Humanitarian Action.

#### Child survival and development

18. The outcome of the child survival and development programme is: *Disadvantaged children, adolescents and women utilize quality health, nutrition and water, sanitation and hygiene (WASH) services.* The programme will integrate health, nutrition and water, sanitation and hygiene interventions and contribute to national efforts to reach disadvantaged children, adolescents and women living in hard-to-reach areas and reduce preventable child and maternal deaths, ill health and disability. The programme will contribute to the outcomes of the basic social services pillar of the Strategic Partnership Cooperation Framework in Eritrea and to reaching the Sustainable Development Goals, particularly Goal 2: end hunger, achieve food security and improved nutrition and promote sustainable agriculture; Goal 3: ensure healthy lives and promote well-being for all at all ages; and Goal 6: ensure availability and sustainable management of water and sanitation for all.

19. UNICEF will prioritize support for the development of health-related legislation, policies and sectoral plans, strategies and budgets, and support to strengthening national capacity for their implementation. This will contribute to the expansion and equitable utilization of facility and community-based integrated high-impact maternal, newborn and child health interventions; specifically, quality antenatal and postnatal care, immunization, essential and emergency care at the time of birth, and integrated management of childhood illnesses. The capacity of community health workers will be further strengthened to implement integrated community case management, promote appropriate childcare and care-seeking practices at household and community levels, and make timely referrals to the next level of care.

20. UNICEF will also support national efforts to reduce the levels of stunting and acute malnutrition among children and to strengthen national capacity to deliver high-impact child, adolescent and maternal nutrition interventions. There will be a strong focus on nutrition security, appropriate infant and young child feeding practices, and a reduction of water and sanitation-related diseases through sustained coverage of WASH services and practices, including community-led total sanitation initiatives. UNICEF will continue to support the Government to reduce its carbon footprint through the adoption of renewable energy sources, such as solar power for water pumping and cold chain equipment.

21. Recognizing the role that safe drinking water, good hygiene and improved sanitation play in children's nutrition and health, and the importance of nutrition for early childhood development, UNICEF will support the Government, communities and institutions, including schools and health centres, to improve and sustain quality water, sanitation and hygiene services, and to integrate nutrition, health, water, sanitation and hygiene interventions and services.

#### Basic education, child protection and participation

22. The basic education, child protection and participation programme is an inclusive programme designed to contribute to the following outcome: *By 2021, Eritrean girls and boys in four disadvantaged* zobas *have expanded access to quality basic education and child protection services.* The programme will support the Government in expanding access to quality basic education for all children, protecting children from violence, exploitation and abuse, and enabling children to participate meaningfully in decision-making processes that affect their lives. This programme will contribute to the basic social services pillar of the SPCF and the Sustainable Development Goals, specifically Goal 4: ensure inclusive and equitable quality education and promote lifelong learning opportunities for all; and Goal 5: achieve gender equality and empower all women and girls. The programme will operate under the comprehensive national child policy, the national education policy, the Convention on the Rights of Persons with Disabilities, and other relevant policies and sector strategies.<sup>23</sup>

23. The programme will focus on increasing access to quality, inclusive basic education and protection for children, particularly girls, in the most disadvantages *zobas*: Anseba, Gash Barka, Northern Red Sea and Southern Red Sea. The programme will support schoolaged children not in school so that they can enrol and participate in quality education interventions from early childhood through elementary (Grades 1 to 5) and lower secondary (Grade 6 to 8) school. UNICEF will prioritize inclusive early childhood development approaches, improvements in teaching and learning, elimination of all forms of violence against children in and around schools and the fostering of child-friendly and protective environments. It will foster linkages with the child survival and development programme through early learning, deworming, immunization, school water and sanitation, nutrition, and adolescent-friendly health services. UNICEF will support further improvements to coordination mechanisms and initiate innovative monitoring approaches such as EduTrac for effective oversight and support to programme implementation at all levels.

24. The basic education, child protection and participation programme will also focus on the elimination of abuse, exploitation and violence against children, with a specific emphasis on harmful traditional practices, such as FGM/C and child marriage. Interventions will include supporting the Government and partners to enforce the legal age of marriage of 18 years, and advocating for the continued enforcement of protective laws against FGM/C and violence against children. In addition, UNICEF will support the implementation of comprehensive civil registration for universal and continuous birth registration of all children.

25. Child and youth participation is a new strategic programme area for Eritrea, one that takes into account the outcomes of the Children's Forum coordinated by the Eritrea Ministry of Information in 2015. The programme promotes effective child participation through the development of life skills interventions and improved child and youth involvement in community and school-based activities. Young people will be engaged as agents of change and partners in development.

#### **Programme effectiveness**

<sup>&</sup>lt;sup>23</sup> These include the National Policy on Persons Living with Disability; the National Health Policy; National Union of Eritrean Women Strategic Plan and National Strategic Plan on Civil Registration and Vital Statistics, National Education Policy (2009) and the Education Sector Development Plan, 2013-2017.

26. The programme effectiveness component relates to overall leadership, management and coordination for efficient implementation of the country programme and effective delivery of results. This programme focuses on the following outcome in support of the two thematic outcomes: *The Eritrea country programme is efficiently designed, coordinated, managed and supported to meet quality programming standards in achieving results for children.* Programme effectiveness comprises four strategic areas: (a) programme coordination; (b) advocacy, communication for development, partnerships and external relations; (c) programme planning and monitoring; and (d) cross-sectoral approaches. The Country Office coordination, planning and monitoring functions will be in line with UNICEF policies and procedures.

27. The programme will pursue effective advocacy, communication for development and partnership strategies in support of sector programmes, policies, plans and policy dialogue. Communication for development approaches will be applied across sectors to galvanize and sustain demand for basic social services as well as to overcome harmful traditional norms and reduce the incidence of FGM/C, child marriage, and violence against children.

28. In line with the national gender policy and the UNICEF policy on gender equality and the empowerment of girls and women, the programme will provide cross-sectoral support for the prevention and elimination of gender-based violence, and for the promotion of adolescent health.

29. Evidence generation will support the country programme in monitoring results and targeting programmes to benefit the most disadvantaged children. UNICEF will strive to support the Government in generating child-centred evidence to inform policy decisions and strengthen national capacities for production and use of timely, disaggregated and gender-sensitive data.

30. The programme will continue to expand and strengthen collaborative efforts with government ministries, United Nations system organizations, the National Union of Eritrean Women, and the National Union of Eritrean Youth and Students. UNICEF will continue to strengthen existing and develop new South–South networks for information and experience sharing, and document and disseminate good practices.

	(In thousands	of United States	dollars)
Programme component	Regular resources	Other resources	Total
Child survival and development	3 800	36 500	40 300
Basic education, child protection and participation	3 650	47 500	51 150
Programme effectiveness	7 110	3 900	11 010
Total	14 560	87 900	102 460

### Summary budget table

### **Programme and risk management**

31. This country programme document outlines UNICEF contributions to national results and serves as the primary unit of accountability to the Executive Board for results

alignment and resources assigned to the programme at country level. Accountabilities of managers at the country, regional and headquarters levels with respect to country programmes are prescribed in the organization's programme and operations policies and procedures, which lay out adequate measures for risk management and mitigation.

32. UNICEF will continue to strengthen procedures to manage and mitigate risks in the programme environment. The management of the harmonized approach to cash transfers will be further strengthened to respond to risks in programme implementation.

33. Eritrea has a small donor base and few international public sector and local private sector partnerships. Constraints in resource mobilization pose a significant risk to achieving optimal results for children and women. The UNICEF Country Office will update and further contextualize its resource mobilization strategy, and work with the Government to mitigate this risk to the extent possible. The Country Office will also sequence programme delivery by first focusing available funding on key priorities in the most disadvantaged regions, and by increasing coverage as more resources are raised.

34. In addition, there are risks associated with the limited availability of up-to-date data, research and evaluations on the situation of children and women in Eritrea. UNICEF will advocate for strengthened United Nations-Government engagement in this regard, and work to support the capacity of national partners to design and implement systems to collect, manage, disseminate and utilize data.

35. The country programme will be coordinated as part of the SPCF and will be implemented in cooperation with the Government under the leadership of the Ministry of National Development. With Eritrea rolling out the United Nations Delivering-as-One initiative, the business operations strategy will be implemented to harmonize and reduce business operating costs. United Nations organizations will continue to share premises and some common services, with security oversight provided by the United Nations Department of Safety and Security.

## Monitoring and evaluation

36. UNICEF will support monitoring of results through annual management plans, sector work plans, and annual and peer reviews with implementing partners to assess the key strategic, programmatic, operational and financial risks, and define appropriate control and mitigation measures. UNICEF will continue to monitor the effectiveness of governance and management systems, stewardship of financial resources and management of human resources.

37. Progress toward planned results will be monitored using the indicators contained in the results and resources framework (annex A). UNICEF will work with the National Statistics Office and other relevant national institutions to effectively monitor progress toward national and international goals and to track inequities using timely and relevant data. The Integrated Monitoring and Evaluation Plan will guide the generation of new evidence through studies and research commissioned across the sectors. Strong advocacy for evidence generation will be a key priority. In line with the UNICEF evaluation policy, UNICEF will support national evaluation capacity development and learning from good practice from the Eastern and Southern Africa region. Evaluations will enhance planning and decision-making and provide a basis for informed advocacy. An evaluability assessment will be conducted during the first year of programme implementation to determine whether results have been adequately formulated, are verifiable, and whether causal linkages are clear enough to support an end-of-cycle evaluation of the country programme.

38. UNICEF will also work with partners to strengthen national monitoring and evaluation systems, including management information systems and capacity to use data to assess results, by further institutionalizing the concept of results-based management. The country programme monitoring system will ensure that findings from programme assurance activities contribute to effective and efficient programme management. Emphasis will be placed on improving performance monitoring and creation of feedback mechanisms that contribute to systems strengthening through the mainstreaming of the UNICEF Monitoring Results for Equity System.

39. UNICEF will support the Government in conducting a mid-term review of the country programme in 2019. This will include a test of the country programme's theory of change and a verification of assumptions made at the design stage of the country programme to determine if they continue to hold true. The mid-term review will inform the priorities and strategies for the remainder of the country programme cycle and any adjustments necessary.

### Annex

## **Results and resources framework**

## Eritrea-UNICEF country programme of cooperation, January 2017-December 2021

#### National development plan 2014-2018 results:

- 1. Enhanced equitable access to quality basic opportunities and basic services to produce all-round citizens with a firm commitment to country, people and social justice.
- 2. Improvement of health status, general well-being, longevity and economic productivity of all Eritreans.
- 3. Development of sustainable water sources and institutional capacity to match needs.
- 4. Achievement of food security, both at the national and household level.

### Strategic Partnership Cooperation Framework (SPCF) 2017-2021 outcomes involving UNICEF:

- 1. Basic social services
- 2. Environmental sustainability, resilience and disaster risk management
- 3. Public sector capacity development
- 4. Inclusive growth, food security, and sustainable livelihoods
  - 1. Child survival and development

Relevant articles of the Convention on the Rights of the Child: 6, 24.

Related UNICEF Strategic Plan outcomes: 1. Health; 4. Nutrition; 3. Water, sanitation and hygiene.

					1	nurces by countr gular resources resources (OR) ls of United Sta	(RR), other
UNICEF outcomes	Key progress indicators, baselines and targets	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	RR	OR	Total
Disadvantaged children, adolescents and women utilize quality health, nutrition, water,	Proportion of live births attended by skilled health personnel (doctor, nurse, midwife and auxiliary midwife) Baseline: 32% (2010)	Eritrea Population Health Survey data	1. Health: By 2021, National partners have strengthened technical and management capacity to sustain high-impact maternal, neonatal and	Ministry of Health Ministry of Land, Water and Environment	3 800	36 500	40 300

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sanitation and hygiene (WASH) services.	Target: 65% (2021) Percentage of districts with	Health Management		child health interventions, focusing on the most vulnerable communities.
	Percentage of districts with Penta-3 vaccination coverage in children less than one year of at least 80% Baseline: 50% (2015) Target: 80% (2021)	Information System data		
	Number of children aged 6 to 59 months with severe acute malnutrition enrolled in the therapeutic feeding programme or other community-based programmes and facilities <i>Baseline:</i> 10,378 (2015) <i>Target:</i> 13,000 (2021)	Ministry of Health Integrated Management of Acute Malnutrition database	2.	Nutrition: By 2021, Government partners have increased technical and management capacity to provide high-impact child and maternal nutrition services.
	Coverage of vitamin A Baseline: 83% (2015) Target: 90% (2021)	Ministry of Health administrative reports		
	Proportion of rural population practising open defecation Baseline: 90% (2010) Target: 50% (2021)	Environmental Health Division, Ministry of Health community- led total sanitation monitoring reports and field monitoring reports	3.	Water, sanitation and hygiene (WASH): By 2021, Government institutions have the capacity to provide quality WASH services to target communities.
	Percentage of rural population using an improved source of drinking water Baseline: 50% (2010) Target: 57% (2021)	Ministry of Land, Water and Environment progress reports and field monitoring reports	4.	WASH: By 2021, communities in target areas are able and willing to use quality WASH services.

### 2. Basic education, child protection and participation

## Relevant articles of the Convention on the Rights of the Child: 1, 2, 3, 5, 7, 9, 12, 19, 20, 21, 23, 25, 28, 29, 32, 34, 35, 37, 39, 40.

### Related UNICEF Strategic Plan outcomes: 5. Education; 6. Child protection; 7. Social inclusion.

					outcome: reg	ources by countr gular resources resources (OR) ls of United Stat	(RR), other
UNICEF outcomes	Key progress indicators, baselines and targets	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	RR	OR	Total
By 2021, Eritrean girls and boys in four <i>zobas</i> have access to quality basic education and child protection services.	Proportion of primary         school-aged children who         are out of school         Baseline: 18% (2015)         Target: 13% (2021)         Percentage of pupils         completing primary         education achieving         minimum proficiency in: (a)         reading, and (b)         mathematics         Minimum mastery level         Baseline (2015):         Grade 3: 30%; Grade 5: 25%         Target (2021):         Grade 3: 50%; Grade 5: 35%         Desired mastery level	Ministry of Education annual education management information system report Monitoring and learning achievement report, Ministry of Education	<ol> <li>Education: By 2021, girls and boys in the most disadvantaged <i>zobas</i> have increased access to quality, inclusive basic education, including in emergencies.</li> <li>Education: By 2021, teachers have increased capacity to deliver and sustain quality education that conforms to national standards.</li> </ol>	Ministry of National Development Ministry of Health Ministry of Education Ministry of Labour and Human Welfare Other ministries National Union of Eritrean Women National Union of Eritrean Youth and Students Eritrea Sports and Culture Commission	3 650	47 500	51 150
	Baseline (2015): Grade 3: 11%; Grade 5: 8% Target (2021):						

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Grade 3: 25%; Grade 5: 20%		
Graue 5. 25%, Graue 5. 20%		
Percentage of women aged 20 to 49who were married before age 18 Baseline: 41% (2010) Target: 30% (2021)	Eritrea Population Health Survey data	<b>3.</b> Child protection: Community members are able and willing to reject the practice of FGM/C, child marriage and violence against children.
Percentage of girls aged 0 to 14who have undergone FGM/C (as reported by their mothers) Baseline: 33% (EPHS 2010) Target: 20% (2021)	Eritrea Population Health Survey (EPHS) data	
Number of vulnerable children benefiting from social protection Baseline: 83,000 (2015) Target: 150,000 (2021)	Ministry of Labour and Human Welfare reports	
Number of children's clubs established in four disadvantaged <i>zobas</i> . Baseline: 0 (2015) Target: 300 (2021)	Zoba administration education reports	4. Child participation: Children and youth, especially in the most disadvantaged <i>zobas</i> , have the knowledge and skills to participate in school and community- based activities.

					outcome: reg	ources by countr gular resources resources (OR) ds of United Stat	(RR), other
UNICEF outcomes	Key progress indicators, baselines and targets	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	RR	OR	Total
The Eritrea country programme is efficiently designed, coordinated, managed and supported to meet quality programming	Percentage of annual work plans aligned with Government priorities and approved by March of every year during the country programme. Baseline: 100% (2016) Target: 100% (2021)	Country management team meeting minutes Annual management plan reports	1. Programme coordination: UNICEF staff and partners have the guidance, tools and resources to effectively design and manage programmes.	National Statistics Office Ministry of Information National Union of Eritrean Youth and Students	7 110	3 900	11 010
standards in achieving results for children.	Annual financial utilization rate/ implementation rate <b>RR/OR/ORE</b> Baseline: 100% (end of 4th quarter 2015) Target (2021): 25% 1st quarter 50% 2nd quarter 75% 3rd quarter 100% 4th quarter	Insights (online publication) Compact for results Country management team and annual management plan Insights and the Results Assessment Module	2. Programme planning and monitoring: UNICEF staff and partners have the guidance, tools and resources to effectively plan and monitor programmes.				
	Results-based management score Baseline: Low (2015) Target: Medium to high (2021)	Insights (online publication) Compact for results					
	Planned vs. mobilized resources Baseline: \$14,750,000 (2016)	Country management team meeting minutes Insights (online	3. External relations: UNICEF staff and partners have the guidance, tools and resources for effective				

#### E/ICEF/2016/P/L.20

Baseline: To be confirmed (2015) Target: 50% (2021) Insights	Baseline: 78% (2015)     risites related to child       Target: 80% (2021)     resilience, disaster risk       Percentage of outputs with     reduction – are       humanitarian action marker     developed and applied.	Percentage of outputs with gender equality marker rated at 3 (Significant)Insights (online publication)5. Cross-sectoral approaches: Strategies to address crosscutting issues related to child
gender equality marker rated at 3 (Significant)publication)approaches: Strategies to address crosscutting issues related to child rights – gender, resilience, disaster riskendBaseline: 78% (2015)resilience, disaster risk reduction – are developed and applied.end	gender equality marker rated at 3 (Significant)     publication)     approaches: Strategies to address crosscutting issues related to shild	

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