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Summary of midterm reviews of country programmes

South Asia region

Summary

This regional summary of midterm reviews of country programmes conducted in 2010 was prepared in response to Executive Board decision 1995/8 (E/ICEF/1995/9/Rev.1). The Executive Board is invited to comment on the report and provide guidance to the secretariat.

* E/ICEF/2011/13.

Introduction

1. During 2010, two countries in the South Asia region conducted midterm reviews of country programmes: Bhutan and Sri Lanka.
2. Both midterm reviews (MTRs) demonstrate the continuing commitment of UNICEF to move its emphasis upstream and focus on establishment of sustainable systems, enhanced capacity development and strengthened evidence-based programming. Such a shift is expected to facilitate achievement of the Millennium Development Goals in both countries, especially in lower-performing areas and among more deprived and remote populations.

Midterm reviews

Bhutan

Introduction

3. UNICEF Bhutan is a self-starter in the Delivering as One initiative. The country programme is thus part of the 2008-2012 common country programme action plan (cCPAP), which covers the activities of 14 resident and non-resident United Nations agencies. In 2010, at the midpoint of the United Nations Development Assistance Framework (UNDAF)/cCPAP for 2008-2012, a midterm review was undertaken by the United Nations system under the leadership of the Gross National Happiness Commission of the Royal Government of Bhutan.

4. As part of this joint UNDAF/cCPAP MTR, the UNICEF country programme MTR was also carried out, feeding into the MTR of the Government's tenth Five Year Plan (2008-2013). The objectives of the UNICEF MTR were to take stock of achievements made and determine adjustments needed in strategy, focus and implementation; update the situation analysis, with a focus on equity; identify good practices, lessons learned, constraints and opportunities; and identify emerging areas for consideration in the next country programme.

5. The methodology was based on internal programme self-assessments in consultation with the implementing partners in the five United Nations Theme Groups. An analysis of contributions to relevant outcomes and outputs of the cCPAP Results and Resources Framework examined whether targets were achieved, on track or in need of further attention. Attention was also given to assessing the contribution of cross-cutting issues such as gender, emergency preparedness and response, HIV/AIDS, communication for development, and adolescents and youth. The self-assessments were critically reviewed by the regional office to ensure quality and obtain technical guidance. Final review of the UNDAF/cCPAP MTR was carried out by the Government-United Nations Country Programme Board on 7 December 2010.

Update of the situation of children and women

6. Bhutan has a population of 687,000, with a child population of 262,000. Its urban population has increased rapidly from 21 per cent in 2004 to 35 per cent in 2008. In 2008 successful parliamentary elections were held, marking the peaceful transition to a democratic constitutional monarchy. In September 2009 an

earthquake measuring 6.3 on the Richter scale caused 12 deaths, 47 injuries and extensive infrastructure damage, highlighting the country's location in an area highly prone to earthquakes.

7. Bhutan's has achieved middle-income country status mainly due to revenue from hydropower, most of which currently serves debt repayment. Human asset and economic vulnerability criteria however, underline ongoing development needs. Around 23 per cent of the population was living below the national poverty line in 2007. Another 6 per cent was living below the extreme poverty line, mostly in rural areas. Bhutan has continuously allocated more than 20 per cent of the national budget for basic social services such as education and health. The Government aims to reduce poverty to 15 per cent by 2013, but it is challenged by increasing youth unemployment, which has more than doubled, from 6 per cent in 2005 to 13 per cent in 2009.

8. Bhutan has made great achievements on many social indicators, although numerous challenges remain. Bhutan is on its way to achieving the Millennium Development Goal 5 target on maternal mortality,¹ but the under-five mortality rate, at 81 per 1,000 live births in 2008, is the sixth highest in Asia. The highest levels of maternal and child mortality are found in poor and rural areas of the east and south. Serious levels of stunting were found nationally in 2009, with critical levels in the east. Coverage of the national water supply has declined slightly, and water quality in schools is low. National coverage of sanitation is only 65 per cent, with large disparities between urban (87 per cent) and rural (52 per cent) areas.

9. The country has made commendable progress in education and is close to achieving Goals 2 and 3. The primary net enrolment ratio in public schools has increased from 84 per cent in 2007 to 92 per cent in 2009, with no gender disparity. In 2005 the overall adult literacy rate was 53 per cent, but rural areas have only a 29 per cent female literacy rate, indicating the need for further emphasis on non-formal education.

10. Bhutan does not have any alternative care institutions besides monasteries, where approximately 5,000 children live. Another 20,000 children live in boarding schools to facilitate access to education. There are no accurate figures on children with disabilities or on working children. Children in conflict with the law is increasingly described as an urban youth problem. Drug-related crimes have increased, especially among unemployed youth. Women in general enjoy equal rights, though gender parity and equality issues exist in areas such as governance, economic development, tertiary education, training and health.

11. Since 2008 the United Nations country team has made great strides in coherence and Delivering as One, contributing to the aid effectiveness agenda. The partnership analysis conducted as part of the MTR found that, from the Government's perspective, Delivering as One has improved coordination, flexibility and streamlining while reducing duplication and overlap. However, United Nations

¹ While the 2005 World Health Organization/UNICEF/United Nations Population Fund/World Bank adjusted maternal mortality ratio (MMR) was estimated at 440 per 100,000 live births, the reported 15 maternal deaths in 2009 correspond to a much lower MMR of 112. However, the estimation methodology suggests that less than 20 deaths results in a relative standard error of more than 23 per cent, which can be considered statistically unreliable. If maternal deaths, including those unreported, exceed 20 cases (in the range of 22-24 total maternal deaths), the annual MMR is below 180 per 100,000 births in Bhutan.

agencies perceive that workloads have increased and programme implementation is still somewhat fragmented.

Progress and key results at midterm

12. The overarching goal of the 2008-2012 country programme is to support the Government to progressively realize the rights of children and women, the Millennium Development Goals and national priorities. The country programme has four components: health, nutrition and sanitation; quality education; enabling environment for child protection; and planning, monitoring and communication.

13. In **health, nutrition and sanitation**, working together with partners has improved outcomes. Institutional deliveries increased from 40 per cent in 2005 to 62 per cent in 2009, the quality of service delivery improved in 90 per cent of the 234 health centres, newborn care improved at the National Referral Hospital and 95 per cent of health centres sustained high immunization coverage. While most initiatives are on track to achieve their targets by 2012, further attention is needed to sustain improvements and increase the number of certified baby-friendly hospitals.

14. In collaboration with partners in **education** UNICEF has supported a national Early Childhood Care and Development (ECCD) policy that awaits cabinet approval. It is needed to address the dismal rate of access to early learning opportunities, which are available to only about 2 per cent of children aged 3-5 years. Under the umbrella of educating for gross national happiness and the child-friendly school concept, around 10,000 primary schoolchildren in remote areas now have access to child-friendly, high-quality teaching-learning approaches. Over 11,000 primary schoolchildren enjoy an improved school learning environment through provision of school furniture. Further attention is required to reach the target for non-formal learners to complete basic literacy courses. Progress is on track in WASH (Water, sanitation and hygiene education) -in-schools, with at least 13,000 schoolchildren and child monks/nuns now using improved water and sanitation facilities. Work is ongoing to increase the number of functional taps and improve sanitation facilities.

15. A National Youth Policy supported by UNICEF is pending cabinet approval. To address increasing urbanization and modernization, UNICEF has also supported life skills training for non-formal education learners as well as drop-in centres and rehabilitation centres for young people at risk or with substance abuse problems. Collaboration with partners working on HIV/AIDS has raised knowledge and skills on prevention of mother-to-child transmission of HIV (PMTCT) and counselling among basic health unit workers and district hospital staff. UNICEF has also supported initiatives for prevention of HIV among youth through public awareness and training of non-formal education learners and traditional healers. Further attention is needed to increase the number of health centres implementing PMTCT guidelines and the number of monks and nuns trained on HIV/AIDS prevention and corresponding services.

16. In **child protection**, UNICEF supported efforts to enact the Child Care and Protection Act, which covers children in need of protection and those in conflict with the law; the Adoption Act (pending enactment); and the first police complaints and response mechanism. Two women and children units were supported at the police stations of Thimphu and Phuentsholing.

17. In **planning and monitoring**, support has been provided to strengthen results-based management in the tenth Five-Year Plan, draft a Statistical Act and further develop the institutional capacity of government partners. The availability of disaggregated socio-economic data for analysis and policy advice has been increased through the Bhutan Multiple Indicator Cluster Survey (BMIS) and BhutanInfo, customized from DevInfo.

Resources used

18. In 2007, the Executive Board approved a total commitment of \$4,830,000 in regular resources and authorized a ceiling of \$15,000,000 in other resources for the 2008-2012 programme of cooperation. Fund utilization has been high, and an additional \$5 million in other resources was recently approved for the remaining period of the programme (2011-2012). This increases the overall other resources ceiling to \$20 million. Total resource utilization was \$10.7 million in August 2010 at the time of the MTR.

Opportunities and constraints affecting progress

19. Key opportunities during the first half of the programme included growing demand for data generation and analysis and greater availability of disaggregated information, which raised opportunities for evidence-based policy advocacy. Decentralization offers opportunities to ensure equitable access to basic social services for children within the overall democratization process. The evolving social welfare system and use of monastic bodies as agents of change are other important opportunities. The Government is also committed to scaling up national capacity for emergency preparedness and response.

20. Major constraints during the period include insufficient national human resources in some areas, particularly affecting communication for development and monitoring. Withdrawal of donor support, mainly due to the country's middle-income status, will diminish funding for service delivery, compounding the high costs of working to ensure equity in remote areas.

21. UNICEF will continue with some downstream strategies while expanding upstream support. Legislative and policy development will continue over time. UNICEF will work with partners to streamline its programme and forthcoming country programme document within the cCPAP and the context of Delivering as One.

Adjustments made

22. To ensure equity and reduce disparities among children, the programme needs to be consolidated geographically, focusing on the districts and *Gewogs* (groups of villages) with the worst social and economic indicators. These are primarily in the east and the south. Basic social services will be supported to ensure quality and systemic supervision and monitoring, as well as policy advocacy. Long-term strategies will be gradually initiated to reduce downstream components of the programme, such as delivery of supplies. On the demand side, more emphasis will be given to improving the knowledge, attitudes and practices of rights-holders and duty-bearers at household and community level.

23. Opportunities to expand involvement in social policy and social welfare will be explored and capacities strengthened to generate and disseminate knowledge and

use it for policy advocacy. As a number of laws and policies have been enacted in recent years, it will be important to provide continuing support to monitor their implementation. Gender equity, emergency preparedness and response, HIV/AIDS and adolescent/youth issues cut across all four programmes and will require strong cross-sectoral approaches.

24. The maternal and child **health and nutrition** component will support both the equity-focused approach and communication for development. A particular target of equity efforts will be the remaining children and women unreached by health services. Services with high coverage will be supported in terms of quality improvement, monitoring and evaluation, and policy advocacy. Communication for development will emphasize knowledge, attitudes and practices at household and community level with a focus on integrated management of pregnancy, childbirth and neonatal and childhood illnesses, as well as infant and young child feeding practices. Child health interventions need to be scaled up, especially for children under 3 years old.

25. The **water supply and sanitation** component will continue to focus on both supply and demand, concentrating on primary schools and monastic institutions. Upstream work should include support for development of strategies, guidelines and action plans as well as operations and maintenance mechanisms and budgets for WASH in schools. Another area is advocacy to ensure that no new schools are built without proper water and sanitation facilities.

26. The **education** component will support equity and communication for development. The emphasis will be on the remaining children not enrolled in primary education and out-of-school adolescents and young people. The programme will expand its interventions to basic education, focusing on access, gender equity and quality to ensure a higher transition of girls to secondary education. ECCD centres need to be scaled up. Particular efforts in communication for development are needed to ensure that parents and communities, especially in the poorest districts, have the necessary knowledge, attitudes and practices regarding ECCD. This will occur in parallel with more attention to quality education, including through child-friendly schools and life-skills education. The context for this work is educating for gross national happiness and advocacy with the Government for increased ECCD funding and inclusion of multi-grade teaching in the education policy.

27. In terms of supporting an enabling environment for **child protection**, further relevant services will be designed, piloted and rolled out, emphasizing the most disadvantaged children and families at risk. While preventive services are needed nationwide, responsive services are mainly needed in disadvantaged urban areas. Life skills messaging related to child protection and participation issues for parents, children and adolescents will be strengthened. The National Youth Policy will form the basis for developing an action plan for youth, taking a comprehensive and cross-sectoral approach with a particular focus on adolescents. Further knowledge generation and a monitoring system are needed to build an evidence base on child protection and participation.

28. The **planning and monitoring** component of the country programme will continue to focus on equity and disparity issues. It will work to promote or expand the demand for data disaggregated by location and gender and will support further knowledge generation on equity issues at district and *Gewog* levels. Partnerships will continue with key government agencies at decision-making levels on social

policy and social welfare issues. These partnerships will continue to address capacity-building to improve results-based reporting, monitoring and evaluation, as well as study and survey methodologies. Successful social policy/social welfare options in other countries will be explored in parallel with mapping of the current situation in Bhutan. A comprehensive communication for development strategy will be prepared based on community needs and gaps in existing communication interventions across all programmes.

Sri Lanka

Introduction

29. The midterm review of the Sri Lanka-UNICEF country programme for 2008-2012 was co-chaired by the Deputy Secretary to the Ministry of Finance and Planning and the UNICEF Representative for Sri Lanka. The main components of the MTR constituted joint Government of Sri Lanka-UNICEF reviews of the education, health and nutrition, child protection, WASH, and planning, monitoring and evaluation programmes. Reviews were undertaken at central and provincial levels; at central level, programme review committees were chaired by the Secretaries of relevant ministries. Members of the Department of External Resources and the Department of National Planning of the Ministry of Finance and Planning were invited to participate in the sectoral committees. At the end of each programme and provincial review, a validation meeting was held to obtain the consensus of all members of the programme review committee before finalization of sector and provincial reports.

Update of the situation of children and women

30. The Sri Lankan country context has undergone dramatic change. In May 2009, almost 30 years of conflict came to an end, enabling the Government, UNICEF and other partners to support the resettlement of more than 250,000 internally displaced persons. The end of the conflict enabled UNICEF to shift its focus from emergency humanitarian response to rehabilitation, resettlement and development. A more upstream, policy-related focus on equity for disadvantaged children and populations in general has been emphasized. The end of the conflict and the country's recent achievement of middle-income status has been accompanied by a reduction in donor assistance for humanitarian response.

31. The overall goal of the country programme continues to emphasize fulfilment of children's rights, with a special focus on increasing equity for disadvantaged children and women in selected areas of the country, including the areas formerly affected by conflict. The country programme will continue to contribute to the national goals of reducing poverty and regional disparities in health and nutrition, education, water and sanitation, and child welfare. These are in line with the country's Ten-Year National Development Horizon (2006-2016) known as *Mahinda Chinthanaya*. The Government has also detailed two plans to address the needs of the Eastern and Northern provinces, both of which were affected by the conflict.

32. Sri Lanka's social indicators continue to compare favourably with those of the rest of South Asia, except on nutrition of children aged below 5. The country has a good track record on Millennium Development Goals 2 and 3 (on primary education and gender equality) and has one of the highest literacy rates in South Asia. It has

achieved gender parity in primary education, with gross enrolment rates of 91.4 per cent for girls and 92.2 per cent for boys. Sri Lanka has achieved a relatively high level of health care as reflected in low levels of infant, child and maternal mortality. The country is on track to achieve the Goal 7 targets for water supply and sanitation. The main challenges are to reduce disparities between and within districts and to reach underserved areas, including poor urban communities.

33. Another remaining challenge is the completion of the resettlement process in the areas where the conflict took place, where much of the physical infrastructure has to be replaced or repaired, particularly in two of the five northern districts. Also critical is continued capacity development of regional and local administrations, incorporating the participation of communities in order to ensure the sustainability of investments.

Progress and key results at midterm

34. The change in country context is reflected in the remaining half of the country programme cycle, with a shift in emphasis from emergency to development. UNICEF supports programming in 11 United Nations focus districts. Eight of these are in formerly conflict-affected areas and the remaining three are in Uva and Central provinces.

35. The components of the country programme are education; health and nutrition; (WASH); child protection; and planning, monitoring and evaluation. The overall goal in **education** is to increase access, expand inclusiveness and improve the quality of basic education, with an emphasis on supporting the most vulnerable children. A key initiative has been development of a comprehensive, inclusive education policy with special attention to children with disabilities and those who have dropped out of school. The programme has contributed to building the knowledge and skills of national education officials on basic education indicators and data analysis. The child-friendly schools approach has contributed to a 10 per cent improvement in essential learning competencies. More than 1,000 schools (10.8 per cent of the total) have adopted child-friendly criteria and improved quality.

36. An accelerated learning programme is ongoing to reduce gaps in learning competencies among children from conflict areas, who suffered from irregular school attendance. As the co-lead of the education cluster, UNICEF provided immediate relief to students, teachers and school communities affected by the emergency. By the end of the conflict in May 2009, approximately 80,000 displaced students, aged 5-14 years, were attending school within two months of being displaced. Educational materials and support were provided during the early phases of the resettlement process along with school furniture and help in reconstruction. The cluster simultaneously supported capacity development to better deal with future emergencies and manage the transition towards development. Emergency preparedness and response training was provided to zonal education officers, teachers and school principals. Schools reopened wherever displaced children were located to ensure minimal disruption to schooling.

37. During 2008-2010, as part of the **water and sanitation** component, UNICEF supported the establishment of the Rural Water Supply system, which provided technical repair and maintenance support to community-based organizations. Small-scale water supply systems provided rural populations with access to safe drinking water. UNICEF also continued to support the National Water Supply and Drainage

Board and other local authorities in Batticaloa, Trincomalee and Ampara to increase coverage of safe water and safe household sanitation.

38. In 2009, support was provided to 247,241 people who were displaced and living in welfare centres in Vavuniya (Northern province). As the cluster lead for WASH, UNICEF facilitated coordination of emergency planning and response in close collaboration with the Government, together with other United Nations agencies, international non-governmental organizations and community-based stakeholders. The emergency response helped to ensure access to safe water, sanitation, and hygiene supplies, and minimize outbreaks of waterborne and sanitation-related diseases.

39. The **child protection** component focuses on systems through strengthening legal frameworks and child protection capacities in the Government. Special attention is given to children living in formerly conflict-affected areas. UNICEF supported a review of laws and practices and identification of new standards needed for the Ministry of Child Development and Women's Empowerment and the police, probation and labour departments. The result was a proposal to reform the Children and Young Persons Ordinance, the main law related to children in Sri Lanka.

40. Significant capacity-building efforts for magistrates, police and probation officers supported a process to review cases involving children and establishment of the Juvenile Justice Forum at the Ministry of Justice. In 2009 the National Guideline on Case Management was finalized and endorsed by the Ministry of Child Development and Women's Empowerment, along with related training modules and guidelines.

41. Support to family tracing/reunification and deinstitutionalization resulted in family reunification of 1,947 children living in institutions between 2008 and 2010. In 2009, UNICEF facilitated emergency child protection by supporting the establishment of 141 child-friendly schools in welfare centres for internally displaced people. Over 57,956 children were reached with recreational activities. Two child-focused units were established in welfare centres, and 98 volunteers were trained to deliver coordinated child protection services in the units. Interventions continued in collaboration with partners on issues related to the conflict, such as family tracing and reunification.

42. In December 2008, an action plan to stop recruitment of children and support release and reintegration of all children was developed and agreed to by the former armed group Tamil Makkal Viduthalai Pulikal, the Government and UNICEF. Under the umbrella of the action plan, recruitment by the group fell by 86 per cent and came to a halt in October 2009. However, the resumption of open fighting during the last phase of the conflict in 2008-2009 increased under-age recruitment by armed groups. Specifically, 397 cases of recruitment were reported between February and May 2009 by the Liberation Tigers of Tamil Eelam. In accordance with United Nations Security Council resolution 1612 (2005), the Sri Lanka Task Force submitted regular reports on children affected by armed conflict, including two annual reports to the Security Council Working Group.

43. The main focus of the **health and nutrition** component has been on reduction of child undernutrition. During 2008-2010, UNICEF supported the Ministry of Health in adopting an integrated approach to tackle nutrition concerns, including through development of a comprehensive package to overcome undernutrition and

anaemia among children and women. Launched in March 2009, the package's interventions included infant and young child feeding, growth monitoring and treatment of acute undernutrition with therapeutic and supplementary feeding. It was directed at children aged below five, adolescents and pregnant and lactating women. The Government National Nutrition Policy was developed and launched in June 2010 with UNICEF assistance.

44. In 2009, emergency support was provided to those displaced by the conflict. Twenty one nutrition rehabilitation centres were established in the Vavuniya displaced-persons site for community management of acute malnutrition. A supplementary feeding programme was also established in the Vavuniya and Jaffna displaced person sites with support from the World Food Programme. Nutritional status significantly improved among children aged below 5. As nutrition cluster lead, UNICEF worked closely with the Government, United Nations agencies, the International Committee of the Red Cross, non-governmental organizations and community-based stakeholders in emergency planning and response.

45. UNICEF also supported the capacity development of health professionals on antenatal care, emergency obstetric care and neonatal life support. A review of maternal mortality in Sri Lanka from 2001 to 2005 was carried out and published in 2008 by the Family Health Bureau. It highlighted the country's success in reducing maternal deaths as well as district disparities.

46. UNICEF support for the prevention of mother-to-child transmission of HIV focused on development of strategies to ensure integration with maternal and child health services. It also established linkages with adolescent prevention through life-skills training in education institutions.

47. In the area of **planning, monitoring and evaluation**, UNICEF has provided oversight for studies, assessments and evaluations with an emphasis on equity analysis across all programme areas. Subsequent to a review by the Government, the Plan of Action for Children for 2011-2016 is being finalized with the Ministry of Finance. Studies and assessments were conducted across all programmes. Three major evaluations² were coordinated by the UNICEF Evaluation Office together with the Sri Lanka tsunami programme evaluation.

Resources used

48. The total planned funding for the country programme from 2008-2012 was \$39 million (\$4 million in regular resources and \$35 million in other resources). An additional amount of \$30 million in emergency funds was carried over from tsunami funds from the previous country programme. Given the situation in the country at the time of approval of the country programme document, an indicative figure of approximately \$40 million was also included to be raised for additional emergency requirements. In 2010 the other resources-regular ceiling was increased to \$70 million, bringing the total programme ceiling to approximately \$110 million. Total funds utilized during the reporting period were \$105,991,217, including \$76,572,352 in other resources-emergency.

² Evaluation of the early childhood development programme, formative evaluation of child-friendly schools and evaluability assessments of the mine risk education programme.

Constraints and opportunities affecting progress

49. The implementation emphasis in the initial two and a half years of the 2008-2012 country programme was largely a response to the tsunami and the conflict, including care, rehabilitation and resettlement of displaced populations. The programme interventions evolved with the changing national context, with some adaptation of planned activities as the situation required.

50. Security considerations during the last stage of the conflict and its immediate aftermath constrained some internal travel and programme implementation, particularly community-based and longer-term development support in the Eastern and Northern provinces. The end of the conflict, improvements in security and opening of roads and access to all parts of the country have assisted population movement and facilitated implementation of the balance of the programme.

51. The transition from an emergency to a development orientation has required adjustments with national partners to refocus programme activities. In addition, as the majority of donor funds were for emergency-related activities, the availability of non-humanitarian funds was limited, restricting implementation of the development component of the programme. Finally, declining support from external donors as Sri Lanka moved from low-income to middle-income status also hampered funding and ultimately programme implementation.

Adjustments made

52. With the end of the conflict, the country has entered a rapid development phase with heavy investments in rebuilding physical infrastructure and establishing administrative systems. For the remainder of the programme UNICEF will contribute to disparity reduction between and within districts and among disadvantaged populations. UNICEF will also continue to support the resettlement of displaced persons in the Northern and Eastern provinces.

53. Evidence-based advocacy on the needs of women and children will support increased partnerships and mobilization of both private and government resources. The education programme will support expansion of the number of child-friendly schools. At the national level, it will aid development of a supportive policy framework so that all schools and children can benefit from more community participation and ownership. The Accelerated Learning Programme will assist children in formerly conflict-affected areas to increase age-appropriate learning competencies. UNICEF will support the Ministry of Education to implement the newly proposed Education Policy, which includes ECCD components.

54. The health and nutrition component will continue to support efforts to lower the prevalence of child undernutrition using innovative local solutions. Guided by the newly established presidential task force on nutrition, an integrated nutrition programme and community mobilization will be scaled up to cover geographic areas with high levels of undernutrition. The programme will continue to support capacity development in the Ministry of Health to improve delivery of services. Efforts to reduce neonatal deaths will be strengthened through prenatal death audits and increasing the availability of essential newborn care packages at appropriate levels. The WASH programme will continue to support the Government's enhanced water quality surveillance activities and efforts to achieve universal coverage of safe drinking water and sanitation.

55. The ending of the conflict has increased the time and resources available for building systems and establishing minimum standards for child protection. UNICEF will continue to support national legislation in areas such as the minimum age of criminal responsibility, enactment of the Children and Young Persons Ordinance and reform of the Orphanage Ordinance. A more comprehensive reform of the juvenile justice system will be supported and engagement with the police strengthened. Resources dedicated to implementation of Security Council resolution 1612 (2005) are expected to diminish, given the end of recruitment of children. Monitoring the release of all children covered under the 1612 mandate will continue until the end of the mandate.

56. With the shift in focus from emergency to development and reduction in overall funds, the Trincomalee and Killinochchi zonal offices have been closed.

Conclusion

57. Both the Sri Lanka and Bhutan midterm reviews emphasize increased leverage and allocation of resources among partners for more effective results. Both countries face the challenge of advancing the child rights agenda with fewer donor resources, owing to the countries' achievement of middle-income status. This is particularly true for Sri Lanka where, with the end of 30 years of conflict and progress made in the social sectors, attracting funds will become more difficult. The anticipated results in equity will require close monitoring by UNICEF and partners. The stress on equity by UNICEF also provides the fiscal and policy opportunities to improve coordination with government partners across all programmes. The ultimate objective is to promote convergence for the benefit of disadvantaged children and women living in lower-performing areas.
