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Draft country programme document**

Armenia

Summary

The draft country programme document (CPD) for Armenia is presented to the Executive Board for discussion and approval at the present session, on a no-objection basis. The draft CPD includes a proposed aggregate indicative budget of \$3,850,000 from regular resources, subject to the availability of funds, and \$11,018,000 in other resources, subject to the availability of specific-purpose contributions, for the period of 1 October 2021 to 31 December 2025.

* E/ICEF/2021/23.

** In accordance with Executive Board decision 2014/1, country programme documents (CPDs) are considered and approved in one session, on a no-objection basis. This draft CPD, and a costed evaluation plan, will be presented to the Executive Board for review from 16 June to 6 July 2021. The final CPD will be posted to the Executive Board web page in English six weeks in advance of the 2021 second regular session and in the other designated languages four weeks in advance.

Programme rationale

1. In 2018, Armenia reduced its poverty rate to 23.5 per cent, the lowest in a decade, and reached upper-middle-income status. However, the coronavirus disease 2019 (COVID-19) pandemic reversed gains made in human development, inducing an 8 per cent drop in the country's gross domestic product (GDP) in 2020.¹ The Government is amplifying the democratic transformation launched by the peaceful Velvet Revolution in 2018 and accelerating reforms aimed at improving the well-being of the country's nearly 3 million people, including approximately 700,000 children.

2. The recent large-scale military hostilities in the Nagorno-Karabakh conflict area caused a massive displacement from Nagorno-Karabakh to Armenia, resulting in a humanitarian disaster for tens of thousands of women and children. Among an estimated 90,000 displaced people, 88 per cent were women and children who were housed in host communities and collective shelters. A significant number of the arrivals from Nagorno-Karabakh may not be able to return safely with the ceasefire in place, particularly residents of territories currently under control of Azerbaijan. Tens of thousands of them lost their homes and productive assets due to large-scale military hostilities. The humanitarian needs and vulnerability of children and their caregivers will be prioritized based on the humanitarian principles of humanity, neutrality, impartiality and independence.

3. Of note, the negotiated, comprehensive and sustainable settlement of all remaining core substantive issues of the Nagorno-Karabakh conflict in line with the basic principles and elements within the framework of the internationally agreed format of the Organization for Security and Cooperation in Europe Minsk Group Co-Chairs continues to shape the humanitarian-development-peace nexus for the region, including for Armenia.

4. In Armenia, 51.7 per cent of children live below the national poverty line,² and 61.6 per cent (75 per cent of children in rural areas and 52 per cent in urban areas) are deprived in two or more dimensions of multidimensional poverty.³ Yet family benefits reach only 13 per cent of the population.⁴ Ongoing social protection reforms require further action to eliminate inclusion and exclusion errors, improve the adequacy of benefit size and address insufficient public financing for social sectors. The urgency of strengthening the social protection system and social service workforce while making other sectors more shock-responsive is underscored by the COVID-19 pandemic and recent military hostilities in the Nagorno-Karabakh conflict area.

5. In the aftermath of the large-scale military hostilities in the Nagorno-Karabakh conflict area, the vulnerabilities of children in displaced families and those in border communities of Armenia have significantly increased. The needs of such children and families will require additional social protection measures in locations affected by the Nagorno-Karabakh conflict, as well as the Tavush and Syunik regions. The social protection, integration and physical rehabilitation needs of children and adolescents in Armenia affected by the military hostilities require special multisectoral

¹ World Bank, *Global Economic Prospects*, Washington, D.C., January 2021.

² Statistical Committee of the Republic of Armenia (ArmStat) and World Bank, "Social snapshot and poverty in Armenia: statistical and analytical report" (2020).

³ ArmStat and World Bank, "Social snapshot and poverty in Armenia: statistical and analytical report" (2018).

⁴ ArmStat Armenia and World Bank, "Social snapshot and poverty in Armenia: statistical and analytical report" (2020).

interventions, including medical care, access to quality education, psychosocial support and vocational training. In 2019, 1.5 per cent and 2.0 per cent of GDP was allocated to health and education, respectively – five times lower than the average for countries in the Europe and Central Asia region for health and 2.5 times lower for education. At 6.9 per cent of GDP, social protection expenditure is also below that of other countries in the region.

6. Gender discrimination in Armenia manifests in gender-biased sex selection⁵ in favour of boys; domestic violence affecting one quarter to two thirds of women; a gender pay gap of more than 30 per cent; the heavy burden of unpaid care work; and the strong influence of patriarchal social expectations and behaviour models that disempower girls and women. Women are significantly underrepresented in decision-making and leadership positions in private and public sectors.

7. Global challenges, such as climate change, environmental degradation, pollution and access to clean, affordable energy impact children's well-being, their development and access to quality essential services. The country is prone to hazards, with natural disasters posing a particular threat to life and livelihoods.

8. Inadequate data regarding the adolescent age group impedes the development of targeted social services and civic engagement opportunities. A high incidence of injuries is due to the lack of child and adolescent-friendly infrastructure and spaces, and accidents contribute to more than 45 per cent of deaths among children aged 1 to 18 years. Adolescent mental health is a growing concern: 21 per cent of children aged 11 to 15 years and 32 per cent of those aged 17 years reportedly have signs of depression while 6 per cent of children aged 11 to 15 years and 8 per cent of those aged 17 years report thoughts of suicide.⁶ With 94 per cent internet penetration, cyberbullying and online abuse pose significant risks. Unemployment among youth aged 15 to 24 years is 33.6 per cent compared with 19 per cent for the rest of the population.

9. Infant mortality rates have halved over the last two decades to 6.1 deaths per 1,000 live births in 2019.⁷ Reduction in neonatal deaths (which accounts for 75 per cent of infant mortality) and post-neonatal mortality has stalled. The number of stillbirths (18.3 per 1,000 live births in 2018 compared with 15.3 in 2008) and the proportion of newborns with low birthweight (8.4 per cent in 2018 compared with 7.4 per cent in 2008) are increasing. Staff capacity and infrastructure (especially in the regions), along with underfunding of the health system, constrain the delivery of quality neonatal and paediatric services. Gaps in the knowledge and skills of parents/caregivers also undermine the continuum of nurturing care for newborns. Early identification of child disability and/or developmental delays is a problem due to lack of protocols and staff qualifications.

10. Less than 45 per cent of children in Armenia are exclusively breastfed in the first six months of their lives.⁸ The double burden of malnutrition is apparent in Armenia: approximately 9 per cent of children aged 0 to 5 years are stunted and 14 per cent are obese.⁹ School nutrition is a concern due to inadequate school policies

⁵ The sex ratio at birth in Armenia is 110/100 (boys/girls) (Source: Statistical Committee of the Republic of Armenia, 2019). According to the World Health Organization (WHO), a natural sex ratio is typically considered around 105/100.

⁶ Arabkir Medical Centre – Institute of Child and Adolescent Health, “Health behaviour in school-aged children of Armenia 2017/2018: national study results” (2019).

⁷ ArmStat, *The Demographic Handbook of Armenia* (2020).

⁸ Armenia Demographic and Health Survey (ADHS), 2015–2016.

⁹ Ibid.

and food marketing regulations.¹⁰ Based on self-reported data, 13 per cent of children aged 11 to 15 years are overweight, 2 per cent are obese and 16 per cent are underweight.¹¹

11. The national immunization programme is effective, reaching more than 90 per cent of children of appropriate age with vaccination.¹² However, growing “anti-vaccination” sentiment has resulted in a slight decrease in coverage and presents a risk in light of the COVID-19 pandemic.

12. Preschool education is not mandatory and is organized in public and private facilities. More than half of children aged 3 to 5 years attend preschool, less in rural areas than in urban areas.¹³ A shortage of preschools impedes women’s labour participation. Inclusive preschool education is limited to a few kindergartens in the capital.

13. Since 2017, 12 years of fee-free schooling has been compulsory in Armenia. Despite considerable investment in education reforms, 35 per cent of children do not achieve minimum proficiency at the end of primary school.¹⁴ Quality education remains a challenge; the education curriculum and pedagogy need revision to match the twenty-first century standards for foundational and transferable skills.

14. The COVID-19 pandemic highlighted inequalities in the education system; notably poor water, sanitation and hygiene (WASH) and lack of access to technology and skills to facilitate distance learning. Approximately 77 per cent of observed schools have inadequate WASH facilities, 52 per cent of rural schools lack basic WASH facilities and 35 per cent have restrooms outside the school building.¹⁵ Twenty-eight per cent of schools in remote, rural and border areas are non-compliant with seismic-resistant standards.

15. The water, sanitation and hygiene conditions of conflict-affected communities in Armenia have been severely affected by the recent military hostilities in the Nagorno-Karabakh conflict area. Access to clean water and sanitation, including improved WASH facilities in schools and health centres, will be prioritized according to needs and available resources.

16. Recent deinstitutionalization and childcare reforms have reduced the number of children in state-run residential care and educational institutions by 70 per cent, to approximately 1,300 children in 2020. Most children were integrated into mainstream schools; however, capacity gaps, underfunding and lack of accessible community-based services for children with disabilities push parental preferences to “traditional” institutions, in pursuit of more specialized services for children with disabilities.¹⁶

17. Continuous efforts towards improving justice for children have successfully reduced the number of juveniles in detention. However, diversion, mediation and probation services and child-friendly judicial processes need further strengthening

¹⁰ Zvart Avedisian Onanian Centre for Health Services Research and Development, American University of Armenia, “Assessment of nutrition practices of primary school-aged children in schools of Armenia” (2018).

¹¹ Arabkir Joint Medical Centre – Institute of Child and Adolescent Health, “Health behaviour in school-aged children of Armenia 2017/2018”. (2019)

¹² WHO, Armenia: “WHO and UNICEF estimates of immunization coverage” (2020).

¹³ ArmStat, Integrated living conditions survey, (2019).

¹⁴ World Bank, “[Armenia: Learning Poverty Brief](#)” (2019)

¹⁵ Human Rights Defender of Armenia, “Ad hoc public report on ensuring the right of access to water and sanitation in preschools and schools” (2019).

¹⁶ Human Rights Watch, “When will I get to go home?”, video, 22 February 2017.

including the compliance of criminal procedure legislation with the United Nations standards for child victims and witnesses.

18. Nearly 69 per cent of parents admit to using some form of violence to discipline their children.¹⁷ Twenty per cent of children self-report peer-to-peer violence.¹⁸ Underlying causes for such violence vary, from social norms justifying corporal punishment to lack of knowledge and capacities to effectively promote positive discipline in homes and educational institutions. Armenia joined the Global Partnership to End Violence Against Children in 2018 and has included actions towards ending violence against children in the National Strategy for Human Rights Protection (2020–2022) and action plan. The protection of children displaced and orphaned in the aftermath of the military hostilities in the Nagorno-Karabakh conflict area will be prioritized.

19. The Council on Sustainable Development Goals of the Republic of Armenia was established in 2015. Membership broadened in 2020 to include civil society organizations. To date, the Government has submitted two Voluntary National Reviews (in 2018 and 2020) on progress towards the Goals.

20. The evaluation of the United Nations Development Assistance Framework for Armenia, 2016–2020 recommended strengthening the formulation of results, monitoring and reporting to better measure impact. This is addressed in the United Nations Sustainable Development Cooperation Framework (UNSDCF), 2021–2025. Based on a UNICEF evaluation of childcare reform in Armenia, the country programme will promote a comprehensive approach to the ongoing reorganization of residential care facilities, the establishment of specialized child and family support services at the local level and appropriate reforms within the mainstream education system.

Programme priorities and partnerships

21. The Government and UNICEF share an overall vision of change: by 2025, all children in Armenia increasingly benefit from equitable enjoyment of their rights to survive, thrive, learn, be protected and participate – based on enhanced policies, services, resources and practices of duty-bearers, and in line with the country’s commitments to the Convention on the Rights of the Child and the Sustainable Development Goals.

22. Through strengthened partnerships, forming an integral part of the UNSDCF, 2021–2025 and aligned with Transformation Strategy of Armenia 2050, UNICEF, in partnership with the United Nations country team and the Resident Coordinator, will engage Parliament, Government, academic and research institutions, bilateral and multilateral development partners, civil society organizations and the private sector in the implementation of the country programme.

23. UNICEF will scale up its humanitarian assistance as part of the humanitarian community’s response, focusing on the protection and health of children as well as on ensuring access of the most vulnerable families and communities to WASH in areas affected by the Nagorno-Karabakh conflict where they can be reached directly or through indirect humanitarian response mechanisms. Specific rehabilitation, integration and vocational training initiatives will be designed for young people who were affected mentally and psychologically, wounded or disabled during the military hostilities in the Nagorno-Karabakh conflict area.

¹⁷ ADHS 2015–2016.

¹⁸ Arabkir Joint Medical Centre – Institute of Child and Adolescent Health, “Health behaviour in school-aged children of Armenia 2017/2018” (2019)

Social policy

24. The long-term vision of change is that, by 2025, children and families benefit from a progressively universal, inclusive and shock-responsive social protection system across the lifecycle, underpinned by equity-focused data and financing. This programme component will directly contribute to outcomes 2 and 7 of the UNSDCF and focus on: (a) strengthening national and local capacities for planning and implementing social protection policies and programmes; (b) fostering public and private investments and partnerships for children; (c) enhancing data systems and relevant capacities to inform equity-focused policies and monitor progress towards the Sustainable Development Goals; and (d) promoting gender equality in policies and practices.

25. UNICEF will contribute analytical, advocacy, technical and coordination resources to build an integrated, inclusive, child-sensitive and shock-responsive social protection system in Armenia. Defined and resourced in national policies and local programmes, cash and service-based components are expected to be mutually reinforcing. The aim is a social service workforce of appropriate profile and qualification to ensure continuous contact with individuals or families vulnerable to poverty and other deprivations. The programme prioritizes addressing both monetary and multidimensional child poverty. Underpinning this are cross-sectoral cooperation, strong administrative systems and adequate financing.

26. UNICEF will engage with the Government for planning and measurement of child-focused expenditures to identify needs and gaps and monitor spending in the social sectors. UNICEF will enhance local capacities for child-sensitive planning and budgeting, with specific attention to resilience and risk management. UNICEF will systematically nurture partnerships with individuals, foundations, the diaspora and the private sector and encourage businesses to consider child-related areas as an investment opportunity. Support to shaping the social responsibility agenda of businesses will align with the Children's Rights and Business Principles. Programmes will empower girls and boys – and their caregivers and families – to voice their opinions and create a demand for child-friendly action and policies.

27. In cooperation with other United Nations agencies, UNICEF will continue to support the Statistical Committee of the Republic of Armenia, focusing on capturing social inequities through surveys and administrative data. Considering the discontinuation of the Demographic and Health Survey in Armenia, UNICEF advocacy and technical assistance for implementing the multiple indicator cluster survey (MICS) will generate disaggregated data on children, women and families and will allow identification of deprivations. UNICEF will extend technical assistance to improve administrative data systems and evidence-policy linkages.

28. Together with partners, UNICEF aims to ensure that the Government's social protection reforms are explicitly gender-sensitive and family-friendly and put girls and boys, especially the most marginalized, at the centre. UNICEF will proactively identify and promote positive gender socialization practices, gender equality and non-discrimination in policies and services thus contributing to greater equality between boys and girls.

Health and nutrition

29. The long-term vision of change is that, by 2025, children and adolescents benefit from a universal, affordable, accessible and quality health system and adopt healthy lifestyle practices. This programme component directly contributes to outcome 2 of the UNSDCF and focuses on: (a) strengthening national capacities for equitable, preventive, promotive and curative health-care services; (b) addressing the double burden of malnutrition; and (c) enhancing the capacity of adolescents, parents, health

professionals and influencers to promote healthy lifestyles and adolescent psychosocial well-being.

30. To strengthen national and local capacities for equitable, quality health-care services, UNICEF will support the Ministry of Health to revise and develop policies, clinical standards and protocols. UNICEF will enhance the knowledge and skills of health-care providers, focusing on quality assurance and performance monitoring in line with the provisions of the Health System Strengthening National Strategy (2020–2025), the Every Newborn Action Plan and the country’s Child Injury and Trauma Prevention Strategy (2018–2023). Improving the quality of maternal, neonatal and paediatric health services will be central, with universal progressive home-visiting complementing facility-based care. UNICEF will continue supporting the national immunization programme via procurement services and communication interventions, targeting vaccine hesitancy among parents and professionals. UNICEF will foster intersectoral mechanisms for early identification of disability and developmental delays; it will strengthen the information management system, policy framework and intersectoral mechanisms for prevention of child injuries and traumas.

31. UNICEF will address the double burden of malnutrition through policy development and enforcement mechanisms to promote sound nutrition and diets for infants, young children and school-age children. UNICEF will provide legislative advice to promote breastfeeding and ensure marketing and labelling standards for healthy diets and lifestyles. UNICEF will promote cross-sectoral policies and action plans alongside communication interventions; and improve quality of counselling by health-care providers.

32. Relying on modern communication, counselling and education techniques, the programme will promote healthy lifestyles to ensure nurturing, safe and supportive family and community environments for children and adolescents, focusing on childcare, immunization, early childhood development, mental health and psychosocial well-being.

33. Capitalizing on the advancements in multisectoral data collection and reporting systems, UNICEF will encourage harmonization of data flows under the Government’s e-health initiative. All planned interventions will be adapted as necessary to the context of the COVID-19 pandemic.

Education and inclusion for all children

34. The long-term vision of change is that, by 2025, children and adolescents exercise their talents and skills and benefit from age-appropriate, lifelong learning and inclusive and quality education in an enabling and safe environment. This programme component will directly contribute to outcomes 3, 4, 5 and 8 of the UNSDCF and focus on: (a) strengthening capacities in education policy planning, financing and monitoring; (b) increasing inclusion of children with disabilities and other vulnerable groups, including those from border areas, into mainstream education system and society; (c) expanding quality and inclusive preschool education; (d) integrating resilience, environmental protection and climate change into laws, policies and budgets; and (e) promoting twenty-first century skills and lifelong learning approaches.

35. UNICEF will intensify support to education policy planning, budgeting, curriculum update, implementation and monitoring, while stressing the value of evidence and robust data to identify inequities. Strengthened professional capacities in gender-sensitive, disability-inclusive and climate change-responsive planning are expected to result in improved education policies and classroom practices. UNICEF will assist in modernizing the system of teachers’ pre- and in-service training, deployment, retention and incentives. The Education Management Information

System will support tracking and reintegration of out-of-school children, especially children with disabilities and adolescents of high-school age. A comprehensive digital learning platform, identified as a necessity during the COVID-19 pandemic, will contribute to overcoming the existing “digital divide”.

36. Within childcare reform, UNICEF will support coordinated efforts of education, health and social protection systems by developing professional capacities for a holistic system at the community level. UNICEF will promote inclusion of children with disabilities in mainstream kindergartens and schools, while special schools continue transforming into teaching and care resource centres.

37. Guided by the Law on Preschool Education, UNICEF will support the Ministry of Education, Science, Culture and Sport and the Ministry of Territorial Administration and Infrastructure and other stakeholders to expand opportunities for all children aged 0 to 6 years to benefit from early childhood education (ECE), including a one-year pre-primary preparation. Tested cost-efficient ECE models will be scaled up, accompanied by further exploration of affordable budgeting scenarios. Plans include promoting childcare facilities and family-friendly arrangements in the workplace to facilitate women’s participation in the workforce; revising and enhancing standards, tools and professional training programmes; and supporting communication interventions to encourage parents to demand and utilize quality ECE and childcare services.

38. UNICEF will assist the communities in designing legislative, policy and programmatic frameworks to adapt to climate change, combat environmental degradation and prevent harmful effects on children’s health, focusing on border communities. Addressing country-specific evidence gaps will create momentum for consolidated action by the Government, including in cross-border and global policy debates and forums. Environmental projects offer space for civic engagement of adolescents to advocate for their future and right to live in a safe environment; schools will serve as platforms for consolidated action.

39. By facilitating twenty-first century skills, emphasizing analytical and critical thinking and use of technologies and innovations, adolescents will develop leadership and communication capacities, participate in civic engagement and social entrepreneurship, and learn about future professional opportunities. UNICEF will promote participation of adolescent girls and boys, including those with disabilities and other vulnerabilities.

Child rights system and child protection

40. The long-term vision of change is that, by 2025, the realization of child rights in Armenia is safeguarded by a strong child rights architecture, including a continuum of child protection services, justice for children and improved knowledge and skills of parents/caregivers. This programme component contributes to outcomes 2, 6 and 8 of the UNSDCF and focuses on: (a) strengthening child rights monitoring and coordination mechanisms; (b) enhancing systems and capacities to ensure comprehensive protection and justice for children; and (c) improving knowledge and skills of parents/caregivers and influencers to secure children’s well-being and freedom from violence in the family.

41. UNICEF will strengthen the country’s child rights architecture by promoting a child rights monitoring system with clearly defined roles and accountabilities. This includes stronger capacities for equity-focused data analysis and dissemination; effective mechanisms to infuse evidence into decision-making processes; results-based programming and budgeting; UNICEF will also ensure the voices of children, adolescents, families and communities are heard by decision-makers through online and offline platforms and initiatives. The initiatives will build on the partnership with

Human Rights Defender of Armenia and align with the child rights chapter in the National Strategy for Human Rights Protection (2020–2022).

42. Further strengthening of child protection and justice systems in Armenia is imperative to avoid abandonment of children born with disabilities and separation of children from families, and to ensure prevention and response to violence against children and access to justice for all children. UNICEF will support the development of policies to clarify accountabilities of key actors and define mechanisms for collaboration between the social welfare, justice, education and health sectors to promote an integrated and coordinated social service. UNICEF will continue advocating for reallocation of resources from residential to alternative family-based care, while assisting partners to define optimal intersectoral mechanisms.

43. UNICEF will support social service workforce strengthening and develop capacities for delivering specialized support services (medical, psychological, rehabilitative, referral, counselling and other types of services) to children and families in need. The priority will be extending services at the community level with a special focus on emergency situations. To complement the child-specific provisions in the draft Criminal Code and draft Criminal Procedure Code, UNICEF will support the development of policies to better protect child offenders, victims and witnesses.

44. UNICEF will strengthen the knowledge and skills of parents and caregivers to provide an environment free from violence and abuse. This is conducive to comprehensive development of children in family environments. The membership of Armenia in the Global Partnership to End Violence Against Children signifies a strong political commitment that UNICEF will assist in converting into results, and support professional capacity-building, positive parenting education and communication initiatives with a goal of eliminating adverse childhood experiences, including violence against children, in both real and virtual spaces. UNICEF will promote direct access for children to share their concerns or complaints with the office of the Human Rights Defender of Armenia. Adolescent participation and empowerment, as well as development of targeted policies and services will support the psychosocial well-being of children and adolescents.

Summary budget table

<i>Programme component</i>	<i>(In thousands of United States dollars)</i>		
	<i>Regular resources</i>	<i>Other resources</i>	<i>Total</i>
Social policy	1 062	1 969	3 031
Health and nutrition	608	2 009	2 617
Education and inclusion for all children	608	3 307	3 915
Child rights system and child protection	608	1 919	2 527
Programme effectiveness	964	1 814	2 778
Total	3 850	11 018	14 868

Programme and risk management

45. This country programme outlines UNICEF contributions to national results and serves as the primary unit of accountability to the Executive Board for results alignment and resources assigned to the programme at the country level. Accountabilities of managers at the country, regional and headquarters levels with

respect to country programmes are prescribed in the organization's programme and operations policies and procedures. UNICEF will execute the programme under the overall coordination of the Ministry of Foreign Affairs. Joint UNSDCF and UNICEF-specific programme governance mechanisms and processes will assess the progress of interventions, identify possible risks and define appropriate mitigation measures. The programme will mainstream the humanitarian response to the needs of people displaced by the recent large-scale military hostilities in the Nagorno-Karabakh conflict area and will prioritize the needs of conflict-affected communities.

46. Armenia is a mountainous country, prone to seismic risks, droughts and floods. Risk reduction and preparedness are guided by the Disaster Risk Management National Strategy 2017–2030. UNICEF is part of the United Nations Disaster Management Team, the mechanism for emergency preparedness and response coordination in cooperation with the Ministry of Emergency Situations.

47. The COVID-19 pandemic aggravates other major risks to successful implementation of the country programme, such as: (a) limited financial resources to support social sector reforms and take innovations to scale; (b) insufficient policy planning and coordination capacity; (c) a deficit of professional cadres for service delivery, especially in remote areas; and (d) fragmentation of efforts by development partners, which undermines the quality and sustainability of achieved results.

48. To mitigate the risks, UNICEF will: (a) advocate and provide technical assistance to increase the effectiveness and efficiency of expenditure for children and women, while actively leveraging domestic, regional and global resources; (b) explore innovative ways to build national capacities in policy design and intersectoral coordination; (c) prioritize support to long-term planning for human resources and respond to accessibility and equity gaps in service provision; and (d) use the convening power of the United Nations to promote greater coherence of action by stakeholders, based on robust data, results-based plans and sound theories of change.

Monitoring and evaluation

49. Alongside the United Nations country team and Resident Coordinator, UNICEF will advocate for and support incremental nationalization by Armenia of the Sustainable Development Goals. UNICEF will use the Government's upcoming reporting on implementation of the Convention on the Rights of the Child as a strategic moment to rally stakeholders for the fulfilment of rights of the most marginalized children.

50. The country programme will be operationalized through the preparation of rolling multi-year workplans and budgets for the UNSDCF and UNICEF country programme collaborative outputs. In conjunction with UNSDCF annual reviews with the Government, UNICEF will monitor progress to verify achievements, analyse implementation and constraints and identify actions to improve programme effectiveness and strategic relevance. Joint monitoring visits with implementing and government partners will contribute to assessing progress on results, using UNICEF standard performance indicators wherever relevant. Plans will be adjusted based on review findings, evaluations and changes in the situation of children and government priorities and will be reported on annually.

51. UNICEF will conduct evaluations in the areas of adolescent participation and child protection, along with a comprehensive country programme evaluation to document lessons learned and inform national policies and UNICEF programming. Joint evaluations or extensive involvement of partners will ensure national ownership and use of evidence. Analysis of the effects of the COVID-19 pandemic and other

crises on children and their families will be included in the scope of evaluations to inform adaptive programme management decisions.

Annex

Results and resources framework

Armenia – UNICEF country programme of cooperation, 1 July 2021–31 December 2025

Convention on the Rights of the Child: articles 2–6, 9, 12–21, 23–37, 40–42

National priorities: Transformation Strategy of Armenia 2050, Programme of the Government of the Republic of Armenia (2019–2023)

Sustainable Development Goals: 1–17

Draft United Nations Sustainable Development Cooperation Framework outcomes involving UNICEF:

1. People benefit from a universal, affordable, accessible and quality health system, while adopting healthy lifestyle practices.
2. People benefit from a progressively universal, inclusive and shock-responsive social protection system across the life cycle.
3. People exercise their talents and skills, benefitting from age-appropriate, life-long learning and inclusive and quality education in an enabling and safe environment.

UNICEF will also contribute to UNSDCF outcomes 5 (ecosystems, climate change and resilience), 6 (governance and human rights), 7 (policies, data and financing aligned with Sustainable Development Goals) and 8 (gender equality).

Related UNICEF Strategic Plan Goal Areas: 1–5

<i>UNICEF outcomes</i>	<i>Key progress indicators, baselines (B) and targets (T)</i>	<i>Means of verification</i>	<i>Indicative country programme outputs</i>	<i>Major partners, partnership frameworks</i>	<i>Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)</i>		
					<i>RR</i>	<i>OR</i>	<i>Total</i>
1. Children and families benefit from a progressively universal, inclusive and shock-responsive social protection system across the lifecycle, underpinned by equity-focused data and financing.	Number of children living in poverty according to (a) national monetary poverty lines and (b) national multidimensional poverty lines B: (a) 246,510 (2019) (b) 182,333 (2018) T: (a) 230,000 (b) 175,000	Integrated Living Conditions Survey, multiple indicator cluster survey (MICS)	1.1 National and local authorities are equipped with evidence and capacities to design, coordinate and implement integrated, inclusive and shock-responsive social protection policies and programmes. 1.2 Capacities of key stakeholders at national and	Ministries of Labour and Social Affairs (MLSA); Education, Science, Culture and Sport (MESCS); Health (MH); Territorial Administration	1 062	1 969	3 031

UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
					RR	OR	Total
	<p>Proportion of total government spending on essential services (education, health and social protection)</p> <p>B: 8.4% education; 5.5% health; 28.8% social protection</p> <p>T: 9.7% education; 6.1% health; 28.8% social protection</p> <p>[UNSDCF outcomes 1–3 indicators, Sustainable Development Goal 1.a.2]</p>	Government reports	<p>local levels are strengthened to routinely measure, mobilize and influence public and private investments in and partnerships for resilient and sustainable results for families and children.</p> <p>1.3 National capacities and data systems are enhanced to systematically collect, analyse and use disaggregated equity-focused data for policy development, national planning and reporting on the situation of children and progress on Sustainable Development Goals.</p> <p>1.4 Positive gender socialization processes and practices are advanced for greater equality between boys and girls and are reinforced by gender equality and family-friendly policies.</p>	<p>and Infrastructure (MTAI)</p> <p>Statistical Committee of the Republic of Armenia (ArmStat), subnational authorities</p> <p>Bilateral and multilateral agencies, academia, civil society organizations (CSOs)</p>			
2. Children and adolescents benefit from a universal, affordable, accessible and quality health system, while adopting healthy lifestyle practices.	<p>Neonatal mortality rate</p> <p>B: 5% (2018)</p> <p>T: 4%</p> <p>[UNSDCF outcome 1 indicator, Sustainable Development Goal 3.2.2]</p>	ArmStat reports, Admin	<p>2.1 National and local capacities are strengthened for equitable provision of preventive, promotive and curative health-care services for children, especially for the most disadvantaged.</p> <p>2.2 National and local capacities are enhanced to provide more coordinated, intersectoral, proactive and responsive services to address the double burden of malnutrition across the lifecycle, focusing on disparity reduction.</p>	<p>MH; MTAI; MLSA</p> <p>ArmStat, subnational authorities, Human Rights Defender of Armenia (HRDO)</p> <p>Bilateral and multilateral agencies, academia, CSOs</p>	608	2 009	2 617
	<p>Percentage of children under 5 years of age who are stunted</p> <p>B: 9% (2015)</p> <p>T: 7%</p> <p>[Sustainable Development Goal 2.2.1]</p>	Child Nutrition Surveillance System, DHS, MICS					

UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
					RR	OR	Total
	<p>Percentage of children under 5 years of age who are overweight</p> <p>B: 14% (2015) T: 11%</p> <p>[Part of Sustainable Development Goal 2.2.2]</p>	Administrative data, DHS, MICS	2.3 Adolescents, parents, health professionals and other influencers have knowledge, tools and institutional support to promote healthy lifestyles and adolescent psychological well-being.				
3. Children and adolescents exercise their talents and skills, benefitting from age-appropriate, lifelong learning and inclusive and quality education, in an enabling and safe environment.	<p>Number of lower-secondary-school age children out of school disaggregated by gender, geographical location and income quintiles</p> <p>B: 11,800 (2016) T: 6,000</p>	Education Management Information System (EMIS)	3.1 National systems and capacities of officials and other stakeholders are strengthened to develop evidence-based policies, plans and budgets, ensuring inclusive and equitable education outcomes for all children.	<p>MESCS; MLSA; MH; MTAI; Ministry of Environment; Ministry of Emergency Situations</p> <p>Bilateral and multilateral agencies, academia, professional associations, CSOs</p>	608	3 307	3 915
	<p>Gross enrolment ratio in pre-primary education disaggregated by gender</p> <p>B: 38% (F: 39.7% M: 36.6%) (2018) T: 60% (F: 60% M: 60%)</p> <p>[UNSDCF output 3.1 indicator, proxy Sustainable Development Goal 4.2]</p>	UIS, EMIS	<p>3.2 Affordable and quality cross-sectoral social policies, schemes and services for children with disabilities and their families are strengthened and support their development, a quality education and transition to independent living.</p> <p>3.3 Policies, financing and infrastructure are improved, and capacities are strengthened ensuring all young children, including from border areas, have access to quality and inclusive preschool education.</p>				
	<p>Number of adolescent girls and boys who participate in or lead civic engagement initiatives through UNICEF-supported programmes</p> <p>B: 2,000 adolescents (F: 1,200; M: 800) (2020) T: 20,000 (F: 12,000; M: 8,000)</p>	UNICEF reports	<p>3.4 Resilience, environmental protection and climate change are integrated into laws, policies, plans and budgets.</p>				

UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
					RR	OR	Total
			3.5 Adolescents have improved twenty-first century skills enabling them to participate in decision-making, become social entrepreneurs and support their transition to employment.				
4. Child rights realization is safeguarded by a strong child rights architecture, including a continuum of child protection services, justice for children and improved knowledge and skills of parents/caregivers.	Level of establishment of permanent national child rights coordinating mechanism B: Initiating (Score 2) (2020) T: Established (Score 3)	National report, Committee on the Rights of the Child concluding observations	4.1 Child rights coordination system is strengthened with clear roles, responsibilities and improved capacities for child rights monitoring ensuring the best interest of the child.	MLSA; Ministry of Justice; MTAI; MESCS; MH HRDO, judiciary, Investigative Committee, police Bilateral and multilateral agencies, academia, professional associations, CSOs	608	1 919	2 527
	Children aged 0 to 17 years living in residential care B: 1,269 (2018) T: 800	MLSA, MESCS, ArmStat	4.2 The child protection and justice systems are strengthened with clear roles, responsibilities and improved capacities, including for prevention of unnecessary separation of children from families and violence against children.				
	Proportion of children aged 1 to 17 years who experienced any physical punishment and/or psychological aggression by caregivers in the past month, by sex B: 68.9% (M: 70.8%; F: 68.9%) (2015) T: 50% <i>[Sustainable Development Goal 16.2.1]</i>	DHS, MICS	4.3 Parents/caregivers and influencers have improved knowledge and skills to ensure children's well-being in the family and prevent violence against children.				
5. Enhanced programme effectiveness					964	1 814	2 778
Total resources					3 850	11 018	14 868