



**One UN Programme Bosnia and Herzegovina 2015-2019
Joint Work Plan for the Years 2015-2016**

Social Inclusion: Education, Social Protection, Child Protection and Health (Pillar 3)

1. Cover page

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| Country: | Bosnia and Herzegovina |
| Corresponding One Programme Outcome(s): | <p>Outcome 7: By 2019, all children and young people, including children with disabilities (CwD) and Roma children, benefit from education tailored to their needs and abilities.</p> <p>Outcome 8: By 2019, enrolment in preschool education for all children, including Roma children and children with disabilities, is increased.</p> <p>Outcome 9: By 2019, targeted legislation, policies, budget allocations and inclusive social protection systems are strengthened to pro-actively protect the vulnerable.</p> <p>Outcome 10: By 2019, child protection systems are strengthened to prevent and respond to cases of violence, abuse, exploitation and neglect of children, including institutionalization.</p> <p>Outcome 11: By 2019, provision of targeted health and public health planning documents and services, including management of major health risks, and promotion of targeted health seeking behaviours, is enhanced.</p> |
| Corresponding Results Group: | Social Inclusion/Protection |
| Chairing UN entity: | UNICEF |
| Results Group Members (UN and non-UN entities): | UNICEF, UNDP, UNFPA, IOM, IAEA, UNODC, UNHCR, UNV, WHO |
| Work plan duration: | 2015-2016 |
| Anticipated start/end dates: | 1 January 2015 – 31 December 2016 |

Executive Summary

UNDAF Outcomes 7-11 cover the areas of education, social protection, child protection and health and are implemented by: UNICEF, UNDP, UNFPA, IOM, IAEA, UNODC, UNHCR, UNV and WHO.

Education interventions are covered under UNDAF Outcomes 7 and 8. The 7th Outcome focuses on inclusive education, particularly, through strengthening commitment to enhance quality and inclusiveness of education, expanded availability of education services and increased capacities to ensure quality and inclusive education services. It also incorporates the introduction of Comprehensive Sexuality Education (CSE) in schools and increased awareness on youth Sexual and Reproductive Health (SRH). This Outcome will be implemented by UNICEF, UNFPA, UNV and UNODC. The 8th Outcome emphasizes preschool and is led by UNICEF that will work on: developing the Preschool Strategy for BiH (2015-2021), expanded availability of education services, increased capacities to ensure quality and inclusive preschool education services as well as the increased awareness of parents and children, particularly the Roma, on the importance of early learning.

Social protection implies targeted interventions aiming to tackle and reduce the consequences of poverty and vulnerability, including transitory poverty and vulnerability owing to economic and other shocks, and to improve human welfare of individuals and households as well as prevent and avoid social unrest. Given the scarcity of funds, magnitude and complexity of the problem in the field of social protection in Bosnia and Herzegovina, the participating UN agencies have decided to jointly address the issues. Therefore, the current UNDAF, under its 9th Outcome, commits that by 2019 targeted legislation, policies, budget allocations and inclusive social protection systems will be strengthened and harmonized to pro-actively and fairly protect the vulnerable including refugees, asylum seekers, internally displaced persons (IDPs), returnees and persons at risk of statelessness. This will be done through two respective outputs, the first aiming at social protection and population policies, data collection and social statistics, strategies and legislation being developed and/or amended to reflect the needs of the most vulnerable population, while the second output will focus on developing the integrated system of social protection and inclusion and putting it into practice in selected municipalities with the focus on the most vulnerable population. A third output aims at strengthening BiH statistical institutions in collection and analysis of the social statistics, including poverty measures. UN organizations that will jointly contribute to implementation of this Outcome are: UNHCR, IOM, UNICEF, UNDP, UNFPA, UNV and UNODC.



United Nations / Ujedinjene nacije / Уједињене нације

Office of the Resident Coordinator / Ured rezidentnog koordinatora / Канцеларија резидентног координатора
Bosnia and Herzegovina / Bosna i Hercegovina / Босна и Херцеговина

Child protection Outcome 10 is led solely by UNICEF and it will be focused on a) strengthened children and their families capacity to demand child protection services and b) service providers better equipped to deliver child protection services.

When it comes to **health**, WHO, UNICEF, UNFPA, IOM and UNDP will work on addressing key bottlenecks related to the policy and service delivery in the health sector. The key interventions, through Outcome 11, include: a) Public health policy frameworks in BiH have been developed in line with the WHO European health policy framework and operationalized and cardiovascular/metabolic Risk Assessment and Management (CVRAM) intervention package, targeting high-CVR individuals in PHC/FM practices in BIH, developed, quality-assured and implemented – led solely by WHO; b) Strengthened systems and capacities for equitable provision of quality health services including ECD/ECI services, nutrition and immunization, especially for the most vulnerable and excluded children and increased awareness of parents and government on immunization, ECD, and adequate nutrition of girls and boys – under the leadership of UNICEF; c) Increased national capacity to deliver integrated sexual and reproductive health services and promote sexual health, including family planning, maternal health and HIV/AIDS with focus on youth and vulnerable groups - implemented by UNFPA; d) Strengthened systems and capacities for the provision of mental health services in line with international standards for military personnel - under the leadership of IOM; e) and interventions led by UNDP: TB-infected people have access to effective treatment across BiH and people with or at risk of HIV/AIDS have non-discriminatory and adequate access to medical and counseling services.

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| Total Estimated Budget (in USD)*: | | 43,777,096 |
| 1. Funded Budget (USD): | | 29,985,078 |
| 2. Unfunded Budget (USD): | | 13,819,018 |
| Breakdown of contributions by funding sources: | Source(s) | Contributions (USD) |
| | <i>Government</i> | |
| | UNICEF | 4,325,636 |
| | UNDP | 11,607,295 |
| | IOM | 1,404,825 |
| | WHO | 1,100,000 |
| | UNFPA | 285,000 |
| | UNHCR | 10,971,881 |
| | UNODC | 105,000 |
| | UNV | 158,440 |

*Total estimated budget includes both direct programme costs and indirect support costs

2. Context and situation analysis, including lessons learned (Maximum one page)

Full elaboration of the context and situational analysis, including lessons learned is provided in the UN BiH Common Country Analysis (2013) and BiH UNDAF/One Programme 2015-2019 document (2014).

Abbreviations List

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| AKAZ | Agency for quality and accreditation in healthcare in FBiH |
| APOSO | Agency for Pre-Primary, Primary and Secondary Education |
| ASA | Academy of Sciences and Arts of BiH |
| AVPP | Armed Violence Prevention Programme |
| BBB | Build Back Better |
| BD | Brcko District |
| BHAS | Bosnia and Herzegovina Agency for Statistics |
| BHWI | Bosnia and Herzegovina Women's Initiative |
| C4D | Communication for Development |
| CCA | Common Country Assessment |
| CCM | Country Coordination Mechanism |
| CP | Child Protection |
| CRPD | Convention on the Rights of Persons with Disabilities |
| CSE | Comprehensive Sexuality Education |
| CSO | Civil Society Organization |
| CSW | Center for Social Work |
| CVR | Cardiovascular risk |
| CVRAM | Cardiovascular risk assessment and management |
| CwD | Children with Disabilities |
| DI | Deinstitutionalisation |
| DOTS | Directly Observed Treatment Short-course |
| DRR | Disaster Risk Reduction |
| ECD | Early Childhood Development |
| ECI | Early Childhood Intervention |
| ESSPROS | European system of integrated social protection statistics |
| FBiH | Federation of Bosnia and Herzegovina |
| FIP | Federal Institute for Planning |
| FM | Family medicine |
| FMoDPR | Federal Ministry of Displaced Persona and Refugees |
| FMoES | Federal Ministry of Education and Science |
| FMoH | Federal Ministry of Health |
| FMoLSP | Federal Ministry of Labour and Social Policy |
| FPHI | Federal Institute for Public Health |
| GF | Global Fund |
| GBD | Global Burden of Disease |
| HNK | Herzegovina-Neretva Canton |
| IBFAN | International Baby Food Action Network |
| IDU | Injecting drug user |
| IEC/BCC | Information, Education, Communications/Behaviour Change Communications |
| IECD | Integrated Early Childhood Development |
| IDP | Internally Displaced Person |
| IP | Implementing partner |
| IPA | Instrument for Pre-Accession Assistance |
| KAP | Knowledge, Attitude and Practice |
| M&E | Monitoring and Evaluation |
| MDR-TB | Multidrug-resistant tuberculosis |
| MICS | Multiple Indicator Cluster Survey |
| MISP | Minimum Initial Service Package |
| MoCA | Ministry of Civil Affairs |
| MODA | Multiple Overlapping Deprivation Analysis |
| MoD | Ministry of Defence |
| MoE | Ministry of Education |
| MoEC RS | Ministry of Education and Culture of RS |
| MoFA | Ministry of Foreign Affairs |
| MoH | Ministry of Health |
| MoHRR | Ministry for Human Rights and Refugees |
| MoS | Ministry of Security |

| | |
|------------|---|
| MSM | Men who have sex with men |
| MZ | “Mjesna zajednica” – local community |
| NBI | Nordic Baltic Initiative |
| NCD | Non-communicable disease |
| NGO | Non-governmental organization |
| NICU | Neonatal Intensive Care Unit |
| NTP | National Tuberculosis Programme |
| OECD | Organisation for Economic Cooperation and Development |
| OSCE | Organization for Security and Cooperation in Europe |
| PAL | Practical Approach to Lung Health |
| PoC | Person of Concern |
| PISA | Programme for International Student Assessment |
| PHC | Primary health care |
| PHI RS | Public Health Institute of RS |
| PWID | People who inject drugs |
| PwD | Persons with Disabilities |
| RAP | Roma Action Plan |
| RH | Reproductive Health |
| RR | Relative reduction |
| RS | Republika Srpska |
| RS MoHSW | Ministry of Health and Social Welfare of RS |
| RS MoRDP | Ministry of Refugees and Displaced Persons of RS |
| RTG | Roma Thematic Group |
| SPI | Social Protection and Inclusion |
| SRH | Sexual and Reproductive Health |
| SW | Sex worker |
| TB | Tuberculosis |
| ToT | Training of Trainers |
| TransMonEE | Transformative Monitoring for Enhanced Equity |
| UNDAF | United Nations Development Assistance Framework |
| VaC | Violence against Children |

ONE UN PROGRAMME BOSNIA AND HERZEGOVINA 2015-2019

BIANNUAL JOINT WORKPLAN INCLUDING COMMON BUDGETARY FRAMEWORK FOR THE PERIOD 2015-2016

PILLAR 3: SOCIAL INCLUSION: EDUCATION, SOCIAL PROTECTION, CHILD PROTECTION AND HEALTH

UNDAF Outcome 7: By 2019, all children and young people, including children with disabilities (CwD) and Roma children, benefit from education tailored to their needs and abilities (UNICEF, UNFPA, UNV and UNODC)

Outcome Indicators:

Indicator 7.1: Net attendance ratio of all children, CwD, and Roma children for primary and secondary education. **Baseline:** 97.6 Primary (BiH) 97.7M, 97.6F/ 91.8 Secondary (BiH), 90.4M, 93.1F/ 69.3 Primary (ROMA), 70.9M, 67.8F/ 22.6 Secondary (ROMA), 26.6M, 18F/ 0.4 Primary (CWD)-2007. **Target:** Primary (BiH) – 100%/ Secondary (BiH) – 95%/ Primary (Roma) – 90%/ Secondary (Roma) – 50% (2019). CwD target to be determined in 2014. **SoV:** Official BiH Statistical reports / Multiple Indicator Cluster Survey (MICS 2012) / OECD report on CwD, (2007)

Indicator 7.2: Transition rate to secondary education for children, CwD, and Roma children. **Baseline:** 96.9% BiH/ 71% ROMA. N/A for CwD (study to be conducted in 2014). **Target:** 100% for BiH. 90% for Roma (2019). CwD target to be determined in 2014. **SoV:** Official BiH Statistical reports / Multiple Indicator Cluster Survey (MICS 2012) / OECD report on CwD, (2007)

Indicator 7.3: Number of primary and secondary schools where each identified child with disability learns according to an individualized program/curriculum tailored to his/her needs and abilities. **Baseline:** N/A. **Target:** At least 30% of schools in BiH (2019). **SoV:** Official BiH Statistical reports / Multiple Indicator Cluster Survey (MICS 2012) / OECD report on CwD, (2007). **SoV:** Official BiH Statistical reports / Multiple Indicator Cluster Survey (MICS 2012) / OECD report on CwD, (2007).

Indicator 7.4: Teaching content revised by responsible ministries of education to include life skills education, including sexuality education, aligned with international standards. **Baseline:** 0 (2013), 309 secondary schools in BiH (2013). **Target:** Teaching content revised across BiH, and applied in at least 13% (39) of secondary schools in BiH by the end of 2019. **SoV:** Cantonal and entity ministries of education annual reports. **SoV:** Cantonal and entity ministries of education annual reports.

| Outputs including Joint Programme Outputs | UN Entity | Indicator, Baseline and Target (annual monitoring frequency) | Means of Verification | Risk and Assumptions | Implementation modality (agency specific, parallel, pooled, pass-through, combin.) | Biannual Common Budgetary Framework (USD) | | | |
|--|--------------------------|---|--|---|--|---|-----------------------------|--------------------------------------|-----------------------------------|
| | | | | | | Total (USD) | Core/Regular/assessed (USD) | Non-core/other/extra budgetary (USD) | To be mobilized/funding gap (USD) |
| Output 7.1: Quality and inclusive education services enhanced | UNICEF UNFPA UNODC | <p>Output Indicator 7.1a: # of entity, cantonal and district ministries institutionalize training programme on inclusion of children with disabilities into regular schools Baseline: RS and Zenica-Doboj canton (2015) Target: Tuzla and HNK (2016)</p> <p>Output Indicator 7.1b: # of schools refurbished and equipped in accordance to the BBB principle Baseline: 0 (2015) Target: 114 schools (2016)</p> <p>Output Indicator 7.1c: BiH Agency's for preprimary, primary and secondary education capacity for measuring quality in education strengthened (y/n) Baseline: No capacity (2015) Target: BiH Agency for preprimary, primary and secondary education developed capacity for implementation of PISA by Dec 2016</p> <p>Output Indicator 7.1d: Percentage of secondary schools that introduce comprehensive sexuality education aligned with international standards Baseline: 0 Target: 13%</p> | <p>Narrative reports from municipalities, official statistics</p> <p>Lists of participants, school reports</p> <p>Delivery notes</p> | <p>Risks: Lack of interest of Roma parents to enroll their children Drop out of Roma children enrolled in school Lack of understanding on RH and its impact on social and economic development</p> <p>Assumptions: Well- managed refurbishment of 20 priority schools Lack of responsiveness with target population for Grants Facility</p> | Agency specific | 2,729,220 | 426,120 | 1,627,350 | 675,750 |

| Activities | Implementing UN entity/ National Partner | | | | |
|---|--|-----------|---------|-----------|---------|
| 7.1.1 Strengthening capacities of primary and secondary school teachers from 50 schools for quality education and to work with children with disabilities | UNICEF, MoEs, Ped. Institutes, Municipalities, primary and secondary and schools, CSOs | 330,000 | 75,900 | 130,350 | 123,750 |
| 7.1.2 Strengthening capacities of teachers from 10 schools to work on inclusive and intercultural education | UNICEF, MoEs, Ped. Institutes, schools, Universities, CSOs | 130,000 | 0 | 130,000 | 0 |
| 7.1.3 Refurbishment of 114 schools in flood- affected communities | UNICEF | 1,205,000 | 0 | 1,205,000 | 0 |
| 7.1.4 Piloting initiatives on prevention and reduction of school drop-out in 5 secondary schools | UNICEF, MoEs, schools | 100,000 | 50,000 | 0 | 50,000 |
| 7.1.5 Training of teachers and children on disaster risk reduction and preparedness in schools | UNICEF, MoEs, schools | 200,000 | 0 | 80,000 | 120,000 |
| 7.1.6 Strengthening capacity of children, including Roma and CwDs to act as agents of change in perceptions of inclusive, intercultural education | UNICEF, CSOs | 157,000 | 15,000 | 80,000 | 62,000 |
| 7.1.7 Advocacy event to present the drop-out study results | UNICEF | 15,000 | 15,000 | 0 | 0 |
| 7.1.8 Support Agency for preprimary, primary and secondary education in preparation of PISA 2018 | UNICEF, APOSO, consultants | 50,000 | 30,000 | 0 | 20,000 |
| 7.1.9 Strengthening capacity and provision of support to relevant key stakeholders in development and implementation of CSE | UNFPA, Ministries of Education, Ministry of Family, Youth and Sports RS, CSO | 60,000 | 60,000 | 0 | 0 |
| 7.1.10 Strengthening capacities of students, parents and children in the area of drug use prevention | UNODC | 105,000 | 105,000 | 0 | 0 |
| 7.1.11. UNV actions that promote benefits of volunteerism to children and youth | UNV | 77,220 | 75,220 | 2,000 | 0 |

UNDAF Outcome 8: By 2019, enrolment in preschool education for all children, including Roma children and children with disabilities, is increased (UNICEF)

Outcome Indicators:

Indicator 8.1: Percent of children enrolled in preschool. **Baseline:** 13% BiH (12.2 Male, 14 Female). 1.5% Roma, (1.4 Male, 1.6 Female). CwD: N/A (study to be conducted in 2014). **Target:** 30% for BiH. 10% for Roma. 2% FOR CwD (2019). SoV: Official statistical reports / Multiple Indicator Cluster Survey (MICS 2012). **SoV:** Official statistical reports / Multiple Indicator Cluster Survey (MICS 2012).

| Outputs including Joint Programme Outputs | UN Entity | Indicator, Baseline and Target (annual monitoring frequency) | Means of Verification | Risk and Assumptions | Implementation modality (agency specific, parallel, pooled, pass-through, combin.) | Biannual Common Budgetary Framework (USD) | | | |
|---|-----------|--|---|--|--|---|-------------------------------|--|------------------------------------|
| | | | | | | Total (USD) | Core/ Regular/ assessed (USD) | Non-core/ other/ extra budgetary (USD) | To be mobilized/ funding gap (USD) |
| Output 8.1: Preschool Strategy for BiH (2015-2021) developed and capacities of preschool teachers and decision makers strengthened | UNICEF | <p>Output Indicator 8.1a: Preschool Strategy for BiH submitted for adoption to the Council of Ministers by October 2015 (y/n) Baseline: Preschool Strategy for BiH (2008- 2015) Target: By end of 2015 Preschool Strategy for BiH developed and submitted to the Council of Ministers for adoption</p> <p>Output Indicator 8.1b: # of children, including Roma, enrolled in preschool education in targeted municipalities Baseline: tbd (2015) Target: tbd (2016)</p> | <p>Preschool strategy for BiH document</p> <p>Round table and meeting minutes, list of participants</p> | <p>Risk: Lack of allocations of budget resources for pre-school education</p> <p>Assumption: Pre-schools are not adequately resourced and lack basic infrastructure (most not in good condition)</p> | Agency specific | 755,000 | 166,100 | 312,650 | 276,250 |

| Activities | Implementing UN entity/ National Partner | | | | |
|---|---|---------|---------|---------|---------|
| 8.1.1 Support development of Preschool Strategy for BiH (2015-2021) | UNICEF, MoCA, MoEs, Consultants | 50,000 | 30,000 | 20,000 | 0 |
| 8.1.2 Major advocacy event on early childhood education | UNICEF | 40,000 | 20,000 | 20,000 | 0 |
| 8.1.3 Strengthening capacities and services in selected local communities to increase preschool enrolment (with the special focus on Roma children) | UNICEF, MoEs, Municipalities, preschools CSOs | 400,000 | 100,000 | 50,000 | 250,000 |
| 8.1.4 Refurbishment and equipping of 12 preschools in flood-affected communities | UNICEF | 95,000 | 0 | 95,000 | 0 |
| 8.1.5 Strengthening capacities of preschool staff from institutions for quality education and to work with children with disabilities | UNICEF, MoEs, Ped. Institutes, Municipalities, preschools, CSOs | 70,000 | 16,100 | 27,650 | 26,250 |
| 8.1.6 Implementation of media and public campaign on preschool education focusing on Roma and CwDs | UNICEF, media partners | 100,000 | 0 | 100,000 | 0 |

UNDAF Outcome 9: By 2019, targeted legislation, policies, budget allocations and inclusive social protection systems are strengthened to pro-actively protect the vulnerable¹ (UNICEF, UNFPA, UNDP, UNHCR, IOM, UNV)

Outcome Indicators:

Indicator 9.1: Monitoring systems for social protection that produce desegregated data to address bottlenecks and barriers for the most vulnerable children and families. Baseline: Not in place (2013). Target: Joint Social Report developed at the country wide level on an annual basis. **SoV:** Social protection budgets / Public expenditure records / State and Entity Gazettes.

Indicator 9.2: Social assistance for children and families in need harmonized in the Federation of BiH (yes/no). **Baseline:** not harmonized (2013). **Target:** harmonized by 2019. **SoV:** Implementing Partner Progress reports and quality assessment against international normative standards / Reports from Centres for Social Welfare.

Indicator 9.3: Coordination mechanisms at the country wide level for social protection systems established. **Baseline:** Not in place (2013). **Target:** In place by 2019. **SoV:** Implementing Partner Progress reports and quality assessment against international normative standards / Reports from Centres for Social Welfare.

Indicator 9.4: Number of new or revised laws and policies for Persons with Disabilities (PwD), adopted, budgeted and aligned with Convention on Rights of Persons with Disabilities (CRPD) and number of new PwD services and incentives introduced. **Baseline:** UNDP Review of legislation on PWD (2013). **Target:** by 2019 3 new policies/laws and 3 new services. **SoV:** BiH CRPD Reports of the Council for Persons with Disabilities.

Indicator 9.5: Number of policies targeting elderly, youth, Roma and other disadvantaged population. **Baseline:** 1 (2013). **Target:** 357 (2019). **SoV:** Implementing Partner Progress reports and quality assessment against international normative standards / Reports from Centres for Social Welfare.

Indicator 9.6: Number of persons at risk of statelessness who are not registered and assisted with documentation allowing them to access social protection. **Baseline:** 4,500 persons (2013). **Target:** 500 persons annually; at least 2,500 by the end of 2019. **SoV:** Council of Ministers BiH endorsement of new policies. **SoV:** Birth and citizenship registers; MHRR and local authorities (e.g. basic registers) reports and records; Qualitative assessments from service providers; Roma Decade progress reports; Reports by the civil society human rights actors and other international organizations: Council of Europe, UN Agencies, OSCE UNHCR and its implement-ting partners Vasa Prava; BHWI database on registration and access to other rights.

Indicator 9.7: Number of persons still dependent on IDP status for access to social benefits and sustainable solutions; Number of persons unable to find solutions from national authorities; Number of vulnerable IDPs who have been able to regularise their status in the municipality of their choice. **Baseline:** 84,500 (2013). **Target:** 10,000 – 20,000 (2019). **SoV:** MHRR database on IDPs. Entity databases on IDPs. UNHCR and OSCE reports.

| Outputs including Joint Programme Outputs | UN Entity | Indicator, Baseline and Target (annual monitoring frequency) | Means of Verification | Risk and Assumptions | Implementation modality (agency specific, parallel, pooled, pass-through, combin.) | Biannual Common Budgetary Framework (USD) | | | |
|--|------------------------|---|-----------------------|--|--|---|-------------------------------|--|------------------------------------|
| | | | | | | Total (USD) | Core/ Regular/ assessed (USD) | Non-core/ other/ extra budgetary (USD) | To be mobilized/ funding gap (USD) |
| Output 9.1: Social protection and population policies, strategies and | UNHCR IOM UNICEF | Output indicator 9.1a: # of social protection policies, strategies, legislation and standards developed/amended during reporting period for adoption ² to improve lives of vulnerable groups ³ . | Official Gazettes | Risk: Inadequate budget allocation for social protection / Political crises impedes legislative | Agency specific | 331,400 | 281,400 | 0 | 50,000 |

¹ The vulnerable include: IDPs, returnees, children, adults and children with disabilities, Roma, women, migrants, asylum seekers, and the elderly.

² Policy interventions include: Framework Law on Disability; Guidelines for Day Care centers in FBiH; Laws for Persons with Disability in FBiH; Development Strategy FBiH; Social Protection and Inclusion Policy Framework BiH; Cantonal Development Strategies (Social protection component); Standards for Social Work in schools in RS; FBiH Strategy for persons with disability; FBiH By-Law on Day Care centers; RS Social Protection strategy.

³ UNHCR Comments to at least 4 legislative acts: (Law on Asylum, Law on Foreigners, Bylaw on Asylum, Bylaw on access to rights).

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|---|---------------|--|--|---|---|--|---|----------------------------------|--|
| legislation developed and/or amended to reflect the needs of the most vulnerable population | UNDP UNFPA | <p>Baseline: 0 (beginning of 2015) Target: 10 (end 2016)</p> <p>Output indicator 9.1b: # of capacity development interventions made during reporting period aimed at emerging population issues and protection of human rights of families at the risk of statelessness⁴. Baseline: 0 (beginning of 2015) Target: 5 (end 2016)</p> <p>Output indicator 9.1c: # of population data collection activities conducted during reporting period from which data is available for policy development Baseline: 0 (beginning of 2015) Target: Two by end of 2016</p> <p>Output indicator 9.1.d: Number of BiH Cities with adopted strategy on social housing Baseline: 0 (beginning of 2015) Target: At least 2 Cities (City of Banja Luka, City of Tuzla) with adopted SH strategy at the end of 2016</p> | | <p>reform / politization in the area of disability. Assumption: Government cross-sectoral cooperation efforts are sustained / Turnover of key staff in Government services is minimized.</p> <p>Risk: Turnover of municipality staff working on birth/citizenship registration. Assumption: All municipal authorities fully implement legislation on birth/citizenship.</p> <p>Risk: Limited human and financial resources. Further delays in availability of census data. Assumption: Government interest in population data production and availability.</p> | | | | | |
| Activities | | | | Implementing UN entity/ National Partner | | | | | |
| 9.1.1 Provide support to MoS, MHRR and Entity ministries ⁵ to ensure rights from social protection for asylum seekers, refugees, persons granted subsidiary protection and stateless in the new Law on Asylum and Law on Foreigners and entity legislation. | | | | UNHCR, MoS, MHRR, FMDPR, RS MRDP | 5,000 | 0 | 0 | 5,000 | |
| 9.1.2 Increase capacities of MHRR and CSWs to identify and support access to rights to communities and families at risk of statelessness ⁶ . | | | | UNHCR, CSW | 5,000 | 5,000 | 0 | 0 | |
| 9.1.3 Provide assistance to the relevant authorities in developing the Framework Law covering the area of Disability and development and/or revision of social protection policies, legislation, strategies and guidelines as relates to children and adults with disabilities. | | | | UNICEF, UNDP, UNFPA, FIP, RS MoHSW, FMoLSP, relevant cantonal Ministries | 277,000 UNICEF 177,000 UNDP 100,000 | 227,000 UNICEF 177,000 UNDP 50,000 | 0 | 50,000 UNDP 50,000 | |
| 9.1.4 Support the establishment of coordination mechanisms for social protection and inclusion at the country wide level. | | | | UNICEF, MoCA, RS MoHSW, FMoLSP, relevant cantonal Ministries | 19,400 | 19,400 | 0 | 0 | |
| 9.1.5 Validate social policy guidelines for ageing with entity responsible ministries, draft strategies for ageing at entities levels and establish centres for healthy ageing. | | | | UNFPA | 15,000 | 15,000 | 0 | 0 | |

⁴ UNHCR support to 5 events/workshops to increase capacity development of municipal authorities to ensure birth & citizenship registration preventing risk of statelessness and enabling access to other human rights.

⁵ Including comments to the legislative acts by UNHCR.

⁶ Including assessment of PoCs, and exchange of data through RTG.

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| 9.1.6 Analyze secondary census data for aging and gender aspects, analyze potential additional sources of data on migration and gender aspects of migration, and develop population situation analysis. | | | | UNFPA | 10,000 | 10,000 | 0 | 0 | |
| 9.1.7 Support development of the social housing strategy in at least two Cities of BiH | | | | UNHCR, MHRR, City administration, NGOs | 10,000 | 5,000 | 5,000 | 0 | |
| Output 9.2: Integrated systems ⁷ of social protection and inclusion developed in selected municipalities with the focus on the most vulnerable population | UNHCR IOM UNICEF UNDP UNFPA | <p>Output indicator 9.2a: Number of Municipalities with established integrated SPI systems. Baseline: 32 (2014). Target: 49 (2016).</p> <p>Output indicator 9.2b: Number of local communities (MZs) improve access of citizens to social services and encourage citizen participation in public local affairs. Baseline: 20 (2015) Target: 30 (2016)</p> <p>Output indicator 9.2c: Number of persons at risk of statelessness who have been identified, registered and assisted with documentation during reporting period, allowing them to access social protection. Baseline: 0 (beginning 2015). Target: 200 (end 2016).</p> <p>Output indicator 9.2d: Number of CSWs that signed agreement with MHRR to update ERP database. Baseline: 57 CSWs (beginning 2014). Target: 67 CSWs (end 2016).</p> <p>Output indicator 9.2e: Number of families (of IDPs, returnees and recognized refugees) directly assisted during reporting period in order to facilitate their social inclusion. Baseline: 0 (beginning 2014). Target: 500 families (end 2016).</p> <p>Output indicator 9.2e: Number of persons still dependent on IDP status for access to social benefits and sustainable solutions; Number of persons unable to find solutions from national authorities; Number of vulnerable IDPs who have been able to regularize their status in the municipality of their choice. Baseline: 84,500 (2013) Target: 10,000 – 20,000 (2019)</p> | <p>Local Action Plans. Birth and citizenship registers; MHRR and local authorities (e.g. basic registers) reports and records; Qualitative assessments from service providers; Roma Decade progress reports; Reports by the civil society human rights actors and other international organizations: Council of Europe, UN Agencies, OSCE UNHCR and its implementing partners Vasa Prava; BHWI database on registration and access to other rights.</p> <p>MHRR database on IDPs Entity databases on IDPs UNHCR and OSCE reports</p> | <p>Risk: Municipal resistance and associated budget constraints; unwillingness, inertia and /or lack of capacity of local professionals and decision makers to effectively participate or manage the program; cross sectoral cooperation difficult to initiate and sustain. Assumptions: Most local authorities support the program and there is a buy in on the local level. Relevant legislation adopted in order to enable establishment of new services. Risks: Individual undocumented Roma and those at risk of statelessness are not identified and informed about the importance of registration to access services; Limited engagement of local Roma associations to work at all levels in a coordinated manner; Limited human and financial resources. Assumptions: Cross-sectoral functional coordination mechanisms and legal frameworks in place, budget resources allocated. Risks: Local authorities resist absorption of IDPs into mainstream social</p> | Agency specific | 24,867,255 | 2,097,534 | 12,840,567 | 9,929,154 |

⁷ According to UNICEF definition integrated approach has two main components: **system approach** (development of vulnerability assessments, establishment of institutional frameworks and mechanisms of cooperation (SPI Commissions and referrals) and M&E systems, participation of rights holders in the design of actions and decision making and strengthening of accountability of duty bearers, development of local SPI Action Plans) and **multi-sector approach** (identifies and maximizes linkages between different sectors within the social protection and inclusion system, such as the education, health, social and child protection, finance, justice, interior affairs, etc.).

| | | | | service provision; local authorities not willing or able to assist IDPs. | | | | | |
|---|--|--|--|---|--|---|--|---|--|
| Activities | | | | Implementing UN entity/ National Partner | | | | | |
| 9.2.1 Strengthen and enhance the capacities of the social workers and Social Welfare Centres to provide adequate services for most vulnerable internally displaced persons, returnees including elderly returnees, asylum-seekers, refugees, persons granted subsidiary protection, stateless persons, children and adults with disabilities and Roma ⁸ | | | | IOM, UNHCR, UNDP, CSW, MHRR, relevant entity Ministries, BiH Council for People with Disabilities | 310,000 UNDP 55,000 IOM 150,000 UNHCR 105,000 | 5,000 UNHCR 5,000 | 155,000 UNDP 55,000 UNHCR 100,000 | 150,000 IOM 150,000 UNHCR 0 | |
| 9.2.2 Provide support to the relevant stakeholders in implementation of BiH Roma Action Plan, and improvement/establishment of the monitoring and evaluation framework and mechanism (RAP) and local action plans. | | | | UNDP, UNFPA, UNHCR, IOM, MHRR | 1,510,000 UNDP 750,000 IOM 750,000 UNHCR 10,000 | 55,000 UNDP 50,000 UNHCR 5,000 | 705,000 UNDP 700,000 UNHCR 5,000 | 750,000 IOM 750,000 UNHCR 0 | |
| 9.2.3 Expand an integrated SPI model to new selected Municipalities and develop the SPI local Action Plans, including inter-municipal workshops for peer to peer sharing of good practices and provision of evidence for policy changes. | | | | UNICEF, RS MoHSW, FMoLSP, FMoH, relevant cantonal Ministries, selected Municipalities | 1,300,000 | 0 | 530,000 | 770,000 | |
| 9.2.4 Improve access to social services for children and adults with disabilities through establishment of new and/or improvement of existing services and volunteering opportunities. | | | | UNICEF, UNV, MoHSW RS, FMoLSP, FMoH, relevant entity and cantonal Ministries, MHRR, BiH Council for People with Disabilities, selected Municipalities, local NGOs | 240,610 UNICEF 200,000 UNV 40,610 | 39,610 UNICEF 0 UNV 39,610 | 122,000 UNICEF 120,000 UNV 1,000 | 80,000 UNICEF 80,000 UNV 0 | |
| 9.2.5 Improve mechanisms for community dialogue by capitalizing also on the local community (MZ) network, through inclusive media, communication capacity building workshops, volunteering and social mobilization events, targeting inclusion of citizenry, and particularly women, children, Roma, elderly and adults with disabilities and other vulnerable population in decision making processes. | | | | UNDP, UNICEF, IOM, UNV, MHRR, RS Ministry for Administration and Local Self-Governance, Federal Ministry of Justice, relevant municipal authorities and local communities, civil society, BiH Gender Agency and entity gender centers | 2,715,000 UNDP 2,600,000 UNICEF 60,000 UNV 40,610 IOM 50,000 | 105,000 UNDP 100,000 UNV 39,610 | 2,260,000 UNDP 2,200,000 UNICEF 60,000 UNV 1,000 | 350,000 UNDP 300,000 UNV 0 IOM 50,000 | |
| 9.2.6 Build capacities of Centers for Social Work for working in crisis through development of toolkit and training. | | | | UNICEF, FMoLSP, RS MoHSW, Faculties of Social Work Sarajevo and Banja Luka, RS Association of Social Workers, CSWs | 100,000 | 50,000 | 0 | 50,000 | |
| 9.2.7 Support access to social services and assistance of nationals repatriated from third countries, with a focus on those with health conditions and unaccompanied minors. | | | | IOM | 100,000 | 0 | 0 | 100,000 | |
| 9.2.8 Foster social inclusion of foreign vulnerable categories by strengthening their capacities to access employment. | | | | IOM | 100,000 | 0 | 0 | 100,000 | |
| 9.2.9 Strengthen resilience of local communities through enhancing of DRR systems. | | | | UNICEF, selected Municipalities | 300,000 | 30,000 | 0 | 270,000 | |
| 9.2.10 Provide direct multifaceted assistance (including housing and economic sustainability, where appropriate) to the most vulnerable internally displaced persons, returnees, asylum-seekers, refugees, persons granted subsidiary protection, stateless persons, tailored to the status, needs and capabilities of the persons of concern that will enable the effective social inclusion. | | | | UNHCR, MHRR, FMDPR, RS MRDP, CSO/NGO partners | UNHCR 18,156,035 | UNHCR 1,778,314 | UNHCR 9,068,567 | UNHCR 7,309,154 | |

⁸ This would include advocacy, intervention on individual cases through UNHCR free legal aid IPs, training/meetings.

| | | | | | | | | | |
|--|--------|---|--|--|---|---------|---|---|---------|
| Output 9.3: BiH statistical institutions strengthened in collection and analysis of the social statistics, including poverty measures | UNICEF | Output Indicator 9.3 BiH Agency for Statistics able to collect and disseminate social statistics in line with the EUROSTAT standards (y/n) Baseline: Social statistics templates revised; IPA for ESSPROS capacity development; census 2013 Target: ESSPROS implemented in accordance with EUROSTAT; selected census-related data analyzed by Dec 2016 | ESSPROS, TransMonEE, official statistics Official government data | Risk: Budget constraints and/or unwillingness of the entity and State statistics to work together efficiently. Assumption: Statistics offices will continue to have a solid cooperation despite growing political pressures | Agency specific | 158,100 | 0 | 0 | 158,100 |
| Activities | | | | | Implementing UN entity/ National Partner | | | | |
| 9.3.1 Support to statistical institutions in strengthening capacities for data collection. | | | | | UNICEF/BHAS | 37,200 | 0 | 0 | 37,200 |
| 9.3.2 Support to BiH Agency for statistics on Transmonee database and preparation of Country Annual Report. | | | | | UNICEF/BHAS | 25,500 | 0 | 0 | 25,500 |
| 9.3.3 Support to BiH Agency for statistics on institutionalization of ESSPROS including further capacity development. | | | | | UNICEF/BHAS | 22,700 | 0 | 0 | 22,700 |
| 9.3.4 Disability Situation Analysis completed and disseminated. | | | | | UNICEF/BHAS | 50,000 | 0 | 0 | 50,000 |
| 9.3.5 Multiple Overlapping Deprivation Analysis (MODA) finalized and disseminated, in cooperation with the BiH Agency for Statistics. | | | | | UNICEF/BHAS | 22,700 | 0 | 0 | 22,700 |

| UNDAF Outcome 10: By 2019, child protection systems are strengthened to prevent and respond to cases of violence, abuse, exploitation and neglect of children, including institutionalization (UNICEF) | | | | | | | | | |
|--|-----------|---|--|--|--|---|-----------------------------|--------------------------------------|-----------------------------------|
| Outcome Indicators: | | | | | | | | | |
| Indicator 10.1: Guidelines on Response System in cases of Violence against Children. Baseline: 7% municipalities (2013). Target: 40% municipalities (2019). SoV: MHRR, Municipal Reports, Center for Social Work Reports and UNICEF Reports. | | | | | | | | | |
| Indicator 10.2: Prevalence of children in institutions, foster care and adoption. Baseline: 2, 607 institutionalized, (2012 Transmonee). 712 in foster care (2012, Transmonee). 67 adopted (2012, Transmonee). Target: 40% decrease of number of children in residential care (2019). SoV: Transmonee. | | | | | | | | | |
| Outputs including Joint Programme Outputs | UN Entity | Indicator, Baseline and Target (annual monitoring frequency) | Means of Verification | Risk and Assumptions | Implementation modality (agency specific, parallel, pooled, pass-through, combin.) | Biannual Common Budgetary Framework (USD) | | | |
| | | | | | | Total (USD) | Core/Regular/assessed (USD) | Non-core/other/extra budgetary (USD) | To be mobilized/funding gap (USD) |
| Output 10.1: Strengthened children and their families capacity to demand child protection services | UNICEF | Output indicator 10.1: number of CSOs active in monitoring and reporting cases of violence against children. Baseline: 15 (2015) Target: 35 (2016) | Legislation; Law; Reports/ Assessments | Risk: Low levels of interest among right holders. Assumption: Targeted interventions increase interest and awareness. | Agency specific | 500,000 | 30,000 | 60,000 | 410,000 |
| Activities | | | | | Implementing UN entity/ National Partner | | | | |
| 10.1.1 Support awareness raising activities and campaigns to improve attitude and knowledge towards alternatives to institutions for children without parental care | | | | | UNICEF, MoCA, FBIHMolSP, RSMoHSW | 170,000 | 20,000 | 0 | 150,000 |

| | | | | | | | | | |
|--|--------|---|---|--|-----------------|------------------|----------------|----------------|----------------|
| 10.1.2 Strengthen children and juveniles' capacity to make their voices and opinions heard and to reach out to others to deter use of violence through tailored methods (C4D) | | | | UNICEF, MoHRR | 80,000 | 0 | 60,000 | 20,000 | |
| 10.1.3 Support awareness raising of children and families about the availability of preventive/responsive services in cases of violence against children | | | | UNICEF, MoHRR | 70,000 | 10,000 | 0 | 60,000 | |
| 10.1.4 Strengthen children participation in designing and implementing AVPP programmes in at least 10 municipalities | | | | UNICEF | 30,000 | 0 | 0 | 30,000 | |
| 10.1.5 Strengthen CSOs capacity to support right holders to claim their rights when it comes to violence against children, to raise awareness on VAC, and be included in local CP mechanisms | | | | UNICEF, MoHRR, FBiHMoLSP, RSMoHSW | 150,000 | 0 | 0 | 150,000 | |
| Output 10.2: Service providers better equipped to deliver child protection services | UNICEF | Output indicator 10.2a: Selected institutions started DI transformation process (y/n). Baseline: 1 institution (Tuzla) (2015) Target: At least 4 (total) (2016) Output Indicator 10.2b: Number of schools with capacity to prevent/monitor/refer cases of peer violence b) 22 (Dec 2014) c) 42 (by Dec 2016) | Official government reports; UNICEF reports | Risk: Political unwillingness; lack of inter sectoral cooperation; institutions for children without parental care not able/willing to transform; financial/budget shortages Assumption: Sectors willing to work together and political differences put aside | Agency specific | 1,429,000 | 272,500 | 200,000 | 956,500 |
| Activities | | | | Implementing UN entity/ National Partner | | | | | |
| 10.2.1 Support finalization of the FBiH foster care law. | | | | UNICEF, FBiHMoLSP | 15,000 | 7,500 | 0 | 7,500 | |
| 10.2.2 Support the development of public policies and strategies for increasing foster care in both entities. | | | | UNICEF, FBiHMoLSP, RSMoHSW | 40,000 | 17,000 | 0 | 23,000 | |
| 10.2.3 Support capacity development of social workers and mental health workers in providing timely and adequate response in case of emergency; and developing a strategy to include the training within formal training structures. | | | | UNICEF, FBiHMoH, FBiHMoLSP, RSMoHSW | 300,000 | 50,000 | 200,000 | 50,000 | |
| 10.2.4 Support development and implementation of prevention of separation services in at least 5 municipalities. | | | | UNICEF, FBiHMoLSP, RSMoHSW | 139,000 | 25,000 | 0 | 114,000 | |
| 10.2.5 Support capacity development of professionals and foster care families in implementation of the foster care laws, and by laws, and inclusion in official education curriculum. | | | | UNICEF, FBiHMoLSP, RSMoHSW | 180,000 | 32,000 | 0 | 148,000 | |
| 10.2.6 Support transformation of institutions process, and of individual after care plans for children and youth (with a focus on children and youth with disabilities). | | | | UNICEF, FBiHMoLSP, RSMoHSW | 300,000 | 55,000 | 0 | 245,000 | |
| 10.2.7 Support capacity development of professionals and intersectoral cooperation in the area of prevention and response to violence against children. | | | | UNICEF, MoHRR, FBiHMoLSP, RSMoHSW | 85,000 | 20,000 | 0 | 65,000 | |
| 10.2.8 Support school-based AVPP prevention and response mechanisms in at least 20 schools, and advocate for further replication by the relevant Ministry of Education. | | | | UNICEF, FBiHMoE, RSMoE | 200,000 | 35,000 | 0 | 165,000 | |
| 10.2.9 Support the development of positive parenting programmes to prevent violence against children. | | | | UNICEF, FBiHMoLSP, RSMoHSW | 90,000 | 16,000 | 0 | 74,000 | |
| 10.2.10 Support mapping and strengthening of case management for social workers. | | | | UNICEF, FBiHMoLSP, RSMoHSW | 80,000 | 15,000 | 0 | 65,000 | |

UNDAF Outcome 11: By 2019, provision of targeted health and public health planning documents and services⁵⁸, including management of major health risks, and promotion of targeted health seeking behaviours, is enhanced. (UNFPA, IAEA, UNDP, UNICEF, IOM, WHO, UNODC)

Outcome Indicators:

Indicator 11.1: Public health policy documents and evidence-based recommendations are in place and effectively implemented. **Baseline:** Overarching public health policy frameworks are not developed/enforced in BiH, RS, FBiH and BD BiH (2013). **Target:** Overarching public health policy frameworks developed in BiH, RS, FBiH and BD BiH (2016)/ Overarching public health policy frameworks operational/enforced by respective authorities in RS, FBiH and BD BiH (2019). **SoV:** Set of public health policy documents in all administrative jurisdictions of BiH, available from the health authorities in BiH: Ministry of Civil Affairs of BiH; Ministry of Health of FBiH; Ministry of Health and Social Welfare of RS; Department of Health and Other Services of BD BiH.

Indicator 11.2: Relative reduction (RR) in overall mortality from cardiovascular diseases in BiH / Overall mortality from cardiovascular diseases shows decreasing trends in BiH. **Baseline:** Cardiovascular and circulatory diseases, deaths per 100,000: 523.41 (Global Burden of Disease Study / GBD / 2010, BiH) (2010). **Target:** Cardiovascular and circulatory diseases, deaths per 100,000: <500 (2019). **SoV:** Annual public health reports produced by-available from the public health institutes of FBiH (Health Statistics Annual FBiH) and RS (Analysis of Health of Population of RS) / Consolidated information on cardiovascular mortality in BiH from the Ministry of Civil Affairs of BiH / Published international/global studies (e.g. Global Burden of Disease /GBD/ study).

Indicator 11.3: Percent of children, particularly Roma, fully immunized 18-29 months. **Baseline:** 68% BiH, 4% Roma (2011/2012). **Target:** a 10% points increase for BiH and 20% points increase for Roma (2019). **SoV:** Multiple Indicator Cluster Survey (MICS) Report.

Indicator 11.4: Number of families with young children receiving young child wellbeing services including home visits. **Baseline:** 2,500 children (2012). **Target:** 9, 000 children (2019). **SoV:** Official documentation received from the health centers and responsible ministries in FBiH, RS and Brcko district.

Indicator 11.5: TB incidence in BiH reduced. **Baseline:** Incidence 49/100,000 (2012). **Target:** Incidence 35/100,000 (2019). **SoV:** WHO Global TB report.

Indicator 11.6: HIV prevalence rate. **Baseline:** HIV rate in BiH maintained at less than 1% in the general population and less than 5% in any of the key population groups exposed to greater risk (2009/2010). **Target:** HIV rate below the level of 0.01% (2019). **SoV:** Bio-behavioral studies (PWID, SW, MSM) / Clinical records / Annual report on implementation of the Strategy to respond to HIV and AIDS in BiH 2011-2016.

Indicator 11.7: Modern contraceptive prevalence rate increased. **Baseline:** 12% (2012) **Target:** 15% (2019). **SoV:** Multiple Indicator Cluster Survey (MICS) Report.

Indicator 11.8: Number of policies, guidelines, protocols and standards for healthcare workers developed for delivery of quality SRH services, including vulnerable population. **Baseline:** 0 (2013) **Target:** 4 (2019)2019. **SoV:** SRH publications of line ministries in BiH.

| Outputs including Joint Programme Outputs | UN Entity | Indicator, Baseline and Target (annual monitoring frequency) | Means of Verification | Risk and Assumptions | Implementation modality (agency specific, parallel, pooled, pass-through, combin.) | Biannual Common Budgetary Framework (USD) | | | |
|--|-----------|--|------------------------|---|--|---|-------------------------------|--|------------------------------------|
| | | | | | | Total (USD) | Core/ Regular/ assessed (USD) | Non-core/ other/ extra budgetary (USD) | To be mobilized/ funding gap (USD) |
| Output 11.1: Public health policy frameworks in BiH have been developed in line with the WHO European health policy framework and operationalized | WHO | Output indicator 11.1: Evidence-based recommendations incorporated in public health policy framework drafts; Public health policy frameworks endorsed by respective health authorities in BiH. Baseline: Evaluation of Public Health Services in South-Eastern Europe (CEB/WHO, 2009); European Health 2020 Policy and supporting action plans (WHO EURO, 2011-12). Target: Review of final drafts of public health policy frameworks completed. Public health policy framework documents officially presented and disseminated by respective health authorities in BiH by end of 2016. | BiH health authorities | Assumptions: Governmental support to public health policy development is continuous and without substantial opposition/change of direction. Public health policy reforms parallel and complement PHC/FM and hospital reforms. Full and supportive involvement of local institutional capacities/ institutions in public health policy development provided. | Agency specific As stipulated in WHO rules and regulations | 280,000 | 0 | 280,000 | 0 |

| Activities | | | | Implementing UN entity/ National Partner | | | | | |
|--|--------|--|---|--|-----------------|------------------|----------------|----------------|------------------|
| 11.1.1 Support to Public Health policy development process (conferences, roundtables, workshops) | | | | WHO / Health authorities in Bosnia and Herzegovina | | 180,000 | 0 | 180,000 | 0 |
| 11.1.2 Development of Public Health Policy documents (regular meetings of task forces, policy drafting and presentation) | | | | WHO / Health authorities in Bosnia and Herzegovina | | 100,000 | 0 | 100,000 | 0 |
| Output 11.2: Cardio-vascular/metabolic Risk Assessment and Management (CVRAM) intervention package, targeting high-CVR individuals in PHC/FM practices in BIH, developed, quality-assured and implemented | WHO | Output indicator 11.2: Number of CVRAM trainers trained in BIH. Number of FMTs/professionals trained in and applying CVRAM in daily practice. Baseline: PHC/FM professionals do not have specific training in CVRAM, (November) 2013 Target: 125 FMTs/370 PHC doctors and nurses trained in CVRAM by end of 2016 | BIH health and public health authorities | Assumptions: Health authorities at lower administration levels (cantons, municipalities) are supportive to the changes brought about by intervention and agree on the dynamics of implementation. Potential changes of key CVRAM counterparts are smooth and do not cause major operational delays. | Agency specific | 820,000 | 0 | 820,000 | 0 |
| Activities | | | | Implementing UN entity/ National Partner | | | | | |
| 11.2.1 CVRAM inter-sectoral population-wide primary prevention strategies (national policy dialogues) | | | | WHO / Health authorities in Bosnia and Herzegovina | | 30,000 | 0 | 30,000 | 0 |
| 11.2.2 CVRAM Family Medicine high-risk individual intervention strategies (regular meetings of CVRAM expert group, development of guidelines, materials, tools, training of Family Medicine Teams, monitoring and evaluation of intervention in family medicine practices) | | | | WHO / Health authorities in Bosnia and Herzegovina | | 790,000 | 0 | 790,000 | 0 |
| Output 11.3: Strengthened systems and capacities for equitable provision of quality health services including ECD/ECI services, nutrition and immunization, especially for the most vulnerable and excluded children | UNICEF | Output indicator 11.3a: Monitoring system for immunization developed and used (yes/no) Baseline: not developed (2015) Target: developed by December 2016 Output indicator 11.3b: Inter sectoral IECD action plans with budgets developed in at least 5 cantons in FBIH Baseline: 1 canton (2014) Target: 5 cantons by December 2016 | Public health reports; Ministry reports; UNICEF reports | Risk: Financial crisis/lack of cross sectoral cooperation/ political crises and lack of resources hampering implementation of legislation Assumption: Relevant ministries and institutions are supportive of strengthening the ECD/ECI systems and services | Agency specific | 1,500,000 | 290,000 | 184,736 | 1,025,264 |
| Activities | | | | Implementing UN entity/ National Partner | | | | | |
| 11.3.1 Support increase of commitment among decision-makers and relevant professionals on importance of IECD, ECI, immunization, breastfeeding and adequate nutrition of young children | | | | UNICEF / MoCA, FMoH, MoHSW RS, BD, MoS, FMoES, MoEC RS, FMoLSP, FPHI, PHI RS, AKAZ, cantonal/municipal authorities, ASA, clinical centers, universities, IBFAN, NGOs, | | 50,000 | 50,000 | 0 | 0 |

| | | | | | | | | | |
|--|--------|--|------------------------|--|-----------------|----------------|---------------|----------|----------------|
| | | | | UNICEF institutional /individual contractors, media | | | | | |
| 11.3.2 Support improvement in planning and implementation of immunization program in order to ensure timely and continued immunization of all children, particularly Roma and other socially excluded girls and boys | | | | UNICEF / FMOH, MoHSW RS, BD, FPHI, PHI RS | 20,000 | 20,000 | 0 | 0 | |
| 11.3.3 Support improvement of monitoring and tracking system of the immunization process | | | | UNICEF / FMOH, MoHSW RS, BD, FPHI, PHI RS | 150,000 | 70,000 | 0 | 80,000 | |
| 11.3.4 Conduct training for health professionals on benefit of immunization | | | | UNICEF / FMOH, MoHSW RS, BD, FPHI, PHI RS, NGOs | 330,000 | 100,000 | 0 | 230,000 | |
| 11.3.5 Support revision of the accreditation quality standards for IECD and ECI services in the health centers | | | | UNICEF / FMOH, BD, FPHI, AKAZ | 100,000 | 0 | 0 | 100,000 | |
| 11.3.6 Conduct training for health professionals on IECD and ECI | | | | UNICEF / FMOH, MoHSW RS, BD, FPHI, PHI RS, AKAZ, clinical centers, NGOs | 400,000 | 0 | 184,736 | 215,264 | |
| 11.3.7 Contribute to development of innovative curricula for ECD and ECI experts | | | | UNICEF / FMOH, BD, FMOES, MoEC RS, FMOESP, ASA, universities, clinical centers, NGOs | 50,000 | 0 | 0 | 50,000 | |
| 11.3.8 Contribute to development of innovative curricula for Developmental Behavioral Pediatricians | | | | UNICEF / FMOH, BD, ASA, universities, clinical centers, NGOs | 50,000 | 0 | 0 | 50,000 | |
| 11.3.9 Provide equipment and didactic materials required for setting up of IECD services in selected locations | | | | UNICEF / FMOH, BD, FMOES, MoEC RS, FMOESP, cantonal/municipal authorities, NGOs | 100,000 | 0 | 0 | 100,000 | |
| 11.3.10 Support government to revise accreditation quality standards for Maternal and Baby Friendly Hospitals, including Neonatal Intensive Care Units (NICU) | | | | UNICEF / FMOH, BD, FPHI, AKAZ | 70,000 | 0 | 0 | 70,000 | |
| 11.3.11 Conduct training to health professionals from Maternity Wards, including Neonatal Intensive Care Units (NICU) on Maternal and Baby Friendly Hospital Standards | | | | UNICEF / FMOH, BD, FPHI, AKAZ, IBFAN, NGOs | 50,000 | 0 | 0 | 50,000 | |
| 11.3.12 Support Agency for Healthcare Quality and Accreditation to recertify ten Baby Friendly Hospital | | | | UNICEF / FMOH, BD, FPHI, AKAZ | 30,000 | 0 | 0 | 30,000 | |
| 11.3.13 Support implementation and adoption of Nutrition Friendly Kindergarten Initiative | | | | UNICEF / FMOH, MoHSW RS, BD, FMOES, MoEC RS, FMOESP, FPHI, PHI RS, cantonal/municipal authorities, NGOs, media | 100,000 | 50,000 | 0 | 50,000 | |
| Output 11.4: Increased awareness of parents and government on immunization, ECD, and adequate nutrition of girls and boys | UNICEF | Output indicator 11.4a: Research on identifying causes for lack of trust of parents and professionals in immunization completed Baseline: no research (2015) Target: research completed by December 2016 Output indicator 11.4b: Research on identifying causes for low breastfeeding practice (among parents and professionals) completed Baseline: no research (2015) Target: research completed by December 2016 | KAP and UNICEF Reports | Risk: Lack of cross sectoral cooperation/ unwillingness of parents including Roma parents to participate Assumption: UNICEF able to convene partners - parents and government institutions work together to achieve goals | Agency specific | 300,000 | 12,000 | 0 | 288,000 |
| Activities | | | | Implementing UN entity/ National Partner | | | | | |
| 11.4.1 Conduct research on causes of low level or lack of immunization, breastfeeding, adequate nutrition and responsible parenting | | | | UNICEF / FMOH, MoHSW RS, BD, FPHI, PHI RS, cantonal/municipal authorities, NGOs, research company, UNICEF institutional /individual contractors, media | 50,000 | 12,000 | 0 | 38,000 | |
| 11.4.2 Develop and conduct social mobilization campaign on IECD, ECI, immunization, breastfeeding, adequate nutrition and responsible parenting | | | | UNICEF / FMOH, MoHSW RS, BD, FMOES, MoEC RS, FMOESP, FPHI, PHI RS, cantonal/municipal authorities, NGOs, media, UNICEF institutional /individual contractors | 100,000 | 0 | 0 | 100,000 | |

| | | | | | | | | | |
|--|-------|--|--|---|--|---------|---------|---------|--------|
| 11.4.3 Capacity building of health professionals in health behavior change communication | | | | UNICEF / FMoH, MoHSW RS, BD, FPHI, PHI RS, cantonal/municipal authorities, NGOs, research company, UNICEF institutional /individual contractors, media | 50,000 | 0 | 0 | 50,000 | |
| 11.4.4 Conduct training for parents including Roma and other socially excluded on benefits of IECD and ECI services, immunization and breastfeeding | | | | UNICEF / FMoH, MoHSW RS, BD, FPHI, PHI RS, cantonal/municipal authorities, NGOs, media, UNICEF institutional /individual contractors | 100,000 | 0 | 0 | 100,000 | |
| Output 11.5: Increased national capacity to deliver integrated sexual and reproductive health services and promote sexual health, including family planning, maternal health and HIV/AIDS with focus on youth and vulnerable groups. | UNFPA | <p>Output indicator 11.5a: # of guidelines, protocols and standards for healthcare workers developed for delivery of quality SRH services Baseline: 0 Target: 4 (2019)</p> <p>Output indicator 11.5b: % of service delivery points at primary healthcare level providing at least 3 integrated RH services Baseline: 0% Target: 25% (2019)</p> <p>Output indicator 11.5c: Mechanism for maternal death and surveillance system established at pilot sites Baseline: No Target: Yes (2019)</p> | BIH health authorities and PHIs reports; MoFA; Regular program reports; MICS 2016 survey analysis. | <p>Risks: Lack of understanding on family planning/maternal death surveillance systems/RH emergency response and its impacts on social and economic development. Health systems burdened with high priority needs, reforms and changes. MoEs pressured with a number of other subjects, curricula developments and political agenda.</p> <p>Assumptions: Health professionals, MoHs highly motivated to strengthen the healthcare system. No sudden/major changes with the major decision makers.</p> | Agency specific National execution to the highest extent possible | 250,000 | 200,000 | 0 | 50,000 |
| Activities | | | | Implementing UN entity/ National Partner | | | | | |
| 11.5.1 Development and implementation of evidence-based SRH guidelines. | | | | UNFPA/ FMoH, MoHSW RS, BD, FPHI, PHI RS, cantonal/municipal authorities, NGOs, media, UNFPA institutional contracts, | 60,000 | 60,000 | 0 | 0 | |
| 11.5.2 FP curriculum developed. | | | | UNFPA/ FMoH, MoHSW RS, BD, FPHI, PHI RS, cantonal/municipal authorities, NGOs, media, UNFPA institutional contracts | 60,000 | 60,000 | 0 | 0 | |
| 11.5.3 Beyond the Numbers methodology for maternal death surveillance established at pilot sites. | | | | UNFPA/ FMoH, MoHSW RS, BD, FPHI, PHI RS, cantonal/municipal authorities, NGOs, media, UNFPA institutional contracts | 130,000 | 80,000 | 0 | 50,000 | |

| | | | | | | | | | |
|---|------|---|--|--|-----------------|----------------|---|----------------|---|
| Output 11.6: Strengthened systems and capacities for the provision of mental health services in line with international standards for military personnel. | IOM | Output indicator 11.6: Establishment of new system of protection of mental health of military personnel and families institutionalized in Ministry of Defense. Baseline: No official system in place for the protection of mental health of military personnel in Ministry of Defense. Target: System establish and fully self-sustainable by end of 2015. | Decision signed by Minister on establishment of system; Policy, Rulebook, and Operational Manual developed; psychologists hired (six); Protocols on Cooperation signed with Ministries of Health of both entities. | | Agency specific | 1,162,358 | 0 | 1,162,358 | 0 |
| Activities | | | | Implementing UN entity/ National Partner | | | | | |
| 11.6.1 BiH-specific methodologies and operational structure developed and integrated in the MoD system. | | | | IOM | | 348,707 | 0 | 348,707 | 0 |
| 11.6.2 Trainings for Psychologists. | | | | IOM | | 813,651 | 0 | 813,651 | 0 |
| Output 11.7: TB-infected people have access to effective treatment across BiH and people with or at risk of HIV/AIDS have non-discriminatory and adequate access to medical and counseling services. | UNDP | Output indicator 11.7: Mechanisms for effective TB BiH identification and treatment and HIV/AIDS prevention at local, entity and state level with fully equipped laboratories, testing facilities and trained staff Baseline: n/a Target: n/a | National Health Accounts. Entity Ministries of Health official statistics. Ministry of Civil Affairs reports. Project reports. | | Agency specific | 8,694,763 | 0 | 8,694,763 | 0 |
| Activities | | | | Implementing UN entity/ National Partner | | | | | |
| 11.7.1 Support to NTPs management units established at all country referral levels. | | | | UNDP, Ministry of Civil Affairs, Ministry of Health and Social Welfare of RS, Federal Ministry of Health, Public Health Institute of FBiH, | | 476,067.32 | 0 | 476,067.32 | 0 |
| 11.7.2 Development and implementation of quality improvement measures for all laboratories in B&H (including procurement of most needed laboratory equipment). | | | | Public Health Institute of RS, Association for Assisting Drug Users - PROI, | | 805,803.63 | 0 | 805,803.63 | 0 |
| 11.7.3 Implementation of infection control policies and practices, and addressing emerging challenges such as MDR-TB. | | | | Action Against AIDS, Association for Sexual and Reproductive Health XY, Foundation PH Suisse – | | 150,261.38 | 0 | 150,261.38 | 0 |
| 11.7.4 Strengthening of health system efforts to provide adequate health care, with focuses on TB, to the Roma and other vulnerable population. | | | | Partnerships in Health, Association Margina, UG Viktorija, Poenta, Association APOHA, World Vision, IOM | | 1,135,024.18 | 0 | 1,135,024.18 | 0 |
| 11.7.5 Maximize coverage of effective HIV prevention and care among most-at-risk populations. Scaled up Information Education Communications/Behaviors Change Communications (IEC/BCC) in Populations with Increased Risk for HIV/AIDS Infection. | | | | | | 3,429,612.07 | 0 | 3,429,612.07 | 0 |
| 11.7.6 Ensure appropriate prevention, treatment, care and support for people living with HIV/AIDS. | | | | | | IOM 242,467 | | IOM 242,467 | |
| 11.7.7 Strengthen the enabling environment for the scaling up of HIV prevention and care. | | | | | | 1,066,848.74 | 0 | 1,066,848.74 | 0 |
| 11.7.8 Strengthen the capacity of the coordination and implementing agencies to respond HIV/AIDS. | | | | | | 57,619.46 | 0 | 57,619.46 | 0 |
| | | | | | | 1,331,058.97 | 0 | 1,331,058.97 | 0 |

| OUTCOME/AGENCY | Total (USD) | Core/ Regular/ assessed (USD) | Non-core/ other/ extra budgetary(USD) | To be mobilized/ funding gap(USD) |
|--------------------------------|-------------------|----------------------------------|---|--------------------------------------|
| OUTCOME 7 | 2,729,220 | 426,120 | 1,627,350 | 675,750 |
| UNFPA | 60,000 | 60,000 | 0 | 0 |
| UNICEF | 2,487,000 | 185,900 | 1,625,350 | 675,750 |
| UNODC | 105,000 | 105,000 | 0 | 0 |
| UNV | 77,220 | 75,220 | 2,000 | 0 |
| OUTCOME 8 | 755,000 | 166,100 | 312,650 | 276,250 |
| UNICEF | 755,000 | 166,100 | 312,650 | 276,250 |
| OUTCOME 9 | 25,356,755 | 2,378,934 | 12,840,567 | 10,137,254 |
| IOM | 1,150,000 | 0 | 0 | 1,150,000 |
| UNDP | 3,505,000 | 200,000 | 2,955,000 | 350,000 |
| UNFPA | 25,000 | 25,000 | 0 | 0 |
| UNHCR | 18,281,035 | 1,798,314 | 9,173,567 | 7,309,154 |
| UNICEF | 2,314,500 | 276,400 | 710,000 | 1,328,100 |
| UNV | 81,220 | 79,220 | 2,000 | 0 |
| OUTCOME 10 | 1,929,000 | 302,500 | 260,000 | 1,366,500 |
| UNICEF | 1,929,000 | 302,500 | 260,000 | 1,366,500 |
| OUTCOME 11 | 13,007,121 | 502,000 | 11,141,857 | 1,363,264 |
| IOM | 1,404,825 | 0 | 1,404,825 | 0 |
| UNDP | 8,452,296 | 0 | 8,452,296 | 0 |
| UNFPA | 250,000 | 200,000 | 0 | 50,000 |
| UNICEF | 1,800,000 | 302,000 | 184,736 | 1,313,264 |
| WHO | 1,100,000 | 0 | 1,100,000 | 0 |
| BIENNIAL TOTAL PILLAR 3 | 43,777,096 | 3,775,654 | 26,182,424 | 13,819,018 |
| IOM | 2,554,825 | 0 | 1,404,825 | 1,150,000 |
| UNDP | 11,957,296 | 200,000 | 11,407,296 | 350,000 |
| UNFPA | 335,000 | 285,000 | 0 | 50,000 |
| UNHCR | 18,281,035 | 1,798,314 | 9,173,567 | 7,309,154 |
| UNICEF | 9,285,500 | 1,232,900 | 3,092,736 | 4,959,864 |
| UNODC | 105,000 | 105,000 | 0 | 0 |
| UNV | 158,440 | 154,440 | 4,000 | 0 |
| WHO | 1,100,000 | 0 | 1,100,000 | 0 |