



Economic and Social Council

Distr.: Limited
10 August 2015
English
Original: English/French/Spanish

For decision

United Nations Children's Fund

Executive Board

Second regular session 2015

8-10 September 2015

Item 4 (a) of the provisional agenda*

Country programme document

Cambodia

Summary

The country programme document (CPD) for Cambodia 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 \$16,653,000 from regular resources, subject to the availability of funds, and \$48,600,000 in other resources, subject to the availability of specific-purpose contributions, for the period 2016 to 2018.

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 2015.

* E/ICEF/2015/12.



Programme rationale

1. The children of Cambodia are growing up at a time of significant social and economic transformation. With average gross domestic product growth of more than 7 per cent since 2011, the country is moving towards middle-income status and full economic integration into the Association of Southeast Asian Nations. Cambodia continues its transition with increased emphasis on decentralization, better performance of systems, increased competitive capacities and expansion of quality services. Governance, human rights and corruption remain impediments to sustaining political stability, inclusive growth and development.

2. Under the National Strategic Development Plan 2014-2018 (NSDP), the Government is undertaking a reform agenda focusing on public financial management, public administration, the legal and judicial system and decentralization. Some notable results have been achieved but additional efforts are required to accelerate the reforms.

3. Transparency and accountability remain the primary challenges for public financial management, with weak social accountability and demand from citizens. Despite some recent budgetary increases, particularly for education, there is still insufficient budget allocation and execution in key social sectors. Despite existing guidelines and procedures for citizen participation in public decisions, particularly at subnational level, there are notable gaps in their application compounded by limited community involvement in development processes.

4. The rate of economic growth has contributed to a steep decline in poverty from 47 per cent in 2007 to 20 per cent in 2012.¹ However, around 3 million Cambodians still live in poverty, of whom 90 per cent live in rural areas. Around 40 per cent of the population of 14.7 million lives just above the poverty line, and is highly vulnerable to minor economic changes, natural disasters and other shocks.

5. A child living in the less populated and predominantly rural north-eastern provinces is more likely to be deprived in relation to education, health and living standards than a child living elsewhere in the country.²

6. The National Social Protection Strategy (NSPS) 2011-2015 was developed as a way forward for social protection system-building; however, the coverage of interventions is limited and highly fragmented, and is largely driven by external development partners. Social protection measures are required to build resilience among the poorest and most vulnerable families who face recurrent flooding and other natural disasters, as well as to mainstream disaster risk reduction into sector policies.

7. Cambodia is among the countries that have achieved significant progress towards most of the Millennium Development Goals. Nevertheless, several strategic challenges to child survival and development remain, including the need to: (i) increase access to and utilization of quality health services, early childhood education, basic education, water, sanitation and hygiene (WASH) and social protection services by poor, vulnerable and marginalized people; (ii) enhance

¹ Ly, S. and E. Aldaz-Carroll, *Cambodia Economic Update: Clear skies*, World Bank, October 2014.

² Oxford Poverty and Human Development Initiative, *Country Briefing: Cambodia — Multidimensional Poverty Index (MPI) At a Glance*, 2013.

complementarity among sectoral policy initiatives and; (iii) institutionalize multisectoral planning, delivery and monitoring of child-centred social services, particularly at subnational levels. In recognition of these challenges, the Government is promoting an integrated approach to ensuring infant and child survival, care and development through its multisectoral Early Childhood Care and Development National Policy and National Action Plan.

8. Among the significant achievements made in the past 15 years has been reducing the number of child deaths. Between 2000 and 2014, the under-five mortality rate decreased from 124/1,000 live births to 35/1,000 live births; and infant mortality from 95/1,000 live births to 28/1,000 live births. The majority of deaths are in the neonatal period, with 18 babies/1,000 live births dying in the first month.³ There are significant geographical differences, with under-five mortality rates ranging from 18/1,000 live births in Phnom Penh to 118/1,000 live births in Preah Vihear province.⁴ The dramatically reduced maternal mortality ratio, from 472/100,000 live births in 2000⁵ to 170/100,000 in 2014,⁶ is associated with the increased percentage of newborns delivered in health facilities.

9. Child and maternal mortality rates remain high in some parts of the country due to financial barriers to health services, staff shortages, poor quality public health services, a poor hygienic environment, harmful cultural practices and frequent unavailability of essential medicines, vaccines and supplies. The lack of regulation of private health services has also contributed to the poor quality of health services.

10. Globally, undernutrition is considered the underlying cause of 45 per cent of under-five deaths and 20 per cent of maternal deaths.⁷ Rates among children under five continue to be high, with 32 per cent stunted, 10 per cent wasted and 56 per cent anaemic.⁸ Stunting is more common among children whose mothers never attended school, those living in rural areas, particularly in the northeast, and those in the lowest wealth quintile.⁹ One in five Cambodian women are underweight.¹⁰

11. A lack of progress in nutrition indicators is partially explained by stagnant trends in some determinants of nutrition, including diarrhoea prevalence, improper complementary feeding and inadequate improved WASH practices. The reasons for a recent decline in breastfeeding rates and the nature of inappropriate infant feeding patterns remain unclear and further research is required to ensure effective interventions.

12. The proportion of households with access to safe drinking water has increased to 54 per cent in 2013, from 49 per cent in 2005. Although households using an improved sanitation facility increased from 34 per cent to 52 per cent over the same period,¹¹ there is a wide variation between urban and rural areas, at 87 per cent and 38 per cent, respectively.¹² About 45 per cent of households have no toilet and

³ Cambodia Demographic and Health Survey (CDHS) 2014.

⁴ CDHS 2010.

⁵ CDHS 2000.

⁶ CDHS 2014.

⁷ *Lancet*, 2013.

⁸ *Ibid.*

⁹ *Ibid.*

¹⁰ *Ibid.*

¹¹ Cambodia Socio-Economic Survey (CSES) 2013.

¹² Cambodia Inter-Censal Population Survey, Final Report, 2013.

practice open defecation, including non-poor families.¹³ Stronger integration of WASH with other sectors is an important strategy for improving the survival and development of children. Additional bottlenecks that should be addressed include: (i) the cost of technology and limited choices, particularly for poorer households; (ii) weak monitoring systems; (iii) lack of knowledge among local authorities of the health and nutrition benefits of improved WASH; and (iv) limited private sector participation in service provision.

13. HIV prevalence is estimated to have decreased from 1.1 per cent in 2006 to 0.7 per cent in 2013.¹⁴ Coverage of HIV testing in pregnant women and of antiretroviral therapy in HIV-positive pregnant women has resulted in a decrease in the mother-to-child transmission rate, from 25 per cent in 2005 to around 8 per cent in 2014. The Government recently introduced the Cambodia 3.0 initiative, which strives for the elimination of new HIV infections by 2020, and seeks to integrate prevention of mother-to-child transmission of HIV (PMTCT) with maternal, newborn and reproductive health, particularly at the service-delivery level.

14. Early childhood education is a government priority, with the enrolment rate for 3- to 5-year-old children increasing from 18 per cent in 2011 to 33 per cent in 2013. More than half of the 300,000 enrolled children are in government preschools, with the remainder in community or private preschools, or home-based programmes.

15. Cambodia achieved strong improvements in primary education between 2001 and 2013, with primary net enrolment increasing from 87 per cent to 98 per cent¹⁵ (including private school enrolment), primary completion increasing from 49 per cent to 89 per cent, and reductions in gender and geographical disparities. Education quality is a concern, with less than half of pupils passing the standardized test on mathematics in Grades 3, 6 and 9, with marks for Khmer ranging from 53 per cent to 68 per cent in the 2013/14 school year. Only half of Cambodian primary schoolteachers are qualified; to improve learning outcomes, significant efforts must be made to address this bottleneck.

16. Children from poor rural families, children with disabilities and ethnic minorities are more likely to be excluded from, or to not complete primary school, with little difference between genders. The major barriers include the hidden financial costs of education, distance to schools in some rural areas, low teacher motivation, limited capacity of teachers, language of instruction and attitudes towards children with disabilities.

17. The gross enrolment rate in lower secondary school has remained below 60 per cent since 2007, mainly due to poor transition from primary school, a significant number of overage children enrolled in primary school and high dropout rates. The economic options offered with the growth of garment factories and the construction sector have meant a high opportunity cost for school at the lower secondary level. While the gender gap in lower secondary schools has been eliminated, regional and income discrepancies are high.

18. In rural areas, a lack of toilets in schools has been reported as a major determinant for school dropout among girls. Approximately 17 per cent of rural

¹³ CSES 2013.

¹⁴ National Center for HIV/AIDS, Dermatology and STDs, *Estimations and projections of HIV/AIDS in Cambodia, 2011-2015*, 2012.

¹⁵ Education Management Information System 2013/2014.

primary schools did not have a toilet and 42 per cent were without a water supply in the 2013/14 school year.¹⁶ Even where toilets are available, they do not meet the standards set by the national school health policy. UNICEF and partners will continue efforts to make school environments more child friendly.

19. While Cambodia has seen momentum regarding the introduction of laws to protect children and women, legislative enforcement remains a key bottleneck. Initiatives have begun to promote a systems-based approach to strengthening child protection to overcome the existing fragmentation of services and limited human and financial resources.

20. The birth registration rate was 62 per cent in 2010, a decline from 65 per cent in 2005.¹⁷ Among the causes of low registration rates are informal fees, discriminatory legislation, a shortage of certificates and registering officers, lack of knowledge of the importance of birth registration and limited budget allocations.

21. Despite the government policy that institutional care should be a last and temporary solution, there has been an increase in the number of children in residential care from 6,254 in 2005 to 12,367 in 2014.¹⁸ Seventy-seven per cent of children in residential care have been found to have at least one living parent. The major reasons families place their children in residential care include poverty, lack of social welfare support and access to education.¹⁹ Many of the facilities are unregistered and efforts are under way to de-institutionalize children and reintegrate them into family care.

22. More than half of children have experienced at least one form of violence, with physical violence the most prevalent. In general, victims do not disclose abuse; and only limited attempts have been made to address social norms and practices to prevent and respond to violence and abuse.

23. Judiciary, police and legal aid reforms are under way to mainstream justice for children in the rule of law framework. With the anticipated passage of the Juvenile Justice Law, progress can be expected in reporting, complaints and monitoring mechanisms, and in alternatives to detention and restorative justice for children in contact with the law.

24. A key lesson from the 2011-2015 country programme is ensuring that programme interventions focusing on most vulnerable children are complemented by innovation, communication for development activities and broader national policies and strategies. As documented in a recent upstream evaluation commissioned by UNICEF, the impact of UNICEF programme support for multilingual education in target communities influenced its inclusion in the national Child Friendly Schools Policy and Master Plan.

25. Following the mid-term review of the current country programme, UNICEF initiated four interlinked strategic shifts: (i) improve sectoral programme integration and coordination; (ii) undertake progressive adjustment from a focus on coverage to quality of services; (iii) better targeting of the most disadvantaged population and strengthened support for local-level planning, budgeting, management and

¹⁶ Ibid.

¹⁷ CDHS 2005, 2010.

¹⁸ Ministry of Social Affairs, Veterans and Youth Rehabilitation Inspection Report 2014.

¹⁹ Study on Attitudes towards Residential Care 2011.

monitoring capacities, and; (iv) increased emphasis on community engagement and empowerment. The programmatic principles have been reaffirmed as essential for the 2016-2018 country programme.

Programme priorities and partnerships

26. In support of the Rectangular Strategy-Phase III and the NSDP 2014-2018, the country programme will support the Government to identify and overcome key bottlenecks that impede the realization of children's rights. The country programme will directly contribute to the three United Nations Development Assistance Framework (UNDAF) outcomes that focus on sustainable growth and development, sustainable and quality social services and protection, and more transparent and accountable national and subnational institutions.

27. UNICEF will prioritize support for strengthening systems and capacities of duty-bearers to effectively implement programme priorities as outlined in paragraph 32 below.

28. Five mutually reinforcing strategies will be prioritized: (i) generating data and evidence to inform policy change for children; (ii) strengthening technical skills and systems for delivery of quality social services; (iii) enhancing the institutional capacities within national and subnational government authorities for planning, budgeting, coordination and monitoring of social development; (iv) using innovation and communication for development to strengthen community resilience, demand for quality social services and safe family practices, and; (v) expanding partnerships with civil society organizations (CSOs), private sector and academia to create a strong alliance for child rights.

29. All UNICEF programming will incorporate actions to promote the resilience of children, families and communities, and to enhance emergency preparedness and response. A gender lens will be applied throughout all programming, addressing the barriers that undermine the realization of children's rights.

30. While the programme will operate nationwide, it will focus on the provinces, districts and communes that have the highest disparities and worst child development indicators, and will continue to intensify its focus on the most vulnerable urban families.

31. The programme will address many of the recommendations from the 2015 Concluding Observations of the United Nations Committee on the Rights of the Child on the Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography, including strengthening the legislative and regulatory framework for alternative care institutions.

32. The country programme will be implemented through five sub-programmes.

Integrated early childhood survival, care and development

33. The programme aims to ensure that children under five and pregnant women have improved and more equitable use of early childhood survival, care and development interventions and practices, particularly in target districts.

34. It will support the National Committee of Early Childhood Care and Development and sectoral ministries to implement the National Action Plan 2014-

2018. To overcome the barriers that cause fragmentation, poor quality and unaffordable basic social services for disadvantaged families, UNICEF will support capacity-building of government ministries, officials and service providers in target provinces and districts to plan, budget and deliver adequate and equitable integrated early childhood development (IECD) services, in line with A Promise Renewed. Community participation in the planning and monitoring of social development will be promoted. Communication and parenting education resources will be developed to promote positive practices for child development.

35. The programme will focus on geographic areas with the lowest child development indicators, primarily in the north-east, and on the urban poor of Phnom Penh. UNICEF will prioritize technical and financial support to a selected number of districts where participatory monitoring will be introduced to promote community engagement and social accountability, and to generate evidence of the impact of the integrated approach to health, nutrition, water and sanitation, early learning, child protection and care.

36. Through technical assistance and funding to the Ministry of Health (MOH), particular attention will be given to HIV testing and care for mothers and children, maternal and neonatal tetanus elimination, integrated antenatal and post-partum care, community care for mothers and newborns and integrated management of child illnesses.

37. UNICEF will assist in the development and implementation of a national early childhood education (ECE) expansion strategy. Technical support will be provided for quality improvement and monitoring, including ECE curriculum revision, preschool teacher and director capacity development, and establishment of a national monitoring system. UNICEF will promote the functional transfer of community preschools to communes and explore the options for gradual phase-out of direct financial support to commune councils.

38. UNICEF will partner with the Ministry of Rural Development to provide technical support for the development of costed plans, and a monitoring and evaluation (M&E) framework for universal access to WASH. The focus will be on ending open defecation and ensuring health centres and schools have WASH facilities and systems that promote behaviour changes, as well as ensuring safe drinking water quality in arsenic-contaminated areas. UNICEF will support government leadership in emergency preparedness and response and co-lead the WASH cluster.

39. Under the umbrella of the Scaling Up Nutrition movement, UNICEF will support the implementation of the National Strategy for Food Security and Nutrition 2014-2018. UNICEF will support strategies for improving breastfeeding, complementary feeding, micronutrient interventions, family and community nutrition and management of severe acute malnutrition.

40. Support will be given to strengthen the civil registration system, including for birth registration, and will include innovative technology for outreach and facility-based registration and monitoring.

41. UNICEF will continue to assist the Government, as part of the United Nations Theme Group on HIV and AIDS, to strengthen the integration of PMTCT into the maternal and child health system, including accelerating the 'test and treat' strategy for mothers and infants in IECD districts.

Quality and inclusive education

42. The programme aims to ensure that children in Cambodia have improved and more equitable access to, and are able to complete quality inclusive education with improved learning outcomes.

43. Collaboration will be continued with development partners, including the Global Partnership for Education (GPE), for national strengthening of the Ministry of Education, Youth and Sport (MOEYS) for the planning, management and financing of education.

44. UNICEF will strengthen children's access to education by supporting the implementation of the Child Friendly Schools Policy in primary and lower secondary schools. UNICEF will assist the Government to institutionalize multilingual education in primary schools in five highland provinces through teacher training and development as well as accelerating specialized and inclusive education for children with disabilities. UNICEF will support training and innovative monitoring for remote schools.

45. UNICEF will continue to collaborate with non-governmental organizations (NGOs) to build the capacity of MOEYS for disaster risk reduction in schools, particularly in flood-affected provinces. In selected districts, the programme will support teacher and principal training on positive discipline, and improving the operation and maintenance of WASH facilities and good hygiene practices in schools.

46. UNICEF will support the ministry's teacher development reform, focusing on teacher competencies and motivation as well as mechanisms for measuring pupils' learning outcomes, especially in Khmer and mathematics.

47. UNICEF will support initiatives in selected districts to build community capacities and confidence to engage with local education authorities to promote more inclusive access, better education quality and transparency in the use of resources.

Protective environment

48. The programme will ensure that children who are vulnerable to and exposed to violence and those separated from their families are increasingly protected by the institutional and legislative framework, quality services and a supportive community environment.

49. A primary focus will be to support the acceleration of the government's deinstitutionalization programme for children in target provinces, focusing on strengthening of the planning, monitoring and oversight capacities within the Ministry of Social Affairs, Veterans and Youth Rehabilitation (MOSVY) over residential care institutions. Advocacy to promote permanent guardianship and domestic adoption, deinstitutionalization of children and case management for those in institutions will be undertaken, along with modelling of family-preservation approaches and alternatives to institutional care.

50. UNICEF will closely work with the Steering Committee on Violence against Children, Ministry of Women's Affairs (MOWA), Ministry of Cults and Religions and international non-governmental organizations (INGOs) to develop and coordinate the implementation of a costed inter-ministerial action plan and

behaviour change campaign to address violence against children as well as to promote the role of religious leaders to prevent violence and unnecessary separation of children.

51. Collaboration will continue with the Cambodian National Council for Children (CNCC) and key ministries to review and update child protection legislation and associated regulations, under the 2014 Legislative Reform Agenda for Child Protection.

52. Technical assistance will be provided to key ministries to develop reporting, referral and response mechanisms on violence against children in schools, health centres and police stations, as well as interdisciplinary investigation procedures and child-friendly justice protocols. UNICEF will continue to support national efforts to develop an effective justice system for children and to strengthen the Partnership Program for the Protection of Children (3PC) to reduce fragmentation of child protection services, including in emergencies.

53. UNICEF will collaborate with INGOs and CSOs, particularly in urban settings, to implement interventions targeting high-risk boys and girls, particularly those vulnerable to exploitation, trafficking, substance use and HIV infection.

54. Technical support will be provided to social sector ministries to include child protection indicators and data-collection mechanisms in their monitoring and information systems.

Social inclusion and governance

55. The programme will ensure that child rights and equity are increasingly prioritized in social sector national and subnational policies, budget allocations, social protection systems and public discussions.

56. UNICEF will continue to provide technical assistance to the Ministry of Economy and Finance (MEF) in programme-based budgeting, and to social sector ministries and subnational administrations in budget formulation, execution and monitoring. Partnerships will be forged with parliamentary committees and CSOs to strengthen their knowledge of equity-focused social sector budgeting.

57. In collaboration with development partners, UNICEF will support the formulation of a child-sensitive comprehensive national social protection strategy and M&E system, including technical support for the development of tools to ensure the most vulnerable children are reached.

58. UNICEF will provide technical assistance to the National Committee for Sub-National Democratic Development (NCDD) for the design and implementation of a child-sensitive social accountability framework. Support will be provided for revising planning guidelines and training of subnational administrations to ensure participation in planning and monitoring, particularly for children, youth, women and socially excluded populations.

59. In collaboration with other development partners, technical support will be provided to the Ministry of Planning (MOP) to develop child- and equity-focused M&E systems, analyses and research. Child-centred dialogue will be strengthened with research institutions, the private sector and CSOs.

60. UNICEF will support inclusive policies for children with disabilities by introducing inclusion concepts and tools into the local governance processes, disability sensitization of subnational authorities, and supporting non-government disability support-providers to deliver quality services.

61. Technical assistance to the CNCC for monitoring the implementation of the Convention on the Rights of the Child and for preparation of the periodic State party reports to the Committee on the Rights of the Child will be provided. UNICEF will support line ministries to address the Concluding Observations of the Committee. UNICEF will also enhance partnerships with CSOs to strengthen their capacity to monitor child rights at national and subnational levels.

Programme effectiveness

62. In support of the four programmatic components, this outcome will ensure efficient and effective programme, financial and human resources management, enhanced external relations and partnerships, and monitoring and evaluation.

Summary budget table

<i>Programme component</i>	<i>(In thousands of United States dollars)</i>		<i>Total</i>
	<i>Regular resources</i>	<i>Other resources</i>	
Integrated early childhood survival, care and development	6 200	19 100	25 300
Inclusive and quality education	1 500	17 500	19 000
Protective environment	2 800	9 000	11 800
Social inclusion and governance	3 200	2 000	5 200
Programme effectiveness	2 953	1 000	3 953
Total	16 653	48 600	65 253

Programme and risk management

63. The MOP will assume overall coordination of the country programme, delegating the coordination of programme components to line ministries. Under the leadership of the Council for the Development of Cambodia, an annual review of the UNDAF strategic management and achievements will be undertaken showing UNICEF contributions. UNICEF will work with relevant ministries and departments at national and subnational levels to ensure efficient and effective programme implementation. Annual or rolling workplans will be agreed with each partner and monitored through quarterly, mid-year and annual reviews.

64. A risk management strategy will be operationalized to mitigate the high risks to the achievement of programme results: diminishing development aid, weak capacity and coordination, corruption, limited transparency and accountability of partners, and the implications of the 2017 commune elections and the 2018 parliamentary election. Continued efforts to foster and strengthen partnerships with NGOs will ensure continuity of critical services and interventions for children, particularly in emergency situations. During emergencies, simplified mechanisms that allow quick activation of agreements and fast-tracking humanitarian response

when working with civil society will be adopted. The early warning and early action system will be systematically monitored to enable timely identification of and response to emergencies.

65. This country programme document outlines contributions by UNICEF 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 headquarter levels with respect to country programmes are prescribed in the organization's programme and operations policies and procedures.

Monitoring and evaluation

66. The Results and Resources Framework will form the basis for monitoring and evaluation. The Three Year Integrated Monitoring and Evaluation Plan, complemented by a Costed Evaluation Plan, will define all priority monitoring, research and evaluation activities. Three key evaluations will be conducted: (i) Equity- and child rights-focused evaluation of the Government of Cambodia/UNICEF country programmes (2006-2010 and 2011-2015); (ii) Evaluation of the Education Capacity Development Partnership Fund programme — Phase II; (iii) Formative evaluation of the integrated approach to early childhood development.

67. UNICEF mid-year and annual reviews will be used to consolidate inputs for UNDAF monitoring and reporting. Through its zone office programme staff, UNICEF will promote joint programme monitoring visits at subnational levels in order to verify and discuss progress on the achievement of results. Given the short programme cycle, an in-depth second year annual review will be used to make necessary programme and strategy adjustments.

68. Through the government systems and in cooperation with the MOP, UNICEF will accelerate operationalization of the Monitoring Results for Equity System, especially in the north-eastern provinces. A selected set of determinant indicators will be used to monitor the reduction of bottlenecks to access to quality social services; and support for strengthening of existing national and subnational information systems in the selected districts will be provided.

69. UNICEF will continue to provide technical and financial support to the National Institute of Statistics for conducting national surveys, including preparations for the national census, the Cambodia Socio-Economic Survey and other major surveys, incorporating new indicators and targets from the Sustainable Development Goals.

Annex

Results and resources framework

Cambodia — UNICEF country programme of cooperation, 2016-2018

Convention on the Rights of the Child: Articles 6-7, 18, 24, and 27-28.							
National priorities: Rectangular Strategy 5: Capacity-building and human resources development – Promotion of health and nutrition, strengthening and enhancing education, science, technology and technical training, development of social protection system, enhanced implementation of population policy and gender equity.							
UNDAF outcomes involving UNICEF: Outcome 2: By 2018, more people, especially vulnerable, poor and marginalized groups are equitably benefiting from and contributing to affordable, sustainable and quality social services and protection and have gained enhanced skills to achieve and contribute to social and human development.							
Outcome indicators measuring change that includes UNICEF contribution							
2.3.1 Skilled attendance at birth; 2.3.2 Antenatal care coverage; 2.3.4 Percentage of HIV-positive pregnant women who receive PMTCT services; 2.4.1 Percentage of children aged 0-59 months stunted, disaggregated by sex, wealth and location; 2.4.2 Percentage of children aged 6-23 months living with their mother who are fed according to three IYCF feeding practices based on four+ food groups; 2.4.3 Percentage of families using any sanitation facility.							
Related UNICEF Strategic Plan outcomes: 1-Health, 2-HIV, 3-WASH, 4-Nutrition, 5-Education, 6-Child protection							
UNICEF outcomes	Key progress indicators, baselines (B) and Targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome (in thousands of United States dollars)		
					RR	OR	Total
By 2018, infants, children under 5 and pregnant women have improved and more equitable use of integrated early childhood survival, care and development interventions and practices, particularly in target districts.	<p>Skilled attendance at birth Nationwide: B:75.12% T: 91% Mondul Kiri: B; 48% T: 70%</p> <p>Percentage of children under 5 with birth certificates: National B: 62% (2010) National T: TBD</p> <p>ECE enrolment for 3-5-year-old children National B: 33% (school year 2013/14) National T: 55%</p> <p>Percentage of children aged</p>	<p>MOH – Health Information System, CDHS 2014</p> <p>CDHS 2014</p> <p>Early Childhood Education and Development Annual Report</p> <p>Programme data</p>	<p>1. Service providers have increased knowledge, skills and communication capacities and provide women, newborns and children under 5 with better quality primary and maternal health care, and nutrition services, especially in target districts, including in emergencies.</p> <p>2. Increased enrolment of children under 5 in quality</p>	<p>Social ministries and departments.</p> <p>Swedish International Development Cooperation Agency (SIDA), European Union (EU), Korea International Cooperation Agency, Australian Department of Foreign Affairs and Trade, United States Agency for International Development (USAID), Deutsche Gesellschaft für Internationale</p>	6 200	19 100	25 300

	<p>0-59 months wasted treated for severe and moderate acute malnutrition Katie: B: 6% T: TBD Mondul Kiri: B 4% T: TBD</p> <p>Percentage of households practicing hand-washing with soap at critical times. National B: 47% T: 15% above B</p> <p>Percentage of primary schools with latrines/water. National: B: 83% (toilets), 58% (water) T: 100% (both).</p>	<p>CDHS, 2014 Knowledge, Attitude and Practice survey 2010</p> <p>Education Management Information System (EMIS) 2013/14</p>	<p>ECE programmes, particularly in target districts.</p> <p>3. Improved and equitable use of safe drinking water, adequate sanitation, and improved hygiene practices in communities, health centres and schools, particularly in target districts, including in emergencies.</p>	<p>Zusammenarbeit/Bank aus Verantwortung (GiZ/KfW)</p> <p>UNFPA, WHO, FAO, WFP</p> <p>Red Cross World Bank (WB) INGOs GPE</p>			
<p>Convention on the Rights of the Child: Articles 28-30 National priorities: Rectangular Strategy 5: Strengthening and enhancing education, science, technology and technical training.</p>							
<p>UNDAF outcomes involving UNICEF: Outcome 2 (as stated above) Outcome indicators measuring change that includes UNICEF contribution: 2.1.2 Percentage of qualified primary education teachers; 2.1.3 Lower secondary school gross enrolment rate in four north-eastern provinces, disaggregated by gender.</p>							
<p>Related UNICEF Strategic Plan outcome: 5-Education</p>							
<p>By 2018, boys and girls in Cambodia have more equitable access to and completion of quality inclusive education with improved learning outcomes.</p>	<p>Results of standardized assessments in Grades 3 and 6 (boys and girls): (B: G3 54.1% Khmer and 48% maths; G6 52.5% Khmer and 42.8% Maths T: G3 56% Khmer and 50% maths; G6 54% Khmer and 45% maths)</p> <p>Gross enrolment rate for lower secondary education (boys and girls): B: 53.5%; T: 57.5%</p> <p>Basic education survival rate (boys and girls): B: 35.6%; T: 38%</p>	<p>Reports from MOEYS</p> <p>EMIS</p> <p>EMIS</p>	<p>1. Strengthened government capacity for policy development, planning and financing of quality education.</p> <p>2. Increased access to inclusive basic education, particularly among indigenous minority children and children with disabilities, including in emergencies.</p>	<p>MOEYS</p> <p>EU, SIDA, USAID</p> <p>UNESCO</p> <p>INGOs</p> <p>GPE</p>	1 500	17 500	19 000

<p>Convention on the Rights of the Child: Articles 3, 9, 12-14, 19-21, 25, 34, 37 and 39-40. National priorities: Rectangular Strategy 5– Development of social protection system, enhanced implementation of population policy and gender equity.</p>							
<p>UNDAF outcomes involving UNICEF: Outcome 2: (as stated above); Outcome 3: By 2018, national and subnational institutions are more transparent and accountable for key public sector reforms and rule of law; are more responsive to the inequalities in the enjoyment of human rights of all people living in Cambodia; and increase civic participation in democratic decision-making. Outcome indicators measuring change that includes UNICEF contribution: 3.1: Level of follow-up and implementation by ministries of selected recommendations by United Nations human rights mechanisms and the Convention on Anti-Corruption Implementation Review Mechanism. 3.6: Existence of standardized minimum services for survivors of violence against women and children, in line with international standards, 3.7: Number of prisoners in pretrial detention, disaggregated by sex and age.</p>							
<p>Related UNICEF Strategic Plan outcome: 6-Child protection 7-Social inclusion</p>							
By 2018, girls and boys vulnerable to and exposed to violence and those separated from their family are increasingly protected by the institutional and legislative framework, quality services, and a supportive community environment.	<p>Proportion of children (0-15) in residential care reunified with family or in family placement, in last 12-month period B: TBD; T: 30%</p> <p>Percentage reduction in proportion of children who experience violence in the home setting in target provinces: B: TBD; T: 30%</p>	<p>MOSVY alternative care database and inspection reports</p> <p>Commune database MOWA records CNCC law compilation</p>	<p>1. Increased provision of quality and well-coordinated child protection services that prevent and respond to unnecessary family separation and violence against children, including in emergencies.</p> <p>2. Increased access to and use by children, including adolescents, of age and gender-appropriate interventions to reduce risk and vulnerability, including to HIV, and promote healthy lifestyles.</p>	<p>MOSVY, MOWA, Ministry of Interior, CNCC, Steering Committee on Violence against Children</p> <p>USAID</p> <p>OHCHR, UN-Women, WHO</p> <p>INGOs 3PC partners</p>	2 800	9 000	11 800
<p>Convention on the Rights of the Child: Articles 4, 12-13, 23 and 26-27. National priorities: Rectangular Strategy 5– Development of social protection system, enhanced implementation of population policy and gender equity.</p>							
<p>UNDAF outcomes involving UNICEF: Outcome 1: By 2018, people living in Cambodia, in particular youth, women and vulnerable groups, are enabled to actively participate in and benefit equitably from growth and development that is sustainable and does not compromise the well-being, natural and cultural resources of future generations. Outcome 3: (as stated above) Outcome indicators measuring change that includes UNICEF contribution</p>							

2.5.1 Percentage of identified poor households benefiting from social assistance programmes; 2.6.1 Selected social sector budget allocation as a proportion of total recurrent budget; 2.6.2 Social protection budget allocation as a proportion of total recurrent budget.							
Related UNICEF Strategic Plan outcome: 7-Social inclusion							
By 2018, child rights and equity are increasingly prioritized in social sector national and subnational policies, budget allocations, social protection systems and public discussion.	Number of disadvantaged children benefitting from social protection programmes (B: TBD, T: increase by 15%)	Budget law NSPS M&E system/administrative data	1. By 2018, social sector ministries have increased capacities to formulate, execute and monitor programme budget with equity focus. 2. By 2018 the national social protection system strengthened to address the needs of the most vulnerable children.	MOP, MEF, social sector ministries, Council for Agriculture and Rural Development, NCDD, CNCC EU, WB, GiZ UNDP, WFP, FAO, ILO NGOs Universities	3 200	2 000	5 200
Programme effectiveness							
Programme effectiveness	Percentage of outcomes and outputs that are annually reported as either on track or achieved: Outcomes: B: TBD (2015), T: >75% Percentage of evaluation recommendations implemented, closed and reported within 12 months of uploading. B: 100% ; T: 100%	UNICEF systems	1. Improved accountability for equitable results for children and women. 2. Key children's and women's issues are brought to the attention of target audiences for advocacy and resource mobilization.		2 953	1 000	3 953
Total resources					16 653	48 600	65 253