



Enhancing Human Security in the Former Nuclear Test Site of Semipalatinsk

Final Report

Covering the period of 01 January 2008 – 31 December 2010

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I. Summary

Benefiting country	Kazakhstan
Location	East-Kazakhstan, Pavlodar and Karaganda Oblasts
Title of the project	Enhancing Human Security in the Former Nuclear Test Site of Semipalatinsk
Duration of the project	01 January 2008 – 31 December 2010
UN organization responsible for management of the project	UNDP Kazakhstan (Administrative Agent)
UN executing partners	UNDP, UNICEF, UNFPA, UNV
Non-UN executing partners	Semey city Akimat
Total project cost	\$1,978,698
Reporting period	01 January 2008 – 31 December 2010
Type of report	Final Report
Date of submission	30 April 2011

Abbreviations and Acronyms

Akim	Village/district leader, town/city mayor, provincial governor
Akimat	Council/Administration (of village, town, city or province)
BP	Better Parenting
CBO	Community-Based Organisation
CFC	Child-Friendly City
ECD	Early Childhood Development
EKO	East Kazakhstani Oblast
HBR	Healthy Baby Room
HRBAP	Human Rights-based Approach
IUD	Intrauterine Device
IUNV	International United Nations Volunteer
KZT	Kazakhstan tenge
MDG	Millennium Development Goals
MoES	Ministry of Education and Science
MoH	Ministry of Health
MoLSP	Ministry of Labour and Social Protection
MoU	Memorandum of Understanding
NGO	Non-Governmental Organisation
NUNV	National United Nations Volunteer
Oblast	Province
PHC	Primary Health Care
PMPC	Psychological, Medical and Pedagogical Consultation
Rayon	District
RBB	Results-based Budget

RBM	Results-based Management
RK	Republic of Kazakhstan
SME	Small and Medium Size Enterprises
SMUS	State Medical University of Semey
SSMC	Semey State Medical College
SSPI	Semey State Pedagogical Institute
TWG	Technical Working Group
UN	United Nations
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UNV	United Nations Volunteers
UN CT	United Nations County Team
WHO	World Health Organization
YFS	Youth-Friendly Services

Executive Summary

In 2008, UNDP together with UNICEF, UNV and UNFPA started a joint three-year Project "Enhancing Human Security in the Former Nuclear Test Site of Semipalatinsk". The UN agencies involved have divided the areas of responsibility according to specific comparative advantages, and have ensured compatibility and coordination in a common effort to face the multi-sectoral nature of the challenges in the region.

Overall, the objectives set by UNICEF, UNFPA, UNV and UNDP for the Project implementation were met. All activities and achievements are shown in the results section of the report. Five Project Board (PB) Meetings took place in September 2008, in May and November 2009, and in June and November 2010. The Project Board Members (PBM) reviewed and commented on projects' progress/achievements and challenges and provision of advice to ensure efficient and timely execution of the projects' activities.

Goal 1 - Health component - to ensure access to quality basic health and social services for vulnerable groups (UNICEF and UNFPA)¹:

UNFPA

162 health professionals of Semey region under the leadership of national consultant from South-Kazakhstan oblast were trained on "Effective perinatal care" on their work places and are ready to provide quality perinatal care. International consultant developed review curriculum for medical students of the State Medical University of Semey on specialty "Obstetrics - gynecology" and Semey State Medical College on specialty "Obstetrics" on safe motherhood. Local guidance to implement safe motherhood initiative is developed. National consultant developed two software-based quizzes to assess how well obstetricians and midwives are aware of evidence-based technologies of perinatal care. Implementation of regionalization of perinatal care in Semey region was discussed during the meeting with participation of international consultant from the Moldova (P.Stratulat) and specialists of the Departments of Healthcare of Semey, East-Kazakhstan, Karagandy and Pavlodar in August 2010 in Astana city. National consultant developed draft action plan on implementation of regionalization of perinatal care in Semey region. Modern contraceptives, including 5,000 pieces of IUD and 1.3 million male latex condoms, were delivered to the central warehouse in Semey as a humanitarian shipment. Three maternity houses of Semey city were equipped accordingly with inventory to ensure implementation of effective delivery technologies (monkey bars, heaters, obstetrics chairs, medical coaches, balls). About 9,000 copies of educational and informational materials (including diaries for pregnant women) were distributed. 50 information boards with full set of detailed WHO guidance on the management of labour and complications of pregnancy and

¹ UNFPA and UNICEF reported on their work separately, due to the fact that their components were addressed to quite different audiences. Kazakhstan is the country with rather well developed healthcare services, where a function of obstetricians-gynecologists, pediatricians, midwives and nurses for children is clearly defined. UNFPA was focused on achieving four groups of results: (1) insuring that obstetricians-gynecologists and midwives are aware of how to receive information on evidence-based approaches to sexual and reproductive health; (2) insuring that effective perinatal technologies advocated by WHO are applied at all levels of mothers care; (3) insuring that service providers are aware of reproductive health commodities security and can implement the appropriate logistics management and (4) insuring that civil society activists including young people can disseminate correct information related to family planning and sexual and reproductive health. When it was possible both UNICEF and UNFPA were working together through arranging joint activities, which is reflected in the report. E.g. the team of trainers for the workshop on effective perinatal technologies was mobilized jointly by UNFPA and UNICEF. UNFPA focus included obstetricians-gynecologists and midwives, whereas UNICEF focus included neonatologists; the workshop for young activists of youth-friendly clinics aimed to build their capacities to address SRH of young people was arranged by UNFPA on the basis of the clinic established by UNICEF.

delivery distributed in maternity houses of the region making the updated reference materials available to health professionals. A resource centre is equipped with 7 PC assembled in local network established in Semey Medical Academy. In total 76 academic staff members of Medical University of Semey and obstetricians-gynaecologists from public health sector providing services to population of urban and rural areas of Semey region trained and received training materials on evidence-based medicine for their further use at five-day duration workshop facilitated by national consultants from High School of Public Health collaborating with WHO. 22 volunteers of Youth health centers from Semey and Ust-Kamenogorsk were trained in the three-day duration workshop on family planning and prophylaxis of STI and HIV transmission 70 local specialists from Semey were trained and provided CDs with installed CHANNEL software to introduce logistics management information system through implementation of CHANNEL for insuring reproductive health commodities security. 25 local civil society organizations representatives were trained to advocate family planning services and at the Country level workshop in Shymkent on sexual reproductive health of young people, including issues on mobilization of resources. 25 national specialists from the region were trained at 5 days duration workshop facilitated by International Planned Parenthood Federation consultants and received training materials for their further activities.

UNICEF

Since 2002 UNICEF has been piloting innovative health, education and social protection models based on proven international standards in Semey region. The outcomes of these practices contribute to the improvement of national policies and social sector system reforms. Main programmatic interventions are the following:

- Quality improvement of maternal and child health care – introduction modern care and quality assurance tools, training of health staff.
- Enhancing optimization of primary health care and development services for young children – identification of developmental risks; education for parents on child development, early intervention for developmental concerns, inter-sectoral coordination of intervention and treatment.
- Promotion of fortified flour production and consumption to prevent anaemia in children and women.
- Establishment of youth friendly medical and psycho-social services – providing sexual and reproductive health information, education and counselling for HIV.
- Establishment of integrated services to support and provide counselling to families with young children and dysfunctional families.
- Provision of children with special needs with access to pre-school inclusive development programmes.
- Strengthening capacity of the local government in good governance for children within the framework of the Child Friendly City Initiative.

Within the 2008-2010 project on Enhancing Human Security in the Former Nuclear Test Site of Semipalatinsk two resource centres were established by UNICEF and provide ongoing pre- and in-service training for health workers at Medical University and Medical College. Training curricula for future neonatologists and practicing ones contain blocks on effective perinatal technologies and essential newborn care and resuscitation. 200 health workers and academicians capacitated in:

WHO advocated effective perinatal technologies,

Monitoring and evaluating progress of the implementation of effective perinatal technologies – application of BABIES methodology as a total quality management tool;

Quality of perinatal care provided in 10 maternities of EKO assessed; recommendations submitted to the local and national health authorities;
Model of regionalisation of perinatal care in EKO developed, proposed and discussed at the local level and in the Ministry of Health: The second level maternity being established on the South of the region (Ayaguz rural area). Technical support was provided to the regional Health department in the area of development plan of actions aimed at improvement of perinatal care quality. 6 beds in neonatal intensive care unit and 8 beds in special care unit for preterm newborns were organized in Semey Perinatal Centre; a special care neonatal unit with additional beds available for sick newborns established at the Regional Hospital;

UNICEF outcome: Infant mortality rate decreased in Semey region:

2008 – 20 per 1000 live births

2010 – 17,9 per 1000 live births

2 healthy model baby rooms (HBR) were established and equipped in Semey out-patient clinics: health care workers monitor growth and development of infants/0-3 children and counsel parents on child care and development; the 691 order approved at national level according to which healthy baby rooms established throughout the country. Guidelines and standards for intervention and continuum of services for early children and for those having special needs and on multidisciplinary approaches in service delivery improved and introduced at national level. 1,500 health professionals, social and educational workers know how to provide early intervention and development techniques for early children and for children with special needs. Exchange of good practices between South Kazakhstan and Semey on early children care and development/better parenting was established; knowledge and skills on early children care and development of Semimapalinsk region rural health specialists and parents improved by 40%.

2 youth-friendly services centers (YFS) were established and provide medical and psycho-social services tailored to the needs of young people: managers of YFS raised their knowledge and familiarized with international experience on services for young people; staff of Semey YFSs increased their knowledge on development & implementation of YFS strategy involving volunteers. Focus-groups discussions on vital youth problems were conducted by trained young facilitators; recommendations presented at the Youth Forum. A center providing YFS was established and supported methodically in Ust-Kamenogorsk. Specialists of Semey youth-friendly services got funding from the Regional healthy life style center. More than 15,000 young people counseled on reproductive health and healthy life style habits.

Psychologists and social workers in Semey family support centre provide counseling services for families in difficult life situations. System for early identification and social services for prevention of child institutionalization was reviewed, services for children with special needs were mapped out and presented at the local level. Piloting of early intervention programmes for children with special needs and family support in Semey was assessed, intersectoral group of 30 representatives from government structures and NGOs was trained on the common understanding of the social services/family support standards.

Students of Medical University and Pedagogical Institute were capacitated in identifying fitness level of children with mental disabilities; 200 children with special needs and their parents got advice on involvement in fitness. Inclusion of Semey city and Shulbinsk rural area children with special needs into pre-school education increased by establishing 6 child development rooms at kindergartens, Semey Ped Intitute, Rehab. Center and PMPC. Recommendations on the improvement of gate-keeping functions at the local level and for improvement of Pedagog-Med-Psycholog. Comission were developed. Experts of the Pedagogical Institute took part in the Conference on inclusion. Semey experience in running inclusive child development rooms was presented. Family-support models/social services were analyzed and documented, training needs

were assessed; experience and methods were summarized and exchanged; recommendations on improvement were made. Child protection system at the local level was mapped; recommendations on its enhancement were presented and discussed at the national and local levels. Main causes of child abandonment were identified; the outcomes and recommendation on its prevention made at the local level. Data on institutionalized children was collected.

30 local civil servants and NGOs have increased knowledge and skills on planning family-based and child-focused social policies at local level. SitAN on child wellbeing in the region conducted and presented at local level. Memorandum of Understanding and Action Plan on a Child-friendly city initiative for implementation in 2009-2010 were signed. Implementation of a Child-friendly city initiative was assessed in Semey and Ust-Kamenogorsk cities; recommendations were developed. Capacity building seminar on child-friendly city organized for all key departments of EKO, Ust-Kamenogorsk and Semey cities; international experience of building the child-friendly cities was shared. CFC Action Plan for 2011-2015 developed and being finalized. Children's and young people's opinions took into consideration when mapping child-friendly/unfriendly city environment; 5-year territorial development programmes of Semey, Ust-Kamenogorsk cities and Beskaragai district were analyzed on ensuring effective budget expenditures at local level in the best interests of children, youth and women. CFC EKO experience presented at the national CFC workshop in Pavlodar, a CFC forum is planned to be held May 2011 in Ust-Kamenogorsk aiming at the best practices exchange and discussion of the main CFC indicators.

Goal 2 - Economic component - to build capacities for entrepreneurship and business skills, and provide modalities for generating economic and employment opportunities (UNDP):

UNDP

Analytical research to study markets and growth opportunities for rural SMEs was conducted to recommend provision of business advisory services via a microfinance institution rather than opening of a business incubator and to narrow the scope of microfinance activities of the project to five particular regions: Abaisky, Beskaragaisky, Abralinsky, Zhanasemeisky and Maisky. These five regions belong to extreme (more than 100 rem) and maximum (35-100 rem) polluted areas and have complete absence of any finance institutions available to the population. As a result of the open competition the micro-crediting organization "The Fund for financial support of agriculture" (FFSA) was selected for signing the contract for the micro-financing programme and provision of business advisory services in October 2008. The FFSA opened the focal points in the rayons to provide free of charge business advisory services to rural entrepreneurs on business management, business planning, microcrediting, microleasing and to do advocacy and awareness about the project and the micro-financing programme in the regions. During the Project implementation period the focal points had provided 980 business consultations to rural entrepreneurs on microcrediting and microleasing, business planning and management. The provision of business advisory services will be continued by credit officers of the FFSA in Abai, Beskaragai and former Zhanasemey rayons after the Project completion. During the Project implementation period UNDP jointly with the FFSA conducted 92 seminars and trained 1280 Project beneficiaries, including rural entrepreneurs, employees of local administrations, farmers, households, and unemployed. FFSA specialists participated as seminar trainers and they explained rules and conditions of microleasing loans, application procedures and etc. Besides the main topics on entrepreneurship issues, the seminar participants were trained on cattle-breeding and crop-raising. Teaching modules for rural entrepreneurs on business management and business planning; vocational/technological training; quality assessment; use of microcredit and microleasing were developed/printed/distributed among rural entrepreneurs and local partners.

On October 14, 2010 the concluding Round Table on "Development of Entrepreneurship in East-Kazakhstan Oblast: achievements and perspectives" was organised in Semey city for 38 participants. Among them being the representatives of partner organizations, donors,

government, business entities, local administration of Semey city, village okrugs and rayons, as well as the Project beneficiaries - rural entrepreneurs. The purpose of the Round Table was to present the results of implementation of Economic Component of the Project on support to building capacities for rural entrepreneurship and elaboration of recommendations for further development of business activity of rural population in the East-Kazakhstan Oblast. Totally, 95% of registered acting rural entrepreneurs from 5 rayons of the Project territory (Beskaragai, Abai, Zhanasemei, Abraly rayons of East-Kazakhstan Oblast and Maiskiy rayon of Pavlodar Oblast) benefited from the realization of the Economic component of the Project. Access to microcredit and microleasing services to rural entrepreneurs is provided thorough the micro-crediting organization "The Fund for financial support of agriculture". The transfer amount allocated for microfinancing was USD 200,000. Totally, 33 microcredits were financed, giving the opportunity for rural entrepreneurs to open or develop their businesses in cattle-breeding, crop-raising, production, trade and services. The microleasing programme was realized through 18 microleasing projects of 25 borrowers (including individual and group applications of 2-3 borrowers), which were mainly directed to the acquisition of agricultural equipment (such as tractors, tricle-irrigation, expanding plant cultivation), mini-bakery, refrigeration equipment for shops. In accordance with the Additional Agreement with UNDP, the FFSA during the next 3 years will continue to disburse microcredits from the rollover capital of paid-off loans to the rural entrepreneurs from the Project territories.

Goal 3 - Social component - to mobilize communities and support NGOs and CBOs in providing community services and in acting as agents of change within society (UNDP and UNV):

UNDP/UNV

A baseline study on NGOs' capacity in the region was conducted to propose training modules for seminars and trainings. Small Grants Mechanism was developed, priority areas for financing were specified on the basis of the project socio-economic researches and the seminar-questionnaire forms. They were: 1) support for vulnerable groups; 2) youth initiatives, addressing local problems; 3) local initiatives, aimed for improving population health; 4) local initiatives, raising socio-economic and ecological problems. In the framework of the Small Grants Programme during 2009-2010 years 5 Grant Appraisal Committees took place, where 42 small grant projects were approved for a total amount of USD 130,000. The applications were selected based on the open competition announcement. The financed grant projects allowed provision of medical equipment to family ambulances, TB dispensaries, polyclinics; provision of musical equipment and computers to boarding schools; repairing of school greenhouses and gyms; provision of sports equipment to village clubs; establishing of sport yards and playgrounds for children, culture and leisure park; repairing of water supply systems to provide the village population with permanent drinking water and water pool for cattle; opening workshops for arts and handicraft training, sewing, shoe-repairing, metalworking. 142 initiative groups and 1,088 volunteers participated in the implementation of these 42 projects, benefiting about 180,600 people. As a result of the social component of the Project, the initiative groups were actively involved in voluntary actions to support small-scale local initiatives, and 15 NGOs were established by the technical assistance and advice of the Project staff. The monitoring results showed that all the grant funds were used by its purpose and the projects are sustainable. International and national UN volunteers provided 394 day-to-day consultations and seminars on various social issues for local project staff, initiative groups, NGOs and local authorities. According to the Project work plan, 20 two-day trainings were organized for 365 participants from local government, initiative groups, NGOs on different topics related to the social project development in the Semey city, affected rayons of East-Kazakhstan, Pavlodar and Karaganda oblasts. Also, seminars on "Social Procurement Law" and on "Access to the information in the framework of Social Procurement" were organized for 32 representatives of NGOs and

journalists to improve the knowledge about directions of the social policy of the society, to discuss the ways to distribute the funds of Social Procurement among NGOs, the inter-relations between state bodies, civil society and mass media. On September 30, 2010, the concluding Round Table on "Partnership aiming the development of civil society in East-Kazakhstan Oblast" took place in Akimat of EKO with the participation of a Deputy of Mazhilis of Parliament of RK, members of Republic Civil Alliance, representatives of NGOs and mass media of Pavlodar, Karagandy and East-Kazakhstan Oblasts. The purpose of the Round Table was to discuss the actual issues of development of NGOs and elaboration of recommendations for further improvement of interaction of the government and institutes of civil society in the framework of Civil Society Development Concept and Social Procurement Law. Village development plan/strategic planning was piloted in Shulbinsk village. Representatives of local Akimat, representatives of the state and business structures, from education and medical sphere, NGOs and initiative groups, developed the "Social and economical strategy plan for development of Shulbinsk village", which was presented to the villagers and then sent for approval to the local budget financing. For the implementation of the Plan activists of initiative groups jointly with the state enterprises and the village Akim undertook different activities, which are successfully being implemented.

II. Purpose

The goal of the project as a whole is to alleviate social suffering among the vulnerable groups in the Semipalatinsk region in order to overcome the ecological, health, psychosocial and humanitarian effects of the Cold War. This project will particularly enhance the economic, health, environmental and community security as well as reduce social tensions to prevent potential conflicts. The goals, objectives, outputs and activities are designed to allow:

- Vulnerable families to benefit from raised living standards and quality health and psychosocial support services
- Decrease infant, child and maternal mortality and improve health status of young people
- Enhance and empower civil society and local ownership in order to prioritize people's needs and implement sustainable community initiatives
- Enhance community and resource mobilization and volunteerism to form self-help groups and associations in conjunction with local authorities to undertake small scale projects for improved living standards
- Create markets in rural areas to benefit the poorest through indirect support, namely empowerment and expanded access to financial services

With regard to this vision, three different goals have been formulated following specific sectoral demands:

Health Component (UNICEF and UNFPA):

GOAL 1 - Health and Social Services: to ensure access to quality basic health and social services for vulnerable groups

OBJECTIVE 1.1 By end 2010, 50 % of women of reproductive age and newborn babies of the Semipalatinsk region will receive quality perinatal care support services

OBJECTIVE 1.2 By end 2010, children of 0-3 years of age from 20,000 families living in rural areas of the Semipalatinsk region will benefit from better early childhood development practices

OBJECTIVE 1.3 By end 2010, 10,000 young people of the Semipalatinsk region will enjoy youth-friendly psychosocial and health services

OBJECTIVE 1.4 By end 2010, at least 5,000 vulnerable families in the Semipalatinsk region will benefit from social counseling and family support services

OBJECTIVE 1.5 By end 2010, local Government and NGOs of the Semipalatinsk region will be able to better plan family-based and child-focused social policies at local level

EXPECTED OUTPUTS:

- 1.1 A pool of obstetricians, gynaecologists, midwives, neonatologists and respective health managers (at least 67%) is enabled to provide quality perinatal services
- 1.2 Sustainable regulatory framework for provision of quality perinatal services is in place
- 1.3 At least 900 primary health care workers (doctors and home visiting nurses) are able to counsel families with children at 0-3 in respect to early childhood development
- 1.4 Enabling regulatory environment for strengthening existing home visiting system for families with children at 0-3 is established
- 1.5 Managers and staff of youth-friendly psychosocial and health services are able to provide quality counselling in respect to young people's sexual, reproductive and psychosocial issues
- 1.6 Regulatory framework for provision of quality youth-friendly psychosocial and health services is in place
- 1.7 The results of piloting in the Semipalatinsk region are used as evidence-based advocacy for nation-wide replication of youth-friendly services
- 1.8 Service providers/social workers effectively support families and enable children to grow up in the family environment
- 1.9 Local government are able to effectively apply Human Rights Based Approach and Results-Based Management in assessment, planning and delivery of social services, taking into account special needs of vulnerable families
- 1.10 Local government will have knowledge and instruments on the management of effective approaches to convergent services improvement (health, social protection and education) and monitoring of the Convention on the Rights of Child
- 1.11 NGOs are able to monitor the quality of service delivery and advocate equity access
- 1.12 Local authorities will ensure the delivery of social sector services according to the developed standards

Beneficiaries:

- Newborn, young, women, rural households, health workers

Economic Component (UNDP)²:

GOAL 2 – Economic development: to build capacities for entrepreneurship and business skills, and to provide modalities for generating economic and employment opportunities

OBJECTIVE 2.1 By end 2010, 30% rural entrepreneurs are better able to understand and exploit economic opportunities through access to financial markets, information and training

OBJECTIVE 2.2³ By end 2010, 150 rural households will benefit from microcredit and microleasing services

EXPECTED OUTPUTS:

2.1 Business Advisory services provided to rural entrepreneurs

2.2 Access to microcredit and microleasing services expanded into rural areas

Beneficiaries:

- Rural entrepreneurs, women, vulnerable households, unemployed

Social Component (UNDP and UNV)⁴:

GOAL 3 – Social infrastructure: mobilizing and empowering communities, promoting volunteerism and supporting NGOs/CBOs in providing community services and in acting as agents of change within society

OBJECTIVE 3.1 By end 2010, 1500 local community members will benefit from initiatives by NGOs/CBOs resulting from training and grant distribution

OBJECTIVE 3.2 By end 2010, 60 self-help groups and associations will be engaged in voluntary action to support small-scale local initiatives

EXPECTED OUTPUTS:

² During the familiarization visit of the UN CT to Semey in February 2008, the delegation met with the local administration as well as SME representatives. The private sector proposed to look at the idea of opening a business incubator in Semey in order to strengthen the SME development infrastructure in the region. To meet the local demand, it was decided to add the question of opening a business incubator into the planned market survey. At the open and transparent competition, SANGE research company was selected to undertake this survey. In August 2008, SANGE submitted its final report. The report made the following recommendations:

- To narrow the scope of microfinance activities of the project to five particular regions: Abaisky, Beskaragaisky, Abralinsky, Zhanasemeisky and Maisky. Initially, the project document suggests covering the affected territories of East Kazakhstan, Pavlodar and Karaganda oblasts. From these territories, it is recommended to focus on the five regions. These five regions belong to extreme (more than 100 rem) and maximum (35-100 rem) polluted areas and have complete absence of any finance institutions available to the population.

³ During the mid-term evaluation 24-29 April 2009 one of the main recommendations was to revise the target of Objective 2.2 {By end 2010, 30% rural entrepreneurs are better able to understand and exploit economic opportunities through access to financial markets, information and training}. In particular, the project should try to align the formulation of the target with what it seeks to achieve (targeting of both rural households and registered firms) and be realistic in terms of what is actually achievable with the (by definition) limited resources of a development cooperation project.

⁴ In accordance with the project proposal, this Component used to have an OBJECTIVE 3.1 By end 2009, Akimats and NGOs of nine rayons and the city of Semipalatinsk will be sensitized to implement the Social Procurement Law and Local Self-Governance Law in an effective and transparent manner. For effective use of resources, the activities under this Objective were merged with the Objective 3.2.

- 3.1 Transparent grant mechanism for NGOs/CBOs established in cooperation with local authorities
- 3.2 Volunteerism-based mechanisms mobilized to contribute to community goals

Beneficiaries:

- NGO/CBOs, vulnerable households, local government

RELEVANCE ON ATTAINMENT OF HUMAN SECURITY

The project aims at translating the basic principles of the Human Security concept into concrete projects through ensuring a rights-based approach that leads towards achievement of the MDGs, and uniting and coordinating efforts of local authorities, civil society and donor community to achieve jointly identified objectives.

The Project strives to address the consequences of the Cold War nuclear testing conducted at the Semipalatinsk Nuclear Test Site between 1949 and 1989. There were 468 devices detonated, 125 of them above ground, affecting a large area at approximately 18,500 km² and about 1.3 million people living in the area. Although the test site in the Semipalatinsk area was discontinued over twenty years ago, effects remain both from the testing and from its closure.

The international community and the UN General Assembly highlight the priority of interventions in the region. The project is complementary to the Government Programme for Semipalatinsk. In the Government's Semipalatinsk Relief and Rehabilitation Programme, it is recommended that 78 per cent of total resources donated by the international community focus on longer-term efforts such as building capacities and empowering institutions and civil society groups that are dealing with the humanitarian and social effects of the nuclear testing.

Strengthening human security in the most vulnerable parts of the country requires a multi-sectoral approach including improved health services to promote universal access to basic health care, realization of minimum living standards and enhanced local capacity and promotion of partnerships with civil society groups and NGOs. A broad range of interconnected issues, namely Health and Social Services, Economic Development and Social Infrastructure are addressed by this project.

The beneficiaries of the Project are newborn children, young people, and women of reproductive age, health workers, rural entrepreneurs and vulnerable households. Along with directly benefiting those particularly vulnerable families by improving living standards and better quality health and psychosocial support services, the project aims at building the capacity of local authority and civil society to identify and monitor the indicators on development. Key milestones to foster the good governance and participatory development are the improved knowledge and skills on results and human rights-based management in planning and delivery of social services.

MAIN IMPLEMENTING PARTNERS

The main UN executing partners are the United Nations Development Programme (UNDP), the United Nations Children's Fund (UNICEF), the United Nations Population Fund (UNFPA) and the United Nations Volunteers Programme (UNV). The main non-UN executing partners are Semey city Akimat and East-Kazakhstan Oblast Akimat.

III. Results

MAIN ACTIVITIES UNDERTAKEN

UNFPA

- Establishing one evidence based medicine resource centre;
- Training of staff in evidence based medicine and use of evidence based research data;
- Training of obstetricians, midwives and neonatologists to implement effective perinatal technologies through workshops
- Training of health facility managers and administrators in Reproductive Health / Safe Motherhood Initiative management;
- Family Planning Training of Obstetrics Gynaecologists in Primary Care Provider Centres and female consultations;
- Procuring/producing basic supplies (partograms, balls, breastfeeding and delivery positions posters, publications, visual aids, equipment) and contraceptives;
- Monitoring and evaluation of implementation of Safe Motherhood Initiative;
- Technical assistance to integrate reproductive health technologies in Semey, Kurchatov city maternity houses and maternities of Abay and Beskaragay districts with the involvement of the national consultant from South-Kazakhstan oblast;
- Development of two software-based quizzes to assess of the level of awareness of health professionals on effective perinatal technologies;
- Technical support to draft action plan on implementation of regionalization of perinatal care with the involvement of national consultants and specialists of the Departments of Healthcare of East-Kazakhstan, Karagandy and Pavlodar oblasts;
- Review of obstetrics gynecology curriculum for medical students developed by specialists of Department for Obstetrics and Gynecology of the State Medical University and Medical College in Semey within enabled 10% changes to improve trainings for medical students and specialists;
- Three-day duration workshop on family planning with the involvement of volunteers of youth health centers established by UNICEF with participation of national consultants from SKO;
- Technical assistance at the sites to introduce reproductive health commodity security through implementation of CHANNEL software to manage contraceptives' supply in Semey region and Oskemen with the involvement of national consultants from Southern-Kazakhstan oblast.

UNICEF

In 2008-2010 UNICEF continued its long-term partnership with Semey city and Eastern Kazakhstan region Aimats targeting the most vulnerable groups and strengthening the state statutory protective systems and services (newborns, 0-3 year-old children, children with special needs, young people, families in difficult life situations, children without parental care and children in contact with law). The main purposes are to ensure sustainable access to quality health and social services at the local level for decreasing infant and child mortality and morbidity rates, prevention of family dysfunction and support child inclusion. The region is eager to develop the model of multi-sectoral approach to support the most vulnerable population and to budget the models that have been set up with UNICEF technical and financial assistance. Main results achieved by UNICEF:

- 2 resource centers established at SSMU and SSMC to provide trainings for health workers;
- Equipment for resuscitation of newborns provided;

- 200 health workers and academicians capacitated in: (i) WHO advocated effective perinatal technologies, (ii) M&E of the implementation of effective perinatal technologies; application of BABIES methodology as a total quality management tool;
- Training curricula for future neonatologists, neonatal nurses and related in-service health workers in blocks of effective perinatal technologies and essential newborn care and resuscitation (SSMU and SSMC, Ust-Kamenogorsk Med. College);
- Recommendations by health professionals on improving regulatory framework submitted to the national decision-makers;
- Quality of perinatal care provided in 10 maternities of EKO assessed by SSMU experts and UNICEF international consultant; recommendations submitted to the local and national health authorities;
- Model of regionalization of perinatal care in EKO developed, proposed and discussed at the local level and in the Ministry of Health;
- Technical support provided to the regional Health department in the area of development plan of actions aimed at improvement of perinatal care quality;
- 2 Healthy child rooms fitted with equipment (for improved screening (child growth and development monitoring) of children 0-3 years (Semey outpatient clinics); counsel parents on child care and development;
- 41 Master trainers can train and consult on ECD/BP;
- ECD model incorporated in medical college curriculum and pre-service training at medical university;
- 189 health workers capacitated at cascade trainings for primary care workers in ECD/BP (Semey and 3 rural districts);
- 65,000 informational materials on ECD/BP distributed to health workers;
- ECD/BP training modules and information and communication materials developed and printed;
- MOH Order 691 on strengthening early patronage system endorsed at the national level;
- Video in 2 languages on breast feeding and C4D shot;
- Better Communication package for parents and families distributed to parents w/children under 3yrs);
- 240 pediatricians and patronage nurses from (4) districts and 2 cities got knowledge and materials on ECD;
- Exchange of good practices between SKO/EKO on coordination models for ECD/BP programmes, structure of training centers and functions of trainers established;
- 1,500 health professionals, social and educational workers know how to provide Early Intervention and Development techniques for infants and children with special needs;
- Knowledge and skills on early children care and development of rural health specialists and parents improved by 40%;
- A technical working group (TWG) on revision of normative and legislation on delivery of health care services for children under 3 was established and revised 16 edicts on health services provision to children at primary health care level (PHC) in accordance with WHO and national policies; rec's of TWG to be shared with leading research centres and medical universities for strengthening interagency collaboration;
- Practical guidelines on child growth and development developed;
- Representative of SSMU trained on child growth and development assessment at WHO training of trainers workshop;
- C4d evaluation contributed to assessment of capacity of pediatricians, nurses (beneficiaries of prior UNICEF interventions); for better data collection, evaluation, identifying gaps; recommendations shared with the national and local levels;
- Improved and introduced at national level guidelines and standards for intervention and continuum of services for early children and for those having special needs and on multidisciplinary approaches in service delivery;

- Established 2 YFS centers;
- Representatives of local authorities and YFS staff participated in national training/planning workshops;
- 6 local experts in TOT for “Counseling Young People on Reproductive Health”;
- Managers at 2 YFS centers raised their knowledge and familiarized with international experience on services for young people at St. Petersburg Summer Camp (YES services, HIV/AIDS, healthy lifestyles);
- Capacity-building exercise for YFS centers’ staff (38 staff, med. college professors, social workers, etc.) conducted;
- 2 YFS centers -Semey provided medical and psycho-social services tailored to the needs of young people for approx 28,000 potential beneficiaries (10,00 direct beneficiaries to date);
- Staff of Semey YFSs increased their knowledge on development & implementation of YFS strategy involving volunteers;
- YFS in Ust-Kamenogorsk established, staffed and funded by Healthy Life Style center;
- Specialists of Semey YFS funded by Regional healthy life style center;
- More than 10,000 young people counseled on reproductive health and healthy life style habits;
- Increased Capacity-building of 37 social workers, psychologists, Drs, teachers of SMUS, SMC and SSPI contribute to enhanced implementation of law on special social services;
- Focus-groups discussions on vital youth problems conducted by trained young facilitators from EKO; recommendations presented at the Youth Forum;
- Review of system and services for prevention of child institutionalization;
- 5 meetings of the working group on streamlining the social services system for CSN held - a) agreed on TOR and issues to be addressed; b) services for CSN mapped out (informed by results of social services needs assessments); c) results of Semey review of social services for families of CSN and early identifications and referral system presented; d) assessed progress in piloting early intervention programmes for CSN and family support services in Semey e) helped streamline understanding of implementing social services standards recently developed as a part of the Law on Social Services and try out a multi-sectoral approach to meet the needs of CSN;
- 30 representatives of intersectoral group trained on the common understanding of the social services/family support standards;
- 57 participants in workshop on early intervention and modern understanding of early childhood development w/ the help of Saint Petersburg Institute of Early Interventions and UNV on new approaches in dealing with CSN and family support services;
- First workshop on Healthy Athlete Fun/Fitness for students at SSMU, SSPI;
- Press conference to ensure sport as effective tool to help achieve goals in health, education, gender equality, HIV/AIDS, child protection and child development;
- Promotion of inclusion of children with special needs in pre-school education;
- Enhanced inclusion of children with special needs in pre-school by establishing (4) Child Development rooms, counseling in SSPI;
- Gate-keeping practices mission to EKO led to draft recommendations for improving gate-keeping, individual care plans and needs assessment; 2 EKO representatives participated in the social services standards workshop in Astana;
- Recommendations made to improve Pedagogy-Med-Psych Commission;
- Evaluation of budget findings on formal care in Kazakhstan shared with local authorities and International Child Care Forum;
- 120 children with special needs consulted on participation in sports activities;
- Psychologists and social workers in Family-Support Center (Semey) provide counseling services for families in difficult life situations;
- System for early identification and social services for prevention of child institutionalization reviewed;

- Students of SSMU and PI capacitated in identifying fitness level of children with mental disabilities;
- 200 children w/special needs and their parents got advice on involvement in fitness;
- Inclusion of Semey city and Shulbinsk rural area children with special needs into pre-school education increased by establishing total of 6 child development rooms at kindergartens, Semey PI, Rehabilitation Center and PMPC;
- Family-support models/social services analyzed and documented, training needs assessed; experience and methods summarized and exchanged; recommendations on improvement made;
- Main causes of child abandonment in EKO identified; the outcomes and recommendation on its prevention made at the local level;
- Review of assistance to children with special needs and families in EKO, recommendations offered;
- Seminar on improvement of social services standards provided to children at local level in Ust-Kamenogorsk conducted;
- Training guide on multi-sectoral approach to inclusion of children with special needs drafted by SSPI;
- 2 Family support centers established;
- Services for children with special needs mapped out and presented at the local level; piloting early intervention programmes for children with special needs and family support in Semey assessed;
- Intersectoral group of 30 representatives from government structures and NGOs trained on the common understanding of the social services/family support standards;
- Child protection system at the local level mapped, recommendations on its enhancement presented and discussed;
- Data on institutionalized children collected; concept on deinstitutionalization developed at the local level;
- Joint training in capacity building. for approx 30 representatives from local authorities, NGOs from EKO w/Agency for Public Administration of the Republic of Kazakhstan, National Commission for Gender and Family and Demographic Policy under the President of the RK and UNICEF (Semey, Kurchatov, Ridder and of other sub-regions of oblast) on planning, implementation, M& E of social and economic programmes for children and families in Semey (RBM, HRBA, and RBB approaches);
- UNICEF w/GOK conducted 2 other similar trainings for civil servants from EKO (Semey and other sub-regions);
- SITAN finalized and CFC action plan being developed for planned CFCI in Semey;
- CFC Round Table in Ust-Kamenogorsk, the SitAn on children and young people in Ust-Kamenogorsk and EKO presented and discussed for CFCI in Semey region as a whole;
- MoU and Action Plan on CFCI implementing in 2009-2010 signed and implemented;
- Implementation of CFCI assessed in Semey and Ust-Kamenogorsk; recommendations made
- 5-year territorial development programmes of Semey, Ust-Kamenogorsk cities and Beskaragai district analyzed on ensuring effective budget expenditures at local level in the best interests of children, youth and women;
- CFCI EKO experience presented at the national CFC workshop in Pavlodar;
- NGOs trained in RBM, HRBA for tools in services and advocacy for equity access;
- Children's and young people's opinions took into consideration when mapping child-friendly/unfriendly city environment (FSC – Ust-Kamenogorsk);
- Capacity building seminar on CFCI organized for all key departments of EKO, Ust-Kamenogorsk and Semey cities; international experience of building the child-friendly cities shared; CFC Action Plan for 2011-2015 developed and being finalized.

UNDP/UNV

- Conducting a market survey to study markets and growth opportunities for rural SMEs by international and national consultants;
- Supporting and building capacity of the organization selected to provide business advisory services and to deliver trainings to rural entrepreneurs;
- Delivering quarterly three-day trainings and for rural entrepreneurs on business management and business planning; vocational/technological training; quality assessment; use of micro credit and micro leasing;
- Transferring capital to a local microfinance institution to be disbursed in microcredits to rural entrepreneurs (mainly women) and a reporting financial system established to monitor the use;
- Training loan officers on up-to-date technologies to expand microcredit in rural areas;
- Assigning capital for pilot leasing programme to a local microfinance institution;
- Advice and basic training by microleasing experts to the microfinance institution staff on the establishment of a microleasing programme;
- Advocacy and awareness raising on microleasing. Monitoring of microleasing and microcredit projects;
- Organizing one-day workshops in 9 rayons with local authorities and NGOs/CBOs on transferring the methodology and the knowhow of transparent small grants disbursement for the implementation of the Social Procurement Law;
- Conducting baseline study on NGO capacity by national consultants;
- Organizing one-day follow-up workshops in 9 rayons with local authorities, NGOs/CBOs on improvement of implementation of Social Procurement Law;
- Awarding small grants to registered NGOs/CBOs with parallel funding from local authorities during the public sessions of the Small Grants Committee. Monitoring visits to track the implementation of projects financed with grants by project and programme staff;
- Monitoring visits to track the implementation of projects financed with grants by project staff ;
- Organizing one-day workshop on Social Procurement Law;
- International UNV to support and conduct training of national UNVs. National UNVs support the creation of self-help groups in selected rural areas through follow-up activities on delivered trainings and day-to-day presence and advice;
- Village development plans that outline possible social, economical and ecological projects are developed by CBOs;
- Organizing quarterly trainings for local NGOs/CBOs at the rayon level on (1) organizational development and technical capacity building; (2) poverty, environment, sustainable livelihoods, gender and human right issues; (3) humanitarian, social mandate of NGOs and CBOs; (4) participatory assessment techniques; (5) practical skills on the new Social Procurement Law and fund-raising; (6) Results based management of social programs and monitoring of local budget implementation (7) Mobilization of volunteers (8) Social project development.

PROGRESS TOWARDS THE ACHIEVEMENT OF THE OUTPUTS

Health Component (UNFPA):

UNFPA outcomes:

- Prevalence of hemorrhages decreased 2 times;
- Prevalence of traumas in labour decreased 1,5 times

Objectives	Outputs	OVI	Progress	Recommendations/ comments
1.1. By end 2010, 50% of women of reproductive age and newborn babies of the Semipalatinsk region will receive quality perinatal care	<p>Local health professionals are enabled to provide quality perinatal services</p> <p>Database on examination of the level of awareness of health professionals on the modern reproductive health technologies developed and submitted to Semey State Medical University</p> <p>Draft action plan on implementation of regionalization of perinatal care developed</p>		<p>162 health professionals of Semey region under the leadership of national consultant from Southern-Kazakhstan oblast were trained in the seminar - master - class "Effective perinatal care" (on the work place) and are ready to provide quality perinatal care.</p> <p>Two software-based quizzes to assess how well obstetricians and midwives are aware of effective perinatal technologies were</p>	<p>Neonatologist to train national professionals was invited by UNICEF</p>

			<p>developed by national consultants</p> <p>Meeting on implementation of regionalization of perinatal care in Semey region with participation of international consultant from the Moldova (P.Stratulat) and specialists of the Departments of Healthcare of Semey, East-Kazakhstan, Karagandy and Pavlodar oblasts, Programme of Perinatal regionalization has been developed.</p> <p>Modern contraceptives: including 5 thousand pieces of IUD and 1.3 million male latex condoms as a humanitarian shipment.</p> <p>Three maternity houses the town of Semey equipped accordingly by the end of the year. Equipment and</p>	<p>Contraceptives were received from UNFPA as a humanitarian supply</p>
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			<p>inventory to insure implementation of effective delivery technologies is purchasing at the moment with monkey bars (11), heaters (27), obstetrics chairs (12), medical coaches (11), balls (600)</p> <p>About 9,000 copies of educational and informational materials (including diaries for pregnant women) distributed. 50 information boards with full set of detailed WHO guidance on the management of labour and complications of pregnancy and delivery (200 copies) distributed in maternity houses of the region making the updated reference materials available to health professionals.</p> <p>A resource centre equipped with 7 PC assembled in local network established in Semey Medical Academy</p>	<p>and distributed to Semey region and circulated there for insuring that follow-up to family planning training is envisaged</p> <p>To insure the project sustainability all procurements are performed on cost-sharing basis with maternity houses</p>
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			<p>In total 76 academic staff members of Semey Medical Academy and obstetricians-gynaecologists from public health sector providing services to population of urban and rural areas of Semey region trained and received training materials for their further use at five-days duration workshop on essentials of evidence-based medicine facilitated by national consultants from High School of Public Health collaborating with WHO.</p> <p>Local guidance to implement safe motherhood initiative is developed. The health code of Kazakhstan was adopted on September 2009 it includes the appropriate articles.</p>	<p>The resource centre was placed in the Medical Academy, as that tertiary institution responsible for training of postgraduate and undergraduate medical students is in the best position to insure sustainability of intervention.</p> <p>Availability of critical mass of trained local academic staff training obstetricians-gynaecologists insures that further training can be provided by local trainers and that a ground to include evidence-based principles in curricula to train postgraduate and undergraduate students is there.</p>
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				Local guidance is developing in parallel with national guidance through participation of and contribution by Semey professionals in public health and obstetrics and gynecology.
1.4. By end 2010, at least 5,000 vulnerable families in the Semipalatinsk region will benefit from social counselling and family support services	<p>Local volunteers of youth health centres are aware of effective reproductive health technologies and able to advocate family planning focused policies</p> <p>Fully operational reproductive health commodity security system</p> <p>Service providers/social workers effectively support families and enable children to grow up in the family environment</p>	<p>Number of young people trained on reproductive health and family planning</p> <p>Number of health specialists trained on reproductive health commodity security</p> <p>Number of service</p>	<p>22 volunteers of Youth health centers from Semey and Ust-Kamenogorsk were trained in the three-day duration workshop on family planning and prophylaxis of HIV/AIDS/STI. "Y-Peers" leaders from Southern-Kazakhstan oblast participated in the training.</p> <p>70 local specialists from Semey region trained and provided CDs with installed CHANNEL software in the seminar-master - class (on the work place) to introduce logistics management information</p>	

		<p>providers/social workers</p> <p>Number of national ObstetriciansGynaecologists trained in family planning</p>	<p>system through applying CHANNEL software</p> <p>25 local civil society organizations representatives were trained to advocate family planning services and at the workshop in Shymkent on sexual reproductive health of young people, including issues on mobilization of resources</p> <p>25 national specialists from the region trained at 5 days duration workshop facilitated by International Planned Parenthood Federation consultants and received training materials for their further activities</p>	
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Health Component (UNICEF):

UNICEF outcome: Infant mortality rate decreased in Semey region:

2008 – 20 per 1000 live births

2010 – 17,9 per 1000 live births

Objectives	Outputs	OVI	Progress	Recommendations/Comments
<p>1.1 By end 2010, 50% of women of reproductive age and newborn babies of the Semipalatinsk region will receive quality perinatal care</p>	<p>1.1.1. A pool of neonatologists and respective health managers (at least 64%) are enabled to provide quality perinatal services</p>	<p>Increased number of newborn babies of the Semipalatinsk region receiving quality perinatal care support services</p>	<p>Two resource centres were established (SSMA and SSMC) to provide pre and in-service trainings for health workers;</p> <p>Essential equipment was made available for the provision of quality care and resuscitation for newborns;</p> <p>A core group of health professionals strengthened knowledge and skills in the provision of essential perinatal care and promoting adherence of lactating women to breast feeding;</p> <p>Training curricula for future neonatologists and practicing ones contain blocks on effective</p>	<p>Capacity of local trainers were assessed by UNICEF international consultant: total improvement index was from 37% to 72%; Following the course results, the participants developed and presented their own action plans on implementing the proposed strategies of effective perinatal care at their maternities. The current problems were summarized by the consultant based upon discussions of the main aspects of perinatal care with the participants: not</p>

			<p>perinatal technologies and essential newborn care and resuscitation;</p> <p>200 health workers and academicians capacitated in:</p> <ul style="list-style-type: none"> -WHO advocated effective perinatal technologies, -monitoring and evaluating progress of the implementation of effective perinatal technologies – application of BABIES methodology as a total quality management tool; <p>Quality of perinatal care provided in 10 maternities of EKO assessed; recommendations submitted to the local and national health authorities</p>	<p>all recommended effective perinatal techniques were implemented; maternities equipped with very expensive high-technology facilities, but personnel were not trained on how to use it; national protocols have some inaccuracies and lacking some practical questions; lack of regional approach to the perinatal care etc.</p>
	<p>1.1.2. Sustainable regulatory framework for provision of quality perinatal services is in place</p>		<p>Perinatal care assessment was conducted by State Med. University of Semey with UNICEF support and presented at local and central authorities (Round Table with involvement of EKO Health authorities</p>	<p>The findings: the main challenges of the improvement of perinatal care provided to women and infants are: no plans for improvement based</p>

		<p>and meetings with the Ministry of Health's representatives on 18-20 November 2009)</p> <p>Model of regionalisation of perinatal care in EKO developed, proposed and discussed at the local level and in the Ministry of Health; the second level maternity being established on the South of the region (Ayaguz rural area)</p> <p>Technical support provided to the regional Health department in the area of development plan of actions aimed at improvement of perinatal care quality</p> <p>6 beds neonatal intensive care unit and 8 beds special care unit for preterm newborns organized in Semey Perinatal Centre; a special care neonatal unit with additional beds available for sick newborns</p>	<p>on the problems identified at the EKO maternities; effective perinatal technologies not fully introduced even in the city hospitals, quality of perinatal care not monitored properly at regular basis; knowledge and capacity of trainers, neonatologists and pediatricians need to be reinforced on provision of basic newborn care and resuscitation; poor regionalisation of perinatal care in the whole region results in high infant mortality which can be prevented.</p>
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			established at the Regional Hospital	
1.2. By end 2010, children of 0-3 years of age from 20,000 families living in rural areas of the Semipalatinsk region will benefit from better early childhood development practices	1.2.1. At least 900 primary health care workers (doctors and home visiting nurses) are able to counsel families with children at 0-3 in respect to early childhood development	Number of families with children of 0-3 age living in rural areas of the Semipalatinsk region benefiting from better early childhood development practices	<p>1,500 health professionals, social and educational workers know how to provide; early intervention and development techniques for early children and for children with special needs;</p> <p>Knowledge and skills on early children care and development of rural health specialists and parents improved by 40%;</p> <p>Two healthy child rooms (HCRs) were fitted out with medical equipment (height meter, scales, a screen, a treatment couch), furniture (case, tables, chairs) and multi-media (a TV and video-player). The main functions of the HCRs are the following: healthy life style promotion, training of parents on the essentials of child education using methodical materials (day</p>	

			<p>regimen, nutrition, physical education, tempering, child caring, child hygienic education, and timely prevention activities), children screening and identification of delays in cognitive and physical development of children under 3 years of age.</p> <p>The ECD model was incorporated into the curriculum of the medical college and medical academy in pre-service training.</p> <p>“Cascade trainings” for primary health care workers in respect to ECD/BP are being conducted (totally 189 have already been trained, including physicians and nurses from Semey city and Abraly, Emshi and Zhalaman rayons).</p> <p>65,000 items of informational materials on the issues of ECD/BP</p>	
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			<p>became available to raise awareness of health workers:</p> <ul style="list-style-type: none"> - The ECD/BP training modules for trainers and trainees; - The ECD/BP chart booklet for trainers and doctors; - Nutrition status report cards; - MoH order № 691 on strengthening the early children patronage system; - “Breast feeding consulting and care for development” a video in two languages (Kazakh and Russian). <p>For increased awareness of parents:</p> <ul style="list-style-type: none"> - The Better Parenting Communication package for families on childrearing was completed and distributed among parents having children under 3. <p>Exchange of good practices between SKO and EKO on the coordination models of the</p>	
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			ECD/BP programmes at local level, the structure of training center and functions of trainers in rural areas and involvement of Academia into the process of incorporating international standards into the curriculum was established.	
	1.2.2. Enabling regulatory environment for strengthening existing home visiting system for families with children at 0-3 is established		<p>WHO Child growth and development standards were adopted for Kazakhstani context and submitted to the Science Department of the Ministry of Health for final approval prior to its printing and distribution among health workers.</p> <p>Care for Development programme evaluation contributed to the assessment of capacity of pediatricians and patronage nurses built within previous and current UNICEF interventions in the region, helped to establish</p>	<p>Some recommendations:</p> <ul style="list-style-type: none"> - Nationalize Care for Development; - Regular Monitoring; - Advocacy strategy for provincial level decision-makers; - More focus on promotion of

			<p>baseline data on care for child development, undertake analysis of knowledge, skills, practices of parents, revision of policies, regulations and service delivery patterns; identify gaps, strengths, weaknesses and opportunities</p> <p>The findings were discussed and recommendations were developed at national level (Round Table on country's Care for Development strategies). Chief pediatrician of Semey region became aware of the experience in South Kazakhstan by visiting colleagues in Shymkent and apply it there</p> <p>Two healthy model baby rooms (HBR) established and equipped in Semey out-patient clinics; health care workers monitor growth and development</p>	<p>Nutrition issues; - Integrate efforts for special needs children across Health, Social Welfare, and Education Ministries; - A sub-regional meeting hosted by the Parliament to share the results of these studies and plan for Care for Child Development would help address problems of sustainability.</p>
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			<p>of infants/0-3 children and counsel parents on child care and development; the 691 order approved at national level according to which healthy baby rooms established throughout the country</p> <p>Improved and introduced at national level guidelines and standards for intervention and continuum of services for early children and for those having special needs and on multidisciplinary approaches in service delivery</p>	
1.3. By end 2010, 10,000 young people of the Semipalatinsk region will enjoy youth-friendly psychosocial and health services	1.3.1. Managers and staff of youth-friendly psychosocial and health services are able to provide quality counselling in respect to young people's sexual, reproductive and psychosocial issues	Number of young people of the Semipalatinsk region enjoying youth-friendly psychosocial and health services	<p>Two youth-friendly services centers (YFS) established and provide medical and psycho-social services tailored to the needs of young people</p> <p>Managers of YFS raised their knowledge and familiarized with international experience on services for young people; staff of Semey YFSs</p>	Training consisted of the following sessions: organization of YFS, volunteers as one of the main YFS

			<p>increased their knowledge on development & implementation of YFS strategy involving volunteers;</p> <p>Focus-groups discussions on vital youth problems conducted by trained young facilitators; recommendations presented at the Youth Forum;</p> <p>YFS in Ust-Kamenogorsk established and supported methodically;</p> <p>Specialists of Semey youth-friendly services funded by Regional healthy life style center;</p> <p>More than 15,000 young people counseled on reproductive health and healthy life style habits;</p> <p>Representatives of local authorities and staff of YFS participated in YFS planning and training workshops, which were</p>	<p>components, peculiarities of adolescent's age (reproductive age and counseling) and basics of neuro-linguistic programming. Needs in the additional trainings on effective communication, counseling of adolescents and youth, risk behavior prevention (unwanted pregnancy, STE, HIV/AIDS), family planning, main strategies of YFS, skills of adolescents health advocacy were expressed.</p>
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			<p>conducted at the national level;</p> <p>Range of capacity building exercises for staff of the centers has been included into the working plans of UNICEF partners which have extensive experience on YFS (training of Semey YFS staff by Astana based YFS “Demeu” took place on 24-26 August 2009); Participants - 38 Semey YFSs’ staff, Med. University teachers, YFS’ managers, psychologists, volunteers and social workers have increased their knowledge on development of YFS strategy and its implementation, including involvement of volunteers. Recommendations were made by Demeu experts regarding the structure of Semey YFSs, roles and functions of their staff, organization of their work and use of local trainers’ potential for training of other specialists etc.</p>	
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	<p>1.3.2. Regulatory framework for provision of quality youth-friendly psychosocial and health services is in place</p>		<p>To ensure sustainable development, review and pre-testing of youth-friendly services' norms and standards are underway at the national level aimed at introduction of youth-friendly services principles into the curriculum of pre-service and in-services health training system;</p> <p>Communication and advocacy materials developed and distributed.</p> <p>Implementation of the Law on special social services enhanced by increasing capacities of 37 social workers, psychologists, doctors, teachers of Semey State Ped. Institute and State Med. University of Semey;</p> <p>Lessons learnt from the YFS and social work trainings documented and recommendations for improvement were</p>	<p>Training was targeted on social workers hired and paid from state budget under the law on special social services, and also for psychologists, doctors, teachers of Ped. Institute (where the social worker speciality was launched starting from this educational year) and SMUS.</p> <p>Capacity of participants regarding the legislative base on social work and role of the social work at health facilities etc. was poor. Some recommendations on further social work development in Semey were made by Demeu staff.</p>
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			discussed with YFS managers and personnel.	
	1.3.3. The results of piloting in the Semipalatinsk region are used as evidence-based advocacy for nation-wide replication of youth-friendly services		<p>The workshop on advocating for inclusion of youth-friendly services into the agenda of the health reform and nation-wide introduction took place in Taraz (February 2008);</p> <p>Training of youth facilitators from all KAZA oblasts (including young people from EKO) took place in Almaty in June 2009; then these young people conducted focus-groups from in their oblasts concerning vital problems of youth; these issues were presented at Youth Forum.</p>	
1.4. By end 2010, at least 5,000 vulnerable families in the Semipalatinsk region will benefit from social counseling and family support services	1.4.1. Service providers/social workers effectively support families and enable children to grow up in the family environment	Number of vulnerable families in the Semipalatinsk region benefiting from social counselling and family support services	Draft Regional Plan of Action on family support, identification of needs in social services, assistance to children with special needs was prepared in February 2008;	The joint action plan of UNICEF and EKO Akimat on family support and children with special needs included the revision of registration of children with special

			<p>Review of the system for early identification and social services for prevention of child institutionalization started in April 2008. The Joint Plan of Action of UNICEF and EKO Akimat on family support and children with special needs was finalized and signed;</p> <p>In April 2008 five representatives of health, education and social welfare sectors visited Saint-Petersburg Institute of Early Intervention to share and improve knowledge and practices in the revision of the early identification and referral system for children and their families;</p> <p>Starting from May 2008 under the guidance of the Semey pre-school center the first family support center started functioning to support families from vulnerable families on how to provide early care</p>	<p>needs, quality control of the services provided and screening parameters, effectiveness of psychological, medical and pedagogical consultations (PMPC), rooms of psychological and pedagogical correction, medical and pedagogical consultations, psychological, medical and pedagogical consultations, home services, normative base effectiveness, technical requirements of preschool-school/school for introduction of inclusive education, assessment of possible introduction of early identification at the level of family health facilities; recommendations on</p>
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			<p>and development and ensure parents are aware of the available for them social services provided in the community. The methodical guidelines on the similar counseling units were tried out for parents in case if there is a shortage of pre-school care facilities. The establishment of the second family support center is now being discussed with Semey city Akimat (including responsibilities, premises, specialists, methodical base and supply). Establishment of family support centres should assist families at risk in the Semipalatinsk region as a part of social reform and social services development with budget co-sharing at the local level;</p> <p>The workshop on early intervention and modern understanding of early childhood development</p>	<p>child supporting and developing plan through special social services provided by the local, regional and national authorities and NGO.</p>
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			<p>was held in Semey with the help of the Saint Petersburg Institute of Early Interventions and UN volunteers for 57 participants from education, health, social welfare, child protection sectors, Medical Academy, Pedagogical Institute, Psychological and Medical Consultations and NGO in East Kazakhstan and Semey. New approaches in dealing with children with special needs and family support services were presented (21-23 October 2008);</p> <p>Akimat of Semey city together with UNICEF and Special Olympics Kazakhstan held the first workshop on Healthy Athlete Funfitness Programme for students of Semey State Medical Academy and Semey State Pedagogical Institute in identifying fitness level of children with mental disabilities to ensure they</p>	
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			<p>are socialized and integrated into physical training exercises for improvement of their status (22-24 October 2008);</p> <p>Press-conference was organized for media to ensure that sport could be an effective tool to help achieve goals in health, education, gender equality, HIV/AIDS, child protection and child development. Now UNICEF is launching initiatives in Semey on including children with special needs into pre-school education, changing attitude towards these children through raising awareness and advocacy. It is planned to organize the similar events in Semey in future to see the progress of children's physical development;</p> <p>Inclusion of Semey children with special needs into pre-school education</p>	
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			<p>increased by establishing of 4 child development rooms with counseling functions in kindergartens an SSPI;</p> <p>Draft recommendations on the improvement of gate-keeping functions, individual care plans, and needs assessment were developed as a result of Gate-keeping practices mission to EKO;</p> <p>Recommendations for the improvement of Pedag-Med-Psycholog. Comission in Semey were made;</p> <p>Social work faculty at the Semey state pedagogical institute (one of the UNICEF's main partner) in order to systematically train social workers in the Semey region was launched;</p> <p>Findings of the evaluation of budgetary aspect of formal care in Kazakhstan</p>	
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			<p>were shared with the local authorities and at the International Child Care Forum in Bishkek;</p> <p>Participants from SSPI took part in the Conference on inclusion of children with special needs jointly organized by Ministry of Education and Science and UNICEF;</p> <p>120 children with special needs consulted how to be involved into sports activities;</p> <p>20 students of Semey Med. College and State Med. University of Semey are able to consult children with special needs;</p> <p>Inclusion of Semey city and Shulbinsk rural area children with special needs into pre-school education increased by establishing 6 child development rooms at kindergartens, Semey Ped Intitute, Rehab. Center and PMPC;</p>	
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			<p>Psychologists and social workers in a family support centre provide counseling services for families in difficult life situations;</p> <p>Intersectoral group of 30 representatives from government structures and NGOs trained on the common understanding of the social services/family support standards; Students of Medical University and Ped. Institute capacitated in identifying fitness level of children with mental disabilities; 200 children w/special needs and their parents got advice on involvement in fitness;</p>	
	1.4.2. Local government are able to effectively apply Human Rights Based Approach and Results-Based Management in assessment, planning and delivery of social services, taking into account special needs of vulnerable families	Local Government and NGOs of the Semipalatinsk region is able to better plan family-based and child-focused social policies at local level	<p>System for early identification and social services for prevention of child institutionalization reviewed;</p> <p>Services for children with special needs mapped out</p>	In 2008 2 family support centers were established: Semey pre-school family-support center (inclusion of children from risk families into pre-school

			<p>and presented at the local level; piloting early intervention programmes for children with special needs and family support in Semey assessed;</p> <p>Family-support models/social services analyzed and documented, training needs assessed; experience and methods summarized and exchanged; recommendations on improvement made;</p> <p>Main causes of child abandonment identified; the outcomes and recommendation on its prevention made at the local level;</p> <p>Data on institutionalized children collected; concept on deinstitutionalization developed at the local level;</p> <p>On 1-2 June 2008 the seminar on improvement of social services</p>	<p>settings and counselling parents re their children, 4 Semey child development rooms promoting inclusion of children with special needs into day care services). Akimat of Semey offered a space and some materials and equipment for the establishment of the family support center that would focus on family vulnerability, re-confirmation of child development needs, mobilizing parents and support their association, provide legal advice and counseling to families, work with Akimat on possible assistance to families depending on their needs.</p>
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			<p>standards provided to the children at local level took place in Ust-Kamenogorsk (with participation of UNICEF international consultant on social standards). During the seminar the groups of social services standards, principles of social services application, types, meaning, sphere of application and characteristics, assessment criteria and social services institutions licensing were discussed.</p> <p>Training guide on a multi-sectoral approach to inclusion of children with special needs drafted by SSPI.</p>	
<p>1.5. By end 2010, local Government and NGOs of the Semipalatinsk region will be able to better plan family-based and child-focused social policies at local level</p>	<p>1.5.1. Local government will have knowledge and instruments on the management of effective approaches to convergent services improvement (health, social protection and education) and monitoring of the Convention on the Rights of Child.</p>		<p>30 representatives of local administration were trained on planning family-based and child-focused social policies at local level;</p> <p>On 1-4 April 2008 Agency for Public Administration</p>	

			<p>of the Republic of Kazakhstan, the National Commission for Gender and Family and Demographic Policy under the President of the RK and UNICEF held a joint training for approximately 30 representatives of local authorities and NGOs of Eastern Kazakhstan (Semey, Kurchatov, Ridder and of other sub-regions of the oblast) on planning, implementation, monitoring and evaluation of social and economic programmes in the best interests of children and families in Semey (based on RBM, HRBAP, and RBB approaches). The objective of this workshop was to increase/build capacity of civil servants in the area of social and economic policy for children.</p> <p>N.B. UNICEF in cooperation with the Government conducted 2 other similar type trainings that were attended by civil</p>	
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			<p>servants from EKO (Semey and other sub-regions);</p> <p>SitAN on child wellbeing in the region conducted and presented at local level. One of the UNICEF initiatives in the Semipalatinsk region planned in cooperation with Semey Akimat is to make Semey a Child-Friendly City. For this purpose, the SitAN on child wellbeing in the region is currently being finalized and the local CFC Action Plan is being elaborated for Semey; at the CFC Round Table held on 20 November 2008 in Ust-Kamenogorsk, the SitAn on children and young people in Ust-Kamenogorsk and EKO was presented and discussed. Appropriate actions and measures are under development to promote the CFC initiative in Ust-Kamenogorsk, Semey and the region as a</p>	
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			whole.	
	1.5.2. NGOs are able to monitor the quality of service delivery and advocate equity access		Through the RBM and RBB and HRBAP approaches delivered within the RBM module, NGOs are educated on the tools to monitor the quality of services and advocacy techniques for equity access;	
	1.5.3. Local authorities will ensure the delivery of social sector services according to the developed standards		<p>A set of social services standards being piloted in the region as a part of the overall social services reform that is currently underway.</p> <p>UNICEF international consultant was invited to meet with local Semey and EKO authorities (National Project Director), UNICEF project partners (Semey State Ped. Institute, Semey State Med. University, Rehab. center, YFSs etc.) and key departments (architecture and city planning, health,</p>	<p>The Law on specialized social services was adopted in December 2008 aimed at providing social work and care to families at risk. EKO is a pilot oblast of this law (launching social workers in the health facilities, establishment of day care centers for children with special needs etc.)</p> <p>Special attention was made to the so-called CFC promotion</p>

		<p>education, social protection, culture, economy and budget planning) and visiting schools, courtyards, meeting with NGO "Istok" that conducted the SitAN on child well-being in Semey.</p> <p>Visit resulted in recommendations re development of Child-friendly city model in Semey (e.g. regarding child participation in decision-making process, improvement of child security in the city, their health conditions, education, social welfare, culture and sport, leisure and recreation, support of parents, transportation, justice services for children and housing);</p> <p>Memorandum of Understanding and Action Plan on Child-friendly city initiative implementing in 2009-2010 signed;</p> <p>Implementation of Child-</p>	<p>group, which should carry out “umbrella” coordination of all activities under CFC initiative in Semey.</p>
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			<p>friendly city initiative assessed in Semey and Ust-Kamenogorsk; recommendations made;</p> <p>Capacity building seminar on child-friendly city organized for all key departments of EKO, Ust-Kamenogorsk and Semey cities; international experience of building the child-friendly cities shared; CFC Action Plan for 2011-2015 developed and being finalized;</p> <p>Children's and young people's opinions took into consideration when mapping child-friendly/unfriendly city environment;</p> <p>5-year territorial development programmes of Semey, Ust-Kamenogorsk cities and Beskaragai district analyzed on ensuring effective budget expenditures at local level in the the best interests of</p>
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			<p>children, youth and women;</p> <p>CFC EKO experience presented at the national CFC workshop in Pavlodar; many local Akimats are interested to visit EKO to exchange the experience.</p>	
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Economic Component (UNDP):

Objectives	Outputs	OVI s	Progress	Recommendations/ omments
2.1. By end 2010, 30% rural entrepreneurs are better able to understand and exploit economic opportunities through access to financial markets, information and training	2.1.1. Business Advisory services provided to rural entrepreneurs	Increased number of rural entrepreneurs benefiting from access to financial markets, information and training	<p>An analytical research to study markets and growth opportunities for rural SMEs was conducted. At the open and transparent competition, SANGE research company was selected to undertake this survey. In August 2008, SANGE submitted its final report. The report made the following recommendations:</p> <p>A) To provide business advisory services via a microfinance institution</p>	

			<p>rather than opening of a business incubator. The business incubator will not be able to cover the main beneficiaries of the economic component, i.e. rural entrepreneurs and it will be difficult for them to travel to the business incubator in Semey from their remote locations. Due to limited resources, it is recommended to transfer the business advisory services to the microfinance institution instead of opening a new entity. The microfinance institution will provide its services through its focal points in the rural areas;</p> <p>B) To narrow the scope of microfinance activities of the project to five particular regions: Abaisky, Beskaragaisky, Abralinsky, Zhanasemeisky and Maisky. These five regions belong to extreme (more than 100 rem) and maximum (35-100 rem)</p>	
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			<p>polluted areas and have complete absence of any finance institutions available to the population;</p> <p>The Project Board Members approved the proposed recommendations and the microfinance programme was implemented accordingly;</p> <p>By the majority of the voices of the Project Board Members the micro-crediting organization “The Fund for financial support of agriculture” (FFSA) was selected for signing the contract for the micro-financing programme of the project and provision of business advisory services. The Micro-Capital Grant Agreement was signed on 31 October 2008.</p> <p>As approved by the Project Board Members the micro-financing covered five</p>	
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			<p>regions: Abaisky, Beskaragaisky, Abralinsky, Zhanasemeisky of East-Kazakhstan oblast and Maisky rayon of Pavlodar oblast. The FFSA opened the focal points in the rayons to provide free of charge business advisory services to rural entrepreneurs on business management, business planning, microcrediting, microleasing and to do advocacy and awareness about the project and the micro-financing programme in the regions.</p> <p>During the Project implementation period the focal points had provided 980 businesses consultations to rural entrepreneurs on microcrediting and microleasing, business planning and management.</p> <p>The provision of business advisory services will be continued by credit</p>	
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		<p>Availability of recommendations for further development of business activity of rural population</p>	<p>officers of the FFSA in Abai, Beskaragai and former Zhanasemey rayons after the Project completion.</p> <p>During the Project implementation period UNDP jointly with the FFSA conducted 92 seminars and trained 1280 Project beneficiaries, including rural entrepreneurs, employees of local administrations, farmers, households, and unemployed. FFSA specialists participated as seminar trainers and they explained rules and conditions of microleasing loans, application procedures and etc. Besides the main topics on entrepreneurship issues, the seminar participants were trained on cattle-breeding and crop-raising.</p> <p>One-day seminar on Corporate Social Responsibility was conducted for the</p>	
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			<p>representatives of big companies, banks, microcrediting organizations and individual entrepreneurs. The main topics included: basics of corporate management, development of corporate management in Kazakhstan and its peculiarities, legislative framework, investment policy and culture of a corporation.</p> <p>Teaching modules for rural entrepreneurs on business management and business planning; vocational/technological training; quality assessment; use of microcredit and microleasing were developed/printed/distributed among rural entrepreneurs and local partners;</p> <p>On October 14, 2010 the concluding Round Table on "Development of Entrepreneurship in East-</p>	
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			<p>Kazakhstan Oblast: achievements and perspectives" was organised in Semey city for 38 participants. Among them being the representatives of partner organizations, donors, government, business entities, local administration of Semey city, village okrugs and rayons, as well as the Project beneficiaries - rural entrepreneurs. The purpose of the Round Table was to present the results of implementation of Economic Component of the Project on support to building capacities for rural entrepreneurship and elaboration of recommendations for further development of business activity of rural population in the East-Kazakhstan Oblast. There was an exchange of experience, achievements and success stories sharing, as well as an active and constructive</p>	
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			<p>dialogue between the local administration representatives and rural entrepreneurs/borrowers during the discussion session of the Round Table. The recommendations of the Round Table elaborated and available at UNDP;</p> <p>Totally, 95% of registered acting rural entrepreneurs from 5 rayons of the Project territory (Beskaragai, Abai, Zhanasemei, Abraly rayons of East-Kazakhstan Oblast and Maiskiy rayon of Pavlodar Oblast) benefited from the realization of the Economic component of the Project.</p>	
2.2. By end 2010, 150 rural households will benefit from microcredit and microleasing services	2.2.1. Access to microcredit and micro-leasing services expanded into rural areas	Number of rural households benefiting from microcredit and micro-leasing services	<p>Microcrediting</p> <p>Access to microcredit services to rural poor is provided through the micro-crediting organization “The Fund for financial support of agriculture”. The transfer</p>	

			<p>amount allocated for microcrediting was USD 100,000.</p> <p>Prior to disbursements of the credits, the trainings to rural entrepreneurs on business management, business planning, microcrediting are provided.</p> <p>Totally, 33 microcredits were financed, giving the opportunity for rural entrepreneurs to open or develop their businesses;</p> <p>Microcredits were directed to development of entrepreneurship in cattle-breeding, crop-raising, production, trade and services;</p> <p>In May 2010 the monitoring visits to microcredit loaners were organized. The following results were revealed: out of 33 borrowers 15 repaid their microcredits, 12 microcredits are to be repaid in the first quarter</p>	
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			<p>of 2011, 6 borrowers did not succeed to repay the loans in time; they plan to do that as soon as possible;</p> <p>In accordance with the Additional Agreement with UNDP, the FFSA during the next 3 years will continue to disburse microcredits from the rollover capital of paid-off loans to the rural entrepreneurs from the Project territories.</p> <p>Microleasing Initially, the micro-leasing programme was developed by the specialists of FFSA. Afterwards, it was analyzed and reviewed by Kostadin Munev, expert on microleasing from UNDP "JOBS" project. Mr. Munev's recommendations were incorporated into the microleasing programme. Also the recommendations, received from Mr. Havhemi Bahloul, an</p>	
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			<p>independent expert, who conducted a mid-term project evaluation, were taken into account in this program. In June 2009 the final version was approved. Maximum microleasing amount was fixed at 1, 050, 000 tenge (about \$7, 000).</p> <p>The Fund received from UNDP 100,000\$ for the microleasing programme.</p> <p>The microleasing programme was realized through 18 microleasing projects of 25 borrowers, including individual and group applications of 2-3 borrowers. Totally, 5 Credit Committee meetings to approve microleasing projects were conducted during the period from end 2009 till July 2010. The grant amount of \$ 100,000 was totally disbursed. In September 21-26, 2010, the monitoring visits to assess microleasing</p>	
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			<p>projects were conducted. The monitoring results showed that the funds were used by its purpose, the equipment is acquired and serves for the benefit of the entrepreneurs. The microleasing projects were mainly directed to the acquisition of the agricultural equipment (such as tractors, tricle-irrigation, expanding plant cultivation), mini-bakery, refrigeration equipment for shops.</p>	
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Social Component (UNDP and UNV):

Objectives	Outputs	OVI (objectively verifiable indicators)	Progress	Recommendations/Comments
3.1. By end 2010, 1500 local community members will benefit from initiatives by NGOs/CBOs resulting from training and grant distribution	3.1.1. Transparent grant mechanism for NGOs/CBOs established in cooperation with local authorities	Number of local community members benefiting from training and grant distribution	<p>A baseline study on NGOs' capacity in the region was conducted. At the open and transparent competition the Institution of Analysis and Prognoses was selected to undertake this survey. Proposed training modules are used for seminars and trainings.</p> <p>In April 2009, Small Grants</p>	

			<p>Mechanism was finalized (including the terms of reference, project application form, and the selection criteria). Priority areas were specified on the basis of the project socio-economic researches and also based on the seminar-questionnaire forms (after each seminar the participants filled in the seminar-questionnaire forms, where they specified which local problems they could solve with gained knowledge). Project application requirements: NGO should involve initiative groups as project partners, a project should be approved by the villagers, own contribution to the project.</p> <p>The competition was conducted in 2 stages: 1 stage - preliminary selection of submitted applications, performed by the Project Managers and the National and International project</p>	
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			<p>volunteers; 2 stage - final selection approval by the majority of voices of the Small Grants Committee. The Committee included the National Project Director, UNDP and UNV staff and a representative of an independent NGO.</p> <p>In the framework of the Small Grants Programme during 2009-2010 years 5 Grant Appraisal Committees took place, where 42 small grant projects were approved for a total amount of USD 130,000. The applications were selected based on the open competition announcement. The priority areas for financing were: 1) support for vulnerable groups; 2) youth initiatives, addressing local problems; 3) local initiatives, aimed for improving population health; 4) local initiatives, raising socio-economic and ecological problems. Maximum size for a small grant is \$ 3,000, with</p>	
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			<p>exception for water supplies projects up to \$ 5,000. The financed grant projects were aimed at provision of medical equipment to family ambulances, TB dispensaries, polyclinics; provision of musical equipment and computers to boarding schools; repaiting of school greenhouses and gyms; provision of sports equipment to village clubs; establishing of sportyards and playgrounds for children, culture and leisure park; repairing of water supply systems to provide the village population with permanent drinking water and waterpool for cattle; opening workshops for arts and handicraft training, sewing, shoe-repairing, metalworking. The monitoring visits to assess all the small grants projects were conducted in August and October, 2010. The monitoring results showed that all the grnt funds were used by its purpose and the</p>	
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		<p>Availability of recommendations for further improvement of interaction of the government and NGOs to ensure sustainability of the NGOs in the region</p>	<p>projects are sustainable.</p> <p>142 initiative groups and 1,088 volunteers were participating in the implementation of these 42 projects, benefiting about 180,600 people.</p> <p>The seminars on "Social Procurement Law" and on "Access to the information in the framework of Social Procurement" took place on September 29, 2010 in Ust-Kamenogorsk city for 32 representatives of NGOs and journalists. The purpose of the seminars was to improve the knowledge of the participants about directions of the social policy of the society, to discuss the ways to distribute the funds of Social Procurement among NGOs, the inter-relations between state bodies, civil society and mass media.</p> <p>On September 30, 2010, the concluding Round Table on</p>	
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			<p>"Partnership aiming the development of civil society in East-Kazakhstan Oblast" took place in Akimat of EKO with the participation of a Deputy of Mazhilis of Parliament of RK, members of Republic Civil Alliance, representatives of NGOs and mass media of Pavlodar, Karagandy and East-Kazakhstan Oblasts. The purpose of the Round Table was to discuss the actual issues of development of NGOs and elaboration of recommendations for further improvement of interaction of the government and institutes of civil society in the framework of Civil Society Development Concept and Social Procurement Law. The recommendations elaborated and are available at UNDP.</p>	
3.2. By end 2010, 60 self-help groups and associations will be engaged in voluntary action to	3.2.1. Volunteerism-based mechanisms mobilized to contribute to community goals	Number of self-help groups and associations engaged	International UNV was recruited and worked in Semey city from April 2009	.

<p>support small-scale local initiatives</p>		<p>in voluntary action to support small-scale local initiatives</p>	<p>to March 2010. Three National UNVs were recruited and started working in Semey city in March 2009. The</p> <p>Volunteers provided 394 day-to-day consultations and seminars on various social issues for local project staff, initiative groups, NGOs and local authorities. In addition to planned activities a number of trainings were initiated and conducted on beneficiaries' requests by the project team.</p> <p>For instance, in the framework of presentation of the small grants project "Grandmothers to Children" National UN Volunteer conducted a training on volunteer mobilization for representatives of the orphanages, boarding schools and social workers of State Enterprise 'Center for Children with Disabilities". With the help of National Volunteers the</p>	
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			<p>Youth Organization of foster children "Tairlandiya" in Shulbinsk village was registered to solve the problems of the entity and the village.</p> <p>On 19-20 May 2010 the second seminar on village development plan/strategic planning was conducted in Shulbinsk village. Representatives of local Akimat, representatives of the state and business structures, from education and medical sphere, NGOs and initiative groups, developed the "Social and economical strategy plan for development of Shulbinsk village", which was presented to the villagers and then sent for approval to the local budget financing. For the implementation of the Plan activists of initiative groups jointly with the state enterprises and the village Akim undertook different activities, which are successfully being</p>	
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			<p>implemented. For instance, one of the presented projects was approved by the Small Grants Appraisal Committee of the Project and is solving one of the problems represented in the plan for further development of Shulbinsk village. Initiative people of the village attracted funds from the commercial organizations and conducted a "Week of the Good". In the framework of these activities there were charitable concerts, exhibition of national crafts. For the money earned they acquired presents for elderly people. Also, for the money from the local budget the sports-ground was built, partially the lighting was established in the village. By the end of 2010, the new Development Plan would be elaborated for the year 2011.</p> <p>20 two-day trainings were organized for 365 participants from local</p>	
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			<p>government, initiative groups, NGOs on the indicated topics in the Semey city, affected rayons of East-Kazakhstan, Pavlodar and Karaganda oblasts. As a result of of the social component of the Project, 142 initiative groups were actively involved in voluntary actions to support small-scale local initiatives, and 15 NGOs were established by the technical assistance and advise of the Project staff.⁵</p>	
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⁵ These are the set of activities that migrated from the previous OBJECTIVE 3.1 By end 2009, Akimats and NGOs of nine rayons and the city of Semipalatinsk will be sensitized to implement the Social Procurement Law and Local Self-Governance Law in an effective and transparent manner. For effective use of resources, the activities under this Objective were merged with the Objective 3.2.

Implementation constraints, including plans for addressing them

The UN Joint Programme was planned to be started from 2007, but due to the delay in the release of funds, the UN agencies received money in February 2008. Soon after that, in February 2008, the UN Agencies Joint Mission to Semey and Ust-Kamenogorsk was undertaken to present the project and plan the work in the framework of the Joint Programme. The project activities began in March and no changes were made in the total budget of the project but due to late funding and inflation the stakeholders had to revise the project work plan (project management, budget for activities).

The project start concurred with a reorganisation of the health organizations in the region. Due to this fact the bases for YFS and start of the related activities of UNICEF was done with 6 months delay. Bearing in mind that the causes of the problems addressed within the programme lay away from its scope, UNICEF puts lot of efforts to bring attention of local and national policy makers to the essential need to apply holistic approach to solve existing problems and explore family as an initial unit of the society. Although, the understanding of that is only emerging in the country with little practical implication at all levels. Therefore, the models and approaches that include interagency cooperation (working groups and events with participation of health, educational and social workers of Semey and EKO – on children with special needs, joint seminar with Special Olympics etc.) being piloted in Semipalatinsk region planned to be scaled-up at national level.

Due to tight schedule and the late start of the project activities UNDP had to postpone the actual disbursements of microcredits to rural entrepreneurs to January 2009. The selection of the microcrediting organization “The Fund for financial support of agriculture” and the signing of the Micro-Capital Grant Agreement was done in October 2008. The money transfer for the microcrediting and business advisory services programmes was done at the beginning of November 2008.

For same reasons as above UNDP/UNV postponed the job start of the UNV team from 2008 to 2009. Due to increased inflation and proforma costs it was decided to shorten the duration of the contracts of two IUNV from 1.5 years to 1 year and to decrease from three NUNVs to two people.

Due to the delay in the release of the third tranche till mid May 2010, the Project implementation started actively in the second half of the year. Moreover, Medical University of Semey, main implementing partner of UNFPA-supported Project component, had two months duration summer vacations. Therefore, it was asked for no-cost extension of the Project till 31 December 2010. No changes were made in the Annual Work Plans of the Agencies, and all the planned activities were implemented properly.

UNDP microleasing programme in the region was a new pilot project both for UNDP and the Fund for financial support of agriculture. Being a new microfinance product in the region and not very familiar to the beneficiaries, microleasing projects application was being slow. Therefore, additional trainings and advocacy activities were conducted. Introduction of group microleasing applications allowed financing of significant agricultural equipment to serve the needs of the farmer households.

Due to limited financial resources, the project could cover only some part of potential rural microcredit loaners. However, it must be born in mind that the project is establishing a revolving fund for microcrediting and microleasing. As soon as tranches of the loans are repaid, the fund will be in a position to grant new loans.

The unusually very snowy winter resulted in melted flood in spring. This became a reason for disability to drive country roads for conducting trainings for rural beneficiaries in remote villages. In this respect, most of 2010 seminars started in May.

General challenges for implementation of health component are as follows:

- Implementation of evidence-based technologies is not yet adequately expanded;
- Adequate performance of regionalization and universal access to EmOC is questionable;
- High maternal mortality due to non-obstetrics causes;
- No sustainability in contraceptives supply;
- Civil society is not properly mobilized, young people awareness is rather low;
- Semipalatinsk region in geographic and geopolitics concept, but not administrative-territorial formation;
- Decisions at local level are made without child, youth and family participation.

Lessons learnt

- **Working with partners**

Good cooperation with project counterparts and beneficiaries is critical for the success of a project. It can be said that the project has established a strong partnership with all the local relevant stakeholders. That with the Semey City Akimat is particularly strong. This is reflected in the high level of participation of Akimat representatives in project events and initiatives. The project also has a webpage on the official website of the Semey city administration, where information about the project and its activities is presented.

UNDP/UNV effective cooperation with local authorities enabled to provide trainings in rural areas with greater numbers of seminar participants and better targeted groups. The local administrations provided information and technical assistance.

The partnership with local NGOs and initiative groups is also very strong. Due to the UNDP/UNICEF previous projects in the region, but also several GEF funded small grants programmes, UN/UNDP/UNV/UNICEF/UNFPA are well known, respected and trusted in the area, including by the local mass media which provide broad coverage to all project activities and events. Another major explanatory factor for the excellent local level partnerships established by the project is the judicious selection of local project staff which provides not only relevant capacity and experience but also strong links with the public, NGO and private sector.

Since EKO authorities are Ust-Kamenogorsk-based, for successful promotion and implementation of UNICEF interventions within the framework of the current project it was crucial to involve EKO authorities into the process of project implementation (MOU signed between UNICEF and EKO Akimat, Perinatal care assessment, Care for development programme evaluation, Budget aspects of formal care study, Gate-keeping mechanisms improvement study etc.) and participation in UNICEF organized events (Round Table on perinatal care, sports tournament for children with special needs etc.).

UNFPA has strengthened further their efficient cooperation with such key project partners as the Semey city Akimat, the Ministry of health, Semey city Medical University, Health department of East-Kazakhstan Oblast, Kazakhstan Association of reproductive health and Association of business women of South Kazakhstan Oblast and Semey city. Local partners provided with technical and information assistance for seminars and trainings.

- **Good practice/innovation**

The design of the project took into account the lessons learned from the UNDP/UNICEF-supported Semipalatinsk Programme. This is another positive feature of the project at hand since

it enables avoiding the mistakes of the past intervention and integrating positive lessons learned such as the need to ensure a better monitoring of micro-credit support, promote employment generating productive activities rather than commercial activities and rely on existing structures for the provision of support rather than create new structures which are difficult to sustain.

A joint UNFPA/UNICEF training on Effective perinatal care, including managing women and infants with HIV disease and STI conducted in August 2009 in Semey resulted in support of the local experts and trainers to transmit their knowledge, commitment of local (and national) authorities and partners to promote, implement and monitor effective perinatal technologies in the region. This training was facilitated by UNFPA; UNICEF recruited one consultant for neonatologists. UNICEF consultant developed the programme of the course, UNICEF provided the participants with the training materials (Enkin manual, the WHO Pocket book of hospital care for children, WHO/USAID modules on provision of effective perinatal care, Effective neonatal care developed by Tamara Chuvakova), hired three local trainers and co-shared the training costs.

The experience of joint initiative by the agencies implementing health component of the project (UNICEF and UNFPA) has shown that it allows to address the regional challenges more effectively. After establishing of social services there is a need to strengthen infrastructure of all child protection system and complex revision of its participants functions. Youth-friendly services and family support services established in the course of the project are now partially funded by local budget.

Best practices exchanging resulted in motivation and capacity building of local health authorities on ECD/BI coordination mechanisms and training center.

Through UNFPA trainings, Semey region health specialists enhanced knowledge and exchanged their work experiences with colleagues from Astana and Shymkent.

For successful promotion and implementation of interventions related to perinatal care, care for development, budget aspects in formal care, family support services, youth-friendly services it is crucial to encourage EKO authorities to monitor, document and present their best practices at the national level.

As the microleasing program experienced low demand due to relatively small amount of \$7,000 per one borrower to purchase the necessary equipment, it was decided to introduce the group requests for microleasing - up to 3 people for one microleasing application to total \$ 21,000. It gave the rural entrepreneurs the opportunity to purchase significant agricultural equipment, such as tractor or irrigating machinery.

After the completion of the agreement between UNDP and the Fund for Financial Support of Agriculture (FFSA) two focal-points will keep working in Abai, Beskaragai and former Zhanasemey rayons. Because project had established revolving credit fund, these focal points will provide control for paying-off process and giving of the new loans for rural entrepreneurs from the Project territory. According to the additional agreement with the FFSA, the FFSA will report on the microcredits given from the revolving credit fund during next three years.

After each training seminar the participants were given a questionnaire to assess the quality of the seminar and to give recommendations/comments for future activities. The questionnaire results revealed a strong interest of the beneficiaries for having seminars on cattle-breeding and crop-raising, as the majority of rural entrepreneurs deal with agricultural sector. These seminars were given a positive feedback.

The experience of implementing the small grants showed that there is a need in mandatory cooperation with local authorities for the future stability of the project and solving problems in the region. When preparing the agreements it is important to include the paragraph about social partnership and monitoring of local government, and the responsibility of using the grant funds appropriately.

- **Application of human security concept**

The project is highly relevant to address the problems of the Semipalatinsk area. While past donor interventions have rightly aimed to deal with the most urgent environmental and medical concerns (this is also the main focus of the Special Government Programme for Semipalatinsk) the project complements these interventions through a long term development approach.

The Semipalatinsk area is one of the poorest of the country. While the area has significant potential for the generation of income and employment out of agricultural activity and micro-business, this potential is largely unexploited due to lack of resources, capacities and access to information. This is coupled with the persistence inadequate economic, social and cultural infrastructure which seriously impacts on the quality of life and makes the area unattractive for investing and living. While the national and local authorities are aware of the persistence of unfavourable socio-economic conditions in the Semipalatinsk area, there is still a chronic shortage of resource to address the problems.

The rural populations in particular seem to be helpless due to limited capacities and passivity to address their socio-economic problems. The project precisely addresses the root causes of the development problems of the Semipalatinsk area, namely: capacity, public service delivery, business initiative, community mobilization and resources. This is why the UN-supported initiative is highly relevant and timely, although its resources are limited compared to the scale of the problems at hand.

By adopting a long-term developmental and integrated approach, the UN-supported project brought a distinct value-added in comparison with other government and donor-supported initiatives implemented in the Semipalatinsk area.

- **Project management**

In UNDP, UNV, UNICEF and UNFPA focal points for Semipalatinsk are appointed to facilitate coordination. The implementing partner is the Semey City Akimat. A National Project Director (designated official of the implementing national partner) and a Project Coordinator (hired under the project) have been appointed. Both report to a Project Board (PB) comprised of representatives of the Semey City Akimat, Japan Embassy in Kazakhstan, a representative of non-governmental organizations, a business representative and programme staff of the UN agencies. The PB meets at least twice a year to assess the project's progress against planned outcomes and outputs and to give strategic directions to the implementation of the project. The National Project Director chairs PB meetings. The Project Coordinator is responsible for the implementation of PB policies and directions and reporting to the PB.

The coordination of the UNICEF/UNFPA administered components on health and social services is ensured by local project managers and programme offices who are responsible for the supervision of joint activities, documenting experience, applied process, lessons learned and ensuring a link with ongoing health and social reforms process.

The economic component is managed by a local project manager who is responsible for the supervision of activities, quality assurance, capacity building, relations with public authorities and communication. The micro-finance and business advisory activities have been sub-

contracted to the JSC “Fund for Financial Support of Agriculture” (FFSA) which was selected and contracted in line with CGAP and UNCDF standards.

The social component is managed by another local project manager who is responsible for the supervision of activities, including disbursement of grants and the monitoring and evaluation of grant-funded activities, quality assurance, capacity building, relations with public authorities and communication. One international UNV and three national UNVs support the work of the local project manager by interacting with the local NGO community and local initiative groups. The implementation of training activities is outsourced in part to NGOs. Decisions on the selection of projects for grant funding will be taken by a Grants Committee consisting of UN programme staff, civil society and local authorities.

Cooperation among the Agencies is realized on day-to-day practice (coordination issues, preparation and follow-up actions of the project regular meetings, sharing experiences with national and international experts.

UNDP receives UNHSTF funds and channels them to the other agencies. It is responsible for the consolidation of reporting and manages the relationship with UNHSTF and the Government of Japan.

Important findings from project final evaluation

The Project Final Evaluation was conducted by three independent consultants for evaluation of UNFPA, UNICEF and UNDP-supported Project components, while the final report was consolidated by UNDP component evaluator, Mr. Jim Freedman.

The performance of the project was evaluated based on the following five evaluation criteria which have been used to structure the evaluation as a whole.

1. Relevance of the design
2. Effectiveness
3. Cost effectiveness
4. Interagency coordination
5. Sustainability

Relevance of the design

Needs in the project area were identified in 2005 with the assumption that the history of extensive nuclear testing qualified the region as an area in crisis. In some regards it may have been an area in crisis; in other regards it was not. The region for example has shown an impressive economic resilience and perhaps this is understandable given that the regional economy was at one time viable and given that Kazakhstan’s national economy is growing rapidly. The components put forward for the project included small loans to kick-start enterprises and small grants as incentives for a number of villages and common interest groups to engender initiative. The latter two inputs may have been more appropriate for a region in an early recovery situation whose economy needed to be built in small steps from the ground up. In the view of the evaluator, they were less appropriate for an economy that already had an active or emerging small loans market, where entrepreneurs were prepared to absorb significant amounts of capital and where public services, however centralized and unaccustomed to meeting the needs of remote areas, were undergoing reform.

Effectiveness

With minor exceptions, all elements of the project have been completed as planned and have met or exceeded their original targets.

- The maximum number of small loans was concluded given the size of the budget. All but two of the loans have been used as intended and are on target to repay. The loan programme has been a factor in stimulating the demand for loans in the region. However, while the small loans provided a few families with increased income, the majority of the loans were too small and the size of the programme was too restricted to have any broader effect on the economy. It should also be noted that the loans provided with UNDP funding are also readily available from other lenders in the market place at comparable rates. (UNDP & UNV)
- The expected number of NGOs, village initiative groups and other common interest groups, has been trained and, given the size of the budget, respectable numbers have received small grants. The programme's asset was to focus mainly on mobilizing small groups to take initiative for themselves. This was also its liability since most of the projects were too diverse and too small to have much of a collective impact. It is generally agreed that a more focused programme of interventions would have been preferable. (UNDP & UNV)
- With training, equipment and the introduction of evidence-based medical resources, neonatal care in Semey City and surrounding area has improved as expected. There are demonstrable impacts. The proportion of deliveries without complications has increased, for example, from 11.5 per cent of live births to 52.7 per cent. (UNFPA and UNICEF)
- With training of health care workers and equipping of a number of dedicated 'healthy baby rooms' the care of young children under 3 years has improved with demonstrable results. Perinatal mortality in the Semey City area has decreased from 24.4 out of 1000 live births in 2008 to 19.2 in 2010. (UNICEF)
- Space has been created in existing kindergartens where children with special needs can play and develop skills amongst other pre-school children. These are known as 'child development rooms' and are intended not only to integrate special needs children into normal pre-schools but also to provide a venue for counselors to encourage families with special needs children to raise them at home instead of in institutions. The number of 'child development rooms' created is slightly greater than the number anticipated. (UNICEF)
- Space in two polyclinics has been created for counselors to offer advice to youth on reproductive health, drugs and alcohol and other preoccupations. They are Youth Friendly Services (YFS) centres. Counselors are available for young people on appointed days. At present, these are offered only in the two originally designated polyclinics in Semey City. (UNICEF)
- Capacity building workshops have been held to encourage municipal and other government officials to commit budget resources for contributing to the creation of Child Friendly Cities. (UNICEF)
- Pool of health professionals implementing effective perinatal technologies has been created in urban and rural areas all over the affected region; training of obstetricians and midwives to implement these WHO-advocated technologies is sustained through training students of local tertiary and secondary schools on the basis of substantially revised training curricula (UNFPA);
- Resource centre to make evidence-based data available for health professionals was established in and is sustained by Medical University of Semey; evidence-based technologies are applied in maternal healthcare and reproductive healthcare (UNFPA);
- Capacities of health and pharmaceutical personnel to insure reproductive health commodities security all over the region were improved (UNFPA)

- Capacities of local civil society organizations including young people organizations to provide non-formal education of peers on the issues of sexual and reproductive health and advocate reproductive rights has been reinforced (UNFPA);

Cost effectiveness

The project has shown itself to be cost-effective by conscientiously keeping costs within budget even after a delay in implementation and inflation resulted in cost increases. It has done so partially with the generous financial assistance of partners whose contributions have added to the cost-effectiveness of the project as well as to its sustainability.

Partnership and interagency coordination

The collaborating agencies found it difficult to realize either the administrative or the programming benefits of joint programming. In the initial two years, UNDP's own hierarchical administrative structure made it difficult to accommodate the administrative needs of UNFPA and UNICEF and it was only more recently that increased flexibility has led to smoother management. From a programming perspective, there have been only minimal efforts for different programmes to reinforce each other. While there have been isolated instances of cross-fertilization, overall the separate interventions have operated as separate projects with little concern to enhance the potential synergy among them.

Sustainability

The public health and social work components have proceeded in close collaboration with government departments (Health, Education etc.), hospitals and polyclinics, medical academies and local schools. These have typically provided financial resources, facilities and administrative continuity to the interventions, and this involvement of local governments and institutions assures a measure of sustainability. This is far less the case for the economic and social components of the programme where training will leave a positive social legacy but where greater sustainability of these programmes could have been assured by closer affiliation with public sector or private sector bodies.

Conclusion and Recommendations

The project has met its objectives. Public health facilities are in place and best practices in child delivery and child care are now practiced with impressive results. There are opportunities for children with special needs to be integrated with other children in supervised environments where parents can be encouraged to raise children at home. There are also now places where youths can speak with counselors about reproductive health, drugs and other preoccupations. Many of these best practices have become part of regulatory frameworks in health delivery and social work.

The project has also achieved its targets in promoting small businesses and providing incentives for small groups and villages to take collective action. Loans have been given to small entrepreneurs and the impact of them has clearly been to encourage more business activity and greater interest in investing in more small scale income earning activities.

When judged against the evaluation criteria, programme effectiveness, cost effectiveness and sustainability, the performance of this project has been positive.

Judging the project against two other evaluation criteria, relevance of design and interagency coordination, indicates some areas where different approaches might have produced even greater results.

A central argument in this evaluation is that the economic and social components, while quite workable and while producing anticipated results, could have set their sights higher. The capacity of this unique geographical area to make use of external assistance was greater than the design anticipated. In addition to promoting small enterprise and collective action at the level of villages, the project might have recognized that the economy was capable of acting on more substantial economic stimuli and aimed at greater impact by working with local institutes and specialists on plans for expanding rural industry on a larger scale.

Another argument is that while joint programming was accepted as a matter of principle, in reality it was practiced in a narrow sense. The agencies combined efforts principally by collaborating administratively, not programmatically. The interventions by UNFPA and UNICEF might benefited by working more seriously in tandem with UNDP, devising strategies for economic stimulus programmes or social mobilization schemes to reinforce, and be reinforced, by public health programmes.

The project, in summary, has met original expectations and yet could have been designed to do more. The recommendations that follow attempt to go somewhat beyond these original expectations in recognizing that it might have been preferable, given the unique history and character of the area, to set project sights somewhat higher.

Recommendation 1

In lieu of regarding the Semipalatinsk as an area in need of *recovery from a crisis*, the Semipalatinsk area should be regarded as needing *developmental strategies* appropriate for an emerging economy; in lieu of small grants and micro-credit programmes, the emphasis should be placed on building competencies for long-term, regional economic growth.

Recommendation 2

The Service Centre for Small and Medium Enterprises, proposed for a successor project to provide support for small and medium enterprises should direct its attention to promoting rural industry such as food processing and small manufacturing, investigating potential markets, trade facilitation mechanisms, transportation logistics and potential social benefits. One of UNDP's key roles would be to provide the appropriate economic planning expertise.

Recommendation 3

Subsequent assistance to small, medium or large-sized businesses should be accompanied by a competent monitoring mechanism which tracks the performance of assisted businesses in a systematic manner.

Recommendation 4

Should UNDP decide to continue providing direct funding for small scale public works projects, the projects selected should avoid duplicating government programmes and should be limited to a restricted set with proven contributions to group infrastructure, productivity and sustainability.

Recommendation 5

UNICEF and UNFPA should collaboratively develop strategies with UNDP for realizing joint programming which may involve 1) designing linkages between interventions from separate

agencies that specifically strengthen or add to each other, and 2) agreeing on a collaborative approach for advising governments on public financing priorities.

Recommendation 6

UNDP should be wary of overly vertical decision-making structures; it should follow its internal policy of encouraging greater autonomy for project managers and greater flexibility for them to interact collaboratively with partners.

Recommendation 7

Support to the private sector in the project area should be in association with an existing and on-going enterprise support organization; this could be a government organization, a university department, a local policy group or an independent enterprise support body in the area, but some affiliation with a durable institution is essential for aspiring to sustainability.

Percentage of budgeted funds actually spent**UNICEF 99,9 %****UNFPA 99,9%****UNDP 99,9%****Total: 99,9%****IV. Resources and financial implementation**

- a) An outline of the total approved budget and a summary of the resources available to the project.

Table 1: Total approved budget and summary of resources available to the project:

	Amount (US\$)
	Period
	2008-2010
Total approved programme costs	1 832 128
<i>Programme costs received 2008 -2010</i>	1 832 128
Total approved Total approved PSC	128 248,96
<i>PSC received 2008-2010</i>	128 248,96
AA-fee	18 321,04
Total funds received 2008-2010	1 960 376,96
Total approved budget	1 960 376,96
Estimated total expenditure 2008-2010	1 958 052,93
Balance as at 31/10/2010⁶	2 324,03
Expenditure vs funds received	99,9%

⁶ The remaining balance of the donor funds is as follows:

UNFPA – USD 508,86 as reported in 2010 Final Financial report

UNICEF – USD 1205,04 as reported in 2010 Final Financial report

UNDP - USD 610, 13. UNDP balance stated in 2010 Final Financial report is USD 631, 43. No direct expenses were made in 2011 financial year. USD 21,30 is indirect expense representing general management support charge for 2010 commitment.