

**Template for delegations providing comments on the
country programme documents**
2020 First Regular Session

Delegation name: United States

Draft country programme document: Mali

Delegations are kindly invited to use this template to share their comments on any of the draft CPDs being presented during the forthcoming Board session.

In accordance with Executive Board decision 2014/1, country programme documents (CPDs) are considered and approved in one session, on a no-objection basis. All comments received by the Office of the Secretary of the Executive Board before the deadline will be made public on the Executive Board website, and considered by the respective regional office, in close consultation with the country office and the concerned Government.

<p>General comments</p>	<p>The CPD rational depict the situation of the country. The document also promotes equity in assistance to those in need.</p> <p>As reference to national policies the CREDD is the only national policy document referenced by the CPD. UNICEF could also take into account other national policies such PRODESS and national relevant health sector policy and strategy documents.</p> <p>The document mentioned escalation of violence and the spread of conflict; reduced humanitarian access as major risks to the success of the country Programme. It will be interesting to talk about how the agency will handle in this non-permissive environment.</p> <p>“Results and geographical areas of intervention will be prioritized based on the MODA, the situation analysis, national and regional consultations and the evolution of the humanitarian and security situations”. Geographic areas of intervention could be prioritized and refined later; however the expected results should be prioritized and defined now as UNICEF already has a clear idea of the funding needed for the Programme implementation.</p> <p>USAID is missing among the partners to work with. At mission and headquarter level USAID contributes in funding UNICEF’s activities, we would appreciate havingUSAID listed among key partners to work with for this CPD. In addition, pleaseadd USAID as a partner for UNICEF Outcomes 1, 2 and 3 in the column listing “Major partners” in Pages 12, 14 and 16.</p>
<p>Comments on specific aspects of the country programme document</p>	<p>(Delegations providing comments may wish to include details, such as the page number X, paragraph number X, or annex (results and resources framework).</p> <p>Para 5: “Deprivations during the early years (0–5 years), including malnutrition and diseases stemming from a lack of immunization and access to basic water and sanitation, cause cognitive, physical and social/emotional developmental delays. Despite progress in reducing infant mortality, the under-five mortality rate increased from 95 to 101 per 1,000 live births between 2012 and 2018.¹¹ In 2018, 29 per cent of children under the age of 1 year had not received their third dose of combined diphtheria/tetanus/pertussis (DTP3) vaccine, compared with 26 per cent in 2012. Access to basic water services increased from 70 to 78 per cent and access to sanitation from 32 to 39 per cent between 2012 and 2017.¹²“</p>

Comment: Draft CPD, Program Rational, paragraph 5: Would be good to add in rural areas the lack or poor infrastructures (community health centers, storages etc.), equipment, and children’s access to adequate food.

Para 6: Though the prevalence of severe acute malnutrition decreased from 5 to 2.5 per cent between 2012 and 2018, it remains above the World Health Organization (WHO) emergency threshold, with related high rates of stunting.¹³ In 2018, only 40 per cent of infants were exclusively breastfed during their first six months and only 22 per cent of children aged 6 to 23 months received the minimally required age-appropriate diversified diet. Bottlenecks include limited access to and poor quality of health services; inadequate child feeding practices; a lack of water, sanitation and hygiene (WASH) infrastructure in communities and health facilities; and limited demand for services. These are compounded by gender inequalities affecting women’s access to information, resources and services for themselves and their children.

Comment: Indicators: Breastfeeding is an issue in CPD Paragraph 6, but it is not mentioned in the priorities. Suggest adding an indicator on Exclusive Breastfeeding in the first 6 months.

General:

- Indicators: would request that the education indicators are disaggregated by sex as well as conflict/crisis-affected populations
- Indicator: Percentage of children (36–59 months) attending an early childhood education programme - the increase from baseline to target is small enough (2%) that it’s not likely going to be useful for management purposes. A 2% increase could be real or a data artifact. UNICEF could consider reframing this indicator to focus on equity for early childhood education in line with the rest of the country plan (e.g. reduction in disparities in access to early childhood program between rural/urban populations or populations affected by crisis and conflict vs those less affected)
- Indicator: pg 14, the baseline and target for ‘country shows improvement in learning outcomes’ are both ‘yes’. This will not be useful for tracking progress to have both the baseline and the target be identical. GAML recently validated [proficiency descriptors](#) for grades 2-6, and UNICEF could consider reframing the baseline and target as percentages of the population moving between proficiency levels.
- Monitoring and evaluation pg 10: given the focus on resilience, one monitoring approach that may be useful to consider using is the Recurrent Monitoring Survey, which are triggered in response to shocks and stresses, and produce data that help understand how other critical outputs/outcomes are reacting to shocks/stresses. Technical guidance available [here](#).
- Costed evaluation plan: pg 2, very pleased to see a planned evaluation of humanitarian-development coherence that applies to all sectors.
- Evaluation Plan: Diarrhoea and pneumonia represent major causes of morbidity and mortality in children and are also linked to immunization programme; it will be interesting to have those two diseases also integrated within the evaluation plan. As the country challenges to produce quality data about the two diseases, this evaluation could be an opportunity to have comprehensive information about the highest burden diseases in childhood including pneumonia and diarrhoea.
- It was said that this CPD will be focused on four key results for children: immunization, the prevention of stunting, improved learning

	<p>outcomes and ending child marriage. By including diarrhea and pneumonia vaccines in EPI, the country program has already started the process. This CPD could be an opportunity to reach an advanced level in this integration; UNICEF could consider integration of pneumonia and diarrhea with immunization in their evaluation plan.</p> <ul style="list-style-type: none">● The nutrition approach seems centered on exclusive breastfeeding and food diversification. Micro nutrients deficiencies and behaviors as key driver of malnutrition when addressed could help to improve nutritional outcomes. UNICEF should consider integration of micronutrient deficiency prevention and behavior change in their global approach to advance nutrition in Mali.● For education services overall, it is important to assure that all learners across the targeted age groups are receiving access to <u>quality</u> education, and not simply access to any formal education. To support the aims of paragraph 30, consider using the Accelerated Education Working Group 10 principles for effective practice.● As much as possible, it would be helpful to identify geographic implementation areas for the technical interventions in health and education. Paragraph 30 indicates a focus on “the most disadvantaged, deprived and hard-to-reach.” This may imply substantial work in the north of Mali. If this assumption is accurate, fine. If the assumption is NOT accurate, it should be clarified within the document.● On page 14, please consider adding USAID as a major partner for all of UNICEF outcome 2.
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