

Stories from the DELIVERING as **ONE** **Pilot** Countries



Albania
Cape Verde
Mozambique
Pakistan
Rwanda
Tanzania
Uruguay
Viet Nam

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Introduction

With the ever increasing interest in the latest UN Reform initiative from members states and from within the UN system, the appetite for information on the Delivering as One initiative is reaching an all-time high. In an effort to address this demand, the Resident Coordinators of the Delivering as One pilot countries had agreed to collect stories from the field that demonstrate how the UN system is working better through Delivering as One to deliver concrete development results in the field. This document is therefore, a compilation of the stories submitted by the UN country teams in Albania, Cape Verde, Mozambique, Pakistan, Rwanda, Tanzania, Uruguay and Viet Nam; the text of their stories have not been altered.

The main message of the pilots' stories reveals what the UN system can achieve when agencies work together—while preserving their distinct identities—to carry out the strategies and programmes needed to engender lasting impact on human development. Furthermore, these stories demonstrate how Delivering as One is achieving real progress and real results, particularly in the areas of agricultural development, HIV/AIDS, education, gender equality, children's rights, and disaster preparedness among others.

National ownership and strong leadership spurs and inspires coordination. In **Mozambique**, the Government took a lead role in carrying out a joint programme—"Building Commodity Value Chain and Market Linkages for Farmers' Association"—that was jointly implemented by FAO, IFAD and WFP. The program improved agricultural

production for 11,355 farmers last year and opened up their market access to sell their goods.

In **Viet Nam**, the UN system, by working together, established stronger partnerships with national and international non-governmental organizations. The Country Team reported that UNICEF, UNFPA and UNESCO worked with Save the Children to support the development and institutionalization of a new curriculum integrating reproductive health and HIV into core lessons in secondary schools.

By working together, the UN is providing more support toward government capacity building and policy development. The Country Team in **Albania** reported its joint programme on gender equality is supporting the implementation of the country's National Strategy for Gender Equality and Domestic Violence.

Working and Delivering as One in **Uruguay** has enhanced private-public sector cooperation in policy design. The Country Team there reported that the development of a long-term Government policy on a country branding strategy was carried out by UNIDO, with the backing of FAO, UNDP, UNEP, UNESCO and UNWTO.

In **Rwanda**, UN agencies are leveraging their comparative advantages to better support the Government. WFP, FAO, UNESCO and UNICEF capitalized on their areas of expertise and coordinated efforts in order to respond to the country's "child-friendly school" project and support the Government to take a holistic approach to reducing school drop-out rates.

The United Nations is working better together to achieve the Millennium Development Goals.

Pakistan, for instance, reported that WHO, UNICEF and UNFPA recently collaborated to develop a comprehensive joint programme to support the country's Maternal and Child Health Program.

After experiencing droughts, floods and earthquakes over the past three years, the Government and the UN in **Tanzania** are working together to ensure that future disasters will not destabilize the country and its economic growth. The One UN Joint Programme on Strengthening National Disaster Preparedness and Response Capacity provides technical assistance, policy advice, training and emergency supplies to support the country's disaster management efforts.

When **Cape Verde** suffered an outbreak of dengue, WHO, UNICEF, UNDP and OCHA worked together to mobilize financial, materials and technical resources in order to respond to the national emergency quickly, effectively and coherently.

Feeding the appetite for information on the Delivering as One initiative is critical to communicate how the UN system is working together to deliver concrete results. The compilation of these stories from the field will be the foundation for a more comprehensive and thematically-organized report that will be distributed at the Hanoi conference in June 2010.

Albania

Albanian women make their voices heard in national elections

In the run up to the 2009 national elections in Albania, the United Nations in Albania worked throughout the country to promote the role of women as a political constituency—voters with needs and a voice. Part of the One UN Joint Programme on Gender Equality, raising the voice of women to hold decision-makers to account—through their vote, through debates and through women’s increase presence in elected positions—is central to Albania’s aspiration to achieve MDG3 of the Millennium Development Goals.

In the lead up to the national elections, the Joint Programme supported national partners in contributing to the adoption of the country’s first quota in the Electoral Code (2008); the doubling of the number of women MPs elected to parliament in national elections in June 2009 and the equal representation of women in many regions in ballots cast.

The UN supported a national survey on Public Perceptions of the Participation of Women in Elections, which was launched in 2009. The survey revealed that 23.10 percent of women and 10.40 percent of men did not vote because their families chose not to vote; indicating that women are much less likely than men to be politically engaged if their families choose to remain uninvolved. The findings are indicative of the restrictive role played by women in decision-making and the stereotypes which remain inherent in the public arena.

To combat such realities, and through the support of the One UN Coherence Fund, the UN rallied women’s



A representative from the Women Forum Elbasan talks to local women about the importance of voting in last year’s election.

groups and nongovernmental organizations to raise awareness, mobilize women as a political constituency and increase public debates on gender issues in the media, using the national elections as a platform. The campaign helped increase the understanding of the impact coordinated action and organized women communities can have to make women’s voices heard. A national Albanian Women Manifesto was created by grassroots NGOs, helping to generate debate on gender issues that political parties, government, state institutions and society need to address.

Ms. Ermira Kopliku was one of many women from Shkoder who participated in the public debates organized for this purpose. She highlights: “I believe the campaign was very useful to me and to my friends, because it made us aware of the importance of voting; not only for ourselves, but for society as a whole. For sure we must vote because later on we don’t have the right to complain about the result. If I don’t vote, I would lose my voice. Many women in the neighborhood voted and I’m proud since I believe I have helped in this direction.”

Ms. Bardha Gura, a high school teacher from Elbasan, highlights: “We came to understand one key issue— woman must be united in order to have a strong voice. This voice must be heard and we must claim our legitimate right. We will do so from now on.”

The national elections saw the highest percentage of voter turnout in democratic times in Albania. The work of the Joint Programme in part contributed to the fact that in regions monitored by supported NGOs, approximately 47.5 to 51.5 percent of voters were women.

NGOs also partnered with the UN to conduct public awareness activities on gender equality and worked extensively with the media in Tirana and in the regions. Talk shows were organized and aired on local television networks, promotional materials were prepared with messages advocating for the increased participation of women in the electoral processes, both as voters and as candidates. A documentary of women MPs and local women leaders was prepared and will be used for advocacy around the upcoming local elections in early 2011.

These activities resulted in greater media attention and an increased understanding of gender equality issues, contributing towards a shift in public opinion and perceptions. Due to the Government’s commitment and the UN’s advocacy role and partnership with nongovernmental organizations, 16.4 percent of the Parliament is now women, a significant increase from the last Parliament, which saw only 7 percent of seats going to women.

On the implementation of the 30 percent quota, a Member of Parliament and also Minister of Integration, Ms. Majlinda Bregu stated that “the necessity of quota implementation was not supported by the political parties as an ideal solution to the equal participation of women and men in politics, but as a necessity to create a critical mass of women that unfortunately has been missing for years in Albania.”

UNIFEM, UNDP, UNFPA and UNICEF in Albania have brought their expertise together under One UN Joint Programme on Gender Equality. Under this Joint Programme, one component is focused on women and elections. As the lead on women and elections, UNIFEM worked with political parties to ensure a quota in the newly adopted Electoral Code; with grassroots NGOs and gender equality advocates in government to mobilize women as a constituency, holding decision-makers to account with their vote and their voice, and monitored the application of the quotas. UNICEF supported Youth Parliaments across the country to raise awareness among their communities about the importance of gender equality and women’s participation in elections—as voters and as candidates. UNDP and UNIFEM partnered together to raise the capacity of the media to better cover gender equality issues in the context of the elections.

Combating Violence against Women and Domestic Violence in Albania

United Nations agencies in Albania are working to advance gender equality and the rights of women. This is featured throughout interventions undertaken by the

UN and is also the focus of a UN Joint Programme on Gender Equality, all supporting Albania's aspirations to achieve MDG3 of the Millennium Development Goals.

According to a national sample survey on gender based violence produced by the National Statistics Agency, with UN support, of 2590 families surveyed, it was found that: 50.6 percent of women have suffered emotional abuse; 39.1 percent of women have suffered psychological abuse; 31.2 percent of women have suffered physical abuse and 12.7 percent of women have suffered sexual abuse.



Workshop on domestic violence for social service providers from the Municipality of Durres, December 2009.

Participating agencies in the UN Joint Programme on Gender Equality are bringing their skills to support the Government of Albania to combat the phenomenon of domestic violence, allocating approximately 2,000,000 USD since 2008.

In 2006, the Albanian legislature passed the Law "On Measures Against Violence in Family Relations;"

and in 2007, adopted the first comprehensive strategy to respond to the phenomenon of domestic violence. Both the Law and the strategy stress the need for an improved coordinated response; to support, protect and provide rehabilitation and employment opportunities to victims of domestic violence; to empower the judiciary in taking protection measures against domestic violence; and to provide quick, affordable, and accessible social services.

The UN provided training for over 500 State Police on the handling of domestic violence cases. Over 80 judges and magistrates were also trained on the domestic violence law and the courts role in its enforcement. The effects of these training are visible, with police sources and courts confirming a significant increase in cases presented to them and a good number of follow up actions taken; including the use of protection orders where necessary.

Elida Rrapti, Shelter Manager and Councilor at the Shelter for Abused Women and Girls in Tirana, noted that police officers are demonstrating an increasingly clear understanding of their procedural responsibilities under the domestic violence law and a good level of sensibility when dealing with the issue, commenting: "the improved capacities of police officers have been witnessed not only by victims coming forward for assistance but through the well defined structure of good cooperation that now exists with shelter services." The UN also supports the establishment of the first government shelter for victims of domestic violence, scheduled to start operations by midyear.

The National Health Service has benefited from the support of the UN in the training of healthcare workers.

Dr Ervim Kallfa, who conducted healthcare trainings at the Tirana Maternity Hospital, commented “the training has provided a space for interactive debate on the methods of diagnoses in cases of domestic violence. The trainees, both doctors and midwives completed the training with a clear understanding of the law and their role amongst the network of national partners.”

The UN has also conducted trainings on domestic violence detection which aims to equip school councilors with the expertise to identify children who are victims of domestic violence and initiate referrals where necessary.

The UN has conducted an in-country analysis of strategies and actions carried out by national and international NGOs in establishing referral services for women and child victims of domestic violence; which incorporates the police service, judiciary, health, education and social services.

Following the development of a draft model for community response to domestic violence based on these findings, the UN has begun piloting the model in the Municipalities of Korça, Durrës, Kamza and Kukes. The overall goal is to develop a model for community response to domestic violence, through a participatory process, which will be formally adopted by the Government and extended to nine municipalities across Albania.

The One UN Joint Programme on Gender Equality partners the UN agencies UNIFEM, UNDP, UNICEF and UNFPA and supports the coordinated

implementation of Albania’s National Strategy for Gender Equality and Domestic Violence (NSGE-DV) as part of the Government of Albania’s National Strategy for Development and Integration (NSDI). UNDP and UNICEF are leading the work on Domestic Violence at the local level with UNFPA providing assistance in this area to health care officials.

Cape Verde

Coherence for children—Integrated Immunization and Birth Register Campaign

In direct co-operation with the United Nations, the Government of Cape Verde intends to immunize 62,000 children against polio, in a synchronized campaign taking place in the West and Central Africa region. In Cape Verde this campaign will also integrate other development priorities such as birth registration of children. While development indicators in recent LDC graduate island nation Cape Verde are overall very positive, birth registration remains a challenge. National statistics indicate that between 38-40 per cent of children between 0 and 1 year of age are not registered.

This year, and for the first time ever in Cape Verde, national authorities jointly with the United Nations have opted for an Integrated Immunization Campaign which covers in addition to polio vaccination, a survey of immunization coverage, birth registration, collection of data on girl's school enrolment and sanitary conditions at the household level.

This initiative which puts the welfare and rights of children at the center counts on joint support from UNICEF, WHO, and UNFPA and forms part of the One UN Programme in the country. What is clear is that by working together, UN support to national action for children is gaining in both strength and efficiency. The integrated campaign truly illustrates how much more can be done with less. Making use of modern technology and handheld computers, and by teaming up 200 trained young surveyors with health workers, this initiative shows how resources can be used wisely as a country attempts to attain and measure

multiple development goals. It is also an example of a coordinated and cost-effective approach for social mobilization and communication for development.

The campaign which includes the participation of several Ministries such as Health, Education and Justice will in one go achieve the following objectives: 1) polio vaccination for all children under 5 years of age; 2) Survey of immunization coverage; 3) accurate information of the number of girls enrolled in secondary education; 4) identification and registration of children and 5) Identification of possible sources for Dengue.



One first day campaign: children in the Health Center

Saving lives in a coordinated way More than 360,000 people reached by the joint UN support to the emergency situation during the dengue fever epidemic

Cape Verde officially declared on 4 November 2009 the outbreak of a massive dengue epidemic. It was the first time that such an epidemic had been registered on the islands. While 4.2% of the country's

total population were affected by the Dengue fever, some municipalities were particularly hard hit, like the municipality of Sao Filipe on Fogo Island where 15% of the population were affected by this potentially deadly disease and the municipality of Praia, the



Training of health professionals by the international expert on Dengue case management

the nation's capital, where 11% of the population were affected. The country was thus facing one of its biggest challenges ever in terms of rapidly responding to and alleviating this health crisis. The whole country quickly and determinedly mobilized around one objective: saving lives. The

international community, and in particular the United Nations, showed solidarity and joined national efforts.

With around 4.2% of the population affected, and with the capital registering close to 15,000 cases (59% female and 41% male) the strain on the health sector was enormous. Hospitals, health centres, and health professionals had to urgently define the health service response, and mobilize as much resources—human, material and technical—as possible and as early as possible. For this reason, the Government declared a national emergency and launched an appeal for support from the international community and the United Nations.

The situation demanded a strong and well coordinated response. Within the framework of the One UN Programme, the United Nations, through WHO, UNICEF, UNDP, and OCHA, worked jointly to

DENGUE OUTBREAK AND THE UN MASSIVE RESPONSES TO THE EMERGENCY SITUATION IN FIGURES

- 21,090 total registered case by the end 2009
- \$973,507 mobilized for rapid response
- \$US 200,000 total amount mobilized by UNDP from Australian Government
- \$80,000 total amount from UNDP and UNICEF for the Municipality of Praia and National Civil Protection Services
- 2000 bed nets distributed
- 6,000 kg Temephos for anti-vectorial fighting
- 361,205 Total number of individuals reached
- 58,022 children under 5 reached with CERF funding
- 189,960 women reached with CERF funding
- 1 instaled clinic laboratory
- 7 technical assistance (9 international staff: doctors, laboratory experts, entomologists, epidemiologist, water and sanitation emergency specialist, communication)
- 140 total closed of abandoned cisterns
- 500 automobile wrecks collected wrecks for appropriate destruction
- 154 rainwater pockets traited
- 40 health personnel trained in dengue fever case management

mobilize financial, material and technical resources in order to provide effective, efficient rapid and coherent support to national efforts in response to the health emergency. The United Nations, through its Resident Coordinator, also played a positive role in the mobilization of international support.

The joint response of the UN permitted both rapid action and optimal use of resources. The UN team, with specialists from different UN Agencies integrated into the national teams created to combat the epidemic, the anti-vector team, the communication and social mobilization team, and the water and sanitation team. US \$ 975,000 were quickly mobilized for UN action, which together with national and international efforts, permitted an adequate and timely life-saving response for 360,000 Cape Verdean children, women and men.

Scientific and medical efforts which were led by WHO, enabled, for example, the fielding of high-level expertise in case management, laboratory work and epidemiological surveillance under South-South cooperation programmes. The international experts contributed to the training of national health workers in case management of dengue hemorrhagic fever and severe cases, and as well in communication for behavior change and vector control. The coordinated UN action contributed to a reduction of the number of fatalities, due to the timely and high quality response.

One of the objectives of Delivering as One is reduction of operating costs. By using One procurement channel, costs were in fact reduced,

allowing the purchase of 6 tonnes of Temephos to fight the mosquito larvae, the delivery of 2000 mosquito bed nets to all hospitals and health centres in the country, as well as nets to cover the most critical water deposits which serve as breeding grounds of the mosquitoes.

The impact of the national initiatives, bilateral donor support and the UN coordinated response to the Dengue emergency will be measured and more visible in the next rain season. Based on the actual assessments, the future outlook is promising. The health capacity developed during the implementation of the project will support better management of dengue fever cases for the next outbreak, if the vector is not eradicated. There is a risk of dengue becoming an endemic disease in Cape Verde due to current sanitary conditions. People are at risk in areas that are favorable for mosquito breeding, where uncovered household water storage is common and where solid waste disposal services are inadequate.



UN Staff solidarity: staff participating in the national appeal made by the Prime Minister for national clean-up campaign

One of the recommendations of the UNICEF Water and Sanitation expert that joined the UN emergency response in Cape Verde was for the country to have a master plan and a well defined division of labor between municipalities and central Government in the sanitation sector. Such a plan is currently being produced by the Prime Minister's Office in close collaboration with local authorities, and with the financial support of UNDP. To succeed in the fight against Dengue and the eradication of the vector, an integrated and multi-sectoral approach including initiatives and improvements in water storage and sanitation as well as other anti-vector activities, information and social mobilization and as well appropriate legislation.

In addition to UN technical and financial assistance to the fight against Dengue, the UN Country Team also joined national efforts and participated in a two day country wide clean-up campaign.

Mozambique

Farmers Get New Market, Good Grains and Better Prices

Under UN's One Program in Mozambique, FAO, IFAD and WFP jointly implement the program "Building Commodity Value Chain and Market linkages for Farmers' Association". The program, implemented in Mozambique's Sofala, Manica, Zambezia, Nampula and Tete provinces, has in 2009 helped tackling poverty by improving agricultural production for 11,355 farmers and in selling their produce on the market. For some the program has helped them to double the land usage from 1 to 2 hectares and improve both quality and quantity of the harvests. Also, the introduction of family silos will help preventing storage losses, which normally are 30% of total grains stored. It is a program where the Government has taken a lead role and worked, like the UN, in a more coordinated and effective way, which has greatly contributed to the success.

With funding of \$1,350,000 from the One UN Fund, FAO, IFAD and WFP support each a set of activities in sequence to support building commodity value chain and market linkages for farmers' association. In 2009, this program benefited 11,355 farmers. FAO is responsible to improve smallholder's access to markets through the provision of infrastructure and technical assistance for post-harvest handling and storage. IFAD complements by working for broadening access to credit and WFP is offering a valuable market opportunity for the farmers by procuring some of the produce for their food distribution programs.

The results so far are promising. Based on an

assessment of some 300 farmers, the total land usage for cultivation has doubled from average 1 hectare 2008 to 2 hectares in 2009. Also the quality of the grains improved and did meet in a higher degree the WFP standards. A link in this chain is the credit provided to farmers' associations. They buy from the farmers with the credit and hold the produce for WFP controls. Without the credit farmers would have sold just after harvest, as many cannot afford storing all the grains. As a result, 2,177 metric



tons could be bought by WFP compared to the 60 metric tons in 2008. To reward good produce, WFP offered a small quality premium on top of the market price for the procured grains. So for many farmers the program has meant access to a new market and better grains sold at a higher price.

Input- and technical assistance and stronger farmers' associations have contributed to these results. In cooperation with local authorities, extension workers have been trained to be able to better assist farmers in using more effective cultivation methods. World Vision, CLUSA and Care international have provided many farmers with seeds from their resources, apart from being UN implementing partners. They have also strengthened the farmers associations and their umbrella federation which today is better organized and managed to support and advocate for their members. Stronger associations also mean individual farmers' bargain power increases for better input and sales prices.

The program will further promote better storage management, both to reduce grain losses and enable sales at times when prices are more beneficial. For this a silo approved by Ministry of Agriculture called "Gorongosa" will be introduced in large scale. It is a cheap silo (the costs equal to one bag of maize) and mainly built by materials found locally. Above all, it prevents storage losses, which on average amounts to 30% of total crops stored. The silo does not only protect from pests consuming the grains, but also makes it harder for thieves to get hold of it. It is planned to build 300 of these silos in the first quarter

of 2010 and will hopefully inspire other farmers not directly benefiting from the program to adopt the idea.

The program success up to now would not have been the same without the strong leadership and ownership of the Government. From central to district level there have been strong involvement, engagement and leadership, and have, like UN, worked in a more coordinated and effective manner. Actually, the strong collaboration exhibit among Government entities is most likely a result of the joint program because it forces and inspires development partners to also work more together.

Another ingredient to the program's achievements has been an effective partnership among all involved parties, including international and national NGOs, private companies, Government entities, the farmers' associations and UN. There has been involvement of all from the onset and the roles have been clear on who is doing what. The work has been uniquely integrated where all parties' contributions have been effectively channelled to the farmers.

This two-year program is only one year old, but will expand into two other provinces and be scaled up to reach other farmers in the existing ones. In total 15,000 more farmers will take part. Part of the expansion will be a larger credits scheme for the farmers' associations, which is a necessity for scaling up the WFP purchases. Also the promotion of the family silo will continue apart from the technical expertise given. With a bigger program and continued positive partnerships

and UN collaboration, the program will clearly benefit many more smallholders in Mozambique to access new markets, get better grains sold at a higher price, and lose less when storing grains.

For more information, please contact Mr. Billy Mwiinga (Billy.Mwiinga@wfp.org)

Increasing the Coverage of the Prevention of Mother to Child Transmission Program

Through close cooperation, the UN agencies are more effectively supporting the capacities of the Ministry of Health and key stakeholders in Mozambique to provide prevention of mother-to-child transmission (PMTCT) packages of services to pregnant women and their newborns. In the first nine months of 2009, according to preliminary data from the Ministry, 54,899 HIV-positive pregnant women received antiretrovirals (ARV), either as prophylaxis or for their own health if eligible to antiretroviral therapy (ART). This is a major raise from 7,690 recipients in 2005. If this trend is sustained throughout 2009, half of all HIV-positive pregnant women will be reached—a significant increase from the estimated coverage of a mere 5% in 2005, and 32% in 2008.

An estimated 30,000 children under the age of 15 were infected in 2009—most of which through vertical transmission from their mother. One central action to reduce new HIV infections in children, and virtually eliminate pediatric AIDS is to prevent mother-to-child transmission (PMTCT) of HIV. National efforts for PMTCT have been rapidly expanded since the inception of the program in 2002, most

recently with the joint support from members of the UN Team on AIDS in Mozambique (UNTAM). The UN support has been two-folded, on the central policy level to improve the national technical and coordination capacities for a more effective response, as well as in the scaling up of PMTCT as an integral part of the maternal and child health services. This support has been given directly or in collaboration with non-governmental implementing partners.

In 2002, the Ministry of Health launched a comprehensive national program on prevention of mother-to-child transmission of HIV. To ensure the program reaches as many pregnant women possible, it has been integrated with existing maternal and child health facilities and linked to other services, such as nutrition, pediatric treatment and malaria control. Mothers and children across the country are offered a wide package of health services, including HIV prevention and treatment. All services are provided free of charge. Pregnant women who are assessed as malnourished are provided with nutrition supplements at selected sites and that is regardless of their HIV status to avoid stigma and discrimination.

Resulting from the national efforts, the number of sites where pregnant women can receive PMTCT services have increased from only 8 in 2002 to 744 recorded in October 2009. This in turn has resulted in an increase of pregnant women receiving counselling and testing from 4,641 in 2002 to 480,000 in the first nine months of 2009. If this trend was continued throughout the year, the program would reach almost 80 percent of all pregnant women in 2009 (on average there are an estimated 800,000 pregnancies



per year in Mozambique). Final official data for 2009 will only be available in the first quarter of 2010.

The uptake of PMTCT services has increased significantly. In the first nine months of 2009, according to preliminary data from the ministry, 54,899 HIV-positive pregnant women received antiretrovirals (ARV), either as prophylaxis of vertical transmission or for their own health if eligible. This is a major raise from 7,690 recipients in 2005. If this performance

was sustained throughout 2009, the coverage of ARV prophylaxis for HIV-positive pregnant women may reach 50 percent– rising from 32 percent in 2008. By joint work of the UNTAM members, the UN has been able to strengthen its voice to influence the program structure and guiding principles. By acting in a coordinated fashion and with clear divisions of labour, involved UN agencies have optimized their support to the Ministry of Health on PMTCT, making it more effective and efficient.

In 2010, the UN, together with other key partners such as *President's Emergency Plan for AIDS Relief (PEPFAR)*, Global Fund and implementing NGOs, will continue supporting technically and financially the Ministry of Health to find solutions to the constraints to expand the program. Issues to address are such as: limited human resources; weak monitoring and evaluation system; insufficient data recording and reporting; and varying quality of services as well as limited involvement of local communities. Many of these hurdles can be overcome by working together. The experience, so far, is joint efforts are more effective for developing the PMTCT program, and, as such, crucial in the work towards reducing the incidence of HIV among children and eliminate pediatric AIDS.

For more information: Scaling-up prevention of mother-to-child transmission programmes in Mozambique

http://www.unicef.org/infobycountry/mozambique_46732.html

Support groups in Mozambique offer hope for stopping mother-to-child HIV transmission

http://www.unicef.org/infobycountry/mozambique_43856.html

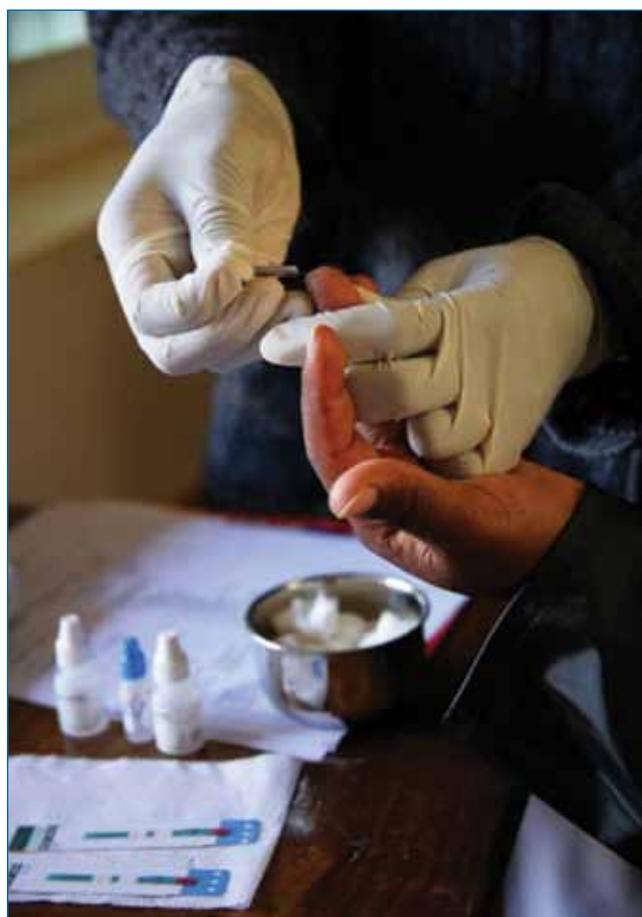
Or contact: Dr. Luisa Brumana (lbrumana@unicef.org), Senior HIV/AIDS Specialist, UNICEF Mozambique

Intensified HIV Response at Provincial Level

UN in Mozambique has strengthened the leadership of the Governor of the Gaza Province in battling the HIV pandemic. Support has been given for elaboration, validation and implementation of 11 district plans of action. UN agencies have also been instrumental in mobilizing financial resources, for implementation and creating enabling environment for all other stakeholders to contribute with their strengths in the fight against HIV in the province.

The HIV prevalence in Mozambique varies from province to province and trends are different. The 2007 survey on HIV prevalence in Mozambique conducted by the national statistics office indicated a levelling off in the central and northern provinces among adults between 15-49 years. But in other parts the figure is still raising. In Gaza province, the prevalence among the adult population was estimated to be as high as 27% in 2007. And in 2009, the province reported 728 HIV related deaths out of a total population of 1,200 000. This was an increase in mortality rate of 28% compared to previous year.¹

These negative trends prompted the decision to rapidly intensify the HIV response in the Gaza province. UN agencies responded by providing technical support to the Governor for developing and implementing HIV action plans for each of the 11 districts in the province, and one for the province itself. In preparation for the exercise, UN provided trainings for all the 11 HIV district teams in developing district



¹ Prevalence rate is sero-prevalence and the estimations are based on prevalence rates among pregnant women

plans. The plans were later reviewed by a technical panel composed of the best HIV experts within the UN and key development partner organisations.

The second stage was to mobilize funds for implementing the plans. The UN supported the Governor of Gaza and his team in organizing a resource mobilization meeting on 24 June 2009. More than 100 participants from civil society, private sector and key agencies attended and resulted in the mobilization of more than two million US dollars.

The UN provided 1,920,500 US dollars to the implementation of the plans. This represented more than 20 % of the total needs of the province in 2009. Support was given in several sectors and in all the areas from prevention, care, treatment to mitigation. At the end of 2009, 80 percent of the planned activities for prevention, care, and treatment had been implemented. This was a successful result considering it was the first year of implementation and activities had been rapidly expanded.

The close collaboration among UN agencies improved the perception of the United Nations as one rather than several entities. The Governor's statement during the opening ceremony reflects this change: "The commitment and assistance provided by the UN and development partners to support HIV prevention and control activities have reached substantial advances (levels); we are satisfied with them and are confident that we will altogether defeat HIV in the province of Gaza".

Other development partners noted the difference of how UN works, and how strong collaboration and coordination is critical for making change happen. One representative from MONASO, the main network of national NGOs in Mozambique, notes: "this is really fantastic because it is the first time I am attending a meeting in which, district authorities have taken the leadership and presented clearly the progress made and the constraints they faced in the fight against HIV at the district level. In addition, the positive interaction I am seeing between government provincial authorities, UN agencies, civil society and the private sector makes it a very promising process which will make a tremendous difference in the fight against HIV and the lives of people at district and provincial level".

In 2010, the UN will continue to work jointly to support the Governor, civil society and districts in Gaza to reduce the devastating impact of HIV and AIDS. It is worth noting that the focus on the districts is in conformity with the Government policy on decentralisation. During the year, UN will specifically work on: a) HIV prevention; b) building the capacity of the provincial staff and communities; c) strengthening monitoring and evaluation; and d) the quality of HIV services in Gaza. These are key to progress towards achieving the Millennium Development Goal number 6 in the province, and the specific target for Gaza: "no new HIV infection in Gaza province beyond 2015".

For more information, please contact: Dr Abdou Moha (Mohaa@mz.afro.who.int), HIV/AIDS Country Officer, WHO Mozambique

Stronger Civil Society in Mozambique

UN agencies in Mozambique support the capacity development of 300 civil society organizations. The assistance provided, has improved monitoring and programming skills of the organizations as well as their abilities to influence and engage in policy discussions. UNESCO, ILO, UNIFEM, UNDP and UNICEF have all given technical and financial support under this UN joint program, and the results achieved so far, are testimonies of what can be achieved by agencies working closer together.

Developed in 2007, the main purposes of UN Mozambique's joint program on capacity building of Civil Society Organization (CSOs) is to strengthen technical capacity of local NGOs, community groups and traditional leaders and their abilities to take part in policy discussions. In many ways, this is an effort to amplify the voices of the poor. The program stems from UN's comparative advantage as facilitator and mediator between the Government and the civil society for dialogue on social issues. A function which was realised could be stronger by UNESCO, ILO, UNIFEM, UNDP and UNICEF working closely together.

Through the efforts of 28 implementing partners the UN joint program has delivered against the objectives. One result is improved CSO advocacy skills which contributed to the approval of the Children's Act in 2008 by the parliament and the Law on Domestic Violence Against Women in 2009. To ensure the new laws are implemented and followed, the program facilitated dissemination of the acts among CSOs and the set up of monitoring mechanisms. One

part of improving monitoring was to train some 300 journalists on child rights. They are now part of a Child-Friendly Media Network and have published more than 100 articles during 2009 on children's situation in Mozambique, with a particular focus on violence and abuse. The strengthened advocacy abilities of the CSOs' also saw a Ministerial decree issued to penalize teachers who abuse children.

Another result is that 300 CSOs' have been empowered to more effectively participate in designing, implementing, monitoring and evaluating government programmes. It was evident during the course of the year that CSOs took a more active part in various policy dialogues and decision making foras, such as the development observatories. These are the government institutionalized foras aimed at encouraging the participation of civil society in decision making on national and provincial levels on particularly poverty reduction. CSOs have been able to better use the opportunity to influence government policies, as well as discuss what the Government does to improve people's lives. This progress is a step forward in strengthening democracy in Mozambique and the accountability of the government.

The CSO's own operational and programmatic capacities were also supported. Better implementation, management and reporting have been the result of different training initiatives. This contributes to improved effectiveness and efficiency of development assistance to the country, but also strengthens the local CSOs as development actors and partners in Mozambique in general.

The UN also supported a nationwide consultative process to review the Civil Society Organizations' legal framework. A revised legislation was developed and is expected to be approved by the parliament in 2010. This will have a positive effect on the operational environment for the CSOs to fulfil their mandates and objectives.

Plans to scale up the activities under the Joint Program exist, both geographically and in terms of civil society participation. So far, hundred out of Mozambique's 128 districts have been reached, and 300 CSOs out of 5,000 have been participated in the program. A target is not yet set for how many more to include, but the program will expand to more organizations and districts.

For further information, please contact Mr. Ruben Cossa (rcossa@unicef.org).

Pakistan

Improving Maternal and Child Health in Pakistan

Pakistan's Maternal and Child Health indicators remain extremely poor every year as 25,000 to 30,000 women die from complications of pregnancy and child birth. Millions more suffer ill health and disability. One million children die before the age of 5 while 16,000 die in the first month after birth. It is one of the most challenging health issues that the Government of Pakistan and its development partners are trying to address.

In 2005 after extensive and exhaustive discussions with the development partners, stakeholders and decision makers, the federal Ministry of Health developed the National MNCH Programme in line with the national and Millennium Development Goals. The UN through WHO, UNICEF, and UNFPA work closely with the Government to achieve the programmes aim of strengthening, upgrading and integrating ongoing interventions and introducing new strategies. The overarching goal of the program to improve accessibility of quality MNCH services through development and implementation of an integrated and sustainable MNCH program at all levels of the health care delivery system is also supported by the UN agencies.

As part of the Delivering as One reform process, WHO, UNICEF and UNFPA have developed a comprehensive joint programme to further support the National MNCH programme. The agencies will be focusing on an additional 10 districts of Sindh and joint implement activities to increase the number

of community-based skilled birth attendants; to ensure comprehensive family planning services at the health facilities; advocate for preventive health behavior and create a demand for MNCH care; and introduce management and organizational reform and monitoring and evaluation activities to ensure sustainability of the development initiatives.

Healthy mothers lead to healthy children. These healthy children are our future and it is our moral duty to ensure that we give the best that can be available to them. The UN is committed to supporting the Government in its efforts to improve the future of the country.

Sultanwas, a successful story of Delivering as One UN

5000 people of a small but prosperous village, Sultanwas, walked down the main road carrying their children and what they could of their life in their arms, on their shoulders, in their hands in the dawning winter days of 2009. They were escaping the terror of the Taliban. They were leaving their homes with a hope that they would return in better times.

The once peaceful and calm Sultanwas lying sedately at the feet of the lush green mountains of Buner was ripped apart, destroyed to its core. Sounds of bombs and gun shots rang in the air in the days that followed the departure of the villagers. Sultanwas suffered great damage during the crisis.

"There was nothing left, nothing! It was all on the ground. I walked on the ruins of my house,

stepping on the head of my daughter's broken doll, the beam of the main door, only to see shreds of our clothes meshed with stone, cement and water, only to see the shreds of our life lying helplessly on the ground" says Mohammad Ikhtiar as he relates his return to the village after the military operation. "We knew that there would be damage to the village but we were not prepared for this."

For days the villagers slept under the open sky, exposed to the weather, exposed to the debree amid wailing children and weeping mothers. But help was round the corner. The humanitarian community led by the United Nations (UN) in Pakistan responded with food, shelter and health care. "I never liked bread; I always used to fight with my wife for not cooking rice every day. But I craved bread like a child craves sweets in the days that followed our return to the village and when the UN distributed wheat flour and my wife made bread, I thanked God and blessed the UN with every bite that I ate," Mohammad Ikhtiar told us as he recalled the first few days of return.

The combined strengths of UN Habitat, UNDP, FAO, WFP, WHO and UNICEF under the delivering as one banner sat with the people of Sultanwas and helped them lead the path towards recovery. A jirga, representing the people of Sultanwas, was immediately formed with the help of the UN. Since its inception the jirga has led the way towards recovery, listing the immediate and priority needs of the people. The UN responded to the best of its ability. Pouring in their core funds, the UN provided 256 temporary shelter, 100 latrines, 280 solar lights, food, 1500

families were given seeds and fertilizers to meet their basic agricultural needs, hand pumps, hygiene and sanitation kits, health care, and restoration of tube wells and electricity generators. In efforts to restore the disabled economy skills training programs were introduced, 143 cows and 1000 other animals were distributed and rubble removal was implemented through cash/food for work initiatives. Link roads, pavements, footpaths, community dry pit latrines, village sewerage lines, retaining walls, causeways, and boundaries etc were also fixed to bring back the living conditions to some kind of normalcy.

"When we had returned, I did not think that I would ever see my son run up and down the lane outside our house again, now when I hear him sing on his way back from school, I know that life will go back to what it was if not better," says the president of the Jirga. "I say this with an honest heart and no qualms that I would never have heard the sweet sound of laughter if it had not been for my friend—the UN."

Rwanda

Building a bridge to better government

Syldio is a farmer in Gicumbi District, who until recently had no way of selling his crops to neighboring districts, because of poor roads.

Thanks to UN support for good governance in Gicumbi, local leaders now work together to bring sustainable, community-led improvement to their citizens.

These government improvement efforts are supported by the United Nations Capital Development Fund (UNCDF), and include a combination of capital investment and capacity building to address specific needs, including food security, peace building, democratization, gender and evidence-based planning and budgeting and public expenditure management.



“The bridge is proof of development”

All of these important reforms help the Rwandan population in addressing its most pressing needs. A better government in Gicumbi has lead to better infrastructure. And now farmers like Syldio have a bridge that connects his village to nearby communities, so that he can sell his crops and improve his quality of life.

“People with small businesses can actually transfer their business into a neighboring district, and improve commerce for both themselves, and their community,” Syldio says. “Moreover, government authorities like the police can also use the bridge.”

The UN works to strengthen local government institutions by training officials, as well as providing basic equipment for groups such as the police who use the bridge to improve law enforcement. And in the spirit of the Delivering As One Programme, other agencies are working together to help the government understand the needs of its citizens. UNDP and UNICEF support the National institute of Statistics to collect and analyze data officials so they can participate in evidence-based planning. This kind of planning focuses on the specific needs of the community, such as the bridge built in Gicumbi, which served not only commerce and police, but education as well.

“Before the bridge, we also had huge difficulties because of the rain,” Syldio says. “Parents actually had to accompany their children to cross this river to make sure they could get to school. But now that has changed”

Besides basic public infrastructure, this community development programme, established in the districts of Gicumbi



Because of poor area roads, Syldio had no way of selling his crops to neighboring districts.



Terrace building, a practice encouraged by UNDP to protect farm flooding has brought increased production to Cuyngo town.

and Rulindo, promotes decentralization and local development initiatives by supporting participative, transparent, equitable and efficient local administration, benefiting more than 700,000. To make sure the programme is sustainable; UNCDF even trains local leaders and trainers—so that there is always a reservoir of available talent and knowledge to keep good governance in place.

Through institutional reforms such as these, real change—change that can be seen and touched—has come to Syldio’s village.

“The bridge is proof of development,” he says. “I have terraces on my farm, which technicians helped me build, and the only way they could come and help was by using this bridge. It’s such a perfect example of development, because the bridge was built first.”

In this and other improvements, the added infrastructure has not only provided a bridge from Syldio to more customers. It has also provided a bridge between Gicumbi’s residents and its government.

HIV Prevention workers devise a game where everyone wins

The Stella Marisse playground in Gisenyi was bare, and with just one volcano rock, it could hardly be called a playground. But Innocent Uzabakiriho and other community members had a vision for that playground. They wanted to create a place where the youth of Gisenyi could have fun while at the same time learn about HIV prevention.

The UN in Rwanda helped make this happen through both financial and technical assistance.

With this support, Innocent gathered workers and supplies to create football fields, basketball courts and volleyball nets in his community.

Today hundreds of children gather at the fields of the Gisenyi Youth Center to play their favorite sports, and with each game they win a valuable education. At the end of the match, the youth participate in an interactive activity where they simulate the roles of the virus and antibody. “It’s fun, competitive, active and educational,” Innocent says. “Without UNICEF, we could have never helped these kids, because it would have cost more than we can afford.”



The Gisenyi Youth Center was built as a place where youth can both play sports and learn about HIV prevention.

Recently, Innocent has noticed a remarkable motivation among young people to get tested for HIV prior to starting a new relationship. “Before, when they did the voluntary testing,



After youth dance and play sports at the Gisenyi Center, they also participate in an activity where they stimulate the roles of the virus and antibody as a way to learn about HIV.

about fifteen per cent tested positive, and now the numbers are much lower. Only about five in twenty-thousand are HIV positive."

Fifteen-year-old Adelyne Uwera agrees. "The importance of an HIV education warns me about the dangers of unsafe sex," he says. "In society it's important to know what AIDS is, how to fight it, and then we'll live longer."

The UN Works at both the policy and service delivery levels to help prevent HIV and mitigate AIDS in Rwanda. The UN supported a pediatric conference in HIV, and for the past four years it has brought internationally renowned guest speakers to share information.

"At the UN, we are the guardians of norms," says UNAIDS representative in Rwanda, Dr. Kekoura Kourouma. "We need to ensure and enable quality strategies so that government actions are sustainable, and can eventually continue without donor support."

Just a mile from the Gisenyi Youth Center, Ange de Marie Unlera coordinates the Family Planning and Mother Children Health services at Gisenyi General Hospital. "One aspect of our family planning work is prevention of mother to child transmission of HIV," she says. "HIV testing is critical, because women who do not know they are HIV positive cannot benefit from our interventions, and without this they cannot make decisions about their planned pregnancy, or protect their children during and after pregnancy. Only three per cent of the surrounding areas used to attend family planning and HIV counseling, but now the numbers are up to 13 per cent."

The rate of HIV infection in Rwanda is currently at 3%, though it remains much higher in the urban areas (7.3%). There are currently more than 200,000 children in the country who have been orphaned because of AIDS.



Services like the Gisenyi Youth Center have lead to a new awareness among local youth. Fifteen-year-old Adelyne Uwera agrees. "The importance of an HIV education warns me about the dangers of unsafe sex," he says.

According to UNAIDS, preventative services are now available to more than 60% of the population. But they hope that by 2010, that access is available to more than 80%. Another area of progress is in condom use, where UNFPA works with the Rwandan government. And UNFP statistics show that in 2005, the Ministry of Health distributed 648,240 male condoms and 1,619 female condoms. In 2006, these numbers rose to 833,863 male condoms and 2,441 female condoms.

And in Gisenyi, Innocent can see the progress made. "The biggest pleasure is to see the fields full of kids. It means that these kids aren't in the street and aren't up to mischief, learning bad habits, or taking drugs and leaving themselves vulnerable to disease." Now the Stella Marisse playground is home to playing fields where children not only can have fun, but they also have a place to improve their future. Innocent agrees that's a game where everyone wins.

Safety in a number: victims of gender-based violence have a place to call—and go—for support

As a pastor in Northern Rwanda, Emmanuel* considered himself “the best” husband. Then he attended a Gender Awareness Raising Program in his community. The program taught the men about gender-based violence, and Emmanuel realized that he had been violent with his wife to a degree that was considered illegal.



Belline Mukamana, Police Officer and Gender Based Violence Counselor at Kacyiru Police Station, Kigali, part of the government’s Gender Desk, counsels a victim.

As part of its work in promoting good governance, UNICEF, UNIFEM, UNFPA and UNDP have, through the UN Delivering as One Programme, helped to revise and promote laws, such as the Gender

Based Violence Bill, which was passed by Rwandan Parliament in 2009.

The bill works to both define GBV, as well as prevent it with educational campaigns and punishments for violators.

And thanks to the UN, there is now a place where women can go for support: the Gender Desk in each of the 69 Rwandan National Police stations all over the country.

Violet Kaberanze, who is a gender consultant at the desk, says the organization provides , psychosocial support, police and legal advice to survivors of all forms of gender based violence . The survivors of gender based violence are referred to the One Stop Center located in the RNP hospital, close to the Gender Desk for a holistic care, which includes free medical treatment, psychosocial care and legal support. The One Stop Center, called “Isange” (in Kinyarwanda, “feel welcome”, “feel at home”) was opened in July 2009 with technical and financial support from the ONE UN (UNICEF, UNFPA and UNIFEM). In 9 months the centre has assisted 511 survivors, the majority of them are girls of less than 18 years of age.



Violet Kaberanze, Gender Based Violence Consultant at Kacyiru Police Station, Kigali, counsels survivors and implements program policies.

“At the gender desk, a survivor of violence has the chance for her case to be investigated and to get to truth about what happened,” Kaberanze says. One of the first cases reported to the desk was about a mother who discovered that her 14-year old daughter had been repeatedly raped by her guardian. Not knowing where else to turn, the mother contacted a UNIFEM Programme Officer who referred her to the Gender Desk hotline.



It is estimated that 250,000 women were raped during the Rwandan Genocide in 1994, but today the Rwandan people are reaching out to educate and prevent gender-based violence.

Police records on reported cases of violence from January to September 2008 show 428 cases of physical assault, 307 cases of rape of an adult, 1,652 cases of rape of a child under 18 and 75 cases of domestic

homicide. 418 cases of rape and sexual abuse ended up in court the first half of 2008; of these 68% of offenders were convicted and 32% acquitted. The Gender Desk helped to investigate these cases and ensure evidence was available for court proceedings. Investigation is an important task at the desk.

“As the police are responsible for investigating gender and domestic violence cases, they have to understand gender inequalities and gender-based violence,” says Kaberanze.

“This helps them listen to victims, take violence against women as a security and human rights issue, and be compassionate to them.”

“When I learned that my behavior was not acceptable,” says Pastor Emmanuel, “I changed. And I promised to share what I had learned with the rest of the men in my community and beyond.”

Tanzania

Driving Change—Improving Access to Health Facilities for Expectant Mothers

When Doricas Shabani went into labor, her mother told her to wait at home for the baby to arrive. But after 24 hours of pushing, the baby had still not come. So she was taken in a wheelbarrow to the nearest dispensary, but they could not help her. Eventually a car from the nearest health facility came to transport her, but the ride took more than six hours for her to finally reach Manyoni hospital. By that time, Doricas had suffered injuries that would cause her to lose her baby and suffer from fistula, a debilitating condition that leaves hundreds of thousands of women suffering of incontinence in solitude and shame.

Doricas lives in rural Tanzania—one of the poorest countries in the world, where only US\$ 17 is spent per person annually on health care. By comparison, the USA spends US\$ 6,350 per capita and France US\$ 3,819 per capita per year (WHO 2005/08).

Transportation infrastructure in Tanzania is also very poor. In 2003, only 6,808 out of 78,891 km of roadways were paved, representing less than 9% of the road network, making access to health centers a formidable challenge for the country's population, especially among those who live in rural areas.

That is why the One UN Joint Programme for the



Reduction of Maternal and Newborn Mortality has made it a priority to help people like Doricas reach health centers in time to stop preventable deaths and injuries. The Joint Programme supports government institutions and civil society organizations in their efforts to provide crucial resources such as ambulances, which greatly facilitate access to health centers.

At the Kibakwe health center in Dodoma, Dr. Eliab Senyangwa Kibakwe said recently purchased ambulances have reduced significantly the mortality rate of expectant mothers and helped increase clean deliveries. He is also glad to see the government's commitment to building a new center that will specialize in obstetric care.

By helping pregnant women get to health clinics on time, the efforts are helping decrease not only the 13,000 women who die in childbirth in Tanzania each year, but also the thousands more who suffer from delivery injuries, including fistula. Decreasing this delay helps save mothers as well as the newborns that cannot survive without proper care if any complication occurs during the delivery.





Studies also show that the chance of newborn surviving is closely linked to the survival of their mother. Almost half of newborn deaths in Tanzania occur within the first 24 hours and three quarters in the first week of life (TDHS). 45,000 newborns die annually before they reach one month of age, representing 47% of all infant deaths in Tanzania. A weak health system, low quality of care, inadequate number of skilled health workers and difficult access to health facilities are the contributing factors to the high rate of newborn and child mortality in Tanzania. A lot of these deaths could be prevented if mothers could deliver in health facilities.

Today, Doricas waits for surgery at CCBRT in Dar Es Salaam, a nonprofit hospital that provides surgical and rehabilitation services for persons with disabilities. Her pain and suffering will hopefully be over soon, and she will finally be able to regain a normal life. “When I go back home, I will tell all my friends how important it is to give birth at a hospital. You never know what can happen.” The government of Tanzania and development partners, including the One UN family, are pooling efforts and resources to

ensure that all women can and do have access to clean, medical- assisted deliveries—a basic human right for the mothers and their unborn child.

Refugees Leave, But Social Services Stay

Adela Madjoro used to visit the refugee camp near her village in Northwestern Tanzania to see doctors, because they were the only medical practitioners where she lived. But after the closure of Muyovosi camp in 2007, she worried that the health and social services her community had benefited from for decades would disappear along with the hundreds of thousands of refugees that had returned to their home countries.

The One UN Joint Programme on **Managing Transition from Humanitarian Assistance to Sustainable Development in Northwestern Tanzania** has committed its support to the Tanzanian government



Adela Madjoro used to take her child to the health clinic in Muyovosi refugee camp and is relieved that the clinic is reopening for the villagers only, now that the refugee camp has been closed.

to ensure that people like Madjoro will continue to benefit from adequate social services. Rather than abandoning the former refugee hosting communities, the UN is helping the population turn their plight into positive economic and social development through the hand-over of closed camp assets to the local authorities and support for their rehabilitation.

The Kigoma and Kagera regions in Northwestern Tanzania are among the poorest and most marginalized in the country. Despite this hardship, the local populations have hosted hundreds of thousands of refugees from the surrounding Great Lakes countries for decades. Refugee numbers peaked at almost one million in 1994 following



The former school in Muyovosi refugee camp is being converted into a secondary school for 240 students.

the Rwandan genocide, but have been declining since then. Today less than 100,000 refugees, mostly women, youths and children, remain in two last camps—one for Burundian and one for Congolese refugees.

The large-scale humanitarian operation established to respond to the massive refugee influxes had both a positive and negative impact on the area. Although these influxes had an impact on the environment

and security of these sensitive border regions, residents also enjoyed improved social services such as health care, water, sanitation and education. The local economy also benefited from an expanded market. Now that the camps are closing and refugee numbers are dwindling, the UN Delivering as One Joint Programme is streamlining the resources and knowledge of multiple UN agencies under one umbrella to support Tanzania's government in its effort to ensure a smooth transition from humanitarian assistance to the support of sustainable development.

The programme is investing a two-year budget of USD 20 million to combat negative consequences of the long-term refugee presence and enhance living conditions of the former host populations. More than 14 million tree seedlings have been planted so far to address environmental concerns. Further activities are focused on the rehabilitation of former camp structures and the continued delivery of health and education services to local communities in Kigoma and Kagera regions.

The local government authorities are fully engaged in these activities. For example, under supervision of the Kasulu District authorities, the former primary school at Muyovosi is being upgraded to a secondary school for boys and girls. When the school opens in 2010, up to 240 students will be accommodated.

With all of the numbers involved—millions of dollars, thousands of refugees, dozens of schools—it is still the people that the UN Joint Programme is focused on the most. Together with the local authorities, they are committed to retain the services and structures vital to their continued development.

Uruguay

New gates—Accessible rights, active citizens

When form-filling transactions of bureaucratic requirements become a barrier to public services or to the exercise citizens' rights, daily life is altered. The project "Support for the decentralization processes and promotion of citizen participation as part of the reform of the State" made the creation of 14 Citizen's Attention Centers possible. These centers are strategically situated in high-density populations, located far away from public services. In these centers up to 150 administrative procedures can be initiated. If information is power—as it is often said—access to these centers is allowing many people to overcome barriers and putting together public services and people's needs. Saving both time and headaches, local attention is contributing to overcoming barriers to accessing services that were once highly centralized.

With a modern and personalized management, the Citizen's Attention Centers are a model of democratic relationship with a society that is growing as a reference in all State services open to the public. Approximately 151,780 requests have been answered since the new system started in June 2008; the daily average being 1,231 cases, and requests and participation of the people is on the raise.

"Things changed a lot. I have lived in this area for over 40 years, and for a very long time. We lost a lot of time in procedures and requirements, and we wasted our precious free time or worse, our time to work. Now, I have my rights at hand, access to information is available, everything is near my home. When you have access to a structure that allows you to solve your day to day needs in the same place where you



live, you feel a part of that place and of that structure. You feel part of a real community." (Testimonies from neighbors of the Attention Center of Barros Blancos)

The project was executed by IOM and UNDP in association with UNFPA, UNIFEM and UNICEF. Total project budget: U\$ 1,960,000.

New policies—Starting to reach the world

"A new way of doing business was defined. The implementation of diverse innovative actions worked as a starting point towards the definition of a policy aiming at achieving a renowned place in the world for Uruguay. This has been identified as a need for many years." These are the words that one of the participants of the project "Strengthening the design of economic development strategies: international insertion and long term energy policies

development,” used to define the activities jointly developed between the private and public sector. Entrepreneurs and companies of the tourist sector worked to design a long term State Policy about the use of a Country Branding Strategy and the presentation of the country in international events.

The coordinator of the project, Carlos Troncoso, explains that opening the country’s doors to a global level needs an efficient worldwide country presentation, and doing so necessarily requires “a clear rationale and an articulated intervention among all institutional actors as well as a jointly defined key messages than can attract investment and tourism in the context of a positive international assessment of the country’s potential.”

Within this project, these objectives implied a high degree of preparation, participation and evaluation of the country’s image in three global forums:

1. The Trade Fair for Cruise Ship Operators in Miami,
2. The World Trade Fair of London, and
3. The American Fair at Dominican Republic, in 2009.

Big changes were achieved at these venues. “In few words, the result was to place Uruguay in the operative map of hundred of investors, tourist agents, decision makers and international authorities,” said Mr. Troncoso. The project overcame institutional barriers and lack of consensus. It sparked a new way of presenting the country to the world undoubtedly having economic, political and cultural consequences. This goal is very important if we bear in mind that Uruguay is a Middle Income Country struggling to reach higher levels of development.

“It is very difficult to sell a Uruguayan product abroad if nobody knows the country. For example, we sell meat, but the success of selling it is directly linked to what the country represents. Beyond the specific product, we have to offer confidence. The world demands confidence, security and transparency about what is being offered and about all the processes behind it; this has implications that range from health rules to the reliability of the country’s authorities. That’s why at the National Meat Institute we are working with the principles proposed by this project. The target is clear: the world has to discover a country called Uruguay.” (Excerpts from Silvana Bonsignori, of the National Meat Institute)

The project was executed by UNIDO in association with FAO, UNDP, UNEP, UNESCO and UNWTO. Total project budget: US\$ 481,500.



Viet Nam

Speaking with 'One Voice' strengthens UN advocacy and communications

The launch of the UN's regional Human Development Report (HDR) for Asia Pacific in early March 2009 in Hanoi is one recent example of how the One UN Communications Team has facilitated a stronger and more coherent UN voice on key development challenges in Viet Nam. The report focused on important issues for Viet Nam that relate to the work of multiple UN agencies: gender equality and economic power, political decision-making and legal rights. To ensure that the expertise and views of relevant agencies were included, the communications team coordinated a joint UN approach for the national press launch. An interagency panel consisting of heads of agencies from UNDP, UNFPA, UNIFEM and ILO, along with the UN Resident Coordinator and the UN Gender Advisor, shared their views and answered questions from more than 40 media representatives.

This approach strengthened the focus on the issues, with the UN providing a clear multi-dimensional perspective on gender in Viet Nam and representatives of each participating agency providing their unique insights.

"While we have seen before that we can truly advocate together around an issue rather than as individual agencies," said the Resident Coordinator, "I don't think I've seen it done so effectively nor the UN speak with such a clear and coherent voice from many critical perspectives."

The launch received extensive media coverage: it was included in prime time news reports on several



national television channels; was highlighted in national radio broadcasts; and more than 20 news and articles were published, including in the National Assembly's newspaper, the Communist Party's online edition, and on the front page of one of the most popular national newspapers. The press launch was part of a week-long series of activities supported by the UN or with UN participation to celebrate International Women's Day (March 8). Throughout the week the UN's key messages on gender—stop violence against women, value girls and boys equally, support women's economic contributions, and make women and men equal partners in decision-making—were shared via discussions, speeches, press releases, and other public information materials.

A unique reform initiative

As part of the Delivering as One process, the UN in Viet Nam took the initiative in late 2006 to create an inter-agency team of communication

specialists from UNDP, UNFPA, UNICEF, UNAIDS and UNV to better integrate and coordinate communication work across UN agencies, allowing the UN to “speak with one voice” on a range of key development challenges and policy issues.

Since it was established, the “One UN Communications Team” has brought a strong common advocacy voice and a clear UN position on issues of relevance for Viet Nam such as the economic crisis, food security, domestic violence, road safety, health insurance, and avian and human influenza (A/H1N1), among others. Better collaboration and more centralized communication capacity have strengthened the UN’s ability to influence these critical policy issues.

The team also supports the much greater internal communication needs under the One UN Initiative. The team has developed new communication tools and services, including an internal news bulletin on the One UN Initiative, and a One UN Intranet linking electronically all UN staff in Viet Nam for the first time.

Climate change

The challenge of climate change is another example of how the communications team has facilitated a stronger and more coherent UN voice. Climate change has been a priority issue for the UN in Viet Nam for years as Viet Nam is one of the most vulnerable countries in the world to the effects of climate change. In support of Viet Nam’s preparations for the Copenhagen conference on climate change, the One UN Communications Team supported an integrated

UN-wide voice on this key issue. In addition to setting up media interviews with UN experts and the Resident Coordinator, the Communications Team worked closely with the UNCT in 2009 to develop and launch a UN policy discussion paper on climate change in Viet Nam in the lead up to COP15. A comprehensive set of messages integrating the messages from all relevant UN agencies were presented to the Government and key stakeholders, positioning the UN as an expert and key partner in addressing this challenge. This followed earlier joint work such as the launch of the UNDP Human Development Report in 2007 on climate change, which involved multiple UN agencies jointly presenting the findings and recommendations. And on World Environment Day 2009, the team organized a media roundtable on climate change and its effects which helped raise the understanding and awareness of the media and the public.

Child survival

In 2008 the communications team took advantage of a series of separately planned events in Viet Nam to gather different UN organizations around one advocacy initiative to promote the child survival agenda in Viet Nam. Linking these individual initiatives as one package proved much more powerful, building on strong UN messaging on child survival issues, and linking sanitation, nutrition and health service delivery with the need to push the child survival agenda in Viet Nam. This also resulted in greater media coverage and a more coherent and comprehensive UN position. A strong UN partnership, under the leadership of the Resident Coordinator, with UNICEF

and WHO in the lead, expanded to a larger partnership group including international NGOs such as Save the Children and the Asian Development Bank.

More information about the One UN Communications Team is available on the UN Viet Nam website: www.un.org.vn

UN joint monitoring mission helps ensure quality of Viet Nam's 2009 census

More than 40 United Nations staff from five agencies in Viet Nam (UNFPA, UNDP, UNICEF, UNIFEM and UNAIDS) joined staff from the national statistics office and other partners to help monitor the 2009 Population and Housing Census in 21 provinces during 1-15 April of last year. This was the first time that UN agencies in Viet Nam jointly monitored a national census, and their work underscored the importance of quality data for both the government and the UN.



“These joint UN monitoring trips demonstrate how the UN Country Team is working together as one so as to better provide recommendations to the government on how census enumerations can be further improved. Supporting the 2009 Census is a key priority for the United Nations as it will provide the Government with the detailed information required to undertake more robust socio-economic development planning for the next ten years,” said Mr. John Hendra, the United Nations Resident Coordinator.

The UN, particularly through UNFPA, has assisted in planning of the census, design of the questionnaires, the testing, piloting, training and monitoring process, and has also supported publicity campaign of the census. Following the enumeration, the UN is now also supporting data analysis and dissemination. One purpose of the monitoring trips was to advocate for and reinforce the importance of the national census enumeration, so that more efforts and resources will be made available by government authorities at all levels, thereby helping to ensure the quality and success of the census.

Data provided by the 2009 Census is key to assessing implementation of the 2001-2010 Socio-economic Development Strategy (SEDS) and is critical to preparation of the upcoming 2011-2020 SEDS. In addition, the 2009 Census will provide information which is useful for monitoring implementation of the Millennium Development Goals.

“We firmly believe that the quality of decision making depends on the accuracy of the

information. The 2009 Census will provide us with key information and data that will help us to better support the Government in designing and implementing development programmes,” said Mr. Bruce Campbell, UNFPA Representative.

Employing 250,000 enumerators, 42,000 supervisors and some 6,000 central, provincial and district staff, the census is an expensive project. The Government is shouldering the bulk of the \$33 million cost, with the UN contributing \$3 million.

“Many people say that the census is costly, but if we compare the amount per person with other countries in the region, it is much cheaper. On the other hand, if our programmes were formulated on low quality data, it would be even more costly,” added Mr. Bruce Campbell.

Suzette Mitchell, UNIFEM Country Manager, participated in Bac Ninh and Bac Giang trips, and noted the preponderance of men as both enumerators and supervisors. “The recruitment process for the enumerators could be looked at further for the next census as the limited number of female enumerators not only means women miss this interesting opportunity to learn and gain a small income from the work, but in some cases it is more appropriate for women to be interviewing single women or women in dormitories, rather than having men coming into these women’s residences on their own.”

The 2009 Census collected data on population size, structure and distribution, migration as

well as information on education, qualifications, economic activity, disability, fertility, reasons of death to estimate the maternal mortality rate, and information on housing conditions such as floor area, number of rooms, safe water use, telephone and computer usage and type of fuel used for cooking.

Vietnamese youth better prepared to protect themselves from HIV

Pham Xuan Tung talks eagerly and takes notes for his group during a biology lesson on HIV transmission and the virus’ replication in blood cells. This new type of highly interactive class is something Tung, a student at Hoang Quoc Viet upper secondary school in Dong Trieu District, Quang Ninh Province, clearly enjoys.

The class is based on a new integrated reproductive health and HIV prevention curriculum for secondary school students that is being developed and piloted by the Ministry of Education and Training (MOET), with support from the United Nations and Save the Children in Viet Nam. Many students of Tung’s age in Quang Ninh Province, Quang Tri Province and Ho Chi Minh City are receiving the new pilot curriculum.

A comprehensive national HIV prevention curriculum

The new curriculum is not just another set of HIV prevention lessons added on to existing HIV curricula that have been introduced in Viet Nam since 1995 through different projects supported by UN agencies. Instead, the new curriculum integrates reproductive health and HIV into core lessons and extra-curricular

activities for secondary schools nationwide. It also includes special training for parents so that they can better discuss sometimes sensitive HIV and reproductive health issues with their children.

In order to achieve this unified HIV curriculum, three UN agencies—UNICEF, UNFPA and UNESCO—have been working together since 2008 as part of the Joint UN Program on HIV/AIDS under the framework of UN reform, together with Save the Children, to support the development and institutionalization of the curriculum.

“This is a unique experience with the UN I’ve never seen elsewhere,” said Ms. Lisa Sherburne, an HIV specialist with Save the Children. “We can continue with the curriculum development because of this joint effort [by the UN agencies]. It allows more resources, more cohesive actions and more powerful voice to the Viet Nam education sector,” she added. “I think the UN in other countries should have the same model.”

Trying to build upon what have been achieved in previous projects, MOET, with assistance from Save the Children, conducted a stocktaking review of all existing curricula in Viet Nam including the healthy living and life skills program for lower secondary schools supported by UNICEF, the reproductive health and HIV prevention program for upper secondary schools supported by UNFPA, and the pre-service training program for teachers on HIV supported by UNESCO.

The UN advised throughout the process by sharing its insights from previous efforts and

helping with a global literature review, which examined lessons learned and good practices in curriculum development. The two analyses have helped strengthen the pilot curriculum, ensuring the consistency and comprehensiveness of both classroom curriculum and extra-curricular activities.

This combination of local lessons and global good practices have resulted in a comprehensive curriculum where reproductive health is strongly linked to HIV prevention; a shift is made towards a learning



environment that empowers young people to think and make choices for themselves in reproductive health and HIV matters; and HIV education reaches beyond the school environment through special training for the parents of students. These changes towards more dynamic teacher-student and parent-child relationships facilitate better guidance for youth on reproductive health and on how to protect

themselves from HIV. Ultimately this approach helps improve communications modes on HIV nationwide.

These changes are all aimed at integrating HIV prevention into the next national curriculum framework and new textbooks to be developed by the Ministry and approved by the National Assembly in 2015.

However, many challenges still remain on the road to this big milestone. The ministry needs not only strong political leadership but also greater capacity for planning and coordination, sufficient resources, teachers with better capacity, and effective intra-ministry and multi-sectoral coordination to turn their wishes into reality.

A coordinated and concerted response to HIV by the education sector

Coordination is the other key area in the education sector response where support from the UN is helping make a difference.

“Our biggest challenge is how to facilitate the close collaboration among departments in the ministry and among ministries related to the education sector response to HIV,” expressed Mr. La Quy Don, vice director of MOET Department of Student Affairs, the focal department on health education (including HIV) within the ministry.

This is one reason MOET leaders are so motivated to establish an inter-departmental coordination committee on HIV, for which they have requested support from the UN.

In December 2009, an MOET delegation headed by vice minister Nguyen Vinh Hien visited Cambodia to learn from their experiences in coordinating the national education sector response to HIV via an inter-departmental committee supported by the UN.

The study visit provided the delegation with many insights, and work to establish a similar committee for MOET has gained momentum. High level discussions with participation of MOET leaders, UN Heads of Agencies and representatives of related departments within the ministry were held to determine the committee’s charter, organizational issues and tentative workplan for 2010.

“It’s very heartening to see the committee taking shape,” said vice minister Nguyen Vinh Hien. “This is the clear impact of the UN working as one with our ministry. Greater UN coherence has motivated us to strengthen our internal coordination. This committee will help us avoid duplication, address potential gaps and have a better overview of the sector response to HIV. I can see the UN is better meeting the demands of the education sector,” he added.

Looking to the future

In addition to helping strengthen institutional arrangement, the UN is also helping MOET to access resources from the Global Fund on AIDS, Tuberculosis and Malaria Prevention. Funds from the upcoming grant round will ensure enough resources are in place for an effective and sustainable education sector-wide response to HIV in Viet Nam.

This sector-wide approach includes expanding the use of the new curriculum in secondary education, addressing HIV at other levels of the education system—especially fighting stigma and discrimination in kindergartens and primary classrooms—and ensuring pre-service teacher training and mainstreaming of HIV in the next national curriculum framework.

Strong commitment and leadership have been shown by MOET, but additional support is needed to realize the vision of a sector-wide response. This will be again be a joint effort in which the UN—particularly UNICEF, UNFPA, UNESCO and UNAIDS—will work with other development partners such as Save the Children.

“We are committed to providing joint support for policy-making, enhanced coordination and implementation of several key aspects of the education sector’s response to HIV,” said Mr. Eamonn Murphy, UNAIDS Viet Nam Country Director.

The ultimate goal of this support is to ensure that all Vietnamese young people, not just Tung and his peers in Hoang Quoc Viet School, can best protect themselves from HIV.

“I have seen a positive change in the participation of students in my class. The new teaching and learning method allows room for every student to speak up, and they are much more responsive,” said Tung’s teacher Truong Thi Hoa. “I hope this learning method and the training for teachers and student’s parents will help young people willing to talk openly about HIV and related issues and thus better protect themselves.”