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R E S E A R C H

EVALUATION OF UNICEF MONGOLIA'S GEOGRAPHIC TARGETING APPROACHES IN PROGRAMMING

(Country Programmes 2012-2016 and 2017-2021)

unicef
for every child

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Evaluation of UNICEF Mongolia's Geographic Targeting Approach in programming (Country Programmes 2012-2016 and 2017-2021)

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Preface

UNICEF Mongolia Country Office has taken an innovative approach to focus its programmatic work in a number of selected provinces and districts in order to ensure best possible results for children for the last two Country Programmes (2012-2016 and 2017-2021). This geographic targeting approach has enabled UNICEF to demonstrate affordable, integrated, and highly effective solutions to bring essential services to children at local level.

The presence at the local level has become very important in piloting innovative models as a learning experience and expanding those models into the national level and generating evidence for national policy advocacy. UNICEF has adopted the Child Friendly Community (CFC)- umbrella strategy to improve synergies between the programme priority areas and enhance the capacity of local government to deliver services to children in selected geographic focus areas (GFAs). The strategy brought together all stakeholders and UNICEF to create inclusive and child friendly provinces, districts, and communities in GFAs.

Under the umbrella of CFC, UNICEF supported local governments to introduce numerous cost efficient and high impact interventions in all sectors to bring tangible results for children. To highlight a few, UNICEF supported local governments to establish innovative and climate resilient container-type sanitation units with toilets and showering facilities in schools and kindergartens. UNICEF also introduced an innovative strategy to deliver integrated Early Childhood Development services to work cross sectorally with health, nutrition, child protection, governance, adolescence, gender, WASH, monitoring and evaluation, and environment. Multi-disciplinary teams in GFAs are providing effective child protection services for children thanks to UNICEF's technical support.

UNICEF has successfully contributed to reducing the risks of air pollution to maternal and child health through enhanced evidence and showcasing new energy efficient, green product and service packages on the ground. Moreover, many children with disabilities are benefitting from inclusive education interventions that are effectively implemented in GFAs. Children from herder families in most remote areas are reaping the benefits of child friendly shock responsive social protection services as a result of the pilots that UNICEF led at the local level.

By implementing the above cost-efficient and high-impact interventions at the local level, UNICEF builds evidence to expand the successful practices nationwide by government partners. UNICEF successfully advocated to scale up interventions in programme areas at the national level.

The evaluation of the geographic targeting approach has been conducted in a timely manner to assess its achievements in Mongolia and inform the design of the next Country Programme. It provides evidence for policy initiatives and validates scaling up by the central and local authorities to sustain and replicate successful models. The evaluation offers a number of strategic and operational recommendations that will inform UNICEF's decision to continue using the geographic targeting approach and ways to improve its effectiveness.

I express my sincere appreciation to Cognos International LLC and its dedicated team for conducting a comprehensive evaluation despite the challenging times of the pandemic. I also express my gratitude to all children, local government officials, and UNICEF colleagues at Regional and Country offices for their invaluable contribution throughout the evaluation process.

Alex Heikens

Representative
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List of Acronyms

ADB	Asian Development Bank	**KPI**	Key Performance Indicator
AFCYD	Authority for Family, Child and Youth Development	**LDF**	Local Development Fund
CDC	Child Development Centre	**LGA**	Local Government Authority
CFC	Child Friendly Community	**LSE**	Life Skills Education
CHIPS	Cooking, Heating, Insulation Products and Services	**MCH**	Maternal and Child Health
CP	Country Programme	**MoF**	Ministry of Finance
CPD	Country Programme Document	**MoH**	Ministry of Health
CO	Country Office	**MES**	Ministry of Education and Science
CRC	Convention on the Rights of the Child	**MTD**	Multi-Disciplinary Teams
CRH	Citizens' Representative Hurals	**NAC**	National Authority for Children
CSE	Comprehensive Sexuality Education	**NGO**	Non-Governmental Organization
CSO	Civil Society Organisations	**NNS**	National Nutrition Survey
CWD	Children with Disability	**NSO**	National Statistics Office
DAC	Development Assistance Committee	**PMT**	Proxy Means Tests
EAPRO	East Asia and Pacific Regional Office	**SAM**	Severe Acute Malnutrition
ECD	Early Childhood Development	**REDS**	Reaching Every District and Soum Strategy
ECE	Early Childhood Education	**SDC**	Swiss Agency for Development and Cooperation
EMIS	Education Management Information Systems	**SDG**	Sustainable Development Goals
EPI	Expanded Programme of Immunization	**SISS**	Social Indicator Sample Survey
FGD	Focus Group Discussion	**SPT**	Special Purpose Transfers
GFA	Geographic Focus Area	**SR**	Strategic Recommendations
GEROS	Global Evaluation Reports Oversight System	**SRSP**	Shock-Responsive Social Protection
GOLSWS	General Office for Labour and Social Welfare Services	**STI**	Sexually Transmitted Infections
GTA	Geographic Targeting Approach	**ToC**	Theory of Change
GO	Governor's Office	**ToR**	Terms of Reference
GoM	Government of Mongolia	**UB**	Ulaanbaatar
HSES	Household Socio-Economic Survey	**UNDAF**	United Nations Development Assistance Framework
IAECD	Integrated Approach on Early Childhood Development	**UNEG**	United Nations Evaluation Group
IBL	Integrated Budget Law	**UNFPA**	United Nations Population Fund
ICT	Information Communication and Technology	**WASH**	Water, Sanitation and Hygiene
IFI	International Financial Institution	**WB**	World Bank
INGO	International Non-Governmental Organization	**WHO**	World Health Organization
INLA	Geospatial Regression Model	**WSP**	Water Safety Plan
IYCF	Infant and Young Child Feeding	**WV**	World Vision
KII	Key Informant Interview		
KOICA	Korea International Cooperation Agency		

Executive Summary

This document represents the Evaluation Report of "UNICEF Mongolia's geographic targeting approaches (GTA) during the 2012-2016 and 2017-2021 Country Programmes (CPs)". The evaluation was conducted between February 2020 and February 2021.

Objectives and Purpose of the Evaluation

The **objectives** of the evaluation were the following:

1. assess the extent to which UNICEF's **GTA** is contributing to achieving the results of the Country Programme Document (CPD);
2. assess whether UNICEF's targeting approach, as was implemented in the **geographic focus areas (GFAs)** addressed the need of the most disadvantaged children in a holistic manner;
3. assess UNICEF's contribution to enhancing **local governments' capacity** to effectively plan and manage integrated and equitable service provisions for children in a holistic manner;
4. identify **lessons learned and emerging good practices**, as well as to determine more effective and efficient modalities for the implementation of the geographic targeting approaches; with the purpose of accelerating results for children in Mongolia, and narrowing the gap with the most disadvantaged children;
5. assess the extent to which UNICEF's support to **sub-national activities** within priority GFAs contributed to **national scale-ups**.

The **purpose** of the evaluation was three-fold: (1) to assess along verified evaluation criteria the local GTA utilized by UNICEF in Mongolia over the past two CPs; (2) to provide recommendations regarding ways to improve the current GTAs; and (3) to inform the programming and design of support through the new 2023-2027 CP. While the evaluation primarily has an **evaluation** intent, as indicated in its main objectives, it will also serve to help inform the implementing partnerships' (UNICEF, Government of Mongolia (GoM)) decision regarding the continued use of the GTA.

The intended primary **users of this evaluation** are the United Nations (UN) as a whole and UNICEF Country Office (CO) from a programmatic point of veiw, and GoM, its partners, and sub-national government entities in the selected target areas. Key GoM partners of UNICEF are the Ministry of Labour and Social Protection (MLSP), Ministry of Health (MoH), Ministry of Educatioin and Science (MES), the Authority for Family, Child and Youth Development (AFCYD), the National Development Agency, the Cabinet Secretariat, and the Ulaanbaatar (UB) City Municipality.

Evaluation Object

The **object of the evaluation** was the GTAs of the 2012-2016 and 2017-2021 UNICEF CPs in Mongolia, to inform the next Country Programme.

The GTA encompasses a multi-level strategy by simultaneously providing technical assistance at the central level, while also focusing on a package of decentralised interventions, chosen for their potential as demonstrations, to be followed by nationwide, or broader replication. Through the GTA, UNICEF aims to amplify its impact at the local level, by creating synergies and limiting cross-sectoral duplication and/or inconsistencies. At a higher-level, the GTA should help UNICEF pursue its mission statement effectively, by ensuring that interventions are inclusive of disadvantaged children and communities most in need.

During CP 2012-2016, UNICEF and its GoM partners identified two GFAs for targeted intervention, namely the Nalaikh district (a peri-urban area) and Khuvsgul province. During CP 2017-2021, the number of selected GFAs was increased to 4: Bayanzurkh district in UB (population 361,689), and three target aimags – Bayankhongor (population 88,672), Govi-Altai (population 57,748) and Zavkhan (population 72,823) as per latest official statistics of 2019 population data .

The CP 2017-2021 has 4 programme components:

- **Outcome 1**: By 2021, the most disadvantaged children in Mongolia benefit from increased access and utilisation of services that promote health and nutrition, including water, sanitation, hygiene and interventions that mitigate the impact of air pollution on child survival.
- **Outcome 2**: By 2021, the most disadvantaged children access and utilise services in a healthy, inclusive and quality learning environment
- **Outcome 3**: By 2021, child-related national policy, budget and systems, including the child protection system, are inclusive and equity focussed.
- **Outcome 4**: Country programmes are efficiently designed, coordinated, managed and supported to meet quality programming standards in achieving results for children.

Evaluation Methodology

The evaluation utilised a **mixed-method approach**, including: a stakeholder mapping exercise, in-depth documentary review and structured desk analysis; reconstruction and systematic testing of UNICEF's Theory of Change (ToC); analysis of national and sub-national quantitative data on marginalisation and deprivation of children; adolescents and children, against UNICEF's Results Frameworks for both CPs; elaboration of a counter-factual through data collection in an non-GFA aimag; in-depth key informant interviews (KIIs), focus group discussions (FGDs) and observations through the case studies developed.

The evaluation was carried out in three phases. In the **Inception Phase**, review of key documentation and development of data collection and evaluation tools were carried out. An evaluation inception report was elaborated and shared with the UNICEF CO. The **Data Review and Collection Phase** was devoted to the in-depth documentary review, and collection of data from existing national surveys, as well as from the KIIs and FGDs taking place in the GFAs between June and September 2020. In the final **Analysis and Synthesis Phase**, a **contribution analysis** was used to identify specific changes due to the targeting approach within GFAs versus the non-GFA control-aimag. Standard United Nations Evaluation Group (UNEG)/Development Assistance Committee (DAC) evaluation criteria analysis (relevance, effectiveness, efficiency, impact and sustainability) was used, in combination with a **gender, equity, and human rights-based approach** in order to assess the achievement of results, identify positive stories and lessons learned, draw evidence-based conclusions, and provide actionable recommendations.

Contextualisation of Findings and Analysis: The total population in Mongolia is over 3 million, with around a third made up of children aged 0-17 years old. Disparities in child issues persist based on geography, income, age, gender, and ethnicity. The national child poverty rate is 37% among children aged 0-17, with slightly lower rates in UB where more than half of the population reside in crowded urban areas as compared to rural areas, and acute poverty in ger communities (NSO 2020). The Multiple Overlapping Deprivation Analysis (MODA)[1] analysis notes that that the proportion of girls experiencing deprivation is slightly higher among Infant and Young Child Feeding (IYCF), overweight, missed vaccination and antenatal care indicators.

Furthermore, according to a report by the National Statistics Office (NSO), familial and institutional violence against children is also an issue of growing concern, with 49.1% of children aged 1-14 having experienced violent discipline[2]. Herder and semi-nomadic children make up almost a third of Mongolia's population, and suffer worse education outcomes, with only about 14% enrolled in early childhood education (ECE) services[3]. The Kazakh minority population (7%), largely located in the Western region, tends to suffer particularly high deprivation, such as poor school attendance and malnutrition[4]. The Committee on the Rights of the Child noted inequities in access to, and the quality of, social services for children of ethnic minorities.

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[1] *The Economic Policy Research Institute (2016): Study of child poverty in Mongolia using Multiple Overlapping Deprivation Analysis*

[2] *NSO, UNICEF (2019) Social Indicator Sample Survey 2018*

[3] *World Bank Group Pre-primary education in Mongolia: access, quality of service delivery, and child development outcomes, 2017*

[4] *UNICEF (2014) Analysis of the Situation of Children 2014, p.51*

The effect of COVID-19 in Mongolia: The COVID-19 pandemic created a heightened need among disenfranchised and vulnerable groups (youth, children, women, and rural populations). UNICEF switched into emergency programmatic mode as the GoM put in place restrictions to control the pandemic. The situation however limited UNICEF's ability to carry out interventions and activities at the local level – a situation they adapted to by moving capacity building interventions on-line, which was highly appreciated.

Main Findings and Conclusions

The GTA in Mongolia related to CP 2012-2016 and the current CP 2017-2021 has been implemented in challenging geographical conditions where existing structural challenges are compounded with the changing urgencies and prioritisations following the COVID-19 pandemic. While UNICEF pursues its vision of assisting the most deprived children, it aims to be holistic in its intervention strategies, working both upstream in policy advocacy and downstream, at sub-national aimag, soum and district levels in GFAs. The feedback received from 173 stakeholders, duty-bearers and rights holders confirms that UNICEF is a respected and appreciated partner, and facilitators of rights based, equitable programme interventions for children, particularly the most disadvantaged children in their target locations.

UNICEF GTA demonstrated success in reaching those most in need through an effective intersectoral and integrated intervention packages. UNICEF contributed to enhancing local government capacity over the evaluated period, and the transfer of good practice models from the 2012-2016 CP to the current CP was successful, however, more is needed to ensure local financing and sector support for sustainability. More specific findings and conclusions for each evaluation criterion are presented below:

Relevance: UNICEF uses their GTA to determine to which aimag, districts and soums they will work. This largely internal process was done based on a mix of criteria – some evidence-based analysis of data, other more subjective related to efficiency and other considerations. Stakeholders considered there was a good alignment and agreement between UNICEF's targeting approach and GoM policy priorities. The GFAs selected were generally relevant for the GoM. Within the GFAs, how deprivation is measured and targeted was less clear as the definition of what constitutes a "vulnerable or deprived" group or area differs. Depending on the granularity of the data collected on deprivation, the GTA's alignment with the reality of the geographic distribution of poverty and need varies. The GTA thus faces an issue of consistency regarding the rationale for area selection.

Nevertheless, UNICEF's work at local level was considered relevant in integrating Human Rights and equity-based approaches overall to the needs of vulnerable children, particularly children with disabilities (CWDs) (**Outcome 2**). More purposeful intervention for specific sub-populations of children of ethnic, religious, or geographic disadvantage was perceived as needed.

Effectiveness: UNICEF's GTA has been effective in advocating for improved national laws, policies and guidelines, integrated intervention strategies and financial budgeting arrangements relevant to child health, education, and social service delivery. UNICEF's was widely appreciated by stakeholders for the value of its evidence-based advocacy and agenda-building for child and adolescent wellbeing and related outcomes

At the sub-national level, UNICEF's support for decentralised, planning, budgeting and intersectoral intervention strategies were considered successful by Governor's offices, sector partners and as well as practitioners such as social workers, and teachers (**Outcome 3**). Local government capacity has been developed as aimag governors and their offices take ownership of child rights issues, improving planning and coordination processes, and integrating inclusion of children's voices in local priority setting.

The UNICEF Child Friendly Community (CFC) approach, based on the Convention on the Rights of the Child (CRC) principles, has helped to create an integrated, holistic, multisectoral safety net at sub-national levels to meet the needs of the most disadvantaged children (**Outcome 2**). The functionality of the CFC approach is enhanced by the noticeable motivation and commitment of local administrators to the programme. The CFC has proven to be a Good Practice model for replication and scale-up nationally.

Other UNICEF strategies to increase sub-national efforts on behalf of children were mixed. Capacity building and advocacy for local government authorities (LGA) to increased budget allocations for children was somewhat successful in increasing LDF contribution, however, institutional constraints necessarily limit the approach. Likewise, while UNICEF has provided capacity building for a wide range of stakeholders as evidenced by their appreciation of child rights and the CFC approach, the ability to effect significant change through awareness raising is limited.

Efficiency: UNICEF's application of the GTA in the past 2 CPs was an efficient step-wise strategy to testing intervention models for future replication and scale up across the country. The selection of GFAs also included efficiency criteria, which was cost-saving for logistical concerns.

The CFC strategy implicated successfully local Governors and authorities to sustain the initiative demonstrating the catalytic power (and efficiency) of transfer of ownership to local authorities for implementing integrated programmes for children. UNICEF's intersectoral intervention packages involves multiple departments and programme components within UNICEF, yet the collective package did not necessarily reduce siloed programming by sector colleagues or within UNICEF programmes.

UNICEF has developed important partnerships with NGOs and the private sector to implement intersectoral programmes adding to their efficiency and sustainability at sub-national level. Duplication of efforts has reduced according to partners; better alignment of efforts under the United Nations Development Assistance Framework (UNDAF) through joint projects could increase UN organisational efficiency.

Finally, UNICEF has a robust monitoring and evaluation results framework that is informed by administrative data, UNICEF supported national databases and survey data of high quality. During CP 2012-2016, the outputs and key performance indicators were rather high level and generally (with only a few exceptions) did not include specific targeting to reach the most disadvantaged children. The current results framework for CP 2017-2021 however is more specific and targeted, offering greater opportunity to further disaggregate and focuses on subpopulations of children in greatest need.

Sustainability: UNICEF's GTA strategy helped to facilitate sustainable engagement of policymakers for replicating and scale-up of pilot interventions. For instance, the human capacity built in the previous GFA of Khuvsgul (CP 2012-2016) on the CFC provided lessons learned to these new GFAs (CP 2017-2021) which were taken up and improved up. Successful experiences of private sector and NGOs have also been drivers of sustainability, especially for Water, Sanitation and Hygiene (WASH) and Early Childhood Education (ECE) interventions such as mobile kindergarten. In principle, LGAs are free to adopt CFC strategies and principles but there are legitimate concerns regarding their ability to sustain financial support of activities and related outcomes through targeted budgetary allocations. Some LGA respondents considered the extent that the CFC work plan can be implemented depends on adjustments or increases to local public recurrent or capital spending to better target vulnerable children, which is a challenge within current funding instruments and rules. Alternatively, some respondents noted that new or existing plans and startegies can be made child friendly with existing or new resources.

Recommendations

The evaluation provides a number of strategic and operational recommendations, which are addressed to the GoM, UNICEF, UN organisations and stakeholders at national and local levels, in line with the ToR and the need to engage all major stakeholders in a concerted effort for the continued effectiveness of the GTA through this CP and the following ones.

Strategic Recommendations (SR)	**SR1:** Continue the GTA approach with more to clarity of its scope, purpose, evidence base, and applicability.
	SR2: Develop an overarching ToC with composite indicators for UNICEF's GTA
	SR3: Ensure sustainability of UNICEF's integrated intervention strategies in the GFAs before scale-up
	SR4: From a Human Rights perspective, give heightened priority to children in the most vulnerable situations in Mongolia.
Operational Recommendations (OR)	**OR1:** Strengthen coordination mechanisms of the CFC at all levels for effectiveness and sustainability
	OR2: Advocate for child friendly plans and programmes with adequate resources at national and sub-national levels.
	OR3: Support local use of data by LGAs and line ministries to improve the focus of interventions at the sub-national level for the most disadvantaged children, especially during COVID-19.
	OR4: Improve cost-effective targeting and approaches to training and capacity building
	OR5: Reduce siloed programming within UNICEF through integrated management of the whole child approach

1. Introduction

1.1 Overview of key issues facing children, adolescents and their families

The United Nations (UN) and its agencies have been working in Mongolia since 1963, artnering with the Mongolian government to reach its sustainable development goals (SDGs)[12], with 114 key activities being implemented across 20 locations nationally. This has resulted in good progress amongst the SDGs most relevant to children, adolescents and their families. For example, nearly half of interventions addressing SDG 1 (End poverty in all forms) have been completed. Similarly, 60% of actions related to SDG 3 (Good health and wellbeing) have been delivered, and more than 70% of SDG 5 activities (Empower all women and girls) have been successfully led[13]. Mongolia is well situated to further its positive trend and to address the key issues which still persist.

Children and adolescents – a demographic particularly vulnerable in the wake of socio-economic shocks as a result of crises such as COVID-19 – made up one third of the country's population[14] of Mongolia's economy in 2016. Targeting the needs of children and adolescents thus aligns with UNICEF's capacity in supporting Mongolia to attain its development goals. Indeed, Mongolia recognises the needs of its younger generations and demonstrates a longstanding commitment to children. Its youthful population and Mongolia's commitment represent a clear opportunity to translate this into sustainable socio-economic progress.

Mongolia's geography, varying population density, and localised harsh weather conditions represent specific challenges, however, in reaching the most deprived. 46.6% of the population resides in rural areas[15], where the provision of social protection services is sparser and less reliable. Around two-thirds of registered people with disabilities (PWDs) live in rural and remote

> **Box 1.** Key issues facing children
>
> Household poverty: children that suffer the worse health outcomes, have low self-esteem, have trouble at school and with the law live in poor households[5]
>
> Nutritional deficiency: stunting affects 10.5% of children in rural areas and 5.6% of those in urban areas[6]
>
> Health problems: Pneumonia is now the leading cause of under-five child mortality in the country[7] due to exposure to pollutants
>
> Violence against children: 49.1% of children up to 14 having experienced violent discipline[8]
>
> Mental health struggles: attempted suicide rates up to 14.7% in adolescent girls (2019)
>
> Unequal access to opportunity: Adolescents living in poor ger districts benefit from social development due to environmental degradation where they live
>
> Violence against children: Around half of all children up to age 14 have experienced violent discipline[9]- an indication that social protection systems are insufficient
>
> Mental health: Suicide rates among adolescents aged 10-14, have increased five-fold; attempted suicide over the previous year was as high as 14.7% in girls and 10% in boys[10]
>
> Sexual and reproductive health: Adolescent pregnancy and childbirth, unsafe abortion, sexually transmitted infections (STIs) are on the rise among young people[11]

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[5] *UNICEF (2014) Analysis of the Situation of Children 2014, p.20*

[6] *UNICEF/WHO/World Bank Group: Joint child malnutrition estimates*

[7] *Centre for Health Development (2019) Health Indicators 2018*

[8] *UNICEF, Social Indicator Sample Survey 2018*

[9] *NSO, UNICEF (2019) Social Indicator Sample Survey 2018*

[10] *Global School-Based Student Survey, Mongolia, 2010: Youth's health behaviour among secondary school children. CDC, WHO et al, 2010*

[11] *Ibid.*

[12] *UN Mongolia, (2020). "Our Work on the Sustainable Development Goals in Mongolia". (Accessed Dec. 2020).*

[13] *Ibid*

[14] *NICEF, (2016). Country programme document – Mongolia. 14-16 September 2016*

[15] *Ibid.*

areas[16], further exacerbating the need to address their specific issues.

Even within the capital UB, disparities persist based on living situation, and income. Mass rural-urban migration has led many to live in large, unplanned settlements in the outskirts of cities, with around 60.0% of UB's population living in underserviced informal settlements or ger areas[17.] This leads to further disenfranchisement, and degraded health, education, and economic outcomes.

Disparities in child issues also persist based on geography, income, age, gender, and ethnicity. The national child poverty rate is 37% among children aged 0-17, with slightly lower rates in UB as compared to rural areas[18], and acute poverty in ger communities[19]. Poverty impacts child health and development at all levels; a 2014 Situation Analysis of Children Mongolian noted that "children from income poor households tend to have worse health outcomes; do less well in school; are more likely to report low self-esteem; and, may be more likely to come in contact with the law, or get involved in risky behaviour"[20].
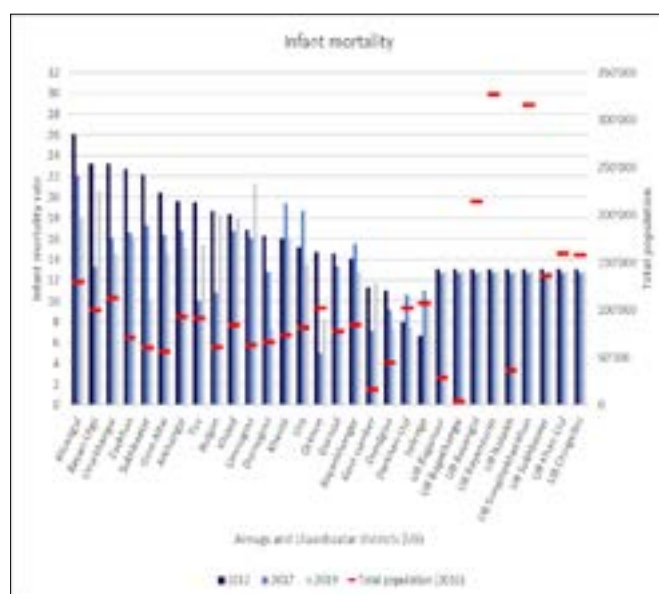
Figure 1. Infant Mortality by all aimags and districts of Mongolia, 2012-2019

UNICEF notes the significant progress made by Mongolian authorities in reducing infant mortality rates and under-five mortality rates[21,22]. Successful vaccination campaigns against measles and rubella ensured that over 600,000 children were vaccinated, no new paediatric cases detected, and many lives of children and young people saved as a result. However, improvement is not uniform across all aimags. Umnugovi for instance reported a higher level of infant mortality in 2019, compared to 2017. Despite national improvements, specific factors leading to negative health and survival outcomes for infants remain of urgent concern to UNICEF[23]. Barriers to adequate infant nutritional health include household poverty, lack of awareness around infant nutrition, and barriers to breastfeeding[24]. The nutritional status of children under five has suffered, with the prevalence of underweight 1.8%, stunting 9%, wasting 0.9% and overweight 10.5%[25].

Figure 2 shows an overall downward trend by aimag in under-five mortality. For instance, Bayankhongor reports an under-five mortality rate of 13 deaths per 1,000 live births in 2019. Nonetheless, UNICEF Mongolia considers the under-five mortality rate, "still a concern, with stark inequalities between remote regions and UB"[26], with some aimags (Bulgan, Dornogovi) experiencing an increase of under-five mortality since 2012. Disparities exist across household income, with greater mortality and increased stunting amongst children in the poorest quintile as compared to those in the wealthiest quintile (respectively, 26 vs 17 per 1000 livebirths; 13.8% vs 6.0% stunting)[27].

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[16] https://www.1212.mn/stat.aspx?LIST_ID=976_L03

[17] https://www.1212.mn/tables.aspx?TBL_ID=DT_NSO_3500_006V1

[18] NSO (2020) Mongolia Poverty Update 2018

[19] NSO (2020) Mongolia Poverty Update 2018

[20] UNICEF (2014) Analysis of the Situation of Children 2014, p.20.

[21] UNICEF Data Warehouse (2020), Mongolia, Infant mortality, 2012-2019

[22] UNICEF Data Warehouse (2020), Mongolia, Neonatal mortality, 2012-2019

[23] UNICEF, GoM, National Authority for Children (2014), Analysis of the Situation of Children in Mongolia (2014), pp.18-35

[24] National Center for Public Health, UNICEF. (2017), Key Nutrition Concerns in the Population of Mongolia, pp.10-13

[25] UNICEF. (2019), Country Office Annual Report 2019

[26] UNICEF (2020) UNICEF Mongolia [country office website]

[27] NSO, UNICEF (2019) Social Indicator Sample Survey 2018

Figure 2. Figure 2: Under 5 Mortality by all aimags and districts of Mongolia, 2012-2019
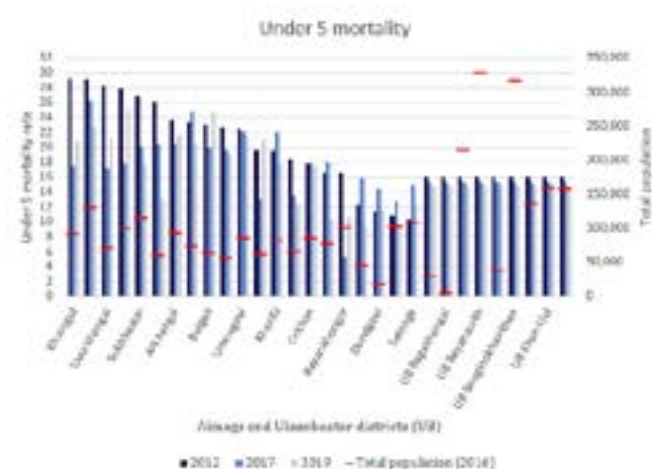
These disparities extend to the urban/rural divide, with 10.5% stunting amongst children in rural areas versus 5.6% in urban areas[28]. Such disparities necessitate development of disaggregated analysis, as exemplified by geographic targeting approaches (GTA) within UNICEF Mongolia's Country Programmes (CPs).

Furthermore, boys and girls face separate challenges and deprivation gender inequalities persist, with higher rates of under-five mortality among boys than girls (30 and 18 per 1,000 live births)[29]. The Multiple Overlapping Deprivation Analysis (MODA)[30] analysis notes, however, that that the proportion of girls experiencing deprivation is slightly higher among Infant and Young Child Feeding (IYCF), overweight, missed vaccination and antenatal care indicators. Furthermore, gender-based violence predominantly impacts women and girls in Mongolia. According to a report by the National Statistics Office (NSO), 58% of Mongolian women experienced one or more forms of violence in their lifetime, a third of them experience sexual or physical violence in their lifetime, and 1 in 10 women surveyed was sexually abused before the age of 15[31].

Familial and institutional violence against children is also an issue of growing concern, with 49.1% of children aged 1-14 having experienced violent discipline[32]. Violations of children's rights and physical well-being are rooted in social problems such as widespread poverty, alcoholism, the lack of awareness about child rights and well-established systems to protect children.

Adolescents further face their own challenges, including an increasingly urgent mental health crisis. Since 2013, there has been a five-fold increase in suicide among adolescents aged 10-14, while the share of adolescents who have attempted suicide over the past year was as high as 14.7% in girls and 10% in boys. Other problems faced by adolescents include adolescent pregnancy and childbirth, unsafe abortion, STIs, the incidence of which is on the rise amongst those aged between 15 and 24[33].

Lastly, herder and semi-nomadic children make up almost a third of Mongolia's population, and suffer worse education outcomes, with only about 14% enrolled in early childhood education (ECE) services[34]. The Kazakh minority population (7%)[35], largely located in the Western region, tends to suffer particularly high deprivation, such as poor school attendance and malnutrition[36]. The Committee on the Rights of the Child noted inequities in access to, and the quality of, social services for children of ethnic minorities[37]. Despite this, there are signs of progress when it comes to reaching the most deprived, with a genuine emphasis on developing capacity and addressing vulnerabilities inclusively across ethnic and geographic discrepancies, with UNICEF technical support and guidance[38].

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[28]   *UNICEF/WHO/World Bank Group: Joint child malnutrition estimates*

[29]   *UNICEF (2016) Country programme document 2017-2021*

[30]   *The Economic Policy Research Institute (2016): Study of child poverty in Mongolia using Multiple Overlapping Deprivation Analysis (MODA)*

[31]   *National Statistics Office, UNFPA, SDC, Australian Aid. (2018). Breaking the silence for equality.*

[32]   *NSO, UNICEF (2019) Social Indicator Sample Survey 2018*

[33]   *Global School-Based Student Survey, Mongolia, 2013: Youth's health behaviour among secondary school children. CDC, WHO et al, 2013.*

[34]   *World Bank Group Pre-primary education in Mongolia: access, quality of service delivery, and child development outcomes - March 2017 (English). Washington, D.C*

[35]   *National Statistics Office of Mongolia. (2015), 2015 Population and Housing By-Census of Mongolia: National Report, p.35*

[36]   *UNICEF (2014) Analysis of the Situation of Children 2014, p.51*

[37]   *UNICEF (2014). Analysis of the Situation of Children 2014, p.9*

[38]   *UNICEF (2016). Country programme document – Mongolia. 14-16 September 2016*

2. Context

1.1 Government prioritizing and programming for marginalized and vulnerable children and adolescents

Through GTA and the other thematic targeting mechanisms, UNICEF aims to assist the government in its goal of supporting marginalised and vulnerable children's health, education, development and protection.

Figure 3. Poverty headcount rate in Mongolia by aimag (%)
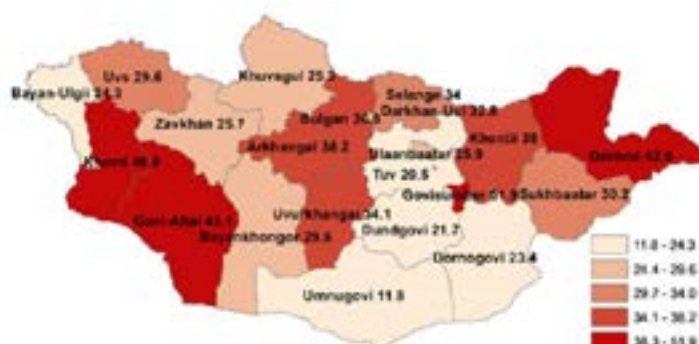
The Government of Mongolia (GoM) has a 'Vision 2050' long-term policy document and 'Five-year Development Guideline of Mongolia 2021-2025,' and 'Action Plan of the GoM for 2020-2024.' In these documents, the Government outlines its policy for economic growth, poverty alleviation and employment; gender equality; family development and demographics; and developing the education, healthcare, culture and social welfare sectors. The General Office for Labour and Social Welfare Services (GOLSWS) is currently in charge of social welfare services, providing food stamps using proxy means test (PMT) the poorest 5% of families, representing more than 118,000 children. This represents a departure from the once-universal Child Money Programme (CMP) in 2016, which became poverty targeted and distributed MNT 20,000 (less than USD 8) per child, available for 80% of children. Recently however, the GoM has reversed back to a universal approach due to COVID-19, increasing the amount to MNT 100,000 per child per month, reaching 1.2 million children.

As noted above, children and adolescents from ethnic minorities in Mongolia often face worse socio-economic outcomes compounded by their remote living situation. The GoM recently adopted provisions against ethnic discrimination in the New Criminal Code, as well as extending social protection coverage herding communities and commitments to invest in Kazakh bilingual schools[39].

In the health sector, universal access to health services is prioritized within existing relevant national programmes. However, access and use of quality healthcare services is not universal. Children and adolescents from the poorest quintile, living in remote areas, and from ethnic minorities such as the Kazakh have "the lowest utilisation of health care services"[40]. In 2017, the Ministry for Labour and Social (MLSP) approved a ministerial order establishing youth-friendly clinics providing a package of adolescent health services. The Education Sector Master Plan (2002-2015) further aimed to support life skills programmes for adolescents focusing on mental health, and specifically, young boys' and girls' attitude towards reproductive health and menstruation. Other life skills programmes aim to equip them with social and emotional skills, improving their ability to communicate effectively However, specific provisions for identified disadvantaged children and adolescents are absent.

Delivery of quality Water, Sanitation and Hygiene (WASH) facilities poses a significant challenge in terms of government programming. While climactic factors, geographical remoteness, and socio-economic disparities introduce complexity[41], community-level WASH facilities in schools and infrastructural development have been prioritized. With UNICEF support, the Commission further mitigated unequal access to quality WASH, by addressing gaps in per-litre water pricing between ger district households and apartment households through a new methodology for setting water tariffs[42].

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39 Ibid., p.71

40 Ibid., p.33

41 Ibid., p.33

42 Ibid., p.7

In the education sector, net enrolment rates in primary and secondary education are high, at 99.1% and 96.1%. Priority is placed on decreasing class size while increasing enrolment and coverage for all children. Further, the Government Action Programme for 2016-2020 has produced a series of inclusive education goals seeking to provide a favourable learning environment and infrastructure for children with disabilities (CWDs).

On child protection, the GoM has integrated programmes inter-sectorally through Multi-disciplinary teams (MDTs) to improve case management for violence against children[43]. However, despite CRC recommendations in 2017, protection for children against economic exploitations and child labour practices are lacking. The National Programme on the Elimination of the Worst Forms of Child Labour 2012-2016 was deemed to have been inadequately implemented due to insufficient funds and management capacity[44].

Government programming on GBV and domestic abuse is principally focused on education, raising awareness of the individual and societal effects of GBV, and changing attitudes towards gender and domestic violence. Nonetheless, intersectional risks (compounded for example by having disability[45]) are not adequately considered. Broader programming targeted towards women and girls addresses gender discrimination and toxic masculinity within rural communities and the workplace[46], gender-responsive mental health STI prevention[47], and reproductive health and menstrual hygiene, a "neglected area of sanitation" and further driver of gender inequity[48].

1.2 Governance and budgeting for children and adolescents

Governance

Mongolia is a unitary state, with 3 tiers of sub-national government: Aimags (21), comprised of 330 soums and 1,559 baghs. Ulaanbaatar (UB) is an independent administrative unit, divided into 9 districts and 151 khoroos.

Checks and balances are institutionalised between the legislative and executive branches of government at both national and sub-national levels:

A legislative assembly, Citizen's Representative Hural (CRH), supported by a full-time Secretary and (at aimag level) and other supporting staff under the Secretary. CRHs serve a 4-year term; and

- An executive branch headed by a Governor and Deputy Governor. These officials are indirectly elected for the same 4-year terms as the CRHs. The Prime Minister (for aimag governors) or aimag governor (for soum governors) selects a candidate from a list nominated by the CRH, with oversight to:
  - directly supervise the Governor's Office (GO) and its departments and staff;
  - provide administrative oversight of deconcentrated sub-national sector ministry (education, health, etc.) departments, their facilities (schools, clinics, etc.) and staff, but who are under the primary supervision of their central ministries or other central agencies.

The overall local governance framework in Mongolia is shaped by the Constitution (Chap. IV) and a number of key legal instruments:

- The Law on Administrative and Territorial Units of Mongolia (2006 rev.) sets out the roles of Governors and elected CRHs.
- The Civil Service Law (2019) sets out human resource arrangements at national and sub-national level, within a unified civil service.
- The Development Policy Planning Law (2017) sets out broad principles and arrangements for different types of planning instruments (area-based, sectoral, etc.) and for the planning processes underpinning them.

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43 *Ibid., p.3*

44 Committee on the Rights of the Child (2017), "Concluding observations on the fifth periodic report of Mongolia", CRC/C/MNG/CO/5, p.11

45 *UNICEF (2019), SITAN: Understanding Integrated Adolescent Development in Mongolia: development pathways, p.9*

46 *UNICEF (2019) UNICEF Mongolia Country Office Annual Report 2019, p.2*

47 *UNICEF (2017). UNICEF Mongolia Country Office Annual Report 2017, p.18*

48 *Ibid., p.10*

● Most importantly for this evaluation, the Integrated Budget Law (IBL 2012), sets out sub-national government public spending responsibilities, and for how these are financed and budgeted. More detailed guidelines are then provided under various regulatory instruments issued by government, by Ministry of Finance (MoF), and by sector ministries.

Budgeting and Finance

Sources of financing for **local government spending** are: (i) their own revenues, as defined under Article 23 of the IBL; (ii) deficit transfers (for those aimags and soums in 'deficit'), as defined under Arts 66.1 and 56.4 of the IBL; (iii) special purpose transfers (SPTs) for social services, as defined under Art 61.2 of the IBL; and, (iv) LDF transfers, as defined under Article 60 of the IBL.

Of these, the **prime financing sources for child/adolescent-related local government budget spending** are:

- **SPTs** to finance recurrent budget spending on early childhood development (ECD) and general education, primary health care, and for child development and protection. However, local spending from these transfers is tightly regulated by central ministry budget norms and guidelines, leaving little scope for local authorities to change SPT allocations between sectors and very little room for any local flexibility even within sectors.

- **LDF transfers** to finance minor capital investment spending on, e.g. WASH facilities, kindergartens, improvements to school and health facilities, playgrounds, public toilets, showers, lighting, etc. Spending from LDF transfers allows a far greater degree of local discretion than do SPTs. A participatory process and project criteria are clearly laid down under the IBL and the LDF Regulation (2018) and should involve citizen voices, including that of children and adolescents.

The central government is responsible for spending on child/adolescent-related activities through the various welfare transfers to individuals or households (e.g. CMP, administered by the GOLSWS). These transfers take place separately from local budgeting processes. The other main central government budgeting responsibility in regard to child/adolescent support is for capital budget investments in local primary and secondary level education and health facilities, as well as for both capital and current budgets for tertiary level facilities. Here, local authorities may only make proposals but have no final decision-making power on investments.

3 Object of the evaluation

The **object of this evaluation** is the GTA of the 2012-2016 and 2017-2021 CP between the GoM and UNICEF.

3.1 Overview

UNICEF's GTA has evolved over the last four CPs informing **where UNICEF should focus its sub-national programme efforts** (i.e. selection of geographic focus areas (GFAs)); and within the programme components, **how to intervene** (e.g. targeted ways of working both with LGAs, agency departments and development partners). Prior to the start of a CP, UNICEF conducts an internal exercise to guide strategic decisions on the selection of GFAs. This usually involves analysis and consideration of a) secondary data (e.g. of relevant thematic data, administrative data, multi-sectoral analysis of child deprivations (i.e. MODA); b) sub-national aimag capacity, commitment and interest; c) the partnership landscape; and d) operational efficiency considerations.

The GTA further encompasses a multi-level, multi-sectoral programme strategy to deliver a holistic package of services and protections for all children, with special attention to the most disadvantaged. The integrated approach to programming involves advocating and providing technical assistance at national level, while supporting sub-national provision of interventions (in aimag, soums). This entails, working with LGAs to provide services in a package of interventions, engaging various sectors as needed to ensure reaching all children, including the most disadvantages. In specific cases, UNICEF supports local government agencies in their analysis of administrative data and information to decide which communities, families and children should be the focus of an intervention to mitigate specific vulnerabilities, deprivations or risks. Not all intervention areas, however, are predisposed for targeting. Upholding child rights and equality demands that some interventions such as

access to health or school services are universal, while others are case focused (e.g. children with severe acute malnutrition (SAM); communities in dzud (harsh winter) prone areas).

For the purposes of this evaluation, we refer to GTA as UNICEF's general approach to targeting (both where, and how to intervene) to meet the needs of all children, particularly the most disadvantaged children. UNICEF Mongolia's strategy document notes that the approach[49] can be described as "diagonal" in nature and is designed with the **goal of maximizing UNICEF's strategic impact against the constraint of its limited resources**.

3.2 Geographic Targeting Approach (GTA)

In Mongolia, geographic and programme targeting has been done since before the CP under evaluation, evolving based on lessons learned from the previous periods. The following timeline tracks the development of the GTA over the recent past CPs, outlining the criteria used to choose focus areas and other notable developments influencing decision-making related to targeting.

The 2007-2011 CP (period preceding the evaluation period)

This programme included a GTA focus on 6 aimags: Uvs (Western aimag), Bayan-Ulgii (Western, Kazakh minority aimag), Khovd (Western) and Dornod (Eastern) aimags and two districts of UB. The CP also implemented a Reaching Every District and Soum (REDS) strategy, which targeted at least 5 districts in UB. While the CP aimed to address challenges across many locations, later reflection revealed that the budget was spread too thin and results diluted. A key factor contributing to this budget-stretch was the country's relatively small child population, leading to minimal regular resource allocation, resulting in lessons learned for the next CP (as stated in a Country Programme Document (CPD))[50].

The 2012-2016 CP

UNICEF's chosen GFAs for this CP were the Nalaikh district (population of 30,000) and Khuvsgul aimag (population of 114,000). There were three reported criteria used to determine the target areas: (a) Local Development Index and a study of inequity drivers; (b) UNICEF added value and operational efficiency; and (c) Districts designated as the most disadvantaged by the Government.

The Local Development Index identified the Western region as the most vulnerable. A composite index (including infant mortality rate and under-five mortality rate) confirmed this result (see Figures 1 and 2 in section 1.1), while administrative health and education data obtained from national ministries was also generally supported the selection.

Figure 4. Map of targeted areas CP 2012-2016

To prevent inefficiencies among geographically distant aimags, intervention in one aimag and district was considered, demonstrating how an aimag and a district with concentrated support could effectively improve the situation for the most deprived children. An experiment in two locations (Khuvsgul and Nalaikh) was undertaken to test integrated intervention models using a holistic, whole child approach.

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49 UNICEF: UNICEF Mongolia Country Strategy Note, 2016

50 UNICEF (2007). UNICEF Mongolia Country Programme Document 2007-2011

The 2017-2021 CP

GFAs for CP 2017-2021 were decided through evidence provided from Khuvsgul and Nalaikh good practices, service delivery models and lessons learnt. The target areas were widened to cover Bayanzurkh district (population 361,689) and three target aimags – Bayankhongor (population 88,672), Govi-Altai (population 57,748) and Zavkhan (population 72,823) in order to test scale-up of the Child Friendly communities (CFC) approach in different geographical contexts, and to explore

Figure 5. Map of targeted areas during CP 2017-2021

what adjustments were needed for scaling up the other identified good practice interventions (see Table 4 in section 5.4.3 for a summary of best practice from CP 2012-2016). This increase in GFAs represented a large investment for UNICEF, with a total targeted area covering four times the population of the previous CP 2012-2016.

During the design of the current UNICEF CP (2017 – 2021), GFAs were selected on a balance of factors including multiple child deprivations (i.e. MODA); government capacity, the partnership landscape; and UNICEF's minimum requirements for operational efficiency. For example, UNICEF's GTA was informed by equity profiles (2015) they developed for Health, HIV, Nutrition, Social Inclusion, WASH, Child Protection, and Education analysing aimag disparities, as well as factors linked to wealth and education levels. Bayankhongor aimag was additionally chosen to explore the impact of air pollution on children's health, social performance management within the extractive industry, sanitation in cold weather, and the use of mobile technology for service delivery (mHealth, e-education, U-Report, child online protection)[51], despite having improved statistics over other aimags. The Umnugovi aimag (population 60,855) was further included during UNICEF's Mid-term Review (MTR)[52] for specific interventions starting in 2020 (although not considered as an aimag of interest in this evaluation given the date of its inclusion)[53] as a result of ongoing joint programmes with World Health Organization (WHO) and United Nations Population Fund (UNFP) in Umnugovi.

3.3 UNICEF's Strategic Approaches

UNICEF's GTA aims to strengthen the overarching policy environment for children within sectors, particularly child and social protection, and concentrate programme efforts to narrow inequality gaps sub-nationally. Child rights are the overarching framework for UNICEF's programming. Specifically, the GTA is implemented through national policy advocacy, and at the sub-national level through implementation of holistic, multi-sectoral programming approaches, particularly the CFC model to support integrated service delivery, and by strengthening local planning and budgeting for children. The sub-national service packages are designed as model approaches to demonstrate the synergies, added-value, and impact of intersectoral, multi-disciplinary interventions that have the potential to be replicated nationwide.

This **evaluation focuses on two primary strategies** that guide UNICEF's targeted programming at both local and national levels as per the ToRs (see Annex 1): the **CFC model,** and **working with decentralised authorities to improve child focused local planning and budgeting.** Both are supported by UNICEF's engagement at national level. These GTA strategic approaches were tested in CP 2012-2016 in Khuvsgul and Nalaikh district, and then good practices were scale up in CP 2017-2021 across its GFAs.

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[51]   *UNICEF (2019) Bayankhongor Consultation Summary Report*

[52]   UNICEF (2019) Mid-Term Review of the Country Programme 2017-2021

[53]   *UNICEF (2019) Mid-Term Review of the Country Programme 2017-2021*

National level advocacy

At the national level, UNICEF focuses on providing technical assistance, advocating, and building partnerships to create an enabling environment for the delivery of quality basic social services for children. This entails supporting national ministries such as the MoF, and MLSP to legislate, plan and allocate budgets equitably for child focused services that meet international standards. National level advocacy is usually done in close partnership with development partners (e.g. United Nations Population Fund (UNFPA), Swiss Agency for Development and Cooperation (SDC), World Vision (WV), Asian Development Bank (ADB), and government sectoral partners such as Authority for Family, Child and Youth Development (AFCYD). Through collaboration, UNICEF and partners can raise awareness and influence policy for the benefit of children. Such concerted efforts are needed: challenges to the delivery of integrated services for children by government ministries include sectoral siloes, duplication and fragmentation of efforts. Overall accountability for meeting the needs of children, particularly the most disadvantaged is perceived by most government departments as the responsibility of MLSP, either through AFCYD and the aimag MDTs for specifically vulnerable children (e.g facing domestic violence), or through the GOLSWS, responsible for managing subsidies (e.g. to CWDs) and their line ministries at subnational level. UNICEF works nationally and sub-nationally to clarify accountability and support the integration of service delivery models that have improved child indicators with potential for scale up.

Child Friendly Communities

At the sub-national level, UNICEF supports implementation and scale-up of the CFC. The CFC approach, supported by UNICEF implicates local Governors and government line ministries across sectors to support various institutional innovations designed to raise awareness within local authorities to children's issues and to encourage intersectoral synergies between interventions to meet the needs of the most disadvantaged families.

The **CFC initiative** (based on the Child Friendly Cities Initiative[54]) is a UNICEF-led initiative that supports local governments in realizing the rights of children at the local level using the **CRC** as its foundation. It is grounded in 9 building blocks: children's participation; a child-friendly legal framework; city-wide child rights strategy; a child rights unit or coordinating mechanism; child impact assessment and evaluation; children's budget, children's report, child rights known; and independent advocacy for children. The targeted local governments use this strategy as the main planning and monitoring tool for child rights setting accountability targets and milestones in child survival, development, protection and participation.

The CFC model plays a key role in the functioning of the GTA as implementation will provide valuable synergies in those areas and inspire local governments elsewhere in the country to follow suit. The model was piloted in the Khuvsgul aimag and the Nalaikh district of UB during the CP of 2012-2016, and based on the pilot experiences, the model has been scaled up in the current 2017-2021 CP's four GFAs (three aimags and one UB district). In addition, the AFCYD selected six non-GFA aimags as regional representatives to roll-out the CFC model with minimal UNICEF technical support. The evaluation's non-GFA comparison aimag, Uvurkhangai, is one of the AFCYD selected aimags currently engaged in the CFC approach.

The CFC model promotes inter-sectoral coordination through the establishment of a CFC Coordination Committee headed by provincial and district governors to prioritize the interests of children in all sectors and develop friendly environments with child-centred decision-making, budgeting and planning. Further advancing the principles of the CRC, targeted local governments are supported to provide an opportunity for children to express their opinions on specific child-related issues to be reflected in local development planning and budgeting. This entails the following activities:

- Profiling of children's' rights, service-access, protection and other welfare issues in the aimag
- Review of these issues at Child Forums
- Development of a CFC strategy for the aimag
- Establishment of a CFC institutional framework, with Children's Councils and MDTs at aimag, soum and bagh levels

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54 *https://childfriendlycities.org/what-is-the-child-friendly-cities-initiative/*

- Recommendations for issuance of CFC policies and plans by aimag authorities
- Approval by aimag authorities and CRH of budget allocations to finance CFC activities, including a minimum 10% allocation of aimag LDF for children's issues.

As the foundation for advancing child rights and ensuring the needs of the most vulnerable children are addressed, the CFC approach represents an especially important focus for the evaluation.

Working with decentralised government authorities

Critical to UNICEF's strategies is influencing national and particularly subnational resource allocation for children, particularly budgeting and finance at the local levels, for example, through education and health departments, and their respective agencies. UNICEF seeks to institutionalise support for children at aimag and soum level by building capacity of local government to target planning, budgeting and investment in integrated services and infrastructure for children, particularly the most disadvantaged. UNICEF also focuses nationally on engagement with sector ministries and related agencies such as the MoF, Cabinet Secretariat and the Parliament, and other local programmes.

Specifically, the UNICEF CP (2017-2021) strategy recognises the importance of decentralised decision-making and knowledge of local context to target delivery for many child-related services. The most coherent expression of UNICEF's institutional and financing strategy of working with, and supporting local authorities lies in the CFC[55]. As local authorities enjoy greater budgetary flexibility over LDF budget decisions (than other budgetary mechanisms), UNICEF's local capacity support for pro-child budgeting activities have at times focused on LDF transfer. UNICEF supported GFA aimags and soums under the CFC strategy, to advocate use of a minimum 10% target of LDF allocations for child-critical activities, in particular for WASH and ECD investments. However, UNICEF also recognises the need to address national policy and "systemic" issues alongside its operations at the local level, as this is key to effecting wider change and scale-up.

Cross-cutting issues: Human rights, equity and gender approach

UNICEF Mongolia's CP 2017-2021 ToC[56] across outcomes for health, education and social protection hypothesises that attaining child rights for every child, especially the most disadvantaged, is fundamental for improving child-related outcomes. UNICEF human rights and equity-based approach aligns with the GoM's commitment to achieve child-related SDGs as evidenced in the Education Law[57] and the Primary and Secondary Education Law. UNICEF integrates rights-based measures into its results framework by setting goals and targets to measure the progressive realisation of child rights. Key performance indicators have been established for UNICEF and government partners to measure respect, protection and fulfilment of child rights. For example, key performance indicators include demand for disaggregated data (the percentage of children aged 36–59 months attending an ECE programme (national/boys/girls/poorest quintile) and non-discrimination of ethnic minorities (secondary education net attendance rates for Kazakh minority children (total/boys/girls).

UNICEF supports the GoM to make progress on child rights through support for both universal and targeted intervention strategies such as the CFC initiative, and social protection interventions to protect children living in harsh weather conditions and most recently, to safeguard children during COVID-19 (see chapter 4). UNICEF principles hold that if child rights are fulfilled, the most disadvantaged children in Mongolia will be reached by both universal and targeted approaches.

UNICEF Mongolia considers gender as a cross-cutting issue, as well as a key programming objective in adolescent health. Gender disparities are investigated and documented as barriers in access to services and WASH facilities, education (e.g. girls remain in school longer than boys) and health outcomes (e.g. boys suffer more injuries; girls are subject to GBV, and risk of early or unwanted pregnancy, etc.). All products incorporate a gender lens: routine survey data, studies and evaluative data are disaggregated by sex and other key demographic factors

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[55] *Child Friendly Community Documentation – Khuvsgul Practice, 2018.*

[56] *UNICEF Mongolia Strategy Note 2017-2021, Draft.*

[57] *This law suggests that every citizen has equal rights to his or her education, regardless of race, ethnicity, nationality, sex, religion, social status and/ or economic condition.*

to allow for analysis of the gender dimensions of issues.

Gender equality has been pursued as an explicit strategy of several interventions both nationally through laws and policy development and advocacy, and within the GFAs of the CPs. Outputs that specifically address gender issues are notably gender responsive mental health interventions, support to girl victims of violence, abuse and trafficking, and nutrition of pregnant women. Otherwise, gender sensitivity or awareness (rather than transformative) is largely mainstreamed within thematic programmes, including the thematic interventions mentioned above[58].

3.4 UNICEF's Theories of Change

UNICEF's current CP (2017-2021) is guided by ToC per outcome area. The outcomes in full are as follows:

Outcome 1: By 2021, the most disadvantaged children in Mongolia benefit from increased access and utilisation of services that promote health and nutrition, including water, sanitation, hygiene and interventions that mitigate the impact of air pollution on child survival.

Outcome 2: By 2021, the most disadvantaged children access and utilise services in a healthy, inclusive and quality learning environment

Outcome 3: By 2021, child-related national policy, budget and systems, including the child protection system, are inclusive and equity focussed[59].

Outcome 4: Country programmes are efficiently designed, coordinated, managed and supported to meet quality programming standards in achieving results for children.

There is currently no overarching ToC that includes the GTA strategy. An evaluability study noted "that causal linkages [and the assumptions inherent therein] between outcome areas can be missed." It notes the difficulty UNICEF will have "to understand whether they are achieving better results working in 1 aimag and 1 peri-urban district (previous CP) as compared to 3 rural aimags (and 1 additional after the MTR) and 1 peri-urban district (current CP)" and states that "the focus of the CP evaluation could be broader than just focusing on the geographic approach"[60].

Further challenging assessment of results, is the low availability of quality information and data across the different programme outcomes and outputs. This is particularly relevant as equity and age disaggregation data gaps that could help to integrate data and information on marginalised children into planning and programming remain challenges across the different CP outcomes, including for inclusive education and child protection (already identified in the Situation Analysis)[61].

3.5 Reconstructing and testing UNICEF's ToC for the GTA

For the purpose of this evaluation, a composite ToC has been developed that takes stock of the role that the targeting plays in UNICEF's own ToC (see Figure 6 below). The reconstructed ToC reflects the conceptual and programmatic approaches taken by UNICEF to effectively target the most disadvantaged children and their families, including identification of some of the most important assumptions underlying the change pathways. Assumptions identified in the original ToCs have been tested to assess whether UNICEF's GTA contributes towards achieving programme strategic aims.

The additional implicit assumptions relate to working with government authorities and the CFC model, both of which are central to reaching the most vulnerable, as requested by the Terms of Reference (ToR) for the evaluation. For example, we observe that UNICEF's GTA itself is based on assumptions about how local governance, planning, financing and ways of working operate at sub-national level. Through the evaluation, stated and implicit assumptions of the causal pathways with the CPs were tested.

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[58] *Martin Hilber A. A country case study on UNICEF Mongolia's Assessment on Gender-Responsive Adolescent Health: EAPRO. 2018*

[59] *UNICEF (2012) Country programme document , Mongolia 2012-2016, pp.7-8*

[60] *Regional support mission report on the evaluability of the UNICEF Mongolia country programme 2017–2021. Evaluation section UNICEF EAPRO: 6 November 2017.*

[61] *UNICEF (2014) Analysis of the Situation of Children 2014*

Evaluation questions were developed to test the ToC and validate its assumptions and/or strengthen it through revision or inclusion of new assumptions in the pathways. As the original ToCs (developed by UNICEF per outcome area for CP 2017-2021) have not been developed for the purpose of testing GTA assumptions, some gaps in the logical model were observed and expected. The evaluation team worked through a reconstruction of the existing outcome area ToCs to develop a ToC for this evaluation. The evaluation ToC focuses on outputs that can benefit from or do targeting to reach their beneficiaries. By focusing the reconstructed ToC (and the evaluation questions related effectiveness) on intervention areas that have potentially a targeting focus (e.g. adapting materials for ethnic minorities; identifying locations with greatest need to build ger kindergartens, etc.), recommendations for a more robust overarching ToC for the next CP may emerge, guiding future CP targeting approaches.

Reflections and results on the reconstructed ToC are presented in Figure 6 below.

Figure 6. Reconstructed CP 2017-2021 ToC for GTA

4 Purpose, Scope and Methodology of the Evaluation

4.1 Purpose

The purpose of the evaluation is to assess UNICEF's local GTA in Mongolia to inform the design of the new CP to be implemented beyond 2021. The results of the evaluation will inform the decision on whether UNICEF should continue using this approach, or adopt different approaches and recommend ways to improve the effectiveness of the GTA.

The evaluation findings and recommendations aim to also help UNICEF to further improve the adoption of the CFC strategies to achieve better results for children at the sub-national level.

Primary users of the evaluation include the GoM, sub-national governments in selected target areas and the UN as a whole. Key partners in the GoM are the MLSP, Ministry of Health (MoH), Ministry of Education and Science (MES), AFCYD, National Development Agency, Cabinet Secretariat and UB city Municipality. Non-governmental organisations (NGOs) partners are also considered as primary users, such as Save the Children, WV and other NGO representatives working at the sub-national level. Main intended beneficiaries are disadvantaged children. Secondary beenficiaries include national and sub-national government stakeholders, including local government authorities in the GFA aimags, other implementing partners, and UNICEF itself.

Secondary users of the evaluation are communities overall.

As defined in the TORs, the specific objectives of the evaluation are:

- To assess to what extent UNICEF's **GTA** is contributing to achieving the results of the CPD;
- To assess whether UNICEF's targeting approach, as implemented in the GFAs **addressed holistically the needs of the most disadvantaged children**;
- To assess to what extent UNICEF contributed to enhancing **local governments capacity** to effectively plan and manage integrated and equitable service provisions for children in a holistic manner;
- To identify **lessons learned and emerging good practices**, as well as to determine more effective and efficient modalities for the application of the targeting approaches to accelerate results for the children in Mongolia and narrow gaps for the most disadvantaged children; and
- To assess the extent to which UNICEF's support to sub-national work with priority GFAs contributed to **national scale-up**.

4.2 Evaluation Scope

The evaluation covers UNICEF Mongolia's GTAs employed in CP 2012-2016 and the current CP 2017-2021 in the identified GFAs (from 2012 to the present). The scope of the evaluation includes:

- UNICEF's GTA to programme implementation at the sub-national level as a whole, rather than sector-specific assessment;
- Sub-national level interventions through CFC strategy in GFAs;
- The implementation period and GFAs evaluated include:
  - o **2012-2016 CP** GFAs: Khuvsgul aimag and Nalaikh district of UB city; and
  - o **2017-2021 CP** GFAs: Zavkhan, Govi-Altai, Bayankhongor aimags and Bayanzurkh district of UB city.
- Thematic coverage: all programme components that benefited from geographical targeting of interventions.

For purposes of comparison, the evaluation selected **one non-GFA aimag** (Uvurkhangai) **as a control** to provide an opportunity for a comparative analysis of UNICEF's approach at the local level as requested in the ToR (see Annex 1). The control aimag was chosen because of its proximity to Bayankhongor and comparable demographics and deprivation indicators. Uvurkhangai was selected by AFCYD to roll-out the CFC approach, making it potentially problematic as a comparison site (see section 4.6 on limitations and mitigation measures); it was determined however that it could offer important insights on the potential for replication and sustainability of UNICEF interventions, and has remained as a comparison site for this evaluation.

As specified in the TORs, the evaluation does not cover other aimags and districts nor the impact of the GTA given time and resource constraints.

4.3 Evaluation Approach and Methods

Evaluation Approach and Methodology

The evaluation utilized a mixed methods approach.

Qualitative data was collected through primary key informant interviews (KIIs), focus group discussions (FGDs) and secondary data. The secondary data reviewed provided by UNICEF included national country reports, strategies, policies, guidelines, qualitative studies, program documents, etc. Additional secondary evidence was collected through a literature review. The documentary evidence was reviewed using content analysis, and then triangulated with the primary qualitative data. The causal assumptions in a reconstructed ToC were explored to test explicit and implicit assumptions.

Quantitative data was used to assess marginalisation and deprivation of children and adolescents in Mongolia at national and sub-national level, including children and adolescent health, education and socio-economic status, and where possible the sex differentials in those outcomes and challenges.

Two **case studies** were undertaken in order to complement the qualitative and quantitative data collection and analysis: 1) UNICEF's GTA model and mapping of deprivation as a tool for selection of GFAs; and 2) UNICEF's efforts to build capacity of LGAs to target the most disadvantaged children through their budgetary processes. Together the case studies provide important information on the relevance, effectiveness, efficiency and sustainability of the GTA. Case Study 1 investigates alternative approaches to selection of GFAs, while Case Study 2 reviews the sustainability of UNICEF's approach to building the capacity of LGAs to increase budget allocation and priority given to children locally.

The Case Study on the GTA model and mapping of deprivation of children and adolescents in Mongolia used an established Mongolian poverty measurement approach; a MODA based on child-appropriate dimensions of poverty from the nationally representative Household Socio-Economic Survey (HSES)[62] carried out in 2016 was used to create a multidimensional poverty estimate for each aimag based on a sample of 58,512 surveyed

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[62] de Neubourg, C., Karpati,J.,Boon, L., Yang, M. (2016) *Study of child poverty in Mongolia using Multiple Overlapping Deprivation Analysis (MODA)*, *Economic Policy Research Institute, UNICEF*

individuals. These data represent the overlap in deprivation across one or more dimensions for each child, ranging from a minimum of zero deprivation dimensions (not at all deprived) to a maximum of seven (deprived across all dimensions). This was calculated for new-borns, children and adolescents separately. This information was used to assess whether UNICEF's GTA captured successfully aimags and districts with the greatest need, and therefore the best potential to have impact on SDG child indicators. Other approaches to applying the GTA within two other UNICEF COs are discussed.

Methods for the Case Study on local pro-child planning and budgeting encompassed compiling and analysing quantitative secondary data through statistical and indicator data, and other relevant reports. Descriptive statistics were employed to quantify and assess trends in outcomes and financing between GFAs and the comparison non-GFA aimag. Quantitative secondary data reviewed included existing national surveys (Census, Social Indicator Sample Survey (SISS), MODA, HSES, National Nutrition Survey (NNS) etc.), sub-national administrative and financial data, and outcome indicators from the CP 2012-2016 and CP 2017-2021 Results Frameworks. The Results Framework was also used to assess trends in targeting, programming, investment and progress towards CP outcomes.

Data were disaggregated by relevant criteria (wherever possible) for both quantitative and qualitative analysis. All data collected for the evaluation through KIIs and FGDs were disaggregated by age, gender, or deprivation measures to ensure all thematic issues and information was assessed with the most disadvantaged children and their families being the priority target group.

Lessons learned and emerging good practice identified by the evaluation were documented. Best practice models identified by UNICEF at the end of CP 2012-2016 were explored in particular for their sustainability and contribution towards national scale-up. Contribution analysis was used to assess causal links; triangulation was applied in order to guarantee the reliability and robustness of findings. This consisted of cross-referencing different sources of data from the various data collection methods to validate individual responses. A key aspect of the evaluation was to document lessons learned from success stories. Identifying such positive stories was to allow show-casing of what has worked in specific GFAs and how those experiences could be replicated and built upon in future CPs.

Guiding Principles

The evaluation followed United Nations Evaluation Group (UNEG Norms and Standards for Evaluation in the UN system and abided by UNEG Ethical Guidelines and Code of Conduct being independence, impartiality, credibility, conflicts of interest, accountability. Anonymity and confidentiality of individual informants will be protected as required by the ethical procedures of Mongolia and UNEG[63].

For the purpose of this evaluation, ethical guidelines and principles were discussed and agreed upon between the team of evaluators, national and international consultants, and with reference to UNEG Guidelines on evaluation practices, and UNEG guidelines for integrating Human Rights and gender equality in evaluations[64].

Independence was observed between the evaluation team and UNICEF Mongolia staff, in particular the UNICEF Evaluation Office. Not directly involved in conducting the evaluation, UNICEF teams were present in a consultation function, and as stakeholders of the evaluation. **Integrity** during the evaluation process was ensured by building an organizational culture based on cooperation between team members, respect of cultural and gender diversity, openness and honestly in communication, and continual opportunity for each member to voice any concerns they might have on the evaluation process, the organization of the work, the requirements and guidelines used.

Conflicts of interest within the team, and with UNICEF were dealt with honestly through dialogue.

Accountability was guaranteed among team members, participants, and stakeholders during the entirety of the evaluation process. Local evaluators conducting the data collection with duty-bearers and rights holders were trained on their ethical obligations and good practice for handling personal data, and for conducting

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[63] United Nations Evaluation Group. (2020). UNEG Handbook "Ethical Guidelines for Evaluation – June 2020"

[64] United Nations Evaluation Group. (2014). UNEG Handbook "Integrating Human Rights and Gender Equality in Evaluations – August 2014"

an evaluation aligned with UNEG standards and norms. During the data collection phase, specific tools and data handling and storage processes were developed to ensure the ethnicity guidelines. Participants were made aware of their data-related rights, and that their responses and associated personal data would be comprehensively anonymised. Their name was taken down for records and to make the personal data available to the respondent for consultation, modification, deletion. As such, the processes developed were in alignment with the Personal Data Protection and Privacy Principles adopted by the UN High-Level Committee on Management[65].

Ethical safeguards for participants were in place to safeguard respect for dignity and diversity, right to self-determination, fair representation, and compliance with codes for vulnerable groups, confidentiality, and avoidance of harm. Specific ethical safeguards for research involving children were adhered to including, and espcaily the prinicple of "do no harm"[66]. Precautions were detailed in the informed consent process (see Supplemental Sub-Annex C for Informed consent forms and tools), and through training conducted by the lead evaluator. As the team conducted FGDs with children, special measures were also taken to convene the FGD with children at the same time (in the same room at a distance so specific conversations could not be overheard, or, in the next room) as the FGD with their parents to ensure consent and comfort of both parties.

The evaluation was transparent, inclusive, participatory, and integrated both gender and human rights perspectives.

Transparency was assured through clear communication with stakeholders at all stages of the evaluation with respect to its purpose, the criteria applied, and the intended use of the findings. Stakeholders were explained that the evaluation results would be made public at the end of the process. The evaluation had a **participatory approach** and integrated the views of beneficiaries. The evaluation followed the guidance on the **integration of gender equality and human rights principles** in the evaluation focus and process as established in the UNEG Handbook, Integrating Human Rights and Gender Equality in Evaluation- Towards UNEG Guidance.

Special attention was paid to ensure that a **gender, equity and human rights-based approach** was embedded into the data collection and analysis. The evaluation process showed sensitivity to gender, beliefs, culture and customs of all stakeholders. Both rights holders and duty bearers were included as informants with acknowledgement of their responsibilities and entitlements stated in the interview probes. Gender, equity and human rights were included in the evaluation questions under implementation of the CRC. To further elucidate gender, equity and human rights issues, a specific probe was added to all questions where it may be relevant to ensure that the issues are covered both as specific issues (through the CRC question) and as a cross-cutting issues that should underlie all UNICEF activities.

4.4 Evaluation Questions

This section presents the evaluation questions (by selected Development Assistance Committee (DAC) criteria of relevance, effectiveness, efficiency, sustainability as defined in the ToRs), assumptions tested, indicators and data collection methods. The assumptions (and probes) narrowed evaluation questions further by specifying what evaluators should focus upon and what they should check specifically when attempting to answer the question. Data collection concentrated on gathering evidence linked to those assumptions (and counter-assumptions) articulated by the indicators. The Evaluation questions are aligned with the reconstructed ToC and include the questions relevant to testing its validity.

The evaluation methodology aimed to ensure that credible answers can be provided to the evaluation questions based on verifiable evidence. Together the questions provide answers on whether UNICEF's GTA and associated strategies were relevant, whether approaches and programmes had been effectively and sustainably designed and implemented to reach the targeted disadvantaged children and their families; whether specific targeting assumptions such as the building of LGA capacity and use of multisectoral approaches within the CFC strategies had been effective to achieving expected outputs and outcomes, and whether resources had been efficiently

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[65] *United Nations, (2020) Data Strategy of the Secretary-General for Action by Everyone, Everywhere with Insight, Impact and Integrity February 2020*

[66] *Powell, Mary Ann; Taylor, Nicola; Fitzgerald, Robyn; Graham, Ann; Anderson, Donnah (2013). Ethical Research Involving Children, Innocenti Publica-tionsUNICEF Office of Research - Innocenti, Florence*

used to maximize the effects of the CPs. The evaluation questions are provided in Box 3.

Box 3. Evaluation Questions and sub-questions

Relevance

EQ1. To what extent are UNICEF's national and sub-national GTAs to reach the most vulnerable children and their families prioritized in law, policy, regulation, strategies and plan of the Mongolian Government?

1.1 UNICEF's GTA is aligned with, and remained valid within, the decentralised governance system in Mongolia [*Alignment to government priorities]*

1.2 UNICEF's GTA is focused on the inter-sectoral (diverse) needs of the targeted subgroups of vulnerable children and their families [*Inter-sectoral approach*]

EQ2 To what extent has the GTA in each output/thematic area been aligned with the unique characteristics and problems faced by children in the selected GFAs during the last 2 CPs?

2.1 The distribution of the problems addressed by the thematic outputs (e.g. WASH, nutrition, social protection etc.) align with the level of problem/need found in the GFAs? [GTA alignment]

2.2 The UNICEF GTA is the most appropriate approach given the distribution of deprivation in Mongolia [Targeting approa*ch*]

Effectiveness

EQ3 To what extent has UNICEF's GTA contributed to the Country Programme's results and learning at the national and sub-national level and reduced inequalities for children in a sustainable way (in GFAs compared to a non-GFAs)?

3.1 UNICEF's GTA in CP 2012-16 and CP 2017-21 have identified and influenced national policies and guidelines, human resources, and financing and budgeting arrangements affecting child-relevant health, education and social service delivery and support. [National policy advocacy]

3.2 Child rights issues have been integrated into local and national planning and budgeting. [CRC]

3.3 In the GFAs, UNICEF's CP outputs have successfully built the capacity of LGAs, local line ministry departments and partners to adequately make available to LGA and other, resources and political commitment to deliver health and social services under local responsibility for the most disadvantaged children. [Capacity building]

3.4 In the GFAs, local authorities (at the aimag/capital city level) plan, budget and implement integrated strategies to meet the health, education and social protection needs of vulnerable children and their families. [LGA Planning and Budgeting]

3.5 Disaggregated data (age, sex, ethnicity, disability, economic status) is available and is used (by UNICEF and partners) to target the most vulnerable children and their families. [Data]

3.6 What were the major factors contributing to the achievement or non-achievement of the objectives?

EQ4 To what extent has the UNICEF CFC approach helped to create an integrated, holistic, multisectoral safety net at sub-national levels to meet the needs of the most disadvantaged children in the GFA (compared to non-GFA)?

4.1 In the GFAs, the UNICEF CFC approach has helped to create an integrated, holistic, multisectoral safety net at sub-national levels to help meet the needs of the most disadvantaged children. [*CFC*]

Efficiency

EQ5 – To what extent has UNICEF targeting approach been implemented in a resource, time, and technically efficient manner?

> 5.1 UNICEF's current strategic approaches to selecting sub-national areas to test its different targeting activities has proven more efficient than alternative (or past) approaches (non – targeting, equity approach; other) to reaching the most vulnerable. [Efficiency of GTA]
> 5.2 UNICEF's resources were able to achieve their thematic objectives for the most vulnerable
>
> children in an efficiency maximizing manner. [*Efficiency of working through GFA*]

Sustainability

EQ6 To what extent are GFA results achieved likely to continue after UNICEF funding has been withdrawn?

> 6.1 UNICEF's programmes and interventions are likely to continue after funding is withdrawn. [Sustainability]
>
> 6.2 What were the major factors which influenced the achievement or non-achievement of
>
> sustainability of the programme or project?

4.5 Sampling and Analysis

Sample

Participants for the qualitative data collection were selected from key stakeholders who were in Khuvsgul aimag and Nalaikh district during the CP from 2012-2016; and Zavkhan, Govi-Altai, Bayankhongor aimags, and Bayanzurkh district in UB city during the 2017-2021 CP. UNICEF and GoM actors in UB relevant to both CPs were also interviewed. Six categories of stakeholders were identified as priority groups from which responses to the evaluation questions were sought, mainly through KIIs. FGDs were carried out with social workers and teachers in the capacity of duty bearers, and with children and their parents in the capacity of rights holders.

A total of 173 people (67 key informants, 14 FGDs engaging 106 people) participated in data collection between June and September 2020 in all current GFAs (Bayankhongor, Govi-Altai, Zavkhan aimag, Bayanzurkh district) and previous GFAs (Khuvsgul aimag and Nalaikh district) including non-GFA aimag (Uvurkhangai) as we well as national and international stakeholders as follows (detailed lists are in Supplemental Sub-Annex B):

Table 1. Stakeholder consulted

	Category	Nr. of KIIs/ FGDs	Female	Male
1	UNICEF Mongolia: Staff (current and former)	10	6	4
2	International organizations/Development partners	4	2	2
3	Policymakers: High-level (2) and Ministries (5)	7	3	4
4	Implementing partners/agencies: Government Agencies (2); Municipality Level (1);	3	2	1
5	LGA & Citizens' Representative CRH Members: Field KIIs (33) covering 3 GFAs and 1 non-GFA aimag; UB GFA KIIs (10) covering Bayanzurkh, Nalaikh and Khuvsgul	43	24	19
6	FGDs (14) Social workers / teachers (6), parents (4), children (4)	106	62	44
	Total KIIs participants	67	37	30
	Total FGD participants (within 14 FGDs)	106	62	44
	Total number of people consulted	173	99	74

The initial plan for the data collection in GFA aimags was to conduct a total of 24 KIIs (16 KIIs in aimag centres and 8 KIIs in soums) in three GFA aimags and 1 non-GFA aimag and their respective four soums. With good collaboration and commitment from the aimags, the field team ended up conducting more KIIs than planned. As such, the team was able to collect more data than was anticipated in the aimag centres and soums involving officials from Local GOs, and CRH and relevant subnational departments (Departments of Education, Health, and FCYD) in the field. In addition, 14 FGDs engaged 106 social workers, teachers, children and their parents in groups between 5-8 persons.

Data analysis

Qualitative data collected according to the evaluation questions were summarised on evaluation data matrices by respondent category/source and type (i.e. document review, KII, FGD) and analysed through a **three-level analysis process to ensure triangulation and robustness of findings**.

First level analysis of the data was by stakeholder type (i.e. UNICEF staff, LGAs, social workers), was collated and summarised by sub-evaluation question and geographic region. The second level analysis summarised responses to evaluation sub-questions across all respondents from the various instruments. For example, the summary response to evaluation question 1 from the level one analysis for each data source (e.g. KIIs UNICEF staff; KIIs aimags; FGDs teachers; document review, etc.) was analysed together to create a collective summary across data sources as an answer to each evaluation sub-question. At the third level analysis, results from the second level analysis of the sub-questions were pulled together to answer the primary evaluation questions with special focus on the multi-sectoral approach to addressing child deprivation through the CFC model; and the CP programming approach more generally aimed at reaching the most vulnerable. **Triangulation** was applied to maximize the reliability and robustness of findings, e.g. by cross-referencing different data sources and data collection methods.

For the **case study model analysis**, we employed a Bayesian geospatial modelling approach using the R-INLA package within R software. This is particularly useful in situations where survey data were collected and representative at coarser spatial resolutions than the predicted estimates. We included geospatial covariates such as population, elevation, precipitation and temperature, as well as socio-economic indicators such as wealth, accessibility to the nearest urban centre, recent health status, education, etc. to robustly predict child deprivation amongst infants 0 – 23 months and 24 – 59 months. Maps depicting these estimates at the aimag level were produced across the country, in addition to associated model uncertainty in the form of 95% credible interval maps[67].

A **contribution analysis** was used to identify changes that occurred through targeting within GFAs (and a non–GFA for comparison) and UNICEF's contribution to those changes over the relevant time period. Changes reported from the GFAs were contrasted with findings from the non-GFA to assess change that can be attributed to UNICEF and spill over effects. The evaluators made sure to distinguish between attribution and contribution according to the UNEG Standards for Evaluation[68].

The results of the investigation allowed the team to test the reconstructed ToC and the assumptions therein. By triangulating all data from all sources, a comprehensive picture emerged on the validity of the reconstructed ToC, and GTA approaches, and UNICEF's contribution to the changes observed in their GFAs.

Additional results from the Case Studies (beyond the information that was collected through evaluation question responses, from document review, KIIs, and FGDs) also contextualised and informed the third level analysis. Any additional quantitative data from programme and government sources were included in this level of the analysis as well. This analysis and interpretation were done in an **analysis workshop** with the full team online over a series of days. Results from the analyses informed the validation of the ToC and the consideration and recommendations for the new CP, including alternative approaches to geographic targeting.

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[67] *de Neubourg, C., Karpati,J.,Boon, L., Yang, M. (2016) Study of child poverty in Mongolia using Multiple Overlapping Deprivation Analysis (MODA), Economic Policy Research Institute, UNICEF*

[68] *UNEG 2005*

4.6 Limitations and mitigation measures

GTA as an evaluative subject: Evaluating UNICEF's GTA proved challenging as parameters of what is included in the strategic approach, and at what level they can be evaluated, are difficult to define. Despite detailed ToRs, there was a lack of consensus on the scope and focus of the evaluation during the inception period with some staff considering the aim to be programme intervention level focused rather than a strategic level evaluation of UNICEF's targeting approach. As philosophical and programmatic strategy, it did not lend itself to measurement through standard programme evaluation components such as a review of the monitoring and evaluation framework, cost, and partnerships, making attribution of results to the GTA (versus other UNICEF strategies of interventions packages) potentially subjective. In addition, the CPs did not have an overarching ToC to situate the GTA within the programme components. Finally, UNICEF's Global Evaluation Reports Oversight System's (GEROS) evaluation guidelines and quality criteria are not wholly applicable to traditional programme evaluations.

Mitigation: The evaluation team constructed a ToC against which the evaluation was designed. Review of indicators for their contribution to targeting helped to locate the GTA within programme activities. Triangulation of findings, helped focus results on the higher-level analysis of the relevance and effectiveness of the GTA. Consultation with the M&E officer and the regional office M&E team clarified misconceptions and helped guide the evaluation towards a higher-level analysis and result, including on how to responds to GEROS requirements in the context of the evaluation's scope.

GTA focus of the evaluation was difficult to comprehend for respondents: An evaluation on geographical targeting proved difficult to understand for many of the people we were interviewing. In addition, few aimag and soum respondents had the historical memory to respond to how targeting was being done in some of the thematic programmes. This was in part due to high turn-over of local government actors in the GFAs.

Mitigation: The local team gave significant attention (and time during the interviews) to keeping the interviews focused on the specific aims of the evaluation, as most respondents assumed it to be a UNICEF programme evaluation. The high number of KIIs also compensated for any specific interviewees misunderstanding as saturation was reached on each evaluation question. In addition, UNICEF staff that have been involved in the last two CPs facilitated other team members' understanding of the GTA process that occurred previously. Moreover, the evaluation team interviewed former UNICEF staff including the former Representative during the previous CP to better understand the thinking behind the GTA conducted at the time.

COVID -19 and it effect on the evaluation: This evaluation was planned and conducted during the unprecedented COVID-19 pandemic. Restrictions in movement impacted data collection in significant, and in some cases, unanticipated ways. Perhaps the most significant effects have been the restriction on international travel, which has resulted in the international team providing leadership and guidance only at distance. This has protracted the planning, training and data collection process, and limited in depth collective discussion by the team for the analysis and interpretation of the results. Face to face teamwork expedites communication, which is in any case, partially in translation, and facilitates dialogue, debate and triangulation of findings and opinions.

Mitigation: These issues were mitigated by weekly if not biweekly extended conference calls, email communication and online analysis workshops. Training was also provided at a distance on an on-going basis by the evaluation lead.

Appropriateness of the comparison non-GFA: Uvurkhangai was selected as the control non-GFA aimag based on similar criteria as the GTA: It shared comparable indicators, and socio-economic profile as the GFAs and was located adjacent to the GFAs making data collection more efficient. However, it is one of the six aimags in which AFCYD has started rolling-out the CFC since September 2019 with Government funding. In addition, Uvurkhangai aimag was proposed as a control aimag before the case study (see Annex 3: Case Study 1) was conducted on funding patterns that revealed the share of LDF projects benefiting children (directly and indirectly) in Uvurkhangai over the past few years is equal to, or greater than that in 2 of the 4 GFA aimags.

Mitigation: Despite potential bias, closer analysis of Uvurkhangai implementation of the CFC and other child-

focused strategies offers valuable insights on the replicability; scale up and sustainability of UNICEF supported approaches including the CFC approach through external (non-UNICEF), and local resources.

Timing and planning: Initial planning for field data collection was scheduled for March 2020. Due to travel restrictions related to various COVID-19 regulations, and advice from the Cabinet Secretariat, the local team was able to resume field data collection only in June. In addition, the delayed start of data collection needed to be further postponed until after the Parliamentary elections, principally so as not to confuse study participants with election propaganda (as advised by the government).

Mitigation: Despite the fact that all schools were closed and running lessons via TVs, we were able to conduct FGDs with school children with the help of school teachers and social workers. In Tosontsengel soum of Zavkhan aimag, children were already out in rural areas tending the livestock and no longer in the soum. As a result, no FGD with children was collected in that soum. As FGDs were possible in the other soums, the shortfall in Tosontsengel was not considered particularly limiting as saturation of responses had been achieved.

The team also faced additional data collection scheduling challenges in UB, further delaying data collection by a month in July-August. Between the parliamentary election cycle and the holiday period, few additional interviews were conducted. Most local administrators were part of the election campaigns and thus, still busy with planning and transition meetings. Others had already started their summer break (starting from the National Holiday Naadam for July 11-15 and onwards).

Mitigation: As a result, KIIs in UB were conducted until mid-September to ensure all key stakeholders were met.

Within the evaluation, further complications occurred during the analysis and write up of the findings due to the team member's unavailability for a variety of COVID-19 related reasons including ill health and childcare requirements. The protracted data collection, and delayed analysis period ending up exhausting the number of days available on consultant contracts further compressing the time available to work together as a team and conduct the analysis and write-up. Again, due to travel restrictions, a team meeting on the analysis was not possible.

Mitigation: The local and international team leaders absorbed the additional tasks and proceeded with the analysis with the remaining team members as they were available.

5 Findings

5.1 To what extent is UNICEF's GTA reflected in law, policy, regulation, strategies and plans? (EQ1)

Relevance

Summary:

UNICEF's GTA strategy to select GFAs was independent, but largely an internal exercise using criteria that balanced evidence-based needs with efficiency concerns. UNICEF approach to targeting of disadvantaged children within the GFAs aligns with government sector priorities and aim to work inter-sectorally. The GTA strategy integrated a human rights and equity-based approach to strategically reach the most vulnerable children in the GFAs where UNICEF was working was also relevant and aligned to government intervention strategies.

However, there was a notable lack of coherence around the meaning of who is "vulnerable" (or deprived) both in data-terms and more broadly, between UNICEF and the GoM as well as between different stakeholders. Other challenges of the targeting approach was that the data used for targeting was insufficiently granular or representative at the targeting level needed, and that many geographic areas (and sub-populations) falling outside of the selected GFAs identified as having endemic or human rights issues that require specific attention were targeted for interventions during the CPs.

The GTA strategy to reach all children in the GFAs through holistic, intersectoral intervention packages is an appropriate and relevant strategy with promise of replicability and scale-up, particularly when led by local government authorities and stakeholders.

5.1.1 Alignment of UNICEF GTA to government child survival and thriving priorities

UNICEF's GTA outlining *where* to intervene does not necessarily align with the GoM approach; the thematic targeting approach outlining *how* to work remains relevant for the Government and aligns with the national strategies and plans generally. Specifically, alignment was evident in thematic programming as done through implementing local partners, usually sub-national government counterparts such as LGAs, teachers, social workers and other front-line workers. For example, implementation of the CFC approach in all the GFAs of both CPs, and in an additional aimags under the sponsorship of AFCYD, demonstrates applicability and the relevance of the GTA approach to the government. Thematic targeting alignment was evident in UNICEF's support for CWDs within Government schools: UNICEF established 12 Child Development Centres (CDCs) in mainstream schools and non-formal education centres in the GFAs in which 229 CWDs enrolled as of 2019 with additional 4 CDCs enrolling 81 CWDs in 2020[69]. Such intervention strategies exemplified to national and sub-national stakeholders that UNICEF's approach to geographical targeting (using survey data such as the SISS and HSES data and N-MODA[70] analyses) to identify and target vulnerable children through their programmes was an approach founded in equitability (e.g. identifying geographic regions that are in the most need)[71].

UNICEF's priority of selecting GFAs as a potential platform to showcase model intervention strategies tested during CP 2012-2016 (see section 5.6.1) was considered relevant by UNICEF staff and national level policymakers. The approach was considered to allow for both efficient targeting of limited resources, as well as tailoring resources to, either showcase model interventions packages for scale up and replication in other aimags, or for

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[69] *UNICEF (2019) Mid-Term Review of the Country Programme 2017-2021*

[70] *Two versions of the MODA analyses exist, N-MODA and M-MODA, representing different aspects of deprivation. The N-MODA is a single deprivation analysis measuring deprivation in each thematic deprivation dimension (e.g., overweight, shared toilet, overcrowding, etc.), while the M-MODA is a multiple deprivation analysis representing the number of dimensions across which a child is deprived.*

[71] *Mongolia: Nutrition equity profile, UNICEF 2019*

the creation of targeted interventions to suit an aimag's specific needs. In Zavkhan aimag, representatives from the GO and the line ministries appreciated UNICEF's alignment and support for the local government's efforts to invest in an integrated kindergarten model that includes multi-sectoral packages of interventions including WASH, nutrition and ECD. Furthermore, the MES sees UNICEF-supported CDCs as a good model and is planning to replicate this model in 21 provinces with World Bank (WB) support in the next two years.

National policymakers and practitioners (e.g. teachers, social workers) noted, in contrast, that the GoM's approach is founded on an equality-based approach (e.g. ensuring all geographic regions are treated the same). The majority of government policies and programmes have no priority geographic areas identified. Notable exceptions include case specific geographic or population targeting such as cash subsidies for poor families through the food stamps or the CMP and regional action plans for risk management interventions to support families facing dzud or other environmental disasters, among others. GoM determination of who will receive subsidies however is assessed differently than UNICEF (see section 5.1.3 below).

Aside from these exceptions, government support was otherwise stated to be universally applicable to all aimags and regions[72]. As such, UNICEF and GoM necessarily approach targeting differently both in terms of approach and philosophically based on respective institutional priorities and requirements. The selection of GFAs through UNICEF's application of the GTA was understood as an internal, institutional issue. This may explain why GoM representatives did not participate during UNICEF's GFA selection process for CP 2017-2021, although preferences and requests for assistance were received from Governor's offices and some Ministries. It was not clear however whether limited external participation was not due to organisational issues rather than as a purposeful internal process.

5.1.2 Thematic targeting and alignment to government priorities

UNICEF's GTA that works through integrated strategies and approaches both upstream through policy advocacy, and downstream in aimags, soums and districts is relevant and aligned with government strategies aiming to reach the most vulnerable children.

Relevance of upstream policy advocacy and evidence generation

There was almost a consensus of appreciation by policy-maker key informants, especially of MES, MoH and MLSP on UNICEF's alignment to government policies and priorities in their collaboration on developing intersectoral strategies. For example, the multi-stakeholder permanent working group led by the Deputy Minister for Labour and Social Protection, and GoM solicitation of UNICEF's support to jointly review sector strategies for children and provide feedback before approval demonstrate concurrence of approach.

UNICEF also influenced the GoM policy agenda through evidence generation and advocacy.

During CP 2012-2016, UNICEF successfully advocated with the MoH and the National Authority for Children (current AFCYD) to develop key legislation to benefit vulnerable and disadvantaged children. UNICEF successfully raised awareness of critical issues through the Fifth NNS to inform the development of the law (2016) on Food for Infants and Young Children to include a breastmilk substitution. In partnership with other development partners such as UNFPA, they advocated extensively over years for the approval of the Child Protection and Child Rights law (2016).

UNICEF also partnered with the GoM to build the evidence base for future collaboration. Examples include convening an Expert Consultation on Sanitation in Cold Climates (with the MoH, the Public Health Centre and SDC); commissioning a study on barriers to education for CWDs; and developing a Developmental Assets Profile on Adolescent in Mongolia to raise awareness of adolescents' intersectional need. Likewise, UNICEF built the evidence base and partnership around combatting urban air pollution, which resulted in a national research agenda, a policy roadmap, and a national communications and advocacy strategy.

In the GFAs, UNICEF translated the national dialogue and policy agenda for local action. The GFA Bayankhongor

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[72] *National Programme on Maternal, Child and Reproductive Health 2020-2024; National Program on Reduction of Air and Environmental Pollution 2017-2025; National Program on supporting rights of people with disabilities, their participation and development (2017); State Policy on Health 2017-2026; State Policy on Education 2014-2024; The National Nutrition Programme (2015)*

aimag, developed a "Smog-Free Bayankhongor Action Plan" – a testament to subnational commitment and alignment to common priorities. Other thematically targeted interventions during the current CP include: assessment of indoor air quality (in Bayanzurkh district); financial support for the national multiple micronutrient and supplementation programme for dzud affected households; and implementation of the National Programme on Child Development and Protection for 2017-2020, including mapping and reaching out to children in 4 khoroos of Bayanzurkh district who were not attending school.

Relevance to (downstream) sub-national sector priorities

Local government sectoral respondents from the GFAs shared UNICEF's view that issues affecting vulnerable children are multi-sectoral, necessitating inter-sectoral collaboration. For example, in all the GFAs, LGA respondents appreciated the CFC approach for stimulating awareness of child rights and the whole child approach. This translated into intersectoral cooperation through functional multi-disciplinary teams (MDTs) at aimag and soum level, and community-based IYCF counselling service cabinets in the GFAs.[73]

In Nalaikh district, targeting approaches in thematic interventions were also observed. These included introduction of community-driven and energy-efficient technologies in water and sanitation, addressing capacity gaps in local planning and delivery of quality services for children, and cross-sectoral mechanisms responding to abuse and neglect of children by engaging the health, education, social welfare and justice sectors.

In CP 2017-2021, UNICEF greatly increased support for targeted interventions, even within integrated programmes such as WASH and nutrition, to offset critical deprivation of subgroups such as ger communities in the Bayanzurkh district, or children exposed to dzud in Zavkhan. Within the GFAs, UNICEF responded to the needs of marginalised children by working to develop an inclusive child-friendly school environment for CWDs[74] and ethnic minorities[75]. They also worked to ensure essential health services for marginalized children and women in isolated areas by advocating for equitable social investments through pro-poor social and investment policies. In Zavkhan aimag, representatives from the GO and sector practitioners appreciated UNICEF's support for local government's efforts to invest in an integrated kindergarten model that includes multi-sectoral packages of interventions including WASH, nutrition and ECD.

A reflection of the thematic programmes that are currently implementing the GTA approach in the current CP is summarised in Annex 2C.

Opportunities and challenges

During the previous CP, UNICEF was narrowly focused on two GFAs where they sought to demonstrate the value and effectiveness of integrated programming. The heightened focus in only two GFAs created a strong collaboration between the LGAs (specifically the Governors of Khuvsgul aimag and LGA in Nalaikh district) and UNICEF. Implementation of the CFC initiative at aimag, soum and district level brought together diverse actors implicated in the care and protection of disadvantaged children for common purpose. Through creation and support for multi-sectoral committees and mechanisms under the umbrella of the CFC helped to establish a collective will to integrate child rights holistically across sectors. By design, this targeted the disadvantaged children through the various intervention strategies. In the subsequent CP, the cohesion between UNICEF and LGA programming, which the narrow GTA focus afforded in the previous CP, was more difficult to maintain as the programme interventions necessarily expanded in both geographical focus and content areas.

The GTA provides the opportunity to reach all children. As noted earlier, universal approaches to some intervention strategies, particularly related to health and education, are designed to reach all children (rights holder) equally – a view shared by the GoM and partners alike. For such intervention, targeting is implicated when sub-groups are specifically left out as was the case of internal non-registered migrants living in the outskirts of the ger districts in UB. For those communities, UNICEF did an assessment of needs and discovered

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[73] *Country Office Annual Report (COAR) 2018, 2019*

[74] *UNICEF (2019) Mid-Term Review of the Country Programme 2017-2021*

[75] *UNICEF (2020). "Assessment of Effectiveness of Distance Education (TV Lesson) in Response to Climate-Change Related Emergencies" Preliminary Findings*

the lack of access to basic services such as kindergartens and schools. Through documentation of the problem and joint missions with government actors to assess the situation, UNICEF convinced district authorities and the national counterparts to build kindergartens, and develop legislation to facilitate access to services for the targeted areas – a policy deviation from the government's universal approach[76].

Most sector respondents at national and sub-national level (e.g. education, social protection, health) were positive about the collaborative working relationship they have with UNICEF, and valued the intersectoral emphasis of the intervention strategies. Some LGA respondents at aimag level however, shared that in some locations both the sector line ministry and the UNICEF thematic programmes work together but independent from the other sectors associated with the integrated package - even when being implemented in the same soum for example. This siloed approach to implementation in some sectors was considered difficult to overcome given sectoral ways of working were not always aligned. For example, WASH infrastructure development in a school in Bayanzurkh district originally did not build capacities of technicians to maintain the facilities, leaving oversight to teachers and principals. As a lesson learned from the first installations, UNICEF involved school plumbers at an early stage of planning and trained them on operation and maintenance both during and after construction.

A summary of UNICEF's thematic targeting of outputs and outcomes in CP 2012-2016 and CP 2017-2021 is available in [Annex 2B and 2C](#).

5.1.3 Defining vulnerability and disadvantage

To successfully target, clarity of terminology is critical. **No clear definition of vulnerable (or disadvantaged)[77] children emerged** among aimag and soum respondents among both rights holders and duty bearers. While recognising translation issues, interviewees and the evaluation team discussed in Mongolian differing views on which children (and families) have the greatest needs. The most important determinants included socio-demographic factors (e.g. occupation, poverty dimensions), orphan, disability or household status, disability, and living status (e.g. under the care of relatives, living in dormitories, etc.) among others. For example, soum parents and teachers suggested that vulnerable children are those that are unaccompanied by parents or caregivers, or who live in the soum centre in gers rather than in school dormitories. FGDs with teachers, social workers and parents frequently identified the following vulnerable groups: CWDs, orphans, and families with the lowest living standards, children with malnutrition, and children experiencing domestic violence due to drinking problems.

In contrast, national policy-makers generally presented a more concise definition of who the vulnerable children are and how they are targeted, based on age and disability. Although in the legal and policy realm there is no clear definition of vulnerability, some government laws and national programmes on child development provide a definition of a child at risk:

> *"A person who cannot live in an adequate environment that enables their right to health, life, and safety; or a child without caregivers or legal bodies to represent or a child in disasters and emergencies"*
>
> *– KII, Policymaker*

The latest government policy document emphasised that: "Child Development, Rights and Protections policies shall be strengthened, and social policies shall enable equal opportunities for all children including CWDs, children from migrant, vulnerable, at-risk families"[78].

The definition of who is vulnerable (or disadvantaged) often rests on examples in policy documents, or by the agency or partner doing the targeting. This leaves an opening for considerable subjective interpretation, and potential bias. Many respondents noted differences in the needs and risks of specific children based on

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[76] *Country Office Annual Report (COAR) 2017, 2018*

[77] *'Disadvantaged' children, UNICEF's apparently preferred term, is used interchangeably with vulnerability in many reports and documents; although there appears to be a concerted effort to streamline towards the term disadvantaged – a less stigmatising term focused on the circumstances rather than the child. In Mongolia however, the terms are used synonymously.*

[78] *Vision-2050 Mongolia's long-term policy document, 2020*

their exposure to geographic risk, such as urbanisation and climate shocks. For example, children in arid settings often face harsher climate conditions and are therefore more in need of indoor plumbing/toilet facilities than children in warmer climates within the country are[79].

Further, children in urban areas reportedly face increased health risks due to air pollution as compared to rural children, while rural children are at increased risk of accident and injury due to labour exploitation from herding or child jockeying. Currently, who is vulnerable, and therefore potentially targeted, often differs according to the agency or sector doing the analysis. For example, the GoM analysis for children and families in need of social protection is specified in the Law on Social Welfare within the MLSP agency mandate, (either through GOLSWS or AFCYD depending on the action required); yet national and regional analysis on how to address the effects of climate disasters on herder families may be done based on dzud risk mapping by the National Agency for Meteorology and Environmental Monitoring.

The definitional confusion extends to UNICEF and GoM respondents that also shared different understanding of which children and families should be targeted. This may arise from the different use of data. UNICEF and other partners generally use sources such as the MODA analysis and SISS data to define child deprivation, whereas the GoM uses various data sources and analysis techniques such as PMT as well as sectoral administrative databases (see below). Recently, stakeholders have noted an increasing interest from the government to update and consolidate data sources, representing a potential opportunity to work collaboratively with the GoM to better define vulnerability among children and collect more accurate data. Another issue identified was that the government's definition of vulnerability was constantly changing, further suggesting a need for reflection or a paradigm shift in thinking about how deprivation should be measured, and its significance for children across Mongolia.

5.1.4   Alternative approaches to targeting: trade-offs, gender and human rights

The GTA was generally seen to integrate a human-rights and equity-based approach, by aiming to strategically reach the most vulnerable populations in the GFAs. Gender, in contrast, was embedded within thematic programming as a topical issue, and not a specific criterion for the geographical targeting. For example, a gender-based assessment was mentioned, which elucidated differences in issues faced by boys and girls. These results suggested boys were at greater risk of labour exploitation and resulting accidents due to herding or child jockeying[80], while girls were at higher risk of suicide or other mental health conditions. Based on this assessment, UNICEF created a gender-based tool to allow each geographic area to identify its own gender-related challenges and issues. However, many soum-level duty bearers argued that there was no need to integrate a gender-based approach, as their areas did not suffer from gender-based discrimination. Further exploration of respondents understanding of gender related barriers to services for example, were not well understood indicating a need to expand training for LGA partners in the GFAs on gender determinants of child and adolescent health and wellbeing.

As noted above, respondents stated that UNICEF GFAs are selected based on deprivation indices as measured through data sources such as the SISS, HSES and MODA analysis, but that the GoM uses PMT and other means to identify vulnerable children and their families. Challenges have been raised around all methods but there were considerable concerns about the government's use of PMT and administrative data to decide on which families receive support.

Many respondents considered that the GoM's PMT approach, which identifies those who will receive benefits from the food stamp distribution programme and the CMP (previously), was successful in identifying and ultimately helping to lift families out of poverty by increasing food security, reducing reliance on social benefits, and increasing employment[81]. Despite these positive impacts, many interviewees noted that the PMT often missed the most vulnerable children and their families by not considering other dimensions of deprivation, and the difficulty in calculating economic deprivation without actualised data. Further, mistakes in targeting

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[79]   WASH: Sectoral and OR+ (Thematic) report, 2018

[80]   The right of child jockeys in spring horse racing, NHRCM, ILO, UNICEF, 2016

[81]   Food Stamps and Medicard Impact Evaluation Report, OPM, 2013

by line ministries locally are common due to inclusion and exclusion errors and human bias (analysing the administrative data). The GoM officials and IFI partners increasingly recognise such problems: an updating of the PMT approach is currently underway. UNICEF staff generally agreed that data sources encompassing multiple deprivation indices, such as those undertaken through MODA analyses, were more appropriate for targeting thematic interventions such as social protection and ECD to reach the most vulnerable. Nevertheless, challenges around up-to-date and reliable data sources persist.

Key respondents observed that data sources used for targeting geographic areas are representative at the regional level and are not suited for use at the aimag or soum level, where more localized data sources should be used, such as administrative data (although of inconsistent quality). Further, because UNICEF's targeting approach is philosophically different to that of the GoM, some respondents felt that the government may not have appreciated UNICEF's approach to the selection of GFAs. Some interviewees suggested that political priorities may have played a role in the government's position.

5.2 To what extent has UNICEF's GTA aligned to the unique challenges faced by children during the last two CPs? (EQ2)

Relevance

> **Summary:**
>
> UNICEF was seen to be adequately targeting vulnerable children, and more specifically, CWDs through its programming. However, some participants mentioned that the UNICEF-targeted aimags were not necessarily those where the problems are most significant, especially related to problems facing adolescents, such as STIs and mental health issues.
>
> Areas identified where additional targeting may be needed include those with significant air pollution problems and the growing unregistered communities outside of ger districts in UB due to high rural-to-urban migration. The predominantly Muslim, Bayan-Ulgii aimag was also not selected despite having very poor indicators for child health and wellbeing.
>
> There were calls for universal interventions to tackle certain issues that are not specific to geographic areas such as STIs. A key challenge for such thematic programming is the difficulty in scaling up sustainably and in closing the funding gap when operating outside of UNICEF's GFAs.

5.2.1 Identifying and tackling barriers to reaching vulnerable children

National level government partners indicated that they supported UNICEF's selection of aimags for the previous programme, and further, considered the selection criteria valid as applied by UNICEF in the current GTA process. For example, national stakeholders confirmed that for CP 2012-2016, Khuvsgul was selected due to its number of ethnic minorities, multiple deprivations, and location (e.g operational efficiency of focusing in one aimag)[82]. Nalaikh district was considered specifically vulnerable in terms of the high number of working children at the small coal mining sites, as well as the presence of a marginalised minority groups (e.g. Kazakh groups) and migrant children. However, development partners and some UNICEF staff held that household economic indicators were prioritised for the selection of areas and localities in need. For CP 2017-2021, despite wider consultation, and a more inclusive process, which criteria was given greater weight for the final selection of GFAs remained unclear for some stakeholders (though there was little dissatisfaction with the selection). For UNICEF and their GoM and international partners, the relevance of the GFAs selected was rationalised. This was perhaps in part due to GoM stakeholders considering the application of the GTA as an internal to UNICEF (as noted in Section 5.1.1)

At aimag and soum level however, many respondents were unaware why their location was selected. Nonetheless, there was agreement that UNICEF was adequately targeting vulnerable children, and more

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[82] *UNICEF. Country Programme Document 2012-2016*

specifically, CWDs in their area. Successful targeting within the WASH program was most noted as appropriate given the needs. In 2016, during the design of CP 2017-2021, access to improved WASH facilities was around 27.3%- 39.1% in urban areas, but only 6.8% in rural areas[83] making the issue a priority for both national and LGAs in the GFAs.

Moreover, there was ambivalence among some local government and practitioner respondents from the GFAs regarding the prominence of the disability program. All participants agreed that focusing on CWDs was crucial, as these children are at higher risk of adverse outcomes than other children (without disability) that may be able to attend mobile and ger kindergartens, and benefit from other services. However, all GFA respondents (duty bearers and rights holder) were concerned that the increasing focus on CWDs may create a backlash among poor communities and families that are suffering multiple deprivations.

5.2.2 Targeting hotspots of deprivation for children

The evaluation team explored with duty bearers and rights holders whether the GFA selection for CP 2017-2021 continued to represent the locations with the greatest needs, and thus holding better promise for reducing inequity and deprivation among children strategically. While it was clear that not all challenges can be addressed with UNICEF support, respondents were asked to reflect on what they considered the most pressing issues facing children, with the goal of informing and heightening the relevancy of future GTA application by UNICEF for identifying where and how to intervene strategically with greatest impact.

UNICEF and implementing partners (IPs) recognised that currently, UNICEF's GFAs only partially cover significant hotspots related to adolescent health and air pollution in particular. UNICEF has reportedly adapted to the challenges of partial coverage by adding the Umnugovi aimag in the current CP as recommended by the UNICEF MTR[84]. Key informants from UNICEF reported that issues relating to substance abuse are on the rise in Umnugovi aimag due to the increase in cross border traffic of coal and persons (truck drivers).

Another aimag with current UNICEF programmes that falls outside of the GFAs is Bayan-Ulgii aimag, a predominantly Muslim aimag with poor child health and welfare indicators. UNICEF respondents clarified that it was not selected as a GFA because it was deemed as not representative of Mongolian children's situation. Similarly, Dornod, an Eastern aimag with the highest prevalence of adolescent STIs was also deemed to be an outlier but one which could benefit from UNICEF supported national STI prevention interventions.

Stakeholders raised various issues that need additional attention (beyond what UNICEF was focusing on in their aimag or soum) and may require alternative targeting to ensure they are adequately addressed.

Policymaker and UNICEF key informants commented that a critical population in need of specific interventions are the growing number of **unregistered communities outside of ger districts in UB** due to high rural-to-urban migration. UB's peri-urban, ger areas have a very concerning mix of issues, and poverty there is estimated as among the highest in the country (30%-40% poor households in peri-urban areas compared with 26% in rural areas). These communities face challenges including lack of urban infrastructure and shortages of quality health and education services. Moreover, children from UB experience 7-8 times more respiratory disease than children living in other urban and rural areas with lower levels of air pollution[85]. The situation in these communities was summarised as follows:

> *"Children in my constituency spend their winter on ice and their summer on dust and play on litter.. children walk for five kilometres to reach school from home due to a lack of bus and transportation.. there is this restriction to riding horses because no livestock is allowed to be in UB anymore.. "*
>
> *- KII Policymaker*

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[83] *Situation analysis of adolescents, UNICEF, 2016*

[84] *Mid-term Review of the Country Programme 2017-2021, UNICEF, 2019*

[85] *Child rights situation in Mongolia, Save the Children, 2018*

Respondents Bayankhongor (LGAs, practitioners, and rights holders) and UNICEF staff raised the related theme of air pollution, both indoor and outdoor. One rights holder noted:

"UNICEF must do more to inform and educate people and children on the means and benefits of better indoor air quality"

– FGD Teachers, Bayankhongor

UNICEF however is working to improve the conditions for these populations in UB, though apparently, many are unaware of their recent efforts. These issues have been recognised by UNICEF: UNICEF and partners have worked with AFCYD and others to streamline registration processes to facilitate access to health and education services for unregistered internal migrant families. UNICEF also worked with Mobicom and WV to build a kindergarten to service these communities where there are currently none and investigated and upgraded the conditions of 24-hour kindergartens in UB districts[86].

Gender also emerged as an important issue that seems to be given less attention. Gender differences in educational achievement, starting at the lower secondary school level, is documented according to national statistics[87] as a reversed gender gap. - There maybe evidence that an education system that 'favours' girls, without a holistic analysis of the gender norms driving poor education outcomes for boys. This issue was not seen as critical however among national and sub-national respondents.

Opportunities and challenges

UNICEF recognises many of the needs raised by the LGAs, teachers and social workers, and works actively to be responsive to issues as they become apparent. While not all critical issues facing deprived children and their families can be tackled, UNICEF recognises the issues raised by respondents, and in most cases is investing in both upstream policy and subnational interventions to address them. In UB, for example UNICEF collaborates with the local government to reduce air pollution by installing inexpensive heating and cooking options. The increased focus on indoor and outdoor air pollution within UNICEF is a welcome concentration within the current CP as it resonates with both duty bearers and rights holders.

Geographical and even thematic targeting was not always considered appropriate by respondents within UNICEF and among national and local stakeholders. Respondent questioned whether targeting was a relevant approach across UNICEF programming when making universal access to services (through upstream policy changes) may be a more effective strategy to reaching deprived children in certain contexts. For example, by addressing residency registration universally through changes in laws or policies, all unregistered families would have increased access to public services where they are staying.

Conversely, a few respondents within UNICEF and development partners stressed that there are sub-populations of children and adolescents that do require explicit attention and targeting to meet their diverse needs. Citing the GoM's human rights commitments, UNICEF advocated for the government to increase its commitment to support ethnic minorities (such as Kazakh and Tsaatan peoples)[88], especially in relation to respecting local languages and making textbooks and survey questionnaires (e.g. SISS 2018) available to them[89]. While these efforts by UNICEF were recognised, the development partners felt that UNICEF could be more purposeful and proactive within the CP to bring more explicit solutions to meeting the needs of ethnic minorities.

Finally, a clear challenge to thematic targeting is the funding gap. For example, one UNICEF report mentioned that "only a small portion of the (air pollution) programme has been funded and there are major challenges with finding and scaling up cleaner, affordable and sustainable solutions for heating in the Ger districts….it is clear that more investments are needed to reduce children's exposure to air pollution, and provide affordableand

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86 *UNICEF COAR 2019*

87 *NSO, UNICEF: Social Indicator Sample Survey, 2018*

88 *Convention on the Rights of the Child Alternative Report Submission: Violations of Indigenous Children's' Rights in Mongolia, 2017*

89 *UNICEF (2020). "Assessment of Effectiveness of Distance Education (TV Lesson) in Response to Climate-Change Related Emergencies" Preliminary Findings*

good quality health care to affected children"[90]. It is estimated that in UB in 2016, air pollution related illness in children (0-18) cost the GoM USD 4.8 million in public health services, and this figure is expected to reach USD 9.8 million by 2025[91].

Limited resources for combatting the effects of air pollution however are not only an issue within UNICEF. It is recognised that urgent measures are needed by the GoM to make funding available, particularly during the winter season through emergency declarations (to free up governor's reserve funds), and longer term, to strengthening health sector budgeting by harmonising fund disbursements methodologies across sector funds[92]. The current CP includes air pollution interventions with limited resources, and interventions to streamline local budgeting for children. For UNICEF to invest further, the GoM will need to take urgent steps to demonstrate willingness and accountability for the issue. To sustain new interventions however, UNICEF must work with the GoM to create the mechanisms and necessary resources to tackle national problems.

5.3 To what extent has UNICEF GTA contributed to CP results, learning and sustainability, and reduced inequalities for children? (EQ3)

EFFECTIVENESS

Summary:

UNICEF's activities are based on best practices identified from the previous CP and are designed to showcase how policies, guidelines, and administrative mechanisms can meet the needs of vulnerable children and their families.

UNICEF successfully advocated for legal and policy changes to protect the most vulnerable children by creating the evidence base for new legislation through feasibility surveys and studies (e.g. a costing study) for the implementation of laws and regulations related to child protection, combatting domestic violence, and financial incentives for services for CWDs. UNICEF provided technical expertise in developing new policy guidance and evidence-based information materials for interventions targeting children most at risk.

Several pilot projects were identified as showing promise in influencing policy in aimags and at national level such as CFC, which has been taken up by six other non-GFA aimags with full funding of AFCYD. However, not all promising pilot projects, particularly related to air pollution mitigation, were scaled up due to budget constraints of the government.

UNICEF raised awareness of child rights by embedding them within their CFC, and child budgeting advocacy approaches. Recognition of child rights was most prominent at sub-national level where GFA governor's created space for the participation of children in priority setting and budget allocation around their own issues.

Capacity building has been provided for a wide range of policymakers and sector specialists including training and awareness raising on child-friendly budgeting for GFA Governor Office divisions' representatives. The involvement of high-level officials in training was reported to have made a noticeable difference in support for increased child-focused budgeting, but there were mixed reports as to whether the heightened awareness and stated interest by local authorities to increase budget allocations for children ultimately materialised in practice in any significant degree. Perceptions of budget increases in spending on children however in the GFAs was widely credited to UNICEF's efforts nonetheless.

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[90] WASH: Sectoral and OR+ (Thematic) report, UNICEF 2018

[91] National Center for Public Health and UNICEF (2018). Mongolia's Air Pollution Crisis: a call to action to protect children's health. Discussion paper. P.27

[92] Ibid, p51

5.3.1   Application of the GTA within National Policy Advocacy

A UNICEF GTA approach to national policy advocacy, alongside those of government agencies including the MLSP, MES, MoF, MoH and AFCYD, have yielded tangible results across UNICEF's thematic intervention areas. UNICEF GTA brings the child rights lens and intersectoral approach to policy and intervention package development and implementation. For example, during CP 2012-2016, UNICEF strategically contributed to building the evidence base through their support for an implementation cost analysis to help secure approval for the Law on Combating Domestic Violence demonstrating UNCEF's added value to the advocacy effort. Likewise, UNICEF's multi-sectoral and holistic approach was evident in their focus on the enabling environment around breastfeeding in the Law on Fortified Food for the Infant and Young Child (2016). The law banned all types of aggressive advertising and promotion of breast milk substitutes to the general public, caregivers and healthcare professionals, and banned industrially produced complementary foods for children under six months[93].

UNICEF's support for intersectoral action was also included in the new Child Protection and Education Law, which saw the GoM reaffirm its commitment to measuring and tracking child poverty, child-friendly social protection, the first 1,000 days of life and ECD. Further, during this period, Parliament also amended the Education Law of 2014 with provisions for inclusive education including new financial incentives and financing to schools and teachers dealing with CWDs.

UNICEF's contributes to national advocacy campaigns by commissioning evidence synthesis and convening workshops to share new knowledge as a means to focus new legislation and policy action on disadvantaged children. During the period, UNICEF supported the Fifth NNS, and a Developmental Assets Profile Survey on Adolescents in partnership with National Authority for Children (NAC). UNICEF also provided technical assistance in development of a draft National Plan of Action for Promoting Adolescent Mental Health that incorporates multi-disciplinary and sectoral intervention strategies.

The UNICEF Mongolia-led Consultation on Sanitation in Cold Climate, which brought together the Government and private sector, resulted in the approval of a National Programme on Reduction of Air and Environmental Pollution (2017-2021). This included soil pollution caused by poor sanitation conditions in peri-urban areas[94].

UNICEF also promoted child targeted policy action at sub-national level within their GFAs through their CFC initiative. In Khuvsgul, the CFC strategy was full adopted at aimag and soum level making the CFC model a best practice for Mongolia (see section 5.4.1 and 5.6.1 for further details).

Further examples of UNICEF's contribution to legislative, policy, planning, and implementation are shown in Table 2 below.

Table 2. UNICEF's contribution to legislative, policy, planning and implementation in CP 2012-2016

Thematic areas	UNICEF Contribution to Policy and Strategic Achievements at National and Sub-National/ GFA level ☑ CP 2012-2016
MCH/EPI	UNICEF supported the approval of national MCH law in 2015, and developed the National Communication Strategy on Immunization. UNICEF also ensured national pneumonia guidelines reflected in Community- Integrated Management of Childhood Illness guidelines. ☑ UNICEF Introduced of new pneumonia guideline in GFAs.
Nutrition	The Fifth NNS (UNICEF-supported) assisted the drafting of the 2016 law on Food for Infants and Young Children ☑ Integrated packages on nutrition were rolled out to 3 GFAs ☑ Effectively delivered lifesaving nutrition services and supplies in dzud affected areas (45 soums in 6 aimags)

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93 *Country Office Annual Report 2017, UNICEF*

94 *Ibid.*

WASH	UNICEF organized an International Expert Consultation on Sanitation in Cold Climate, with MoH, Public Health National Centre and SDC. ☑ UNICEF supported piloting of equitable drinking water tariffs in Zuunmod and Baganuur. The approved tariffs were then enforced in all areas. ☑ Evidence-base developed on bottlenecks in WASH financing
Adolescent mental health	UNICEF's contributed to strategies in identifying most-at-risk young people. ☑ Govi-Altai provincial level action plan developed to addressing adolescent mental health
Inclusive education	UNICEF conducted documentation on barriers to children's education and recommended policies to reduce education disparities. Led to standards and guidelines for inclusive education ☑ Implementation and documentation of a scalable model in distance learning technology (6 selected schools)
Adolescent Life Skills Education (LSE)	In 2014, UNICEF and National Authority for Children commissioned a Developmental Assets Profile survey on adolescents in Mongolia, within Education Sector Master Plan (2002-2015). ☑ Developed skill programmes "My Family" for ages 10 to 14 "My World" for ages 15 to 17 ☑ Supported small-scale efforts to teach 21st century skills through LSE via extra-curricular activities.
Child protection	UNICEF, in partnership with UNFPA, contributed to the development and approval of the Law on Child Protection, and Law on Combating Domestic Violence. UNICEF also supported the creation of the National Programme on Child Protection and Development for 2017-2020 ☑ NAC and UNICEF organized capacity building trainings to prepare the implementation of new laws on Child Protection and Child Rights (2016) ☑ Within the National Child Protection Strategy and Action Plan (2011-2015), UNICEF is strongly supporting the training of social workers and other care staff.
CFC	☑ UNICEF successfully coordinated CFC strategy in Khuvsgul aimag (targets 89.9% implemented) although Nalaikh district faced obstacles

In CP 2017-2021, UNICEF made further contributions of bring the GTA perspective to legal, policy and regulatory frameworks for the benefit of children. Key legislative and policy successes during the period include UNICEF contributions to add a focus on the most disadvantaged children including CWDs in the Education Sector Master Plan. This resulted, for example with the inclusion of health education as a stand-alone topic (based on recognition of the need for all children, particularly the most disadvantaged to have more knowledge and skills around critical health issues such as how to protect themselves from risk of accidents, or eat healthily)[95]. The GTA was also successful in managing interventions for children with multiple deprivations: UNICEF supported the development of a national protocol[96] on the management of SAM with a large budget allocation for micronutrient supplementation programme for dzud-affected herder households, as well as social protection cash transfer measures for these children to better protect them from dzud.

UNICEF effectively translated their GTA strategies into sustainable multidisciplinary government platforms in favour of children. As mentioned previously, UNICEF supported the establishment of a permanent multi-stakeholder working group, led by the Deputy Minister for MLSP focused on child-friendly budgeting and fund allocation for children. UNICEF also provided technical and financial support for MLSP to establish the National Programme on Child Protection and Development for 2017-2020 (for total of 22 procedures and 2 standards), including the Procedure for providing legal assistance to children affected by domestic violence and the Procedure for temporary protection of abused children[97]- all key steps for the implementation of the landmark legislation on child protection mentioned above[98].

At the sub-national GFA level, examples of UNICEF GTA focused policy advocacy and engagement include support for needs assessments on indoor air quality in kindergartens[99] and family health centres, Education

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95 UNICEF (2019) Mid-Term Review of the Country Programme 2017-2021

96 UNICEF: Nutrition - Sectoral and OR+ (Thematic) report, UNICEF 2018

97 UNICEF Annual Report 2017

98 Country Office Annual Report, UNICEF 2017

99 UNICEF (2019) Mid-Term Review of the Country Programme 2017-2021

Management Information Systems (EMIS) in schools, and mapping of children not attending school as part of the new child protection law measures. Further UNICEF contributed creating access to disadvantaged ger children through a demonstration project that resulted in the creation of a new standard for family health centres (approved by the National Standard Office), which mandated that they include an immunization unit as a compulsory structural element to provide better access for peri-urban and unregistered children[100]. These improvements were appreciated by district LGAs and development partners as fundamental to improving child rights for all children in the more deprived areas in the outskirts of UB.

Additional examples of UNICEF contribution to legislative, policy, planning, and implementation at the national and subnational levels during CP 2017-2021 are show in Table 3.

Table 3. UNICEF's contribution to legislative, policy, plan and implementation in CP 2017-2021

Thematic areas	UNICEF Contribution to Policy and Strategic Achievements at National and Sub-National/ GFA level ☑ CP 2017-2021
Nutrition	UNICEF contributed to the Law on Fortified Food with policy advocacy ☑ UNICEF enhanced nutrition related counselling for mothers and infants ☑ UNICEF successfully advocate MES to increase sustainability of the programme implementation in schools and consider out-of-school implementation.
Nutrition (SAM)	UNICEF supported the drafting national protocol on management of SAM ☑ UNICEF contributed to the allocation of USD 530 million for nationwide multiple micronutrient supplementation programmes for 26,054 infant children and 15,803 pregnant women in dzud-affected herder households. ☑ UNICEF Mongolia's assistance enabled 157 target soum health centres to provide quality nutrition services including nutrition assessment and micronutrient supplementation.
WASH	☑ Water Safety Plans (WSPs) developed for BKH, GA and ZA aimags and Nalaikh district. Achieved by setting up local trained technical working groups.
Indoor air quality	☑ Conducted an assessment of 11 kindergartens and family health centres across the Bayanzurkh of indoor air quality control.
Air pollution	UNICEF organized the 'Combating urban air pollution impacts on MCH in Asia: A science and policy dialogue'. ☑ UNICEF supported the development and roll out of training modules for health professionals to learn about air pollution impacts ☑ UNICEF supported the Bayankhongor aimag with developing its "Smog-Free Bayankhongor Action Plan" by strengthening primary healthcare services
Educational environment	UNICEF supported development and approval of Education Sector Master Plan (2020-2023) ☑ UNICEF conducted studies on EMIS, to support evidence-based advocacy efforts.
Health education	Following UNICEF advocacy efforts health education became a stand-alone subject in secondary education in 2018. ☑ UNICEF assisted the implementation of the new curriculum by training 19 national and 90 sub-national master trainers.
Child protection, inclusive education	UNICEF assisted the implementation of the National Programme on Child Development and Protection for 2017-2020 ☑ Supported 97 MDTs in GFAs integrating child protection services ☑ Conducted a national comprehensive school safety assessment covering 96 schools ☑ Developed the new core curricula on mental health, sexual and reproductive health, GBV ☑ Mapped out children in 4 khoroos of Bayanzurkh, who did not attend school

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[100] UNICEF: Country Office Annual Report 2017

Social Protection	☑ Introduction of social protection cash transfer measures for children to better protect them from dzud conditions)
Budgeting and Planning for CFC	UNICEF collaborated with Cabinet of Secretariat to advocate inclusion of a number of key child-specific indicators in the annual performance contract of governors ☑UNICEF continued to provide technical assistance to local governments in GFAs to foster child participation in LGA planning and budgeting ☑ A multi-stakeholder permanent working group, led by the Deputy Minister for Labour and Social Protection, was established.

Note: BKH – Bayankhongor, GA – Govi-Altai, ZA – Zavkhan

4.3.2 Convention on the Rights of the Child

UNICEF has enshrined CRC principles in its GTA rationale and intervention strategies across thematic areas of intervention, dialogue, and partnership. UNICEF, through its advocacy and programme interventions, raised awareness of the principles of the Rights of the Child and helped to establish CRC principles in national law, such as in the law on child protection and guidelines for services for CWDs mentioned previously. Another example of the rights enshrined in law, policy and regulation is the MES's 2019 review of implementation of new curriculum for primary and secondary education. Within the review process, UNICEF played a central role, which reportedly led to the CRC being strongly reflected in the new curriculum[101]. For example, education ministry respondents noted CRC has become the foundational concept of the new curriculum.

Despite respondents' appreciation of the CRC foundation of UNICEF's targeting approach, key interviewees from UNICEF and other development partners had mixed opinion on whether national authorities and partners fully recognise the principles of the Rights of the Child. Most respondents from policy makers and LGAs and practitioners spoke to how crucial the principles of the CRC are, but noted that many are either selectively applied or aspirational at best. In addition, some respondents noted the application of principles also varied by administrative level, with national level policies clearly reflecting principles, but less so at the aimag level.

The right to non-discrimination faced by ethnic minorities in particular was mentioned multiple times by UNICEF staff, and international development partners, as well as in the recommendations of the CRC itself, as an area that needed greater attention within UNICEF's CP. As noted previously, UNICEF was very responsive to specific discriminatory issues measured against ethnic minorities such as the inflexibility by NSO to provide census survey documents in local languages.

> *"…translation of survey materials into local languages were not supported by government initially, and were only implemented in the end with UNICEF insistence and support…"*
>
> *- KII, UNICEF*

> *"…efforts to translate materials into local languages for ethnic minorities have been prioritized by UNICEF…"*
>
> *- KII, Policymakers*

The current CP however has only a minor focus on these groups. Furthermore, regional and gender disparities in the education system negatively impact girls and boys, especially for children living in rural areas, nomadic children, and children belonging to Indigenous communities [102]. More proactive and purposeful engagement with the specific needs and discriminatory barriers faced by rural and ethnic minority children were considered important to be given more attention in the next CP.

Conflating the role of UNICEF with that of the government, some respondents suggested that the principle

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[101] *Primary Core Curriculum, 2013 and Secondary Education Curriculum, 2016*

[102] *Convention on the Rights of the Child Alternative Report Submission: Violations of Indigenous Children's' Rights in Mongolia, Prepared for 75th Session, Geneva, 15 May - 02 June 2017*

of the best interest of the child in all actions was not consistently implemented[103], noting in particular the challenges faced by many herder children, such as precarious living situations, and a lack of water sanitation facilities.

District level respondents generally could not list specific CRC principles but nonetheless felt local policies upheld or aligned with the CRC. Specific interventions to uphold CRC principles mentioned were health priorities (e.g. water sanitation, access to a healthy environment, etc.); a safe environment (e.g. ensuring an adequate environment to study/learn); participation (e.g. via a specific day to listen to children, "Researcher Children," and the "Mini parliament" and a nationwide youth police programme for children to gain knowledge about the law. In the GFA districts, sector practitioners (e.g. teachers and social workers) said they were familiar with the CRC principles and that they were kept in mind when planning activities although no specific examples were offered on how that influenced their programme interventions.

Teachers, social workers and parents reported that community and children's understanding about CRC had increased through UNICEF efforts, however there is reportedly still much to do on the ground to realise CRC principles. It was observed that level of children's knowledge about the CRC was directly associated with UNICEF supported CRC-related posters on the walls at schools. For example, children of Zavkhan were very knowledgeable about the CRC as their schools had many posters related to CRCs whereas it was not the case in other GFAs.

Recognition of CRC in the non-GFA Uvurkhangai aimag included in this evaluation was largely equivalent to the GFA aimags and districts, because training was provided on the CFC approach by AFCYD that included CRC principles (see section 4.4 for a more comparative information on non-GFA engagement and outcomes.

UNICEF 's advocacy for child rights through the GTA is credited for the strides the GoM has made towards increasing its realisation of child rights through its laws, policy and practices, however more is needed beyond what UNICEF can directly support. For example, the 2017 Recommendations of the UN Committee on the Rights of the Child[104] to the GoM highlighted the need to ensure effective implementation of Child Rights laws by allocating the necessary human, technical and financial resources. The Committee also recommended that necessary measures be undertaken to address the issues of adequate budget allocation, promotion of child rights in the business sector, non-discrimination, family environment, environment and health, child jockeys and child labour[105]. CRC recommendations and UNICEF's responses[106] are shared in Annex 2F.

5.3.3 Capacity building

UNICEF supported the implementation of the legal, policy and programmatic achievements through its efforts to build local capacity to implement child rights provisions to enact change for disadvantaged children. Application of the GTA necessitates building national and local level partners and stakeholder awareness of CRC principles, and capacities to implement multi-sectoral interventions to meet the needs of the child as a whole.

UNICEF supported capacity building of its IPs at national and sub-national level through training, strategic advice, joint evidence generation activities such as monitoring, evaluation and research, consultations and dialogue, and advocacy with key national stakeholders[107]. UNICEF provided training to all national and sub-national partners on the GTA strategy, intervention packages and the supporting standards and guidelines.   Evidence of the effectiveness of UNICEF's capacity building (and advocacy) was the integration and mainstreaming of ECD strategies into *health, nutrition, WASH, and child protection within the National Programme on Child Development and Protection with its accompanying standards and guidelines (see section 4.3.1).*

UNICEF GTA focused training was reported by local policymakers as having increased their skills to better target

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[103] *Child rights situation in Mongolia, Save the Children, 2018*

[104] *Committee on the Rights of the Child (2017), "Concluding observations on the fifth periodic report of Mongolia", CRC/C/MNG/CO/5*

[105] *Child rights situation in Mongolia, Save the Children, 2018*

[106] *UNICEF (2019), "Country Office Annual Report 2019 – Mongolia"*

[107] *UNICEF Annual Report 2017, 2018*

interventions to reach vulnerable children and their families. Respondents from government ministries and Governors' offices in all GFA aimags stated that there was strong evidence that policymakers at ministerial and aimag levels have a good knowledge of UNICEF's the CFC intervention strategy, intentions and goals, and the importance of child-friendly budgeting allocations to support CFC implementation locally.

GFA respondents credited the training with helping them to both understand and implement the CFC approach.

> - *".... Many of our local businessmen attended child-friendly business training conducted by UNICEF, and also our local governors attended child-friendly planning and budgeting trainings.. now everyone strives to make everything child-friendly... as if though they have this child-friendly lens to see everything.... each community.. each organization tries to make a safe and friendly environment for children."*
>
> *- KII, Bayankhongor*

UNICEF also provided technical assistance to the health sector through a large package of trainings in both GFA and non-GFA aimags during both the 2012-2016 and 2017-2021 CPs, such as in child psychology, methodological training on socialization and development of CWDs in the community and infant health nutrition education to target the vulnerable children. A result of this comprehensive GTA capacity building strategy, the National Centre for Public Health conducted in 2017 the country's most comprehensive nutritional assessment[108].

> *"The UNICEF activities influenced our mind substantially. Before, I didn't even know what I was doing. We even didn't understand meaning of child with disabilities or what does it mean child protection. The UNICEF projects are considered by us are very effective".*
>
> *- KII, Govi-Altai*

Training was provided to pertinent organizations on UN standards for responding to violence against children and dealing with minor witnesses and victims .. Collectively, UNICEF' GTA focused training in the context of the CFC and support for intersectoral collaboration created over 600 MDTs nationwide, responsible for providing primary care to at-risk children and child victims of domestic violence. Private sector engagement in UNICEF child protection activities is also increasing through awareness raising and training[109].

> *Capacity building as a route to improved government targeting of interventions towards vulnerable children and families*

Special training on child-friendly budgeting and planning, and pertinent existing legal framework were provided to the majority of Governor Office divisions' representatives in GFAs, including a broad array of local actors and representatives from all sectors including both duty bearers and rights holder (e.g. families and children)[110]. The zero-based budgeting methodology was piloted in 19 soums of four GFAs and six non-GFAs[111]. In 2018, the Budget law was amended[112] and 'fixed recurrent costs' (utilization cost) of aimag, soum hospitals, kindergartens, schools shifted to the local governments, as owners, giving them incentives as well as responsibilities. According to Ministry respondents, the intersection of capacities built and changes in the budget law resulted in local government's child-friendly budgeting and processing being more disciplined and appropriate to advance GTA aims of institutionalisation of the CRC and CFC intervention packages.

Although UNICEF used capacity building to disseminate strategic approaches and interventions to plan, programme and budget to improve the situation for disadvantaged children in the various thematic areas, it was not clear from respondent remarks, nor from the results achieved to what degree can UNICEF wholly attribute the programme successes to the comprehensive (and costly) training of such a wide array of stakeholders observed in both CPs. Results of the Case Study on local planning and budgeting show, for example, that

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[108] *https://www.unicef.org/mongolia/media/1116/file/NNS_V_undsen_tailan_EN.pdf*

[109] *UNICEF Annual Report 2017, 2018; https://www.ot.mn/oyu-tolgoi-and-unicef-to-support-childrens-rights-in-local-communities/*

[110] *MOF, Budget policy planning department*

[111] *MOF, Budget policy planning department, UNICEF*

[112] *Budget law, clause 58.1.18, 58.2.17*

while the capacity building efforts on child-friendly budgeting were comprehensive, more strategic targeting of training for those in a position to influence child-friendly budgeting could have been more effective, and cost efficient. Training for pro-child LDF budgeting did not appear to target key factors such as the bagh/khoroo Governors, the LDF committees (charged with prioritising proposals) or the local CRHs, nor provide them any practical guidance tools to inform their decision-making (see Case Study on Local Planning, Budgeting and Financing for Vulnerable Children in Annex 3).

Nevertheless, including LGA's high-level officials in training sessions were reported to have made a noticeable difference in their public communication, support for increased budgeting from the LDF, Governor Reserves Funds and capital investments from the state budget on ECD, primary, secondary schools and dormitory facilities[113].

In relation to these outcomes, UNICEF contributed to providing technical assistance to local governments in fostering means for children to express their opinions on specific issues related to them, including in local development planning, budgeting and monitoring of local governments' performance on establishing CFCs. This resulted in an increase in the LDF of 14% to 33% over the 2017 levels[114].

Other noticeable changes have become rooted in GFAs were pro-child mind-set and attitude among communities, organizations and businesses as they reportedly have claimed that people have started to looking at things whether safety and friendliness in neighbourhoods are in place, like making sure no manholes on streets and more lights among ger districts etc.

Further evidence of capacities built is described in section 5.6 related to Sustainability.

5.3.4 Local planning, budgeting and financing for vulnerable children

UNICEF's GTA strategy sought to influence social sector budgeting and LDF allocation for children through, capacity building and technical support at national and sub-national levels. In broad terms, there is evidence that **targeting resources for children is increasing, with reported increases in pro-child spending from central and local budgets**. MLSP has increased spending on child protection at central level and through SPTs to aimags (see Figure 7).

Figure 8. Expenditure for child protection, by central and local budget, by thous.MNT
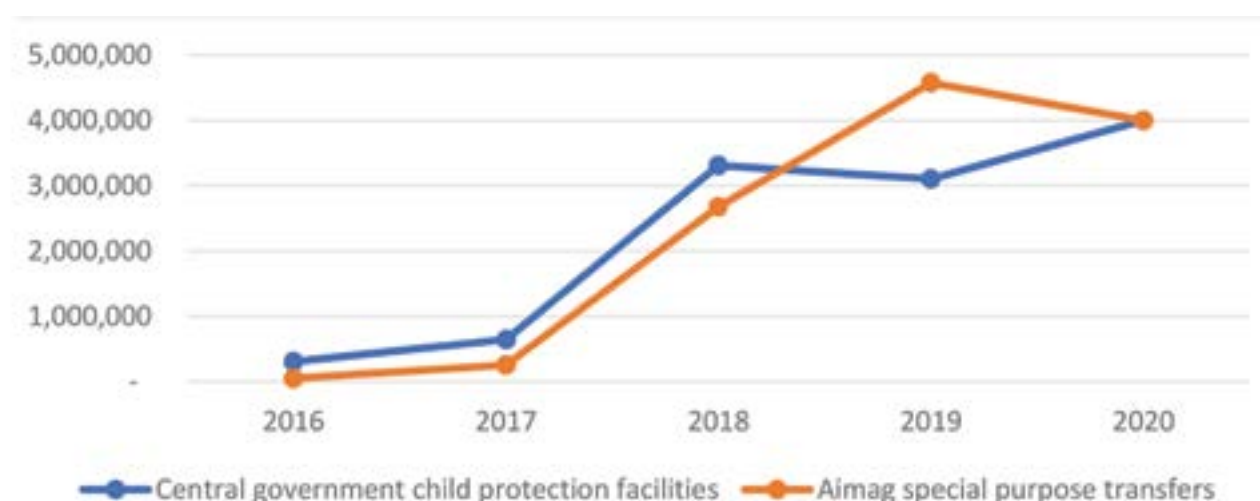
This appears to be due in large part to UNICEF advocacy for a large increase in the 'outreach' component of the transfers, which rose 23 times, from MNT 356 million in 2016 to MNT 8 billion in 2020.

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[113] *MoF data 2016-2020, GFA aimag reports to UNICEF*

[114] *UNICEF Annual Report 2018*

Respondents shared a high appreciation for UNICEF's efforts and credited UNICEF for increased financing for children however, a closer look at UNICEF strategies indicates some opportunities may have been missed[115].

Social sector budgeting

A review of the UNICEF Strategy Note 2017-21 and its outcome ToC suggests that there may be an inadequate appreciation of the limited role and powers of local governments in the budgeting of public expenditure for children. Currently, the financing of many child-critical services has been decentralized to local budgets, but not all. For example, household and individual cash transfers such as the CMP (key to activities under Output 3.1 in the Results Framework). All capital spending on facilities such as schools and regulatory authority for many child-related services remain on the central State budget and under central government authority. Moreover, even those social sector spending functions, which are decentralised to local governments are done so via 'delegated' arrangements, through tightly earmarked budget norms, which greatly reduces local level flexibility in targeting budgets for vulnerable children.

By contrast, the actual plans and activities adopted by UNICEF, and views expressed by staff, reflected a much more realistic approach to addressing these sorts of constraints at central as well as local level. UNICEF has engaged with social sector budgeting processes through a combination of upstream and downstream strategies:

- **Upstream advisory and advocacy activities with sector ministries concerning policy, guidelines and recurrent budget norms:** According to respondents, an initial work plan was prepared for upstream advisory and advocacy activities with quite ambitious targets for revising national norms, but this was then scaled back[116]. Nonetheless, some successes were registered, including increased child protection transfers noted above[117], a move away from the use of PMT-methodology toward universal allocation of the CMP transfers, adoption of consolidated national WASH guidelines, and revision to the kindergarten education transfer budget norms allowing counting of non-resident children.

- **Local training both in awareness and application of central planning and budget procedures and norms, as well as more generally on child-friendly budgeting**: Local respondents generally expressed satisfaction with this, although documentation attributing improvements in pro-child budgeting processes or outcomes by government was inconclusive.

There was, however, no reported engagement by UNICEF staff with stakeholders responsible for the sector performance contract mechanism[118] in these sectors (by which local authorities commit to service delivery targets in exchange for their special transfer allocations), nor with sector capital budgeting processes (by which, e.g. kindergarten and school building decisions, key to child access to schooling or to major WASH systems, are made).

Elected CRHs play a key statutory role in the review and approval of Governors' budget proposals, and in the monitoring of spending on service delivery by the executive branch[119]. While central budget norms allow little scope for local changes to the original social sector budgets, the CRHs must approve annual budget revisions and oversee the management of social facilities and budget execution by the executive[120]. It is unclear to what degree UNICEF engaged with CRHs beyond training some members in child-friendly budgeting, and possibly conducting advocacy.

Local Development Funds

The one major area where local authorities have some role to play in allocating financial resources to child issues is through the LDF, which allows local small-medium investments in community proposals across sectors (which may include WASH, kindergartens, playgrounds, etc.). However here too there are still some constraints

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[115] See Supplemental Annex: Case Study on Local Planning, Budgeting and Financing for Vulnerable Children

[116] UNICEF Social Policy Work plan 2018-20, KII UNICEF

[117] MLSP budget data

[118] However, equity of ECE investments has been raised in other reviews e.g. World Bank 2017

[119] IBL 2011, LATUG 2006

[120] IBL 2011, LATUG 2006

on local flexibility, which can frustrate the desired focus on investment spending on children's priorities. While the criteria for selecting project proposals for LDF funding are laid down in the IBL and in the 2018 LDF regulation, it is not always clear whether "soft" investments (e.g. capacity building or training activities) qualify for funding or not, since these are often recorded as recurrent rather than investment budget spending, and hence their eligibility is thought to be unclear. Secondly, it is not always clear to local authorities how they are supposed to reconcile the 'citizen vote' criterion with the other criteria also referred to in the IBL and LDF Regulation, such as adherence to local policy. By default, it is therefore often the citizen vote factor alone which determines prioritization - and this may not necessarily favour pro-child spending proposals.

UNICEF's strategy was primarily focused at the local level on advocacy and training of a range of local officials around allocating LDF budgets for pro-child priorities, and securing commitments from aimag governors to allocate ≥ 10% LDF budgets for these specifically[121]. These efforts were coupled with strong implicit LDF-reallocation incentives in UNICEF's co-funding of annual CFC work plans[122]. Respondents generally reported positive outcomes from this support and that this had led to greater pro-child spending from the LDF.

There is little evidence of more targeted engagement with the key steps and decision-makers in the annual LDF project prioritisation and approval cycle: e.g. bagh/khoroo Governors (who organize the initial prioritization), the soum/aimag governors' LDF committees (where project proposals are formally screened and prioritized for submission to the CRH), and then the CRHs themselves, which finalise LDF budgets. There is no reported advocacy with MoF about national LDF regulations and guidelines governing project prioritization criteria and LDF spending rules.

Some LDF budget data sources suggest that considerable shares of LDF investments do routinely, directly or indirectly, benefit children. It remains unclear, however, whether UNICEF's engagement directly contributed to these improved levels and better targeted LDF spending for children.

In principle, LGAs are able to adopt CFC strategies and principles with heightened commitment, multi-sectoral planning, coordination and partnership, and a whole child approach to the funding they have available. However, implicit in the CFC strategy is the call for substantial local co-financing, which many respondents noted did not fully recognise the highly centralised budget system noted above, and that aimags and soums generally have very few budget resources to allocate flexibly, other than the LDF and, to a much lesser extent, own-revenues and savings in the Governor's reserve fund[123]. CFC work plans and budgets also include many activities which are recurrent spending items not eligible for LDF funding. These would therefore need to be funded from either SPTs (if budget norms allow for that), or from modest governors' reserve funds where they exist [124], but no complete data were available for the extent of actual co-funding by LGAs of recurrent CFC recurrent expenses from such sources.

The LDF, as the only significant investment budget resource under local discretion was key to the local co-funding of WASH and other capital investments in the joint multi-annual aimag CFC work plans and budgets, co-signed by UNICEF and aimag authorities. These work plans however appear to be signed with aimag governors only, but not by CRH chairs that have the final decision-making authority over allocation of the LDF[125]. It is unclear what emphasis UNICEF gave to working with soum authorities on LDF budgeting even though until 2017, 70% of LDF allocations were to soums (while this share has been reduced, it is still significant and may well be increased again).

LGA respondents from the GFAs did not address this point directly although there was a strong concurrence that they felt they are able to do pro-child budgeting and, as noted above have indeed done so in some cases.

UNICEF's GTA supports a CFC approach to meeting the intersectional needs of children sustained by local funding eventually. As already underlined under Section 1.3, the main potential source of discretionary local co-funding for such activities is the LDF, since other funding sources such as the SPTs are already tightly earmarked through

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[121] KII, UNICEF=

[122] Work plan budgets

[123] IBL and local budget data

[124] CFC work plans and budgets for Khuvsgul and Zavkhan

[125] CFC work plans and budgets for Khuvsgul and Zavkhan

ministry budget norms (local own-revenues are generally meagre, and their use subject to MoF regulation and approvals, except in the very few "budget surplus" aimags and soums). However, preliminary review suggests the levels of co-funding implicit in the CFC implementation model are higher than could be sustained from present local LDF budgets alone, sometimes requiring a doubling of LDF allocations, and/or a very substantial reallocation of LDF funds away from other local priorities, which may not be realistic[126].

However, some cases were recorded of both private sector and NGO co-funding of activities in CFC work plans: e.g. Mobicom co-funding of a child help hot line in Govi-Altai, and WV co-funding school WASH facilities in Khuvsgul[127]. There are also reports of local staff and community members putting in time and resources to co-fund some projects – e.g. school staff funding school toilets.

Lastly, there appears to have been little coordination with other projects also building local LDF planning capacities: e.g. the Sustainable Livelihood Project-III, the CRH Project, and the Urban Governance Project.

National budget policy alignment to GTA priorities

UNICEF's GTA advocacy activities on national level policy were reported by respondents to have been effective in terms of planning and budgeting in some cases e.g. increases to child protection transfers, revision of budget norms dictating kindergarten funding allowing coverage of non-resident children, and WASH guidelines.

The Government showed increased commitment to strengthening the child protection system in Mongolia in 2017, following UNICEF Mongolia's continued strategic advocacy and systematic technical support[128]. This commitment is evidenced in the major steps it took, including approving the National Programme on Child Development and Protection as well as a series of standards and guidelines for child protection services, allocating USD 2 million from the state budget for child protection services, and capacity building for professionals across sectors at various levels.

Other important national budget policy changes were also made affecting children, but it is not clear whether UNICEF played a direct any advocacy or advisory role. An example of this is the change in in Budget Law in 2018 (reflected in revision to the IBL) whereby all 'fixed recurrent costs' (utilization cost) of school, kindergarten and hospital facilities (heating, light, water, maintenance, etc.) were covered by SPTs, but on local revenue budgets – possibly posing funding and equity challenges to local authorities.

UNICEF did engage with ministries in relation to more practical issues of policy implementation and central guidance clearly emerging from field operations. For example, there is reported widespread local lack of clarity and even misunderstanding about LDF eligibility rules and local budget revision powers, which in cases UNICEF staff themselves helped address in 'hands-on' manner with ministries concerned. UNICEF also played a critical role in informing local aimag and soum managers and in some cases, CRH members and parents locally on the new guidelines around LDF investments. It is unclear whether UNICEF also advocated for clearer guidance from central government itself to local officials on such key issues.

5.3.5 Data

Building and using evidence to better meet the needs of disadvantaged children

UNICEF contributed to building the evidence base to facilitate implementation of the GTA towards disadvantaged children and their families. UNICEF Mongolia continued to provide technical assistance to the Government for the Fifth NNS in 2017, and the SISS in 2018. Key features of the Fifth NNS included regional data on relevant nutrition indicators that quantified the prevalence of nutrition conditions that were of greatest concern to the population, particularly those of young children and pregnant women. As for the SISS, provincial and district level disaggregation of data estimates was made available for the GFAs of the current and previous CPs, plus Bayan-Ulgii and Umnugovi aimags which was not possible in previous surveys.

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[126] *CFC work plans and budgets for Khuvsgul and Zavkhan, LDF grant allocation data*

[127] *CFC Work plan Khuvsgul 2017*

[128] *Country Office Annual Report 2017, UNICEF*

Other examples of significant data exercises to support targeting of disadvantaged children included:

- a stakeholder mapping and methodology to generate evidence for higher-level advocacy on urban immunization were completed by a joint team consisting of academia, Government, NGOs and the National Centre for Communicable Diseases (with support from the East Asian Pacific Regional Office of UNICEF (EAPRO);

- A UNICEF Mongolia's study, 'Mining-related in-migration and the impacts on children in Mongolia' that created a solid foundation for stakeholder discussions and policy dialogue with the mining sector on children's rights[129];

- a legal review of business practices related to children and family development with the aim to provide evidence for opportunities and gaps in developing child- and family-friendly business in Mongolia[130].

- A country case study on UNICEF Mongolia's Assessment on Gender-Responsive Adolescent Health (on behalf of EAPRO) that contributed to programme design in adolescent mental health and adolescent life skills programme in Mongolia).

- Rapid social impact assessment on social and protection services for children and families during school closure due to prevention from COVID-19

- Mining-related in-migration and the impact on children in Mongolia[131]

National level stakeholders and partners in aimag centres were aware of UNICEF's contribution to research and evidence generation, particularly the SISS, and NNS. Line Ministries appreciated the SISS and used it widely for planning and advocacy for children's health, education and child protection issues. The SISS was conducted in 2013 and in 2018: the results were analysed (e.g. MODA) to inform UNICEF's GTA for the previous and current GFAs. While the MICS provided data at regional level, the MODA analysis was able to model aimag level results facilitating GFAs to plan, budget and compare the trends on critical issues between 2013 and 2018. At soum level, officials and specialists were not aware of the SISS nor the MODA and were not regularly using survey data in their planning and budgeting.

Some GFAs were motivated to collect and use data for better programming for children. With the support of UNICEF, Bayanzurkh district set up a district health sector database of all children at risk. Information is aggregated across 12 indicators for local health officials to better target programmes and activities. Updating of the database is performed in collaboration with the local health and social welfare departments, as well as the MDTs. It contains information on children disaggregated by stunting, weight loss, etc. UNICEF trained local family hospital staff to track the development of young children in all health indicators and provided them with scales for the anthropometric measurement of all children. Following the training, local health workers now prepare monthly reports on children's health status and have the possibility to follow up as needed.

Use of data to improve programming

There is evidence that UNICEF's GTA strategies produced monitoring data that was used efficiently to adjust and improve their activities to better target vulnerable children and their families. For example, ECD enrolment has always been notoriously high at over 90% in the GFAs, however, it was observed by UNICEF colleagues during a monitoring mission that many children were at home, especially within herder families. It was uncovered that the local education department was including children that attended only one month per year into the kindergarten enrolment rate - a situation that was corrected, with those children subsequently targeted for inclusion.

Indeed, respondents noted that transparency and accessibility of the PMT database was challenging in some places, and even more so if the local Governor and local social welfare office representatives are from different parties. In particular, it was a challenge in one district for the GO and CRH to get data on vulnerable children from the local Labour and Social Welfare Services department that holds the database of families who receive food stamps, because their management is vertical and under MLSP. Lack of access to local databases of

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[129] *Country Office Annual Report 2017, UNICEF*

[130] *Ibid.*

[131] *https://www.unicef.org/mongolia/reports/mining-related-migration-and-impact-children-mongolia*

vulnerable families limits the UNICEF and partners' capacity to extend and target services to meet immediate needs, particularly during the pandemic.

UNICEF also supported Departments of FCYD and Health to use local administrative data to ensure the needs of the most at-risk children were being addressed. During household visits by the MDTs it was clear that CWDs were spending an inordinate amount of time at health clinics for their diagnosis to be discussed and approved by the doctor (risking their non-attendance or follow up). To mitigate this risk the MDTs initiated a service with the slogan: "To serve [CWDs] by coming at your door, not by having you wait at the door of the state services". MDTs then began visiting the families and herders furthest away to conduct risk assessments and provide integrated services like health and psychological counselling. Such initiatives are evidence of UNICEF's training and support for MDTs to focus on attending to the whole child – a strategy that has been adopted by the GFA aimag and soum administration and departments.

Opportunities and challenges

Respondents noted that although most data are disaggregated by key socio-economic characteristics, sectoral data between ministries, departments and agencies differed, sometimes significantly. This was particularly the case for the numbers of CWDs and vulnerable children. Another challenge in identifying vulnerable children and families was concern around lack of confidentiality; due to small population settlements where everyone quickly finds out who is vulnerable, with the associated stigmatisation. Analysis and targeting disadvantaged children in the GFAs remain a challenge for the success of the GTA.

5.4 To what extent has UNICEF's CFC approach to implementing the GTA helped to create an integrated, holistic, multi-sectoral safety net in the GFAs? (EQ4)

EFFECTIVENESS

Summary:

UNICEF successfully piloted the CFC in the previous CP (2012-2016), and effectively scaled up the approach in the 4 aimags and 1 district of the current CP (2017-2021). In addition, the CFC has been taken up by an additional 6 non-GFA aimags demonstrating that the pilot to scale approach.

Implementation of the CFC approach was found to be broadly positive among targeted aimags and soums, with particular 'success stories' with the Bayanzurkh district and Zavkhan aimag. Among key stakeholders, both local and central, and from policymaker and beneficiary perspectives, the CFC approach was welcomed for its inclusiveness and effectiveness in delivering on key child-related health and socio-economic outcomes, specifically for CWDs. Children's participation was successfully integrated at the community level.

At both central and local levels, improved political will and added sustainability in funding for child protection services and case managers were reported, as a result of intersectoral collaboration of the CFC approach. However, the continued successful implementation of the CFC approach appears to depend upon the enthusiasm and commitment of specific individuals.

5.4.1   Functionality of the CFC approach

The GTA is successfully implemented, in large part, through the CFC strategy in the GFAs with further potential to demonstrate replicability and scale up in non-GFA locations. During the previous CP (2012-2016), UNICEF demonstrated the value of the CFC approach in Khuvsgul. CFC was subsequently taken up in the new GFAs under the next CP (2017-2021) successfully. All respondents appreciated the CFC approach and reported it functional in the UNICEF GFAs and beyond[132]. The concept of CFC is well known to those

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[132] *Country Office Annual Report 2018*

interviewed, all of which could list mechanisms and activities done under CFC. CFC has also been adopted by six other aimags, a demonstration of its potential for scale-up and sustainability (see section 4.6)[133].

Sub-national governments in the GFAs have approved a CFC sub-programme (2017-2021) that is currently being implemented[134]. The sub-programme has priority goals, objectives and activities directed towards the holistic development of the child through intersectoral approaches. Progress of implementation of the CFC approach is reported annually in the Implementation Progress Report from the GFA aimags. For example, in the Bayanzurkh district, the sub-programme includes the following 3 key goals/priorities such as (1) providing equal opportunities for all children; (2) improving health and development conditions of children; and (3) improving collaboration of agencies to work towards children. Specific activities included under the sub-programme were to provide learning conditions CWDs, establish ger kindergartens for enrolling children out of pre-school education children in ger areas, and improving conditions for all kindergartens through renewing heating and air quality of old buildings of kindergartens in the district[135].

CFC provides opportunities for intersectoral collaboration. To implement the CFC, aimag and district government authorities established CFC Coordination Committees comprised of representatives of all related line departments and agencies such as education, health, child protection, and police to promote intersectoral collaboration towards child development[136]. According to interview participants, the Coordination Committees were effective: they met regularly to discuss the progress on implementation of CFC sub-programme activities with representatives of key line departments/agencies presenting on progress, challenges and next steps. This helped to create a mechanism for collaboration, and information and knowledge sharing between agencies working for children. For example, previously agencies in the GFAs rarely met to discuss children's issues. Due to their engagement in the Coordination Committees, key sector respondents from the aimags reported that they are now well informed about each other's work. They appreciated the meetings because they provided an opportunity to learn from each other, and for the education, health and child protection agencies (at aimag level) to organize activities jointly. All aimag and soum LGA respondents were generally positive that the Coordination Committees had a positive impact at the community level.

Stakeholder appreciation and engagement in CFC

The representatives of the national government agencies also noted that the CFC is established at policy level. Policymakers highlighted that the national government's priority related to CFC is promoting child-friendly budgeting and an enabling environment for all areas of child development. Accomplishments of UNICEF's advocacy related to CFC and child-friendly budgeting are seen in increased state budget allocations for children's issues and needs (as mentioned previously in section 5.3.4). For example, the state budget has increased spending on central and local child protection services from MNT 356 million (2016) to MNT 8 billion (2020). Another example is that as a result of CFC implementation, the mutual agreement of cooperation between the MES and the aimag governors presents more activities directed towards implementation of CFC in their localities.

LGA respondents reported that the CFC approach has also had a positive impact at the community level. Several specific examples of the impact of CFC were provided, ranging from an increase in the number of qualified staffs working on child health at the aimag level, decreased child mortality rates, increased health infrastructure, and greater understanding/awareness of child issues, particularly CWDs. In addition, new kindergartens for CWDs at the soum level, new infrastructure and learning rooms in schools for CWDs, new WASH facilities in schools and kindergartens, and extensive capacity building training are examples of CFC implementation mentioned by respondents.

UNICEF engaged local stakeholders effectively. In Zavkhan, respondents reported that the Governor had begun a scheme to donate to savings accounts of all CWDs, build new child-focused facilities such as playgrounds, institute a mechanism to "listen to children's voices" around their concerns and priorities, and improve learning

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[133]   *Ibid.*

[134] *Annual work plans of GFA aimags*

[135] *CFC Sub-Programme of the Bayanzurkh district*

[136] *Governor's Resolution on Approval of the CFC CC in all GFAs*

conditions in kindergartens. National respondents commented that their work on air pollution with the local governments was facilitated by increased budget allocation for these issues. Line staff/departments, aimag and soum governors and CRH members all explicitly stated that they were engaged in CFC activities initiated by UNICEF in their respective aimags.

> *"[The CFC approach] improved child-focused local governance through the use of the CFC strategy as the main planning and monitoring tool for child rights at the local level, setting accountability targets and responsibilities"*
>
> *– KII, UNICEF*

5.4.2 Intersectoral collaboration through the CFC approach

Within the UNICEF GFAs, the CFC is the programmatic strategy for implementation of the GTA. Activities are expected to support the goals identified in the GTA through a CFC sub-programme of the aimag or district. Through the CFC, intersectoral collaboration is established to meet the diverse needs of vulnerable children and their families. For example, UNICEF promotes intersectoral collaboration operationally within kindergartens through the Integrated Approach on Early Childhood Development (IAECD). The IAECD means that young children should be supported in all areas of development, including health, education, nutrition, WASH and protection to offset fragmentation of intervention efforts- a strategy embraced in Zavkhan (as noted previously in section 5.1.2).

Another example of UNICEF's efforts to support intersectoral collaboration is the establishment and strengthening of MDTs to meet the diverse needs of vulnerable children. UNICEF supports capacity building training of MDTs in all GFAs to strengthen their effectiveness, functionality and efficiency of collaboration and response. Respondents from aimags reported that in recent years, child protection case management performed by the MDTs has improved significantly, and as a result, their work is increasingly recognised and encouraged by local authorities. For example, local authorities recognise the difficulty collective case management poses, as MDT members must be ready to respond with urgency when a case is reported. In recognition of the difficulty of the work of MDTs, case management fees are now officially allocated to the MDTs. UNICEF successfully advocated to reflect child-friendly performance indicators in civil servants' work performance, and also child-friendly activities and plans were integrated in annual provincial socio-economic development main directives.

CFC principles evident in the work of LGAs

CFC principles are embedded in policies and documents of GFAs. For example, policy directives such as the Governors' Action Plan (2016-2020) and Aimag Economic and Social Development Plan include objectives to support the implementation of CFC Sub-Programme[137]. Respondents also mentioned that as a result of the CFC approach, more resolutions have been approved by aimag CRH on child related issues.

CFC principles necessitate that soums and aimags have Children's Councils to ensure the opinions of children are reflected in local debates and activities. To this end, all GFAs adopted the "Day to Listen to Children's Voices"[138]. On this day, the Children Council members meet with local administrators or school principals to present and submit their requests. Many examples were cited by rights-holders (parents and children) respondents on how children's requests were responded to. For example, In Bayankhongor aimag, the Governor took action to promptly address a request for less dogs on the street and more lights.

> *".... Our Governor once said that if we keep hearing the children's voices, then I get to know all the problems I need to solve in our aimag.. so we were very encouraged and felt heard...*
>
> *- FGD Children, Zavkhan*

Further, under the CFC, obligatory Parental Committees have been established to support aimag and soum level activities aimed at the development of all children, including vulnerable children. The Parental Committees

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[137] *Governors' Action Plan (2016-2020), Aimag Economic and Social Development Guideline/Plan*

[138] *Ibid.*

raise funding and organize various competitions and parent-engagement activities to support the CFC.

Central to the CFC approach is the provision of support to all children, including the most vulnerable. A majority of aimag and soum level respondents noted that working through intersectoral approaches fostered by the CFC was a good approach to reach all vulnerable children. In one example, LGAs in Bayanzurkh district stated that their CFC activities cover all vulnerable children at the district level, including those who from the more disadvantaged ger areas.

Comparison between GFA and Non-GFA related to implementation of CFC

CFC achievements in implementing the 9 building blocks of the CFC in GFA and the Non-GFA aimag are summarised in Table 4 below. A comprehensive overview of CFC implementation in GFA and the Non-GFA is provided in Annex 2E.

Comparing the results of GFA aimags against a non-GFA aimag did not yield significant differences at aimag level, except in terms of dissemination at soum level in the non-GFA. As mentioned previously, AFCYD supported 6 non-GFA aimags to implement the CFC approach, including the evaluation control aimag, Uvurkhangai. As a result, no significant difference in knowledge or appreciation of the CFC initiative was found among local GO representatives', and other LGA members interviewed. This was only the case in the aimag centre, however. A stark difference of knowledge and attitudes related to the CFC between GFA and non-GFA was observed at soum level. In the GFA soums, local GO staff, communities and MDTs were knowledgeable about child-friendly aimag and soum initiatives and had been involved in some way. However, in the non-GFA soum, the local GO representatives were not aware of the CFC initiative despite being chosen by AFCYD to rollout "Child Friendly Aimag" program. Child related activities in non-GFA soums, if implemented, were being done so superficially, without consistency or sustainability. In the Uvurkhangai soum visited, there were almost no public activities to increase children's participation in community events and discussions as no facilitated platforms had been created for dialogue on issues such as LDF allocations. At a local event observed, adults were passive and not engaged in the public discussion, and the issue of child engagement was not raised.

5.4.3 Financing of CFC activities

CFC activities are mainly financed by UNICEF, but with LGA co-funding mainly from the LDF, lesser co-funding from local revenues and the Local Governor's Reserve Fund, and with occasional co-funding from NGOs like WV, the private sector and local community members. In addition, local entities or Children Council members raise small funds for gifts and warm clothing for vulnerable children. Many respondents noted that UNICEF worked jointly with stakeholders and with the LDF budget process (see section 3.4 on sector budgeting and LDF) to secure support for the CFC. UNICEF advocated for aimags and soums to allocate resources for CFC activities, which following awareness-raising, was eventually achieved in many of the GFAs (see section 5 on efficiency). In Bayanzurkh district for example, the budget for CFC activities is now allocated annually.

UNICEF has increased efforts to engage the private sector around implementation of the CFC. Examples of private sector partnerships include those with Mobicom on 108 Child hotline and establishment of a centre for CWDs in Govi-Altai with support of Wagner Asia LLC[139]. Moreover, a joint collaboration between Arig Bank, Wagner Asia, the Bayanzurkh district of UB and UNICEF Mongolia helped more than 830 children access kindergartens with good water and sanitation facilities[140]. Several respondents commented that social corporate responsibility is increasing as a result of UNICEF efforts, as are partnerships in the NGO sector. One example included a recent proposal to the Trade and Development Bank of Mongolia on mental health issues.

Opportunities and challenges

While the CFC approach is now appreciated, the introduction of the CFC in Khuvsgul at the start of the previous CP (2012-2016) presented challenges. Local administrators had to be trained and made aware of the value of the approach. Over time, Governors became convinced of the CFC approach and in particular, the Governor

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[139] *Annual review meeting presentation by Govi-Altai, 2018*

[140] *Country Office Annual Report 2018*

in Khuvsgul became an ardent supporter both financially and through advocacy. Many credit his engagement with the scale-up of the CFC to non-GFA aimags (see section 5.6).

The CFC brings challenges at aimag/soum level due to staff turnover and job satisfaction. The success of the CFC depends on those at the aimag and district level: motivated people with a positive work attitude to succeed and initiate new activities. Conversely, those that are not engaged in their job, are also not engaged in making the CFC operational, as observed by a policymaker: "if people are not engaged fully in their job, success is limited".

Table 4. CFC 9 building blocks implementation by GFAs and non-GFA

	GFAs	Non-GFA
Children's participation	• A consultative process is now mandated by law under the CFC initiative, and is active in all GFAs, ensuring participation of A&Y in local plans through platforms like a "Day for Listening to Our Children" and "Children's Forums." • Due to changes in local government in Govi-Altai, these Days have not instituted. • Local authorities try to address children's requests with allocations from LDF and the Governor's reserve fund.	• Identical platforms to those in GFAs have been developed and function effectively. Aimag representatives express pride of their ability to continue the development agenda despite changes in local government.
A child-friendly legal framework	• All GFAs have a sub-national CFC programme and institutionalized the sub-national coordination mechanism which are effective to some extent (depending on commitment). • In 4 GFAs, sub-national development policies and programmes reflect ideas and new attitudes in their local policies. • Sub-national government's commitment towards CFC is high.	• A CFC sub-programme was approved in 2017 by local government and implemented. • Local government ownership is weak at soum level, but good at aimag centre level.
Child rights strategy	• All adopted Child-friendly aimag programmes, and integrated CFC building block concepts into their aimag key documents. CFC concepts have been disseminated through LGA department, private and public agencies, communities and parents. • Awareness of pro-child attitude has been improved as a result of CFC implementation. • Messages on child rights strategies reached the whole area through initiating various interventions and activities by local Hurals, local entities, schools, kindergartens and health centers	
A child rights unit or coordinating mechanism	• Official structural mechanism to carry out CFC set up in by UNICEF or AFCYD to roll-out the CFC. • The Children's Council is led by Aimag Governor; the CFC Coordination Committee is led by Head of Governor's Office. • The Children's Council meets every quarter. Members in Children's Council and CFC Coordination Committee overlap in all GFAs which complexifies the implementation, M&E of the CFC Strategy. • A comprehensive system for coordination at the national level is lacking; unified policy level network is insufficient.	
Child impact assessment and evaluation	• Local governors and authorities in GFAs do M&E under CFC strategy: 1/ submit monitoring reports to Cabinet Secretariat according to the Order No 322, dated 2013, and 2/ report to UNICEF. • MDTs often carpool and chip in resources for field monitoring missions which is cost efficient and effective. • However, accountability and feedback mechanisms are lacking at aimag level to hold local authorities to be accountable.	• The Mainstreaming Social Accountability in Mongolia Project has been implemented.
Children's budget	• Efficient budgets and child-focused decisions are made in all GFAs. Child-friendly budgeting show potential for sustainability of CFC for long-term development and growth. • UNICEF partnership with private sector and local investments provides an innovative approach to replicate further. • Multisectoral coordination in GFAs substantially improved; resulted in budget allocations from LDF, Governors' funds, local tax revenues, private sector for children-related activities increased significantly.	• Non-GFA implementation is closely monitored by the national government and international organizations due to government investments • Assessment of budget expenditures for children in the social sector is needed, including budgetary norms for children.
Children's report	• In all GFAs and non-GFA, CRC awareness strengthened with implementation of CFC. • High visibility of CRC principles, esp. in Zavkhan. • Voices of children are heard by local governments and actions are taken to implement their requests. Parental awareness on child rights has improved, especially through parental council. • Children know their rights and how to express it to their parents and teachers • Social media has been the most popular channel they learn about their rights.	
Making child rights know	• All GFAs and non-GFA include pro-child issues on their agenda. • Child rights issues are considered for local planning and decisions. • GFAs institutionalized child rights inspector activities. Support from UNICEF ensures ground-roots progress. • Each CFC committee has a parental council, however CSOs are not sufficiently present in advocating for children's issues both in GFAs and non-GFA due to a lack of financial and human resources.	
Independent advocacy for children	• In all GFAs and non-GFA, government and local NGOs and private-sector organizations adopted child protection policies, and parents' councils established to consider children's-rights topics. • Many government and local NGOs and private-sector organizations adopted child protection policies,	

5.5 To what extent has UNICEF's GTA been timely and efficient? (EQ5)

EFFICIENCY

Summary:

UNICEF's targeting and test interventions in the GFAs has proven more efficient than alternative (or past) approaches to reaching the most vulnerable. The efficiency of working in a few locations to demonstrate models of intersectoral programming as was done in Khuvsgul and Nalaikh districts in the previous CP, was balanced in the next CP (2017-2021) against the need to demonstrate reach for equity and political reasons in the decision to work in more GFAs. This expansion based on alternative priorities however maintained an efficiency component in the selection of adjacent aimags for logistical and financial concerns.

UNICEF 's support to aimags to implement the CFC is predicated on local funding for activities, and eventually increased local budget allocations to sustain CFC engagement. Aimag governors were slow to accept that UNICEF was not underwriting the cost of the implementation of the CFC, however over time, aimag partners accepted this balance of contribution and even became advocates of the approach beyond UNICEF GFAs demonstrating the catalytic power (and efficiency) of transfer of ownership to local authorities for implementing integrated programmes for children.

UNICEF's intersectoral intervention strategies did not always yield intersectoral collaboration. Siloed ways of working within sectors – both in the government line ministries, and within UNICEF's programme components did not always facilitate broader collaboration on joint programme interventions.

UNICEF successfully partnered with NGOs and the private sector to support UNICEF-initiated intervention strategies. UNICEF worked with partners to avoid duplication of efforts, though in some cases only after some duplications had already taken place. More collaboration between UN agencies on UNDAF outcomes through joint projects could increase UN organisational efficiency.

UNICEF plays a significant role in supporting the collection of national data related to children. UNICEF has established a robust monitoring and evaluation mechanism that uses national survey and subnational administrative data to measure UNICEF results. The 2012-2016 CP results framework includes higher-level performance indicators that make it difficult to assess the effectiveness of targeting of interventions towards the most disadvantaged children. The results framework for CP 2017-2021 included more granular performance indicators to measure the results of outputs, many of which were targeted towards disadvantaged children and their families. An analysis of the results framework for the current CP is included in Annex 2D.

5.5.1 Increased efficiency through GTA focused partnership

UNICEF's GTA strategy to selecting sub-national areas (GFAs) to target and test its different activities has proven more efficient than alternative (or past) approaches (non–targeting, other) to reaching the most vulnerable (see section 3.1 on GTAs). In the previous CP (2012-2016), concentration in one GFA facilitated demonstration of multisectoral, holistic programming for children. UNICEF GTA approach created synergies with sub-national public and private sector partners and other implementing organisations and donors increasing the efficiency of their programmatic efforts by increasing engagement, diversifying the technical responsibility, sharing financial risk, and effectually creating greater local ownership and sustainability.

In CP 2012-2016, UNICEF had the opportunity to showcase intersectoral programming between WASH and the education and health sectors. In the next CP (2017-2021) however, UNICEF expanded its geographic reach, indicating that the efficiency gains of operating in one GFA were insufficient rationale to remain narrowly focused. This view was supported by national policymakers who felt UNICEF should work in more aimags to demonstrate their model intervention strategies more broadly as context and terrain require varied approaches and adaptation of models to be relevant for scale-up. GTA selection of GFAs for their past two CPs facilitated

UNICEF to dedicate resources and focus strategic interventions with partners to reach children at particular risk in the GFAs.

GTA Implementation Partnership

UNICEF has created a large partnership network with local organizations including LGAs and CRH to implement its GTA strategies.

Collaboration with Governors and between sectors at **local level** was noted as a synergistic approach that added value to implementation of UNICEF's GTA strategy, but was time intensive. In Khuvsgul, for example, initial entry into the aimag was delayed due to lack of resource availability at the outset. Respondents felt this slowed initial collaboration, particularly with national government partners. In Bayankhongor aimag, UNICEF co-financing and collaboration demonstrated how an aimag can advance implementation of the CFC approach. The efficiency gains achieved where a result of increased collaboration to achieve common objectives. This was possible, respondents reported, because the capacities of LGAs were built, which eventually paid off in terms of local ownership and initiative to advance the agenda for children. For example, respondents noted that as collaboration and trust grew within the aimag, local stakeholders under the leadership of the aimag governor came to realise how few WASH facilities existed in schools and hospitals, and how they could influence their own budget allocation. As a result of better understanding and planning, the provincial authorities were able to increase spending by generating savings and moving funds to alternative budgets.

UNICEF developed private sector partnership, which improved resource availability and implementation efficiency due to shared risk and investment. It also increased the likelihood of sustainability and scale up of successful project interventions. For example, selection of Umnugovi as an additional GFA in the current CP (2017-2021) facilitated the concentration of efforts to expand work on air pollution with the support of the provincial LGA and the private sector (Oyu Tolgoi LLC). In the Bayanzurkh, Mobicom partnered for the installation of WASH facilities in the ger areas where there is a large population of unregistered herder migrants without access to public services.

Challenges and opportunities of partnerships

UNICEF partners effectively with other UN agencies when they are working on a topic that intersects organisational mandates. For example, in health and social protection sectors, UNICEF partnered with UNFPA in support of the Domestic Violence law, STI prevention, and adolescent life skills education (LSE) among other issues. International partners include other UN organisations, such as UNFPA, and the IFIs (e.g. ADB, WB, as well as international non-governmental organizations (INGOs) such as WV, among others. In Govi-Altai and Zavkhan aimags, UNICEF is partnering with the Korean International Cooperation Agency (KOICA) and WV to produce WASH facilities in kindergartens and schools. International partners affirmed the effectiveness of these relationship as also demonstrated by the tenure of the partnerships (many have continued since CP 2012-2016), co-financing and joint initiatives (see section 4.6 on sustainability).

Respondents gave a positive assessment of efficiency (e.g. avoiding duplication, sharing materials and coordination) reporting that partnering with UN organisations, government and others was becoming more efficient and less duplicative. On LSE, for example, UNICEF works in schools and UNFPA in universities. It was a concerted effort to support and implement the new curriculum nationwide through training of 19 national master trainers and 90 sub-national trainers tasked with disseminating the curriculum throughout the country[141]. Another respondent gave an example that local and coordinated funds are distributed to schools efficiently, despite the multiple sources of support, for inclusive education for CWDs, focusing on logistics and transportation.

Within the UN system however, some respondents felt that better inter-organisational collaboration and synergy was needed within the UNDAF. Respondents noted that under UNICEF's leadership as coordinator of the UNDAF Outcome 2 (Quality and equitable and social services), interagency cooperation and efficiency have improved. Nevertheless, there are currently 10 UN organisations working in this area, and they together

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[141] *Country Office Annual Report 2018*

implement 25 projects through a multiplicity of approaches that are sometimes not fully aligned, or based on ad hoc government requests, or agency-specific analysis. Each organisation is guided by its own strategies and outcome measures, collectively missing the opportunity to achieve UN development assistance objectives in Mongolia as One[142].

"…from a national perspective… systems thinking is lacking"

- KII, International Organisations

There were also some challenges reported at aimag level where the LGA staff member in charge of social issues policy is responsible for coordination. At subnational level, the departments of FCYD and Health are directly managed by national ministry counterparts. Local Governors stated that there has been, on occasion, a mismatch or lack of coordination between the local GO priorities, and AFYCD priorities at the national level. This has complicated the execution of intervention strategies in the aimags and created confusion. Advocacy by UNICEF and other partners on their individual priority issues added to the coordination gap at times. This was addressed by having one representative from each government and relevant agency in the coordination discussion to facilitate coordination.

In Zavkhan aimag, LGA respondents reported siloed partnerships, which did not facilitate broader collaboration and intersectoral work. Annual work plans were signed between the aimag Governor and UNICEF but then implemented by UNICEF sectoral colleagues who work with the relevant departments at subnational level. During implementation, local line ministry partners of the intersectoral intervention package noted that as they are not involved in all aspects of implementation they have been, at times, left out of strategic communication on progress, though they understood that efficiency of implementation was improved by working directly with the sectors.

Nevertheless, respondents generally appreciated UNICEF and partner efforts to avoid duplication of activities through coordination and better representation of local partners when cooperating with the soums. Similarly, it was important that citizen representatives and activists were brought into the dialogue with government officials to ensure understanding and cooperation.

5.5.2   UNICEF's efficiency in use human and financial resources

UNICEF maximised on their positive relationship with Governors to improve internal efficiency of GTA implementation, though perhaps at the expense of local partners. UNICEF's previous outposts (in Khuvsgul, for example) were closed with the rationale that engaging with Governors locally by allocating staff in the aimags could replace UNICEF staff in the field. Indeed, UNICEF had hired someone to work within the aimag structures instead of having outposts. Efficiency was expected to result from the consequent lower fixed costs – while quality was ensured by having a system that could still monitor results. For example, in Govi-Altai, the former head of social policy department now runs the UNICEF, KOICA and WV joint WASH project locally.

Despite efficiency gains however, some respondents observed that UNICEF is now only moderately active within their aimag. They shared that the staff member in charge of collaborating with UNICEF was essentially taking on an increased workload by doing so. They implied that if an employee is funded specifically through UNICEF and can devote all their time/resources to that role, then that is a better scenario than the current situation. While the transfer of leadership to local actors can bring efficiency gains, it must be recognised that non-UNICEF staff are less likely to be as effective as staff that are solely dedicated to advancing UNICEF aims in the area.

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[142] *UNDAF 2017-2021*

5.5.3 Monitoring and Evaluation

Monitoring and evaluations systems[143]

UNICEF Mongolia's has a robust monitoring and evaluation strategy to monitor outputs and demonstrate UNICEF's contribution to outcomes. Baselines, targets and means of verification related to each output's key performance indicators (KPIs) are annually updated at the end of each year. Data to inform both outcome- and some specific output-related achievements and measures are derived from administrative data sources, such as the Education Management Information System, and child statistics database managed by AFCYD.

For the education sector data, UNICEF and government partners noted the need to adapt the system to include information from both public and private services that can be disaggregated to consider equity dimensions (e.g. identifying out-of-school children and their characteristics such as sex, age, ethnicity, location; and/or disparities in terms of learning outcomes). Health sector data similarly does not provide comprehensively disaggregated service data needed to facilitate targeting and service improvements.

The child statistics database was established with financial and technical assistance from UNICEF. It collects and compiles data from a variety of sources to provide information and analysis of the health, nutrition, well-being and socio-economic status of children at various ages. The database is a critical resource for targeting is well maintained and expanded to include adolescents. UNICEF plans to institutionalize aspects of the Developmental Assets Profile (DAP) into the data collection/management system to improve the availability of data on adolescents.

UNICEF and partners noted that while there has been significant improvement in the data collection system for health statistics, better disaggregation of data is needed for targeting- particularly related to equity and age. In addition, there is a need to include additional indicators related to the current priorities of the government in maternal, newborn and child health, IYCF; and/or the availability of WASH services in health centres.

The important survey-related data sources for which UNICEF provide technical and financial support includes: Population and Housing Census; SISS; Children's DAP; Maternal, Neonatal and Infant Surveillance System; and the NNS.

UNICEF works not only to improve the relevance of indicators and the functionality of administrative systems, but also to ensure that data and information are translated into analysis for policymakers. It was recognised by national policymakers and international partners however, that these databases need not only to be updated in terms of indicators but also to be improved in quality. The Nutrition Surveillance System was particularly noted as being in need of improvement.

UNICEF has developed a host of tools to assess data quality and institutionalise learning to better target disadvantaged children. A Quality Assessment Tool is planned to be developed with MECS in the next CP to facilitate monitoring of implementation of norms, standards and requirements around education, including WASH in schools. Analysis on the equity dimensions of education and learning experiences in Mongolia will also continue in the new CP. UNICEF plans to also complete an update of the MODA conducted in 2014 to include education-related analysis.

Important administrative data sources that can support the monitoring of both outcome and some specific output-related achievements for the child survival outcome are listed below. UNICEF works not only to improve the relevance of indicators and functionality of these systems, but also to ensure that data and information are translated into analysis for policymakers. UNICEF will provide an update to the MODA (conducted in 2014) to integrate updated data and analyse the extent to which progress has been made in reducing deprivations and inequities in the country. The new analysis however is not expected to model deprivation at the aimag or soum level, stakeholders reported – an important limitation that could be overcome as shown by the Case Study: 'Mapping geospatial distribution of deprivation and UNICEF's GTA' in this evaluation (see section 6.1 for a summary of the case study, and the full case study in Annex 3).

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[143] UNICEF. (2017). Mongolia Strategy Note 2017-2021. Final (2017)

UNICEF CP Results Framework

In CP 2012-2016, outputs (and corresponding outcomes) and KPIs were generally at a rather high level with little specificity of beneficiaries whether rights holders or duty bearers. Two outputs were notable exceptions: output 308 which focuses on increasing utilisation of social services by disadvantaged families (under outcome 2); and output 410 that highlights universal access to education particularly for sub-groups of disadvantaged children such as ethnic minorities, migrant children and CWDs (under outcome 4).

As shown in **CP 2012-2016 thematic targeting of outcomes, outputs and key indicator results specific to GTA** (see Annex 2A), outputs calling for a specific targeted intervention and corresponding indicators are not necessarily similarly targeted. As the CP was narrowly focused and programming was integrated, perhaps targeting measures were not deemed necessary given the whole child approach that was being advocated. UNICEF universal integrated approach to its programming (e.g. CFC strategy) was designed to cast a net wide enough that all children, including the disadvantaged would be reached according to UNICEF respondents. Without specific indicators however, to measure who is reach of the most disadvantaged, it is difficult to assess the effectiveness of the strategy.

CP 2017-2021 results framework is more granular, providing significantly more outputs and KPIs explicitly focused on outcomes for the most disadvantaged children. Like the former results framework however, many KPIs remain national in orientation without measuring (or accounting for) whether disadvantaged children and their families are specifically targeted through UNICEF actions – even within universal approaches to services.

A summary analysis of the **CP 2017-2021 thematic targeting of outcomes, outputs and key indicator results** specific to GTA as presented in the Results and Resources Framework in Annex 2B. In outcome A summary 1, there are three outputs and 17 KPIs of which only 5 have some targeting aspect. Disadvantaged children from key populations, herder families exposed to dzud, and implicitly children and women from poor households in need of support to access services are included as in need of a targeted approach. Outcome 2 focuses on access to education and includes 4 outputs and 12 KPIs, 7 of which are targeted. In this outcome, inclusive education for CWDs and creating greater access for children from ger districts, herder families and remote soums is prioritised for targeting. Child protection and CFC implementation are the focus of Outcome 3. There are four outputs and 8 KPIs of which three have a specific emphasis on targeting. As the CFC approach advocates for integrated programming for all children, with a specific focus on providing intersectoral support for the most disadvantaged, it can be considered that nearly all of the KPIs implicitly have a targeting potential.

Given UNICEF's GTA and explicit focus on disadvantaged children, greater measurement specificity is needed to ensure that GTA implementation strategies such as the CFC and working with LGAs to increase local budget allocation and planning for children, as evaluated in this report, are explicitly monitored and evaluated for their contribution to meeting the needs of the most disadvantaged children in Mongolia.

5.6 To what extent are the results of UNICEF's GTA sustainability? (EQ6)

SUSTAINABILITY

Summary:

While the GTA hoped to foster higher-level government engagement for integrated intervention packages, the sustainability of the integrated programming for children and families seems to be more effective at a local level than at national level.

The CFC approach is widely considered the most likely to be scaled up and sustained by the GoM, as interest from aimags, private sector and NGO partners has already been demonstrated. Sub-programme components however may have more difficulty in being sustained with WASH being a likely exception. The Children's Hotline for reporting on domestic violence is another example of a sustainable government intervention, following the fact that the hotline is now owned by the national government, as opposed to donors like UNICEF or WV.

However, through the production of tangible and nationally owned deliverables, institutional memory of the previous CP (2012-2016) is strong and remains a key indicator of programme sustainability.

With the current CP, capacity building for higher-budget sectoral actions is likely to be sustainable, as the funds already engaged encourage further stakeholder commitment, even post UNICEF withdrawal. Probable sustainability is equivalent for infrastructure projects where the realisations are explicitly visible to the community.

5.6.1 Sustainability of UNICEF targeting approaches

Sustainability of UNICEF's GTA focused intervention packages in the aimags and districts after funding for the four-year action plan with the Governors expires, is considered to be mixed by respondents. UNICEF's targeting approach in selecting GFAs was considered to facilitate sustainability due to the GFAs higher-level engagement, particularly related to the implementation of the CFC sub-programme's annual socio-economic plan. It was reported that as a lasting legacy, the GoM plans to replicate this approach in the remaining aimags with the support of AFCYD that has branches in 21 aimags and 9 districts of UB city. Plans for replication are currently under discussion within Government pertinent ministries and agencies and the remaining aimags.

Sustainability of some UNICEF supported activities from the previous CP of 2012-2016 in Khuvsgul aimag and Nalaikh district is evident as shown in Table 4. Local authorities have maintained CFC activities at the aimag and soum level with increased financing from their LDF, enhanced state budgets, and other donors. In the case of Nalaikh, for example, smart water wells, new schools, and kindergartens are the result. Institutional memory in Khuvsgul aimag and Nalaikh district is strong, despite possible rotation of officials within the Governor offices after each local election cycle. This constitutes one of the key external factors that may affect sustainability of best practice supported by UNICEF through its programmes. Respondents at the national and aimag level highlighted that the Khuvsgul Governor during the CP became a strong advocate for the CFC on behalf of UNICEF and AFCYD.

WASH and nutrition programmes that include CFC sub-programmes have a higher probability to be continued after UNICEF's withdrawal from GFA aimags due to increased budgets from the aimags and the central government, as well as NGO and private sector contributions, supported by a conducive legal framework[144]. This is demonstrated by the increased budget for the Governors' four-year action plan and socio-economic guidelines of Khuvsgul aimag and Nalaikh district (see example above). In Zavkhan, Government partnership with UNICEF's child protection programme also stimulated buy-in and sustainability through aimag and soum level funding.

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[144] *IB Law amendments of 2018: IBL, provisions: 24.1, 24.6, 58.1.18, 58.2.17*

"A child protection [social] programme in response to the dzud shock was implemented in partnership with the UNICEF. The program provided MNT 40,000 each to more than 2,800 children in the four soums with the highest dzud affection during last year's dzud. The aimag governor proposed to implement it in 23 soums. 6828 children aged 0-5 in 23 soums received MNT 60,000 each. It was very effective. In addition, in cooperation with water and sanitation facilities, hot water and toilets in several soums have been provided to improve the children's environment. In addition, public sports fields have been established in 15 soums with state budget investment and LDF investment."

– KII, Zavkhan

Furthermore, AFCYD is taking actions to scale up CFC to another six aimags with the state budget's allocations, along with technical assistance from UNICEF. As mentioned above, the human capacity built in the previous GFA (Khuvsgul) has been used for delivering lessons learned to these new aimags. UNICEF has supported such dissemination with the capacity building, provision of equipment[145] and training provided in the additional aimags in collaboration with other GFA governors who share their own experiences. As in the GFAs, the process started with the training of local administrators on how to promote CRC, how to design CFC activities and what would the role of local government should be, for example. All aimags received the Handbook "Lessons learned from CFC in Khuvsgul aimag" at the aimag Governors' meeting to raise awareness of the CFC and started initiatives, which seems to be working as was reported.

Asked whether child's rights activities were sustainable, LGA respondents in the GFAs highlighted certain activities that they felt were likely to be sustained. For example, follow-up actions for children dialling into the 108 Children's Hotline (reporting violence) was highlighted as being likely sustainable as a result of the fact that the hotline is now owned by the national government, as opposed to donors like UNICEF or WV. In addition, children's rights to expressing their voices through initiatives like 'A day to listen to children' were seen as likely to be sustained as they have reportedly been taken up positively and implemented widely by both duty bearers and right holders in the GFAs at central and soum levels.

LGA respondents in all GFAs commented that UNICEF's GTA interventions were designed for sustainability and replicability locally given their model/pilot nature. For example, the WASH project in Khuvsgul was taken over by soums where UNICEF did not work and is now done in a more efficient and resourceful way by local actors better positioned to negotiate cheaper services locally. As a second example, local funds were distributed to schools to support inclusive education for CWDs; logistics and transportation. This was maintained by Khuvsgul and has been replicated in the current GFAs. MES sees UNICEF-supported CDCs for CWDs as a good model and is planning to replicate this model in 21 provinces with WB support in the next two years[146]. Another example of cost-sharing activities included funding obtained from a Govi-Altai hospital to complement UNICEF activities. Further in Nalaikh, there was evidence of good institutional memory after completion of the CP in 2012-2016, with achievements and tangible results visible today, such as new schools, kindergartens and all khoroos provided with modern clean water reservoirs[147].

Advancing best practice for replication and scale up

Best practices from CP 2012-2016 were carried forward in the current CP on several thematic areas including the CFC approach and interventions, nutrition (IYCF), Community Health Centres, Innovative WASH facilities, Community Water safety plans, mobile kindergartens (ECD), MDTs for Social Protection, CDCs for Inclusive education for CWDs, LSE for adolescents, mental health programs for adolescents and Child-centred Air Pollution Action Plans. A particular example highlighted was, that of inclusive education models in centres for CWDs, an approach that involved extensive capacity building for school staff, students and community members[148]. It was noted that, following a pilot of the approach in Khuvsgul, UNICEF was able to advocate that the MES adopt new regulations on organizing extra-curricular activities (2018) along with guidelines for

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[145] *KII Govi-Altai*

[146] *UNICEF Country Office Annual Report 2019*

[147] *Annual socio-economic plan, LDF allocations from UB city, District LDF*

[148] *Child protection: Sectoral and OR+ (Thematic) report 2017*

teachers on administering children's clubs in schools.

UNICEF's thematic programmes assessed national policy constraints affecting services for vulnerable families. For example, in the previous CP, UNICEF observed that, in Khuvsgul, there was originally no allocation of LDF funds for children, no intersectoral collaboration or operational MDTs for child protection, and no climate-resilient facility for WASH. In 2014, with joint efforts of Khuvsgul GO and UNICEF's implementation of CFCI, at least 10% of LDF started to be spent for children advocacy and intervention[149]. This practice continued to the current CP in all GFAs, and also for building the capacity of MDTs, and by establishing climate-resilient and child-friendly toilets and WASH facilities. See Table 5 for UNICEF's Good Practices from CP 2012-2016 and CP 2017-2021 to date that were successfully piloted and now serve as models for scaling up in both GFA and non-GFA aimags.

Table 5. Scaling up UNICEF Good Practices

	Model activity/good practice	CP year	Description
1	CFC Strategy- a child-friendly local governance model	2012	Sustained engagement of private sector industries and business to allow for national scale-up. Adoption of CFCI by six new aimags at AFCYD initiative.
2	Children's Council and children's voices in decision making	2012	Sustained advocacy, technical guidance by UNICEF and Increased commitments by LGAs towards child-friendly local budgets.
3	Community based IYCF counselling service cabinets	2012	368 health workers trained on IYCF practices.' Cure-rate of 88% for SAM in GFAs for 2018.
6	Innovative Container WASH Facilities150	2012	Successful partnership with the third sector (WASH Action NGO) and private sector (Mobicom, WV) towards WASH facilities in schools (UB + 6 rural GFAS). 4,000 children and 60 teachers151 end-beneficiaries. Specific budgetary allocations for new WASH facilities committed by MES.
7	Community Water Safety Plans	2017	Smart Water Kiosk systems demonstrated in Govi-Altai, then expanded with LGA funding. UNICEF replication of WSP in Bayankhongor aimag.
8	Multi-disciplinary Teams152	2012	97 MDTs in the target areas to provide integrated child protection services to vulnerable children.
9	Learning and recreational centres for CWDs	2012	Partnership with Mongolian Education Alliance153 740 people (across 3 GFA aimags trained resulting in important changes in attitudes toward inclusive education. Replication in 3 other aimags in 2018. Specific allocation of local budget in Govi-Altai towards interventions for inclusive education
11	Child-Centred Air Pollution Action Plan (2017-2021)	2017	200 ger households in Bayankhongor aimag centre financially supported by UNICEF and partners to adopt cooking, heating, insulation products and services (CHIPS). LGA committed to support another 60 poor households. Local entrepreneurs were trained to produce the CHIPS package.

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[149] *Child Friendly Khuvsgul Aimag Programme under Resolution #36, 2014*

[150] *https://mongolia.gogo.mn/r/155277*

[151] *COAR 2017*

[152] *COAR 2017*

[153] *COAR 2017*

| 12 | Gender-responsive mental health | 2017 | In 2018, multi-sectoral approach was tested in Govi-Altai aimag leading to a provincial-level action plan on adolescent mental health for the next three years. Focus on non-communicable diseases, gender responsive mental health and STI prevention. |
| 13 | Shock Responsive Social Protection | 2019 | In close collaboration with MLSP, UNICEF has designed a pilot programme worth USD 490,000 to provide cash assistance for all children living in remote rural areas prone to extreme weather shocks in 4 soums of Zavkhan province. As part of the pilot, all children aged 0-5 living in selected soums received cash worth of MNT 40,000 (approximately USD 15) through the existing national system for delivery of the Government's Child Money Programme. The second phase of the pilot covered all 23 rural soums except Uliastai, the provincial centre. The pilot reached 6747 children aged 0-5 and all these children received MNT 20,000 for three months, February-April, 2020. This pilot will be implemented for 2 more years aiming for full integration and adoption by the government thereafter154. |

Advocating for scale-up

UNICEF has sought to influence national policies through the demonstration of successful pilot approaches, a strategy understood and accepted by national policymakers respondents. Specific initiatives cited as examples of pilot to scale include UNICEF's efforts to scale up mobile kindergartens in herder communities, and activities supporting school attendance of 6-year-olds (that were often not yet attending school)[155] [156]. The latter was seen as a way of supporting the socio-psychological well-being of children and their families, and helping to prevent issues such as divorce and cramped housing.

There was appreciation among implementing national and subnational partners of UNICEF's technical expertise in developing new policy guidance, and evidence-based information materials and guidelines by both national and sub-national policy makers and implementers for the replication and scale-up of policy achievements. Specific examples of UNICEF's providing such support is the development of the guidelines on "Services for children in risk of abuse and domestic violence who are in the Shelter" (2018) and their role in supporting the development of the Education Master Plan[157].

Several pilot projects were also identified as showing promise in influencing policy in other aimags and at national level including the CFC approach, ger dormitories for 6-year-olds, and mobile ger kindergartens for herder families' children, and resilient and child-friendly WASH facilities at schools and kindergartens. For example, CFC was taken up by six other non-GFA aimags with full funding of AFCYD after reportedly being seen as a good way to deliver child-as-a-whole integrated services to children. Conversely, another pilot, the REDS strategy in the health sector, which was successfully modelled in Khuvsgul, was not maintained despite its potential due to lack of local budget[158].

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[154] *https://www.montsame.mn/en/read/223420*

[155] *Country Office Annual Reports, UNICEF, 2017, 2018*

[156] *Child Issues, Programme structure and Package of Results, 2016*

[157] *UN Mongolia Country Results Report 2017-2018*

[158] *Country Office Annual Report, UNICEF, 2018*

Factors influencing achievement or non-achievement of scaling up Good Practices

UNICEF adopted a narrow GTA focus for CP 2012-2016 to be able to demonstrate that integrated programming can yield impact for children, including the most disadvantaged. During the period, they developed successful best practice models that were introduced in the next CP as intervention strategies with the potential for scaling up in the new GFAs. To determine which best practice models would be scaled-up and where, UNICEF staff considered inter-related critical success factors namely, partnerships, resources, capacity, and the enabling environment.

Partnership: UNICEF had created the best practice intervention models with national and sub-national partners in government, the private sector and INGOs (see section 5.5.1). International partners and UNICEF staff agreed on the critical role these relationships, and the leadership provided by the national partners for successful scaling up of programs:

> *"..a lesson learned is the commitment and leadership of the local governments are essential in the successful replication of the good practices in the new GFAs" 159*
>
> *- KII, UNICEF*

Resources both from UNICEF and the Government- are also critically important as limits in funding have in fact hampered broader scale-up of effective intervention strategies, such as building kindergarten in ger districts to reach disadvantaged children, and expanding air pollution strategies.

Capacity of the implementing team and leadership support is also critical for sustaining interventions packages. However, having the necessary financial resources can, as demonstrated in the current CP, facilitate comprehensive training and mentoring of LGA and other sector partners to implement effectively in their localities.

Perhaps the most important factor to consider for scale up is the **enabling environment**, including involvement of the Parliament[160]. For Mongolia, this extends beyond the socioeconomic, political and even cultural contexts to the physical and geographical context. UNICEF and other respondents reported a key learning for scale up: the transferability of some intervention models from one location to another, in a geographically diverse Mongolia is more challenging than expected.

> *"We are testing WASH adapted to the climate in Mongolia. Before I came to Mongolia, if you were to tell me that building a toilet in Mongolia is different from in Africa, I would say how? Now I can see it is different. Hygiene facilities are not accessible to everyone. We need to have WASH that can be accessible, affordable. That's what we are testing, and so we can speak to Government saying that kind of WASH can work, because it has to be supplied throughout the time.*
>
> *- KII, UNICEF*

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159   *Country Office Annual Report 2017*

160   *KIIs, Policy makers*

5.7 COVID-19

Summary:

The Covid-19 pandemic has exposed and heightened the risks faced by vulnerable children. Children already at risk for domestic abuse, and neglect became even more vulnerable, while children without access to digitalised learning opportunities via TV were unable to learn and study.

During the pandemic, UNICEF switched to emergency mode to support the GoM to address the new and urgent needs of children, particularly related to mental health. UNICEF and partners supported rapid assessments, and home visits by teachers. Learning from UNICEF's assessments indicated children, depending on where they live, suffered disadvantage differentially. As a result, more attention has been focused on the divide between urban, peri-urban, and rural areas by sector specialist in their response to children's needs.

5.7.1 The effect of the pandemic

COVID-19 has posed particular urgency to target the most disadvantaged families. COVID-19 exposed that many children in already vulnerable situations were placed at even greater risk. For example, many respondents noted that domestic violence[161] and abandonment and neglect of children have increased during COVID-19 because parents were misusing and drinking more with social welfare benefits (Child money, Food stamp), but there were no specific comments from respondents regarding what UNICEF can do to eliminate these problems. Further, many vulnerable children did not have access to digital learning via TVs and were therefore unable to complete their learning activities. In addition, children and adolescents faced greater psychological problems like loneliness, anxiety of not being able to catch up lessons, and even an increased risk of becoming overweight.

UNICEF, with local stakeholders and teachers, worked to mitigate the problems by supporting the 108 Children's Hotline and provided support for teachers to visit homes of children who did not have access to TV learning. Social workers and teachers reported the challenges they were facing in supporting the most vulnerable children, particularly those suffering abuse, neglect and poor nutrition. UNICEF participated in the national level taskforce to address the public health crisis for children seeing their role in gathering evidence to target the most disadvantaged children and developing strategies with government and international partners to reach them with critical support.

4.7.2 Making data available during COVID-19

Data collection activities were continued at the start of the pandemic, by shifting data collection activities away from home visits to public locations.

UNICEF was active in making data available to respond to the needs of vulnerable children and their families during COVID-19. For example, multiple respondents noted that Rapid Risk Assessment of the Situation of Children in 24-Hour Kindergartens in UB was carried out in February, and covered 1,720 children aged 2–5 in 14 public and private 24-hour kindergartens of UB city to see food and nutrition, safety, protection, health and education status of children.

Also, UNICEF conducted two assessments of the mental health impacts on children during COVID-19 and the effectiveness of TV lessons for children. Preliminary findings indicated the children had developed anxiety due to not being able to follow up with TV lessons, loneliness, distress and also, it was found that many vulnerable children were had no TV and electricity to watch TV lessons during COVID-19.

As a result of the pandemic, UNICEF reportedly switched into 'emergency' programmatic mode, though the specific implications of what this meant were unclear. An important concern emerging out of the pandemic

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[161] https://mongolia.unfpa.org/mn/news

was the increased vulnerability and geographically divergent, risks. For example, children living in peri-urban areas within UB were observed to be in a precarious situation as a result of the pandemic, which was brought to the attention of the GoM. As a result, more attention has been paid to the divide between urban, peri-urban, and rural areas. These results will likely extend beyond the pandemic, with the emergent realization that air pollution, for example, is a problem faced by many urban areas, whereas labour exploitation is more common among rural children from herding families.

UNICEF's response during COVID-19 was highly appreciated by the government because of its efficiency. For example, UNICEF found a duplication of efforts in some thematic areas, (UNICEF is cluster head in Education in emergencies), whereby partners were all producing the same informational content; after discussions, partners then worked together to produce a common package of materials. International development partners and policymakers reported that the initial duplication of efforts was overcome through UNICEF's leadership and willingness to collaborate with urgency, which was very appreciated. Further, UNICEF staff and policymakers reported that during the COVID pandemic, UNICEF successfully advocated for an increase in the universal cash transfer all children under 18 increasing it from MNT 20,000 to 30,000, to MNT 100,000 by the end of 2020, however this point could not be corroborated by documentary evidence as yet.

At the soum level in the GFAs, collaboration was highly appreciated and efficient by respondents' statements. They noted that UNICEF asks local stakeholders about their needs before proposing solutions to requests coming from the aimag. They note that this resulted in interventions being based on actual need, which was felt to be an efficient way of working and collaborating.

6 Case studies

Two case studies were done to inform the evaluation: one to investigate UNICEF's role in working with and influencing LDFs and social sector budgeting; and a second to explore UNICEF's Geographical Targeting Approach. A summary of the case studies is described below. The full case studies are presented in Annex 3.

5.1 Case Study 1: GTA model analysis and mapping of deprivation of children and adolescents in Mongolia

This case study explores the extent to which the GTA focuses on UNICEF Mongolia's thematic interventions appropriately to address the unique characteristics and problems faced by children in the selected GFAs during the last two CPs. Geospatial and multivariate analysis were used to understand deprivation patterns in Mongolia, to assess the appropriateness of the UNICEF GTA methods for tackling child and adolescent poverty, and to recommend future analytic approaches to geo-targeting.

UNICEF GTA

The two central functions of geo-targeting for UNICEF are, firstly, the selection of aimags, districts for focused engagement, intervention and action for vulnerable children. The second is the micro-targeting of vulnerable children and households or marginalised groups within the chosen focus areas.

In terms of selection of aimags and districts, for the 2012-2016 CP (referred as 1st CP), UNICEF's GFAs were chosen to be the Nalaikh district and Khuvsgul aimag. Three different aimags and a different district were chosen for the CP 2017-2021 (referred as 2nd CP). Finally, Umnugovi aimag was added for specific interventions starting from 2020. Although there were criteria used to determine the target areas, many considerations, competing data sources, and political processes were accounted for in the decision. As a result, UNICEF has not necessarily been working in the areas where the most deprived children are, and there may be hotspots left behind. Employing updated geospatial techniques, we explored how the decision-making process could have been informed by creating poverty maps based on 2016 data.

Figure 11. GFAs selected during CPs 2012-2016 and 2017-2021
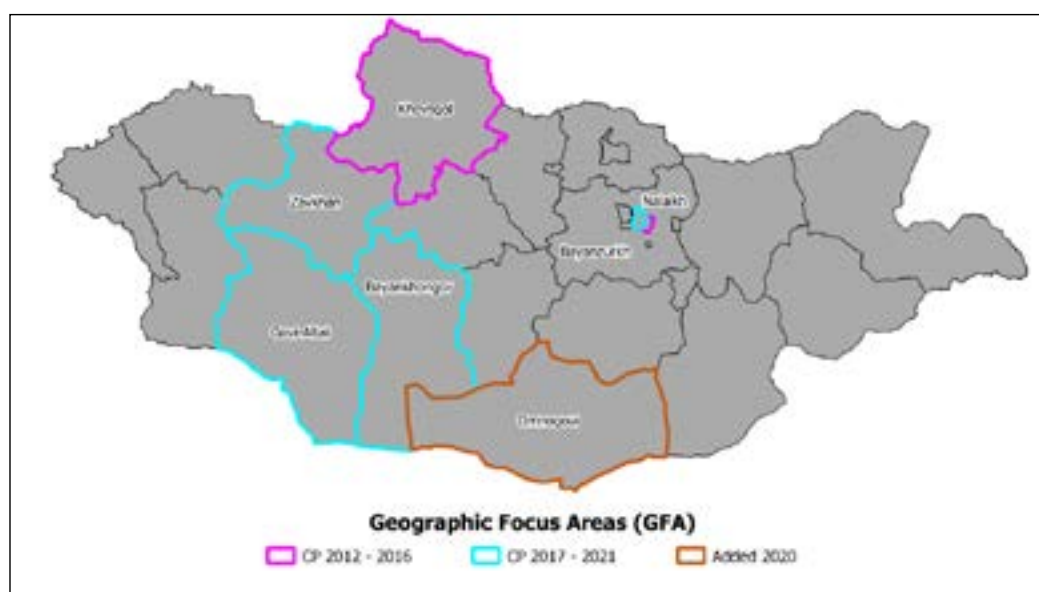
In terms of micro-targeting within selected GTAs, we compared and reviewed the various approaches that have been taken and the data they are based on, comparing approaches with previously evaluated methods for GTA

taken in China[162] and Tajikistan[163].

Analysis and findings

A statistical analysis using Bayesian geospatial modelling techniques was conducted to estimate and map poverty-related variables in the context of the evaluation of UNICEF's GTA in Mongolia. It produced a poverty map for 2016 to assess the situation that UNICEF was confronted with at the start of the second CP, and compared this with the GTA that they took. The resulting map is used as a basis for reflection on alternative approaches to targeting and key trade-offs and assessment of the relative merits of alternative approaches to targeting as informed by available data and updated data analysis techniques.

Using an established Mongolian poverty measurement approach, a MODA based on child-appropriate dimensions of poverty from the HSES carried out in 2016 was used to create a multidimensional poverty estimate based on HSES sample data. These data[164] represent the overlap in deprivation across one or more dimensions, ranging from a minimum of 0 deprivation dimensions (not at all deprived) to a maximum of 7 (deprived across all dimensions). The results, available at aimag level, show that three of the five most deprived aimags for children aged 24- 59 months were selected at the start of the 2nd CP (see Figure 9). An analysis of child and infant mortality trends over the same time period showed that the recently added target aimag of Umnugovi also experienced recent increases in mortality, even though, at the time of the 2nd CP, the area was not among the very poorest.

For micro-targeting, administrative data is often used to identify disadvantaged children and families within targeted aimags and districts – an approach that is highly variable between sectors and significant potential for bias. Use of PMT is another approach that has been used to target food stamp recipients for example. Experience from neighbouring countries shows that such targeting might neglect needy populations and a universal approach to poverty alleviation emerges as a viable solution.

Figure 13. Predicted deprivation across one or more dimensions (24-59 months)

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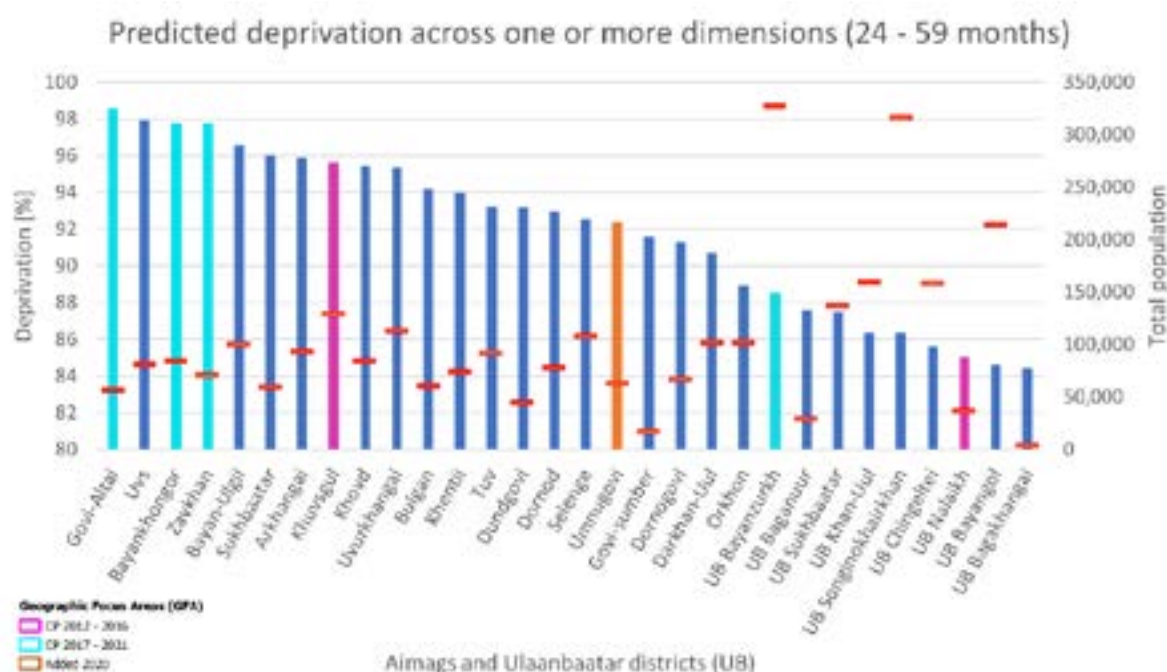
[162] UNICEF Report to the Hong Kong Committee for UNICEF (SC140928) Integrated Maternal Child Health and Development. Submitted by the UNICEF China Country office, November 2017; Information on China's GTA for the MCSS was kindly provided by Dr Robert Schepbier, former head of the Health, Nutrition and WASH section in China from 2011-2018.

[163] Gheorghe C. *Evaluation of UNICEF Tajikistan's work in priority districts during the 2010-2015 Country Programme, Final Evaluation Report, January 2016*

[164] Source of data: Case study geospatial deprivation modelling based on HSES 2016

Recommendations

The two central functions of the GTA for UNICEF - selecting GFAs and introducing strategically intersectoral approaches to, when necessary, micro-target disadvantaged or vulnerable children, should be re-conceptualised and a strategy built for each, supported by agreed reliable databases and a nuanced analysis with a structured discussion of trade-offs. For selection of aimags or districts, GFAs should be selected based on impact to be achieved starting with the highest deprivation areas or where mortality is highest. For micro-targeting within GFAs, UNICEF's universal approach should be continued to provide engagement across all interventions intersectorally. To ensure all children receive the basic services they need, especially the most deprived, an equity approach to delivery of a standardised package of interventions/programmes is needed – irrespective of the ability to pay. This universal rationale should be moderated by the exception of interventions that need different approaches based on climate and geography e.g. WASH or for children at risk (e.g. social protection, malnutrition). Itinerant populations also need special attention given the multiple deprivation they experience. After the universal roll-out, an expansion plan can be carried out for additional populations in phases according to local area conditions.

6.2 Case Study 2: Review of UNICEF CP strategy and impact on local pro-child planning and budgeting

This case study explores UNICEF's strategy of working with, and building the capacity of, local level authorities, coupled with national level advocacy to increase budget allocations for children at all levels. There are two basic means by which LGAs can increase local financing for children: The LDF, and Social Sector Budgeting. Both are discussed in this case study.

Local Development Fund. UNICEF's strategy was to engage in local advocacy with aimags for a 10% threshold for pro-child budget allocations. This approach was generally successful at least for the period of UNICEF engagement. It was generally appreciated for the occasional training and awareness raising for a range of local officials. It did not appear to target support to the local officials at the key LDF planning steps (soum/bagh governors, LDF committees, and CRHs), provide practical guidance to help them reconcile pro-child priorities with the official prioritisation criteria, or provide clarity as to which projects are (and are not) 'pro-child'; nor did it appear to engage systematically with all soum authorities across the aimags, responsible for planning a significant share of 'aimag' LDF budgets.

Evidence for the impact of this support on LDF budget allocations in favour of children is inconclusive. A crude filtering of LDF projects showed a clear sign of a rising trend of such allocations in Khuvsgul, but the evidence was not available as to whether this was sustained. Pro-child allocations varied greatly across more recent GFAs, but were all (often well) above 10%; however (with limited data) no upward trends were obvious, and a 'control' aimag actually displayed higher pro-child allocations than two GFAs. Evidence also suggests that aimag data conceal very wide variance in pro-child allocations at soum level.

It emerged that there are major constraints to greater pro-child allocations from the LDF in the regulatory framework. Local officials are reluctant to violate the over-riding 'citizen vote-based' official priority criterion (which may not always match pro-child priorities), and also to approve 'soft' capacity-building projects which may benefit children, often preferring harder infrastructure. 'Upstream' advocacy with MoF for more regulatory clarity would be important to address these constraints.

Since, as explained in Section 1.3., the LDF is by far the main potential local budgetary resource available to finance the joint multi-annual UNICEF-aimag work plan activities, this regulatory framework also poses a challenge to local co-funding and future sustainability of these work plans. Currently, activities must emerge as citizen priorities from the planning process. So far, many of them have been for 'soft projects', which may not always be seen as a benefit for and by the wider community. There is also the issue that they would absorb very high levels of local LDF budgets.

Social Sector Budgeting. UNICEF's strategy was to provide local training and awareness raising and advocacy to address several central ministry financing and budgeting policy and regulatory issues. These issues are considered major constraints on local government's ability to change pending patterns in favour of vulnerable

children, in what is still a very centralized system (despite apparent assumptions in the Strategy Note). Successes were registered in several policy areas, e.g. large increases to funding of the 'outreach' component of the child protection special transfers, revision to budget norms allowing counting of non-resident kindergarten pupils, and to soum hospital budget norms allowing greater equity, and adoption of inter-ministry WASH guidelines. However, there appeared to be no engagement with the annual 'performance contract' mechanism by which service delivery performance is monitored (a potentially useful entry point for improvements) nor with the sector capital budgeting process, key for equity and access to children's facilities.

Local-level training and piloting support activities were widely appreciated- but concerns were also expressed about piloting initiatives as ambitious as performance-based budgeting. No evidence was available to substantiate improvements to pro-child budgeting outcomes from this support but, given the central budget norm constraints, there was perhaps little scope for significant changes, other than to simply improve the efficiency of the budgeting process itself. This, however, also raises questions about the retail role for UNICEF in basic PFM training around which it may be worth exploring more sustainable strategies through government's own mechanisms for local capacity support.

In both areas, there is scope for greater partnering, both with donors working on upstream policy advocacy in these sectors and around the LDF, and with those working on local capacity support, e.g. to local CRHs which play a key statutory role in basic service delivery and monitoring.

7 Revisiting the Theory of Change

A reconstructed TOC focusing on UNICEF's GTA was developed for this evaluation based on UNICEF's CP ToC per outcome. The reconstructed ToC consolidates the four outcomes change pathways related to targeting broadly. Testing of the change pathways focused on the explicit and implicit assumptions UNICEF programming must overcome to achieve outputs and eventually outcomes. Overcoming or mitigating challenges presented by the assumptions depended heavily on UNICEF's strategic approaches, notably, multisectoral CFC interventions, building capacities and effectiveness of local level authorities to deliver for children, respect, protection and fulfilment of child rights, efficiency of UNICEF partnerships, and the reality of moving from pilot projects to scale in Mongolia.

Moving from **inputs to outputs**, UNICEF hypothesised that they could work with local level authorities if they were receptive to collaborating and open to an equity-focused approach to service delivery. They noted the need for counterparts to have a minimum level of capacity, willingness and political space to adapt local plans and budget to reflect new evidence and priorities in the thematic priority areas (education, health, and social protection). Furthermore, UNICEF recognised the need of having sufficient evidence from UNICEF monitoring and evaluation for planning, programming, and budgeting to target the most vulnerable children and their families. Interventions were assumed to be facilitated by internal positive collaboration and synergy between UNICEF programme interventions in support of intersectoral actions in the GFAs.

Implicit assumptions within the ToC pathways from inputs to outputs however highlighted the role, status and power of local level authorities to influence plans, budgets, and targeting for the benefit of specific populations namely the most deprived families, or even children generally. UNICEF assumed that through training/capacity building, advocacy and awareness raising, local level authorities (and even national level policymakers) could "move the needle" towards more holistic programming and investment for children, particularly at sub-national levels. As observed in the findings (see section 5.3.4) however, local level authorities are still given little scope to make their own budget decisions, which are tightly constrained by national regulations. Where they have been granted legal or regulatory such authority (e.g. to make local budget changes within specified thresholds) they have been slow to use these powers , , to redirect local funds towards children's issues, underscoring the need for governmental dissemination of how the financing rules should be interpreted. In addition, while child-centred budgeting training was appreciated and provided broadly, targeting the training and support to the critical actors with the legal power to make decisions was not always straightforward. For example, Governor's LDF working committee or CRH members that ultimately decide allocations of LDFs rarely participated in the child budgeting trainings or were given practical tools to guide decision-making in favour of children' needs (see Case Study 2).

Further, the implicit assumption that local level decision-making would be informed by improved data for targeting and formulation of budget proposals for services was not realised. Adequate data remains in sectoral siloes and rarely gets used by local decision-makers for such purposes, though there are a few notable examples (see section 5.3.4). Generally, the implicit assumption in the causal pathway – that the introduction of the CFC approach to stimulate intersectoral interventions and collaboration could translate into increased budget allocations – was ambitious at best. Evidence shows that while significant progress has been made to embed the CFC approach at subnational levels in the GFAs and beyond, translating CFC plans into cross-sectoral budget support and LDF allocations is not straightforward. It will require further support from UNICEF and the government to be fully realised and self-sustaining. Moreover, there was an implicit assumption that raising awareness and political commitment around CRC principles would result in measurable action on behalf of the most vulnerable children by local-level officials. Evidence from this evaluation could not correlate heightened use of CRC terminology, and even understanding of child rights into enhanced focus on the most deprived children. There was evidence however that attention and appreciation of child rights did increase children's voice and participation in some soum and aimags discussion about children's needs generally, and their priorities for LDF allocations on behalf of children in their communities (see section 5.3.2 on the CRC).

Moving from **outputs to outcomes and the goal**, further explicit and implicit assumptions mitigated the causal pathways.

It should be noted that despite the breadth of UNICEF's intervention areas, all have an intrinsic focus on narrowing inequality gaps (through both targeted and inclusive, universal approaches) in child deprivation by reaching and serving the needs of the most disadvantaged children. The explicit assumption, that there is the necessary national capacity, resources and political commitment to deliver evidence-based interventions for children, remains valid. Likewise, the assumption that all stakeholders, including development partners, are receptive to scaling up evidence-based practice beyond UNICEF's GFAs holds true. UNICEF's ability and added value to secure adequate financial resources to bring pilot projects to scale and achieve the goals of the CP however are less evident, as most progress thus far has been made due to UNICEF's direct investment incentives. It is unclear whether some of UNICEF's interventions will ever be locally or even nationally sustained, irrespective of the pilot's success. Some downstream areas associated with WASH or construction of kindergartens may never be fully absorbed given the turnover of local authorities and changes in political priority.

The inability to secure a longer-term commitment from elected leaders at national and aimag level is part of the development challenge. UNICEF strategies must clearly identify systematic constraints that dictate LGAs to deliver services adequately and equitably. Evidence-based advocacy from successful pilot interventions may or may not be sufficient to overcome such systemic barriers. The evidence shows however that advocacy efforts were most effective in advancing UNICEF's strategic approaches when led by aimag governors themselves. The scale-up of the CFC approach to six other non-GFA aimags, for example, was achieved through the advocacy of the Khuvsgul governor (see section 5.4). Likewise, the expansion of targeted interventions to meet the service needs of unregistered children in Bayanzurkh district was championed by the district authorities (see section 5.3.5 and 5.4.1).

8 Conclusions

General observations

In this evaluation, UNICEF's local GTA in Mongolia related to CP 2012-2016 and the current CP 2017-2021 was investigated, as to how focus areas were selected, and within the GFAs, how UNICEF's GTA strategy facilitated thematic programmes to reach the most disadvantaged children. While geographical targeting is not new in Mongolia, a common understanding of the concept is lacking.

UNICEF introduced a GTA in 2012 (CP 2012-2016) when they decided to consolidate their efforts in one aimag (Khuvsgul) and one UB district (Nalaikh); an approach which was revised in 2016 to expand the targeting to three (and eventually four) different aimags and one different UB district (Bayanzurkh). The change in focus came following improvements in Khuvsgul aimag (CP 2012-2016) in infant and child mortality, making a good start to achieving progress in the SDG era. As seen in Figure 1, death rates in Khuvsgul improved significantly from 2012 to 2017 but remain high (and have increased for child mortality in recent years). In the second CP (CP 2017-2021), four new aimags were targeted including two new aimags (Bayankhongor and Govi-Altai) with stable but high child mortality rates since 2017, and two, Zavkhan and Umnugovi, that both saw increased mortality over the same period. However, in comparison, several other non-selected aimags also saw increased mortality over the same period (see Figure 1 in section 1.1).

In terms of whether appropriate targeting areas were chosen for focussed effort, it's clear that some of the most deprived areas in 2016 are among the targeted locations (see Figure 10), and that large populations are covered; UNICEF has not lacked ambition[165]. Whether more needy regions could have been chosen is questionable, given the trade-offs UNICEF considered, including potential impact, efficiencies, and government priorities. The initial selection of three new aimags and one alternative district to scale up UNICEF pilot interventions from the previous CP (2012-2016) through intersectoral programming worked well, especially in terms of avoiding fragmentation of resources and capacity inherent when programmes are overstretched. A fourth aimag, Umnugovi was added more recently to GFAs- which, in 2016 was also home to a high proportion of deprived children.

Figure 14. Predicted deprivation across one or more dimensions (24-59 months)

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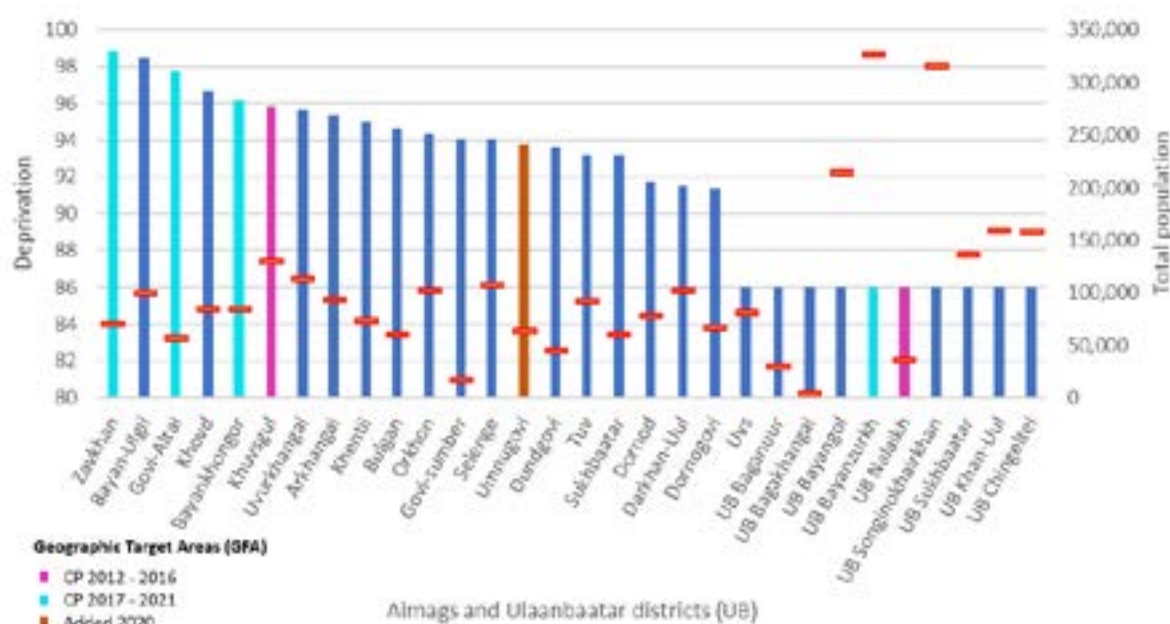
[165] *In this model, district specific deprivation measures are not included. Further analysis of district level deprivation would complete the analysis and tell the larger picture for Mongolia as a whole. This analysis, when the data is available can be added to the model*

The UNICEF strategy to transfer good practice models from pilot in Khuvsgul in the previous CP, to the new GFAs in the current CP was a successful approach – even if not all programme models were directly transferable. Challenges in the WASH sector in Mongolia are a notable exception where tailored approaches to climatic conditions are required. In this sparsely populated country, consolidation of resources and efforts of UNICEF thematic programmes is widely considered as necessary. Indeed, during the last two CPs, UNICEF and its IPs have run integrated interventions successfully demonstrating the value of holistic programming for the whole child.

The execution of the GTA strategy of integrated multi-sectoral programming within UNICEF and at local aimag, district and soum levels was challenging given traditional silos between sectors. Intersectoral programming advanced due to UNICEF's commitment to scale up the CFC approach through local government counterparts. UNICEF contributed to enhancing local government capacity over the period to better plan and manage integrated and equitable service provisions for children in a holistic manner; yet more is needed to ensure local budgeting and sector support for children is sustained. While good practice examples from Khuvsgul demonstrated to the new GFAs (and beyond) the value of local government support for the CFC approach, with commensurate resources associated with it at all levels, additional efforts are needed to ensure these approaches benefit the most vulnerable children and their families.

UNICEF's success in introducing the GTA strategy of intersectoral planning and interventions through the CFC did not appear to be based on a systematic or data-driven set of priorities or evidence-based intervention models. Most thematic intervention packages were integrated into the selected GFAs in various combinations. From the evaluation respondents, it was difficult to know how locations were selected, for example, which soum schools were targeted as a potential pilot for the adolescent mental health programmes, or for a WASH container, etc. Thematic targeting was either 'universal' in nature (Expanded Programme of Immunization (EPI), education etc), demonstration projects (WASH, ger kindergarten construction; mental health programme support for adolescents, air pollution projects) or highly targeted based on critical need (COVID-19 response, child protection hotlines and identification, malnutrition, CWDs, etc.).

In the end, the GTA strategy of bringing together diverse sectors or thematic programmes was largely based on interest from local partners, locally determined needs, feasibility, availability of resources, and the possibility for the few funded examples to demonstrate a promising practice to be scaled up by the government. Like the broader targeting, how intervention packages were targeted to reach the most disadvantaged children balanced local perceptions of need (maybe based on local administrative data or in some cases, a situation analysis) with other more practical concerns. While analysis and priority setting were conducted, it appears that there was no systematic or rigorous, needs-based targeting done for the majority of the thematic programmes.

Theory of Change

UNICEF's outcomes and goal, as stated in their ToC, aim to deliver for the most disadvantaged children in Mongolia. A reconstructed ToC focussing on UNICEF's GTA allowed the testing of the four outcomes change pathways related to targeting. Insights arise from the examination of explicit and implicit assumptions that UNICEF programming must overcome to achieve desired outputs and eventually outcomes. Overcoming or mitigating challenges presented by the assumptions depends heavily on UNICEF's strategic approaches, notably multisectoral CFC interventions, capacity building, child rights, efficiency of UNICEF partnerships, and the reality of moving from pilot projects to scale.

The existing ToC by outcome area do not sufficiently explain the casual pathway for targeting vulnerable children, though specific interventions clearly focus on these children, such as child protection, ECD, and nutrition. Further, not all programmes lend themselves to targeting but require rather a universal approach to access to health and education services. For this evaluation, targeting approaches (and assumptions) were drawn from the outcome area ToCs. It should be noted however that although a priority, targeting was not fully integrated into the outcome ToCs, leaving many of the casual links on how an intervention is actually focused on vulnerable children as assumptions of the process. An overarching ToC that brings the GTA strategy into focus is needed.

Relevance

Relevance of GTA towards GoM priorities and CP results

UNICEF's GTA has contributed to achieving the results of the CPs and the approach aligns with national government priorities. There is an overall agreement between the government and UNICEF to support intersectoral collaboration as advocated by the GTA, underlining the relevance of shared priorities. However, there remains a lack of consensus between UNICEF, the GoM and different stakeholders concerning the exact concept and approach to measuring who is disadvantaged or vulnerable.

In addition, there is a somewhat philosophical conflict in approach to targeting broadly deriving from the fact that while the GoM seeks to treat each aimag equally, UNICEF places more emphasis on equitability. UNICEF's geographical targeting to focus its resources on a select few priority location (GFAs) exemplifies this equity perspective. UNICEF's targeting exercise balanced equitability, with efficiency and political concerns around equality of support between aimags and districts. It is notable however that the GoM was not directly involved in the GFA selection process in the last CP 2017-2021 seeing the exercise as an internal UNICEF matter.

UNICEF's targeting approach in 2016 to select GFAs was to be grounded in an analysis of the data on deprivation generally (children at risk of at least two forms of deprivation), thematic "hotspot" considerations and efficiency. However, a rigorous data analysis exercise to identify the highest deprivation areas was not done for the selection of GFAs in the CP 2017-21. The data used for targeting was not representative at the targeting level (aimag, soum) and many geographic areas falling outside of the selected GFAs were identified as having endemic issues. As a result, the GTA was not correlated with poverty levels nor fully aligned to thematic priority areas. Instead, the selection of GFAs was only generally informed by deprivation and outcome data (often at higher levels of aggregation).

Through consultation and dialogue, UNICEF managers selected GFAs based on the available information, and balanced that against operational efficiency concerns, and as mentioned previously, political consideration (and pressure from some aimag governors). As a result, UNICEF may therefore not have been working in the areas where their targeted support could help the country make the most impact their national and global targets.

The GTA strategy is most convincing if situated within UNICEF's overall mission and strategic aims to effectively deliver on CP results. The evaluation identified a challenge in understanding the purpose of the GTA strategy and consistency of its application. The GTA had multiple aims that were not necessarily compatible. Application of the GTA was to focus intervention strategies on locations with high deprivation, or on locations where UNICEF could efficiently and effectively pilot particular innovations, or both. For CP 2012-2016 in Khuvsgul, an aimag with high levels of poverty and deprivation, both strategies were possible, though limited in it being only one aimag. In CP 2017-2021, the rationale for expansion of the focus to ultimately four aimags and one district was less clear as levels of deprivation, and thematic needs vary considerably between them.

The different rationales for selecting areas for piloting particular innovations may not necessarily relate to levels of deprivation – it may be that area selection criteria should instead reflect willingness of local authorities to commit to change, or to "representativeness" of a particular local context (e.g. 'budget surplus' vs 'budget deficit' aimags and soums having different degrees of local budget flexibility). The inclusion of such alternative criteria, for example, may lead to different area choices. UNICEF Mongolia did not establish a hierarchy of priority for the criteria used in the their GTA nor did they set a higher value on key programming principles, such as reducing under-five mortality in absolute numbers (see Case Study on UNICEF's GTA model and mapping of deprivation).

The evaluation Case Study 1 shows how improved analysis of existing data to model geo-localised deprivation can provide UNICEF with a more robust analysis of where deprivation is most acute in the country, down to the aimag level. Building on a solid deprivation analysis, UNICEF could, in th e next iteration of the GTA, establish weighted criteria to select GFAs that are clear, and evidence-based. Qualitative efficiency criteria will necessarily continue to apply but relative to the broader ambitions of UNICEF for the CP. This will rationalise the process and ensure that the selection is aligned with UNICEF's priorities for balancing breadth and depth

of engagement in their selection of the next GFAs.

Beyond selection of GFAs, the GTA strategy offered the opportunity to reach all children through holistic intersectoral and multidisciplinary approaches. This holistic approach assumes that by casting the net wide, programmes will also reach those in greatest need. UNICEF largely relies on local sector partners to identify and target interventions to the most disadvantaged children. Given the lack of consensus of definition and approach, it can be that UNICEF's GTA strategy as applied locally may miss some children.

Gender and human rights

The GTA was generally seen to integrate a human-rights, gender and equity-based approach. Overarching Child Rights principles have been embedded in UNICEF's interventions in the GTA areas, such as the institutionalisation of Children's Councils as part of the CFC approach. While there was general appreciation of the child rights agenda, some rights were more challenging: more efforts are needed to support children's voice in decisions affecting their life, and in ensuring all groups have the right to non-discrimination (e.g. related to ethnic minorities). Generally, UNICEF enhanced attention to the needs of the most vulnerable children, particularly CWDs. Some concern was expressed about UNICEF responding to (rather than proactively programming within the CP) needs of ethnic minorities and the children of unregistered migrants. Although UNICEF has worked on punctual interventions to address emerging issues for both, a broader, purposeful intervention strategy related to non-discrimination that is population rather than GFA focused was considered needed from a Human Rights perspective. While gender equality has been pursued both in the form of targeted and mainstreamed interventions, and in collaboration with other agencies, government and key stakeholders, addressing specific gender barriers to GTA intervention strategies such as access to education was not observed.

Effectiveness

UNICEF's GTA in the two most recent CPs has been effective in achieving CP results. The UNICEF GTA, through its child-rights lens, and its intersectoral approach to policy design and intervention package implementation has directly contributed to UNICEF's success with its advocacy agenda during both CPs. UNICEF has worked upstream through evidence generation and policy advocacy to influence **national laws, policies, planning and strategies** arrangements affecting child-relevant health, education and social service delivery and support, with an emphasis on reaching the most vulnerable children. For example, the GTA enabled a specific focus on CWDs during the development and drafting of the Education Master Plan.

UNICEF has worked downstream through its GFAs to promote the Rights of the Child through integrated intervention strategies inherent in the GTA. Specifically, UNICEF **CFC approach** has helped to create an integrated, holistic, multi-sectoral intervention "safety net" at sub-national levels to meet the needs of the most disadvantaged children. The functionality of the CFC approach is enhanced by the noticeable motivation and commitment of local administrators to the programme. Review of implementation of the 9 CFC building blocks revealed that within the GFAs, and even in the control aimag that is also implementing the CFC approach, comprehensive application of the strategy is high. All of the aimags and in most soums of the GFAs, the CFC is well understood as evidenced by the establishment of CFC specific intervention strategies like a CFC Coordination Committee, a Children's Council, and MDTs among other. The Non-GFA is also implementing the building block but with less success at soum level – likely due to receiving less external facilitation by UNICEF. In addition, the CFC has effectively engaged rights holders by creating greater awareness among local administrators towards supporting children, and raising parents' consciousness and engagement concerning child rights. While CRC principles are integrated within the GTA rationale, and children's knowledge of the CRC can be directly tied to UNICEF intervention packages, CRC principles are not yet systematically known, understood, and converted into guidelines by all stakeholders within all GFAs.

Much of what has been achieved UNICEF has also contributed to **building and enhancing local governments' capacity** to effectively plan and manage integrated and equitable service provision for children. In the GFAs, UNICEF's CP outputs have successfully built the capacity of LGAs, local line ministry departments and partners to do **child-friendly budgeting, and resource allocations** for children. Budget transfers for children and adolescents from national to local have increased 23-fold between 2016 and 2020. However, budgeting

flexibility according to local contexts is still lacking as household and individual cash transfer programmes are still managed entirely nationally.

Disaggregated data (on age, sex, ethnicity, disability, economic status, and more) is available and used by UNICEF and partners to target the most vulnerable children and their families. The UNICEF supported SISS is a well-known source of data on children's issues throughout the country, although within GFAs. Nonetheless, data on vulnerable children and their families is not collected systematically or scientifically, and research bias is common. This results in a variety of administrative databases, some of which are ad hoc and of poor quality.

Efficiency

UNICEF has implemented the GTA strategy efficiently in the GFAs through partnerships (e.g. government, UN agency, NGO and private sector) that have supported implementation, and in some cases, financing of programme interventions. The evaluation has highlighted lessons learned and potentially more efficient modalities of targeting (through the case study) to accelerate results for the children in Mongolia and to close the equity gaps for the most disadvantaged children. It is unclear whether the UNICEF's current strategic approaches to selecting sub-national areas (GFAs) to test its different interventions and combinations thereof have proven more efficient than alternative or past approaches to reaching the most vulnerable. No data was available to assess resource efficiency gains from the different targeting approaches between the CPs reviewed under this evaluation; however, key stakeholders appreciated the broader reach of UNICEF in the current CP as compared to the previous one. Within UNICEF, although there is an established definition of efficiency, more fundamental issues have been raised concerning how to define the efficiency of remote provincial investments, benefits, and the need for flexibility as intensified investment in just one location can be risky if problems arise.

UNICEF operates in four thematic outcome areas, each with a number of outputs. In the previous CP, outputs were at a high level without significant detail related to targeting, though implementation of intervention in the GFAs were largely integrated and focused on the most disadvantaged. In CP 2017-2021, the results framework was more granular but not always fully aligned to the output. Assessment of the results frameworks for the current CP found relevant targeting within the outputs and KPIs, though much more could be done to focus KPIs so that they measure whether interventions actually reach the most disadvantaged children. Even within universal approaches and policy level action, UNICEF could do more to measure success on how it delivers specifically for disadvantaged children. Use of composite indicators could help to implicate different UNICEF programming components to work more closely together for common, integrated programme achievements.

Despite general commonality in approaches, an overarching thread (or strategy) between programmes to synergistically unite efforts and create a multiplier effect is not evident. At the highest levels, UNICEF staff are aware of what the other programmes are doing generally but are not very versed in the details, possibly indicating a siloed working environment mirroring what is happening within government sectors and agencies as well. While each programme team is highly skilled and apparently effective in their domains, higher-level coordination and consolidation between outcomes and outputs within UNICEF was not found. While many UNICEF staff have a good in-depth understanding of local issues, the larger strategy for the sector is siloed between higher-level experts. Likewise, within UNICEF, sector priorities and activities, can supersede the larger aim of working collectively for the whole child. In a UN context, UNICEF could use their position as the lead agency on children in Mongolia to help create an overarching intersectoral pro-child vision and macro level framework to guide UN efforts within UNDAF and the future of the "one UN" as well as with government, international and local partners working for children in Mongolia.

Despite these issues, UNICEF's resources were able to achieve the thematic objectives linked to them for the most vulnerable children in an efficiency-maximizing manner. UNICEF has been efficient, for example, in the use of human and financial resources. UNICEF's approach is currently not to create posts for UNICEF funded staff at aimags, preferring rather to work through local actors to build ownership and sustainability. The approach however has its limitations.

Sustainability

UNICEF's targeting approach in selecting GFAs has facilitated a sustainability due to higher-level engagement within GFAs and the policy of aiming for scale-up and replication of pilot interventions. As a lasting legacy, the Government plans to replicate the CFC approach nationwide

Sustainability of some UNICEF-supported activities from the previous CP of 2012-2016 in Khuvsgul aimag and Nalaikh district is evident. Institutional memory in these GFAs is strong, and best practices have been successfully scaled-up and expanded to the GFAs of the current CP. For example, AFCYD is scaling- up CFC in another six aimags with the allocations from the state budget along with technical assistance. The human capacity built into the previous GFA of Khuvsgul has been used for delivering lessons learned to these new aimags. UNICEF has supported the dissemination of the CFC model with capacity building, as well as the provision of equipment and training. Certain activities are likely to be sustained, such as the children's hotline reporting violence now owned by the national government, with investment from the private sector (Mobicom) and the support of INGOs, such as WV.

In terms of budget sustainability, there are some issues under discussion. To the extent that the CFC work-plans implies a significant level of annual funding (as discussed in the case of Zavkhan in the Case Study on Local Planning & Budgeting), this may pose a concern if it is to be co-funded significantly by local authorities under current financing and budgetary procedures. Most CFC plan activities appear to require recurrent budget spending, for which authorities enjoy very little local flexibility. CFC investment projects, such as WASH facilities, are more feasible insofar as they can be funded from the LDF.

Factors identified to foster success and sustainability of intervention outcomes include, partnerships with the private sector and NGOs, ensuring adequate funding and budgeting instruments, building LGA capacity, and fostering enabling legislative and policy environments.

COVID-19

During COVID-19, UNICEF has been active in supporting vulnerable children. For example, UNICEF financed a Rapid Risk Assessment of the Situation of Children in 24-hour kindergartens in UB, two assessments of the mental health impacts on children during COVID-19, and the effectiveness of TV lessons for children. As a result of the pandemic, UNICEF switched into a slightly undefined 'emergency' programmatic mode. UNICEF's targeting approach expanded, in response to GoM request and needs to respond to increased vulnerability and geographically divergent risks in hotspots that require rapid information gathering, assessment and action. How the pandemic will actually affect the most disadvantaged population has yet to be seen but indication from recent studies conducted by UNICEF and others suggest increased needs in terms of social protection for the most disadvantaged families.

8.1 Good Practice

Box 4. Implementing the GTA through the CFC

Summary:

Implementation of the GTA through the CFC demonstrates good practice through the delivery of an 'integrated social service package' to meet the intersectional needs of disadvantaged children holistically and sustainability.

- The nine building blocks of the CFC strategy provide a purposeful comprehensive integrated framework for intervention including participation, budgeting, advocacy platforms, and legal frameworks and mechanisms for child rights.
- The CFC strategy puts the child at the centre of a holistic, multi-sectoral intervention strategy and rationale. By engaging duty-bearers from various sectors (teachers, social workers, law enforcement, local government, local NGOs), the intersectional needs of child rights-holders can also be met.
- The CFC intervention strategies include concrete and practical deliverables, often related to infrastructure (e.g. innovative and climate resilient WASH facilities, improvement of street-lights infrastructure) of value to local stakeholders.
- Implementation of the CFC is guided by an M&E framework operated by local IPs, raising the level of local ownership of day-to-day management of interventions.
- Partnerships with the donors, NGOs and the private sector helps to build local capacity while relieving pressure on dedicated public funding, and providing opportunities for broader collaboration.
- Children voices are meaningfully engaged to inform the design, improvement and roll-out of the CFC at the local level. Through institutionalised children councils and direct consultation organised by Governors, a full perspective of children's needs is aggregated and acted upon.

The success of the CFC during CP 2012-2016, and the scale-up demonstrated across the 4 GFAs of CP 2017-2021 (plus 6 AFCYD supported aimags) demonstrate the value, appreciation and replicability of the approach for scale-up.

- The CFC enjoys very broad consensus among stakeholders of a common defining framework for intersectoral collaboration, and local actions.
- The framework is sufficiently diverse to allow for adaption by stakeholders and beneficiaries to local needs and context; the CFC can embrace local priorities for advancing child rights increasing ownership and sustainability.
- Holistic, multi-sectoral engagement and advocacy raises awareness of child rights, and has a ripple effect across a community. As such, responsibility for child rights and child issues shifted from a single duty-bearer: the social worker, to a shared sense of responsibility and a joint commitment by all actors.
- Involvement of government partners such as AFCYD in the advocacy efforts; their approval, enthusiasm, and engagement is a crucial driver of further capacity building of governors and LGAs necessary for improved child-responsive budgeting, and replication beyond UNICEF GFAs – a demonstration of the sustainability and scale up of the approach.
- The particular efforts of highly motivated individuals such as the Governor of Khuvsgul expand the CFC's reach and success, by acting as entrepreneurs of change and advocates of the CFC (convincing another 6 aimag governor's offices to implement the approach).

9. Lessons Learned

1. The GFA selection process should be done purposefully in collaboration with government stakeholders to increase engagement and commitment. The application of the GTA for the selection exercise should be grounded in a robust use of data and a transparent, consultative process with national and subnational government authorities for deeper commitment and strategic thinking on how to roll out intervention packages for those in greatest need. Innovation in engagement is needed. Selection criteria could include proposals from aimags and districts to demonstrate interest and commitment for implementation. A clear guideline for preparing a proposal and consultation with aimag and district representatives could further inform the process. While the demonstration of interest would not be the only criteria, it would allow for a documented, transparent process based on a ranking. National counterparts would value the opportunity to participate and make a case for inclusion in the process.

2. Embedding CFC initiative nine building blocks into local development plans and strategies are important for increased sustainability and accountability in implementation. UNICEF's GTA experience during CP 2012-2016 in two GFAs demonstrated the value of integrated programming by creating a significant number of best practice models for adaptation, replication and scale up. While not all models were continued, many are currently being implemented in the current GFAs. Local authorities developed their own child-friendly aimag programmes with results and monitoring frameworks which was instrumental for all stakeholders to be accountable in good implementation of the CFC in their own areas. While an important contribution to accountability, more efforts are needed to institutionalise such mechanisms. Engaging with rights holders more directly could increase accountability by duty bearers.

3. Strengthen the national policy framework for decentralized budgeting for children through upstream policy engagement. UNICEF has worked largely downstream at the sub-national level to build capacities and understanding of how LGA representatives can mobilize resources for children's issues. While the approach in the target aimags has shown some success, the case study on budgeting and planning noted that the strategies used by UNICEF often assume greater autonomy and flexibility to make budgetary decisions than is enjoyed by local actors in what remains a highly centralized framework. The case study suggests UNICEF work more extensively upstream with national level initiatives and partners to clarify and improve the national policy framework for sub-national financing and budget processes, allowing greater LGA discretion but with clearer guidelines. This will ensure better targeted spending on, and access for, public services for children at the subnational level.

4. Engaging community participation and sensitizing local authorities on pro-child issues increases commitment and LDF funding allocation for children. UNICEF has been working through CFC technical strategies to improve local planning and budgeting for children, and working directly with children to give voice through their parents to submit and vote for LDF. Heightened concern and awareness of children's rights has contributed to increased LDF allocation for children's issues. While LDF is not the only decentralised government financing mechanism available for supporting key interventions for children, when available through the LDF, experience shows it can be a source of funding for children's interest.

5. Fostering both strategic and operational partnerships with private sector actors helps increase the likely sustainability of key intervention packages for vulnerable children and adolescents. Examples of private sector partnerships include those with Mobicom on 108 Child hotline, the establishment of a centre for CWDs in Govi-Altai with support of Wagner Asia LLC, a collaboration with Arig Bank, Wagner Asia on developing innovative WASH in kindergartens helped more than 830 children access kindergartens with good water and sanitation facilities. As well as developing social corporate responsibility in Mongolia, these partnerships result in increased engagement, diversified technical responsibility, shared financial risk, and effactually create greater local ownership and sustainability

6. Overlapping of membership in Children's Council and CFC Coordination Committee, while complimentary can erode effectiveness of both. Legal and administrative rules make the distinction. The Children's Council, led by Governor, is established in accordance with Child Rights Law and is to be a permanent platform for children's issues. The Coordination Committee, led by Head of the Governor's Office, is named to implement

the CFC initiative and exists on behalf of the CFC programme for the duration of the project cycle. Given the similarity of purpose, and human resources constraints, member participation locally often overlaps, making one or the other superfluous as the same persons are in both. UNICEF should undertake a stakeholder mapping, and an effectiveness study in collaboration with local authorities, practitioners, and children in GFAs to recommend how best to streamline the coordination process and platforms for greater efficiency and effectiveness.

7. The best practices and models of integrated services for children should be clearly presented at the end of this CP by local partners. The experience in Khuvsgul showed the power of a local governor as an advocate for implementation of the CFC in other non-GFA aimags. GFAs, with UNICEF support, can document best practices and lessons learned of their experiences. Achievements and challenges could be shared between partners, GFAs and other interested aimag governors as a communication and advocacy message to facilitate replication and scale-up. Documentation of good practices by a predecessor GFA and sharing them with successor GFAs proved to be very effective and useful way of operationalizing the CFC further after CP 2012-2016. This process of knowledge transfer was very much appreciated by current GFA stakeholders as it motivated them to scale-up the CFC in their aimags, districts and soums.

8. Targeting of vulnerable or disadvantaged children, as a concept and framework for intervention, remains poorly understood, or captures a wide variety of definitions according to the stakeholder concerned. Within the national government, there is a lack of coherence when it comes to designing policies targeting vulnerable children. The ministries of education and health for example, tend to target children in a universal manner without specifically targeting those with specific deprivation (with notable exceptions of CWDs). The care for vulnerable children is largely considered to be the responsibility of the Ministry of Labour and Social Welfare and its' agencies and departments. To apply the GTA effectively, UNICEF needs to work closely with LGA and sector specialist to unify the approaches locally so that sector lists of the most vulnerable or disadvantaged are mutually informing to ensure no child is missed.

9. Integrated programming does not necessarily break down siloed ways of working within government sectors or UNICEF. UNICEF has been instrumental introducing integrated, multi-sectoral approaches to programming for the whole child. Intervention strategies engage various sectors to address a collective of problems facing children in schools, communities and the household. Intersectoral programming however still requires sector specific interventions, which are often, still done solely with the corresponding government sector colleagues. The interventions thus become sequential or concurrent but not joint – many times because it is not practical. UNICEF could develop a series of composite indicators that would require sector contributions to the same KPI – catalysing collaboration for a common output or outcome.

10 Recommendations

The recommendations presented in Table 9 below have been iteratively derived from analysis of the findings, deeper investigation and insights from the case studies triangulated against qualitative and quantitative secondary data, and the document review. The recommendation reflects the triangulated opinion of duty bearers including UNICEF staff (past and present), international partners, national and subnational GFA and non-GFA GOs, LGAs, line ministry representatives as well as social workers, teachers and other service providers. Rights holders interviewed included caretakers and children. Each case study explored in-depth, UNICEF's GTA approach and how it affected programme results. A contribution analysis was done on the preliminary findings to ascertain UNICEF's unique contribution to the results observed. As the evaluation focused on UNICEF's GTA, and predominately on two specific intervention strategies (CFC and Local planning and budgeting for children), a more comprehensive programme analysis was outside the scope of the evaluation. Information on additional intervention strategies and specificities was brought in through qualitative interviews with stakeholders and UNICEF staff. Synthesis of the above yielded a broad picture of the achievements of the GTA approach as well as the challenges. Based on this analysis, recommendations on how to improve geographic targeting to define where to work, and how best to thematically target intervention packages to reach the most disadvantaged were elaborated.

Validation of recommendations was undertaken with government partners and UNICEF stakeholders to co-create actionable final recommendations to improve UNICEF's GTA in the next CP.

Recommendations are divided into two categories, Strategic recommendations (focusing on relevance and sustainability) and operational recommendations (focused on effectiveness and efficiency). The recommendations are particularly aimed to inform the application of the GTA in the design of the next CP. As such, recommendation relevance to the development of the next CP is made explicit for ease of consideration and use in CP planning and elaboration. In addition, each recommendation includes a targeted actor (specific stakeholders and partners); a proposed timing and references to the findings upon which it has been derived.

Table 6. Recommendations

N°	Recommendation	Priority	Target group	Timeframe
	Strategic Recommendations (SR)			
SR1	Continue UNICEF's GTA approach with more clarity of its scope, purpose, evidence base, and applicability. Description: UNICEF has used the GTA strategy to select GFAs where they can concentrate interventions and approaches to demonstrate good practice for replications and scale-up. The GTA strategy should be maintained and strengthened based on criteria weighted to reflect UNICEF's goals and objectives, appropriately balanced for efficiency. This rationale and evidence criteria used for the previous GTA were only partially applied through an internal process. To strengthen the GTA, UNICEF should: • establish a higher-level principle of what UNICEF Mongolia wants to achieve through targeting in the GFAs to be selected (e.g. reducing mortality, provided a common intervention package for all children, etc.). These priniciples should be reflected in an overarching Theory of Change that encompasses the outcome specific theories of change (see SR 2). • Consider selecting Eastern region or provinces that do not receive subsidies from Government, such as South Gobi as a comparative site to demonstrate replicability of programming; • analyse deprivation and specific thematic pockets of ned at lower levels of aggregation than the current MODA provides. Aimag level modelling of SISS data (as was done for Case Study 1: Mapping geospatial distribution of deprivation and UNICEF's GTA) could provide this information. • advocate and facilitate, with GoM sectors and partners, a process to build a common understanding on how deprivation in children is defined as a basis for micro-targeting of programmes, including for UNICEF programmes. The agreed upon rationale should be accompanied by clear guidance, approaches and methods for determining which children qualify for special attention through micro-targeting of services or special programmes. • include LGA engagement, interest and commitment in the selection process to facilitate bring pilots to scale for the most disadvantaged children as a criterion for selection. UNICEF may also consider purposefully targeting some intervention at sub-population groups rather than geographical areas to reach the most disadvantaged (See SR5). UNICEF also may explore option and feasibility of implementing which parts of the CP programmes in all provinces of CPs nationwide with the Government. (Findings: 5.1.1; 5.1.2; 5.3.4; Case Study 1: Mapping geospatial distribution of deprivation and UNICEF's GTA; Validation meeting). Relevance to the next CP: Clarification of purpose of the GTA employed by UNICEF to define GFAs should respond to the UNICEF's goal and outcomes. The GTA should be explicit in the <u>programme rationale, priorities and partnerships</u> to increase effectiveness of the CP and its aims. The refined purpose of the GTA should also be reflected in the results and resources framework. The evidence used for the GTA analysis should be robust, and reflect aimag (or lower) levels deprivation data. The GTA methodology, criteria, and how they are weighted should be made clear through guidance documents.	High	UNICEF, GoM Partners at national (including NSO), aimag and local level, specifically departments of line ministries, and International Partners including the IFIs	Short to medium term

N°	Recommendation	Priority	Target group	Timeframe
SR2	Develop an overarching ToC with composite indicators for UNICEF's GTA. Description: Given UNICEF's focus on reaching the most disadvantaged children, there is need to develop one comprehensive ToC across programme components to guide targeted programming for greater effectiveness, sustainability and impact. This overarching ToC should incorporate the outcome specific theories of change and bring them together for common purpose. Such a common ToC focused on targeting the most disadvantaged children through integrated and multisectoral programming in the GFAs would reduce siloed programming both within UNICEF and enhance clarity for government and other implementing partners. For the next CP, UNICEF is encouraged to make explicit the interlinkages and synergies between the change pathways (across outcome areas) in a comprehensive ToC to deliver for all children, especially those most disadvantaged. Inclusion of composite or GTA specific indicators that require contribution from multiple programme components areas and bring focus to sub-populations of vulnerable children could increase programme effectiveness, integration and complementarity (Finding: 5.1.1; Annex 2A-2D). Relevance to the next CP: UNICEF's current CP aims to "demonstrate affordable, integrated and effective solutions to tackle inequalities at the local level, and national policy and budget advocacy to ensure replication and sustainability at a larger scale." A unified ToC and use of indicators to stimulate cross-sectoral/component interventions strategies will support this ambition in the next CP. <u>Programme priorities</u> can detail the overarching ambition of the unified ToC, which would then need to be reflected in <u>programme component</u> strategies and approaches, <u>monitoring and evaluation</u>, and the <u>results and resources framework</u>.	High	UNICEF Mongolia	Short term
SR3	Ensure sustainability of UNICEF's integrated intervention strategies in the GFAs before scale-up Description: In CP2012-2016, UNICEF consolidated programming in GFAs to pilot test integrated service packages, many under the umbrella of the CFC initiative. At the end of the CP, "good practice" models were then replicated in the GFAs of CP 2017-2021. While many good practices, including the CFC initiative are documented by UNICEF, and supported by Government partners (e.g. AFYCD, Khuvsgul LGA, Bayankhongor LGA, among others), often passionately, there is no criteria established to define when an intervention strategy arrives at being classified as a best or good practice. The Results Framework does not go far enough in specifying how such a classification can be assessed. Further, it is unclear when a "good practice" is embedded enough to be sustained locally without UNICEF's support. Currently, the CFCI, for example, is not sufficiently implemented, as yet, at the local levels (soum, bagh) of the GFAs to be fully sustained. To ensure UNICEF's good practices can be replicated and brought to scale country-wide, UNICEF should consider: • applying criterion for assessing when a pilot becomes a "good or best practice". The criteria should include the degree to which key elements of the strategy or package have been embedded in local systems and mechanisms and are being local managed; based on the criteria, a tiered implementation approach (from bagh to soum to aimag centre) to fully operationalise and embed critical components of the strategy to increase ownership and sustainability; validation of practice models through external evaluation of programmes to assess the degree to which the criterion has been met in establishing best or good practices for the country and more broadly. (Findings: 5.1.1; 5.1.2; Validation meeting)	Medium-High	UNICEF Mongolia	Short-medium term

N°	Recommendation	Priority	Target group	Timeframe
	Relevance to the next CP: UNICEF's <u>programme priorities</u> for the next CP should assess the need to continue working in some of the current (or even past) GFAs another 2+ years until the CFCI strategy (for example) and ownership is secured by local authorities, partners and communities in all soums. Selection of the next CP's GFAs should include a criterion that balances the desire for new innovation, and the need to demonstrate replication and expansion of existing integrated packages with, ensuring sustainability and ownership of past and current investments. Such criteria should be embedded within the <u>monitoring and evaluation</u> plan and <u>results framework</u>.			
SR4	From a Human Rights perspective, give heightened priority to children in the most vulnerable situations in Mongolia. Description: UNICEF GTA considered multiple deprivations as one of the criterion for the selection of GFAs. The severity of the deprivation, however, has not been sufficiently measured, nor are the populations with greatest need adequately targeted in the GFAs, and more generally within Mongolia. Specific sub-populations have been identified by UNICEF and partners as having greater needs including (but not limited to) children exposed to climatic shocks (dzuds), children of iterant unregistered populations, children with disabilities, and children of ethnic minorities. While UNICEF has responded (and even shifted priorities) to address specific problems they become aware of, priority in programming for some of these groups has not been systematic (notable exceptions include CWDs and children at risk of climatic shocks). To ensure UNICEF's programmes reach the most disadvantaged children, also from sub-populations, UNICEF should purposefully: • introduce regular and more frequent analysis of the root causes of inequality (including how discrimination and gender disparities manifest for specific groups of children), and investigate how deprivation affects urban versus rural populations, and the longer-term consequences for children that suffer multiple deprivation, particularly in light of COVID-19 and other shocks; • identify and build consensus with partners (including rights holders from these communities) on intervention strategies to remove service barriers and purposefully improve conditions for these marginalised sub-groups; • prioritise the strategies in the next CP across component areas in vertical and horizontal level to ensure an integrated approach by cultivating stronger partnership with Cabinet Secretariat. Create complex indicators to capture intersectoral outputs and outcomes for the targeted sub-populations. The prioritized intervention strategies should be specific to the sub-population and include a policy and service action that speak directly to CRC principles (universal access to health care, nondiscrimination based on residence, ethnicity, etc.). This recommendation aligns with the recommendations from the CRC (See Annex 2F), (Findings 2.3, 5.1.3, 5.2.2, 5.5.1; Case study 1: Mapping geospatial distribution of deprivation and UNICEF's GTA; Case study 2: Local pro-child planning and budgeting). Relevance to the next CP: CRC recommendations are noted as <u>programme rationale</u> for the current CP. While some actions have been included in the current programme priorities, more could be done in the next CP to narrow the inequality gaps between sub-groups of children. UNICEF, as the leading voice for child rights in Mongolia, can use this position to increase accountability for non-discrimination and equality in <u>programme priorities and policy,</u> and through specific indicators in the <u>results framework</u>.	Medium to High	UNICEF Mongolia, in partnership with rights holders' representatives; and departments of line ministries in GFAs, Cabinet Secretar	Short to medium term
Operational Recommendations				

N°	Recommendation	Priority	Target group	Timeframe
OR1	Strengthen coordination mechanisms of the CFC at all levels for effectivenss and sustainability. Description: UNICEF has successfully introduced the CFC in all of the GFAs they have worked in over the last 8 years, plus a further 6 aimags with AFCYD support. The approach is catalyzed by its rights-based, pro-child advocacy, which has created enthusiasm and enduring relevance of the strategy at all levels, but particularly in the aimags. Coordination mechanisms are critical for sustaining the approach. Currently a comprehensive system for coordination at the national level is lacking. At aimag and soum level, the Children's Council (headed by aimag governors) and the Coordination Committee (headed by heads of governor's office) often overlap in mandate and membership. Despite engagement in all the GFAs with different duty-bearers and rights holders, accountability mechanism is not yet in place to institutionalise the approach. Given the importance of the coordinating structures, UNICEF can further institutionalise and strengthen implementation of the CFC by: • simplifying CFC coordination at aimag and soum level to provide flexibility of format in accordance to local needs (e.g. where members of Children's Councils will be the same as those in the Coordination Committee); • create a professional accountability mechanism between aimags and soums with a feedback loop to ensure comprehensive implementation of the approach; • build a social accountability mechanism (e.g. benchmarking, scorecards, public face to face meetings) to call duty bearers (e.g. governor, LGAs) to account for hearing children's voices and responding to them through concrete actions (e.g. institutionalised platforms for dialogue, budget allocations) • align CFC indicators to expected results around the building blocks so all partners engage on all aspects of the initiative. (Finding 5.4) Relevance to the next CP: Strengthening the CFC is fundamental to the full implementation of the GTA strategy as a model on integrated, multi-sectoral intervention. The added intervention focus should be reflected in the <u>programme rationale</u>, as well as in the component specific summaries, as well as the <u>results framework</u>.	High	UNICEF Mongolia, AFCYD, Governor's Offices of the GFAs, LGAs	Short-Medium term
OR2	Advocate for child friendly planning and programming with adequate resources at national and sub-national levels. Description: The success of UNICEF's GTA and integrated programming largely depends on national level engagement in planning and financing for children both directly, and by creating more flexible decentralized financing mechanisms that could be used locally for children. UNICEF should build on the success it has already achieved with sector ministries (e.g. child protection transfers, kindergarten budget norms) to advocate with sector partners for increased sub-national budgetary discretion with the Ministry of Finance. UNICEF can increase its upstream advocacy by: • exploring scope for greater decentralization of child-related spending and budgeting responsibilities to LGAs (building on Government Resolution #350 of 2016, and 2019 revision to the Budget Law) for greater local flexibility in implementing budget norms and guidelines; • to that end, comprehensively documenting the various 'systemic' constraints limiting the flexibility of local officials to better tailor local plans and budgets (between and within sectors);	Medium	UNICEF Mongolia with Governor's offices, CRH members; UN agency, donor partners and IFIs.	Medium to longer term

N°	Recommendation	Priority	Target group	Timeframe
	• reviewing equity of both SPT allocations between aimags and soums, and of procedures for sector capital project appraisal and spending on the central budget aimed to serve the needs of vulnerable children, and identifying areas for improvement and more effective use of evidence related to disparities; • explore the scope for collaborating with both sector ministries and cabinet secretariat around development of their respective performance agreement methodologies (for both service delivery and governors' performances) to better incorporate indicators related to vulnerable children's needs and disparities, and also ensure corresponding application in the same agreements between aimags and soums; and • exploring scope for improving the LDF regulatory and guidance framework to remove possible local impediments to greater pro-child budget allocations Evidence generated can be used for advocacy with /Parliament for critical political support/ (a) sector ministries (to increase SPT transfer levels and relax budget norms, and to ensure more equitable and transparent capital budget decisions for school investments, etc), and (b) with MoF (for standard cost methodology for child protection services, the LDF regulatory framework and guidance). (Finding: 4.3.4; Validation meeting). Relevance to the next CP: Strengthening programme priorities and partnerships in all relevant programme components to strategically generate evidence and use it to expand collaboration on sector planning and budgeting in the next CP will increase programme effectiveness. Embedding relevant indicators in UNICEF Results and Resources Framework that align with what is being asked of sector ministries can help to capture progress made through advocacy efforts.		MoLSP, MoES, MoH, MoF, Cabinet Secretariat MoLSP, MoES, MoH, MoF, Cabinet Secretariat MoLSP, MoES, MoH, MoF, Cabinet Secretariat, NDA MoLSP, MoES, MoH, Cabinet Secretariat MoF and donor partners	
OR3	Support local use of data by LGAs and line ministries to improve the focus of interventions at the sub-national level for the most disadvantaged children, especially during COVID-19. Description: UNICEF should provide technical support and build capacity of local governor's office authorities and specialists, and line ministries in the GFAs to collect and use national survey and administrative data to improve the effectiveness of planning, programming and budgeting. Lack of transparency and access to some sectoral data at local levels limits its use by UNICEF and other partners for improved and aligned targeting of disadvantaged children. The SISS and Situational Analysis reports – which include the most relevant data at regional level and those aimags only in the GFAs- and thematic targeting and analysis should be more systematically used at sub-national level to complement, contrast and validate local administrative data. UNICEF should advise and encourage GFAs to improve their administrative data collection and analysis to inform specific programmes, particularly related to health, ECD and social policies and protection systems (Finding: 5.1, 5.2). In the context of the COVID-19 pandemic, and in collaboration with national and sector specialists, UNICEF should concert financial and technical resources with the IFIs and other development partners to produce more robust data (with larger sample sizes) to better assess the impact of COVID-19 on children (Finding: 7.1). Relevance to the next CP: Better collection and use of data, particularly during the COVID-19 pandemic, can inform the programme rationale and programme priorities and partnerships for targeted policy and programme interventions. Programme effectiveness and efficiency can also improve through more informed and aligned programming between the sectors, UNICEF and other implementing partners in aimags and soums.	Medium	UNICEF (in partnership with GoM, LGAs, and development partners)	Short, Medium and longer term

N°	Recommendation	Priority	Target group	Timeframe
OR4	Improve cost-effective targeting and approaches to training and capacity building Description: UNICEF intervention, particularly training and capacity building, should be more targeted to duty bearers that can use the knowledge to change the outcomes for children. Broad based, awareness raising through comprehensive training initiatives is not cost effective. More strategic selection of who to train (e.g. who is best placed to affect change if they have the necessary skills) is needed. UNICEF should: • analyse and then provide clear indication of what constitutes "pro-child" projects for LDF funding; • provide practical budget prioritisation tools to the Governors' LDF Working Committees and the CRHs for better redistribution in line with pro-child budgeting, consistent with the regulatory framework; • provide guidance and checklists to support the CRHs undertake their statutory role in supervising the quality of spending from pro-child budgets and the management of facilities, such as kindergartens; • support aimag capacities to implement SPT performance contracts with soums (see OR 3. above), to encourage more attention to the needs of vulnerable children; and • support aimags governors to ensure alignment of action plans with available financing for children. Innovation in approach to building capacity of national and aimag policymakers and private sector partners are needed to optimise, replicate and sustain UNICEF's upstream intervention strategies across sectors. Consideration should be given to mentoring, twinning and on-line courses and webinars. As the United Nations in Mongolia moves closer in their reforms towards a "one UN" approach, the need for more joint programming and complementarity between Agency capacity building approaches with government and implementing partners are seen as key to future efficiency gains (Finding: 4.3.4, 5.1; Validation meeting). Relevance to the next CP: Changes in UNICEF's approach to capacity building should be explained in the component <u>programme priorities</u> and measured through <u>monitoring and evaluation</u>. Indicators reflecting the more specific capacity building approaches should be detailed in the <u>results and resources framework.</u>	Medium	UNICEF (in partnership with the MoF, and other Ministries, Cabinet Secretariat, Governor's offices, LGAs, IPs)	Medium to long term
OR5	Reduce siloed programming within UNICEF through integrated management of the whole child approach. Description: The GTA strategy advocates for the implementation of cross-sectoral, integrated intervention strategies implicating multiple UNICEF programme components such as ECD, social policy and WASH. The strategy requests integrated action at the sub-national level, usually with sector specialists that work only in their sector area, limiting collaboration opportunities within UNICEF and between government sectors. As a result, traditional siloed programming is difficult to avoid. UNICEF can act as a bridge between siloed programmes and sector and agency strategies to increase efficiency through integrated programming, as possible. However, there does not seem to be an overarching coordination within UNICEF of the linkages inherent in an integrated programme intervention strategy at higher management level. To increase collaboration and reduce siloed programming, in the next CP, UNICEF should: • improve coordination of programme interventions at subnational level to ensure whole child programming reaches all disadvantaged children in the GFAs and ;	High	UNICEF Mongolia	Medium-term

N°	Recommendation	Priority	Target group	Timeframe
	• create composite indicators that require different programmes to answer to common outcomes and outputs integrating expectations of success and fostering teamwork; and • establish budgetary mechanisms within UNICEF for integrated and flexible funding to avoid dividing up integrated intervention strategies into component parts (thereby limiting sector and component collaboration). (Finding: 5.1, Case study 2: Local pro-child planning and budgeting; Validation meeting) Relevance to the next CP: CP programme effectiveness in GFAs will increase if guided by one person with an overview of all component areas. Explicit programme management will increase operational efficiency and cost effectiveness. Monitoring and evaluation should incorporate this overview into the results and resource framework through both composite technical and managerial indicators.			

11 Annexes

Annex 1 – Terms of Reference

Policy framework:

Since 2016, the Government of Mongolia has taken critical steps towards strengthening the policy and legal framework based on the principles outlined by the CRC, CEDAW, CPRD and SDG framework.

The government of Mongolia has articulated its vision until 2030 in its "Long term Sustainable Development Vision of Mongolia 2016-2030. The Vision was incorporated into the MDG based Comprehensive Development Strategy 2007-2021 which outlines the government's policy for economic growth, poverty alleviation, employment, gender equality and human development. Government is also in process of aligning its long term development vision and strategy with the SDGs. It also presents the policy for development of the education, healthcare, social welfare and protection. A Four year Government Action plan complements this Strategy, and presents the framework for development of Ministry specific plans and strategies, which in turn guide the implementation of national programmes.

UNICEF Country Programme 2017-2021

With new opportunities and rapid change alongside persisting challenges and disparities in today's Mongolia, UNICEF is uniquely placed to be the partner of relevance and choice. As the leading international child rights organization in the country, UNICEF has been supporting the Government's pursuit of sustainable development goals (SDGs) by ensuring that the development process is oriented around equity and invests directly in children, adolescents and young people. This is important not only to fulfil Mongolia's duties under the CRC, but to create a solid foundation for long-term prosperity.

UNICEF's goal for the 2017-2021 Country Programme is to support the Government of Mongolia and other national partners to narrow inequality gaps where children disparities are most prevalent while making the new generations an area of strategic policy investment as a foundation for the country's human capital and sustainable development. The programme is articulated around the following three interrelated outcomes:

Outcome 1: By 2021, the most disadvantaged children in Mongolia benefit from increased access and utilization of services that promote health and nutrition, including water, sanitation, hygiene and interventions that mitigate the impact of air pollution on child survival.

Outcome 2: By 2021, the most disadvantaged children access and utilize services in a healthy, inclusive and quality learning environment.

Outcome 3: By 2021, child related national policies and budgets and systems, including the children protection system are inclusive and equity focused.

Under these three main outcomes, 12 outputs define more specifically UNICEF engagement in each area.

With an emphasis on equity, the CP will directly contribute to the country's Sustainable Development Vision 2030, and in particular to its goals of sustainable social and green development. In addition, the CP is harmonized with the United Nations Development Assistance Framework (UNDAF), 2017-2021, and especially to one of its three outcomes aimed at ensuring that " By 2021, the poor and vulnerable population benefit from better social protection and are able to increasingly utilize quality and equitable basic social services, with a special focus on water, sanitation and hygiene. Furthermore, the CP contributes to 12 of the 17 Sustainable Development Goals. The programme's strong equity focus targets

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most disadvantaged children and families with little or no access to quality services. The programme will reach the most disadvantaged children through a combination of central and local level interventions.

UNICEF's approach is twofold: providing high-quality technical assistance at the national level to influence legislative, policy and strategy reform and to further strengthen systems; while at the same time supporting service delivery models at the sub-national level that have the potential to be replicated nationwide. Funding is catalytic, in that it supports the Government to replicate successful models (tested in the previous CP), thus maximizing the return on UNICEF's limited resources and its strategic impact. *At the national level*, UNICEF works to strengthen the link between national planning and policy development (including budgeting) and the delivery of quality basic social services for children, in order to ensure a sharper equity focus and more effective impact on outcomes for children. This includes working with national counterparts to introduce new legislation in specific areas, or to adapt existing laws and policies to international standards, and to consider comprehensively the cost implications of implementation. It also includes supporting the Government to coordinate and integrate the child-related supply side, involving a multitude of national stakeholders, fostering inter-sectoral dialogue and introducing new norms, requirements and standards that improve the overall situation affecting children and women.

At the sub-national level, Responsibility for providing basic social services has moved between various levels of government over the last decade and continues to do so. Although several new laws attempt to clarify the roles of various levels of government,[3] there is still evidence of duplication and fragmentation between central, provincial and district governments . This also risks weakening the accountability of sub-national authorities for service provision. UNICEF therefore has an important role to play in helping to clarify accountability with respect to child rights, building capacities of local government as well as supporting the integration of service delivery models that have demonstrated successful results in child indicators and their overall replication at larger geographical scale.

UNICEF advocates for further decentralization to ensure that there is a child focus within local authorities' increased autonomy for planning and budgeting. UNICEF helps local authorities improve their ability to compile and use child rights data to inform local policies and decisions.

The functions of local government is defined by the Constitution, the Law on public administrative and territorial units, Law on local self government. Furthermore, 2011 Budget Law[4] afforded UNICEF an unprecedented opportunity to advocate more directly with local authorities to increase allocations for social sectors. It also underlined UNICEF's critical role in strengthening **child-friendly local governance and planning, and integrated service delivery at the sub-national level.**

Local strategies are informed and aligned with the National Development Strategy and the Child Development and Protection programme (2016–2024), as well as the local mid- and long-term development plans. The principles of equity analysis, results-based management and budgeting will guide local planning processes.

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[3] The legal basis for sub-national functional expenditure responsibilities is derived from the Public Sector Financial Management Law (PSMFL), the Administrative and Territorial Units Law (2006), the Capital City Legal Status Law and the Integrated Budget Law (2011).
[4] http://www.iltod.gov.mn/?p=2402

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UNICEF Country Programme 2012-2016

The overarching goal of the CP of 2012-2016 was to support Mongolia in addressing inequity in accordance with the National Development Strategies, the UNDAF and the MDGs. The programme had two key priority areas; social-budgeting initiatives and support for the creation of pro-poor social and investment mechanisms for data management, disparity analysis, social protection, policy review, coordination and advocacy on child rights, and equitable social investments. Second priority defined clear targets to address the multiple deprivations suffered by children and monitor the impact and results of a limited number of equity-focused programmes and policy strategies. In the CP, UNICEF focused on Nalaikh district (also on the outskirts of Ulaanbaatar) and Khuvsgul province (a rural province), which became important test cases for implementing, reviewing and drawing lessons from several models that are now used for wide-scale replication. Some of the lessons learned include[5] the importance of strengthening the capacity and commitment of both national and local authorities to sustain and scale up successful models, especially in WASH, health and ECD, as well as the need to improve national monitoring and evaluation frameworks at the local level to track progress on key child indicators.

Geographic targeting approach (GTA)

During the last two decades of its work in Mongolia, UNICEF has tried different targeting to define the most effective and efficient approaches to country programme implementation that would support more rapid progress for children towards the intended results. At times, UNICEF had chosen different number of GFAs out of 21 provinces and 9 districts of Ulaanbaatar city. For instance, the CPDs during 2002-2006 and 2007-2012 targeted 6-7 geographic focus areas. Then, the number of GFAs was reduced into two in the 2012-2017 with the intent to direct its scarce resources to a fewer number of areas in order to achieve more tangible results by maximizing the return on UNICEF's limited resources and its strategic impact. Current CP focuses four geographic focus areas (3 western provinces and 1 district of Ulaanbaatar capital).

The provinces and districts were chosen on the basis of multiple child deprivations (MODA); persisting inequalities among children, government capacity and the partnership landscape; and UNICEF's minimum requirements for operational efficiency.

Main objectives[6] of the GTA are to increase access of children and women, particularly most vulnerable groups to equitable and integrated services; reach the most disadvantaged (children, youth, disabled people, elderly, herders and domestic migrants); enhance local government's capacities in designing and delivering integrated and equitable services; test innovative low cost, high efficiency models for national level replication. Interventions have been confirmed by each sector, working with national authorities, and considering the patterns of inequity and deprivation.

In general, the presence in GFAs has become very important in piloting innovative models as a learning experience and expanding those models into the national level and generating evidence for national policy advocacy. In addition, UNICEF's interventions in GFAs in the past yielded good results and played an important role in enhancing knowledge and capacities of local government authorities and key implementing partners.

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[5] UNICEF Mongolia Country Programme Strategy Note, February 2016.
[6] UNICEF Mongolia Country Programme 2012-2016 and 2017-2021 and UNICEF Mongolia Country Programme Strategy Note, February 2016.

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During the last two country programme, UNICEF has been employing local geotargeting approach to programme implementation in order to yield more tangible progresses for children towards its intended programme outcome results and equity focus of the Country Programme. Recent MTR confirms that the current country programme is generally on track and good progresses has been achieved in GFAs and strategic approach articulating on the ground support to pilots and models with policy impact has led to expansion of some initiatives beyond GFAs.

UNICEF aims to reinforce multi-sectoral synergies and reduce the number of stand-alone/project-based initiatives that have proved to be unsustainable and/or unable to secure long-term change in institutional performance or individual behaviour. In order to improve synergies between the programme priority areas and enhance the capacity of local government, UNICEF has been adopting the **Child Friendly Community strategy**[7] (CFC) – where the rights of children are an integral part of local policies, programmes, decisions and budgets. This was piloted in Khuvsgul province and Nalaikh district as part of UNICEF Mongolia's 2012–2016 country programme. UNICEF adopted the approach of CFC to promote integrated delivery of childhood interventions as well as increased capacity and commitment of local government and communities to improve children's situation. The strategy works by bringing together local stakeholders and UNICEF to create safe, inclusive and child responsiveness cities and communities in GFAs.

Building up on experiences from the 2012-2016 Country Programme, UNICEF has been working in the GFAs of the current CP to support the local government to adopt the CFC. Technical support has resulted in approval of "Child Friendly Province" sub-programme, setting up children's councils, integrating child-friendly plans in local development plans, allocating a budget for children, and putting in place mechanisms to ensure children can take part in decision-making under the CFC umbrella strategy.

2. Purpose and specific objectives of the evaluation

Main purpose of the evaluation is to assess UNICEF's local geographic targeting approach in Mongolia in order to inform the design of the new country programme to be implemented beyond 2021 and decision on whether UNICEF should continue using this approach or adopt different approaches and recommend ways to improve the effectiveness of the GTAs.

The evaluation findings and recommendations will also help UNICEF CO to further improve the adoption of the CFC strategies to achieve better results for children at the sub-national level.

The primary audiences of the evaluation are the Government of Mongolia (GoM), subnational governments in selected target areas and the UNICEF Mongolia Country Office (MCO). Key partners in the GoM are the Ministry of Labour and Social Protection (MLSP), the Authority for Family, Child and Youth Development (AFCYD), National Development Agency and Cabinet Secretariat. NGO partners are also considered as primary users such as Save the Children, World Vision and other NGO representatives those working at the subnational level.

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[7] The CFCI was launched in 1996 by UNICEF and UN-Habitat to act on the resolution passed during the second United Nations Conference on Human Settlements (Habitat II,) to ensure basic services for children and to make cities livable places for all. As defined as: "is a city, town, community or any system of local governance committed to fulfilling child rights as articulated in the Convention on the Rights of the Child (UNICEF CFCI Handbook, 2018)"

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At UNICEF, as an organisation, whose work is underpinned by the principles of the CRC, we must ensure meaningful participation of children in the evaluation. Children have an inherent right to participate in the evaluation activities because effectiveness and efficiency of implementing the law is the matter that affect the child" (Article 12). Thus, children will be the primary rights holders and will serve as key informants of the evaluation. Furthermore, care takers, parents including local and national level decision makers as primary duty bearers will be engaged in the evaluation process as key informants. Communities overall will be the secondary audience both as rights holders and duty bearers. Both the rights holders and duty bearers will be introduced the findings and informed on the recommendations of the evaluation.

The specific objectives are:

- To assess to what extent UNICEF's geographic targeting approach is contributing to achieving the results of the CPD?
- To assess whether UNICEF's geographic focus areas addressed holistically the needs of the most disadvantaged children.
- To assess to what extent UNICEF contributed to enhance local governments' capacity to effectively plan and manage integrated and equitable service provisions for children in a holistic manner
- To identify lessons learned and emerging good practices as well as to determine more effective and efficient modalities for application of the targeting approaches to accelerate results for the children in Mongolia and narrow gaps of the most disadvantaged children.
- To assess the extent which UNICEF's support to sub-national work with priority geographic focus areas contributed to national scale up

3. Evaluation Scope

The evaluation will cover UNICEF Mongolia's geographical targeting approaches employed in CP 2012-2016 and current CP 2017-2021 in the identified geographic focus areas. More specifically these include:

- UNICEF's geographic targeting approach to programme implementation at the subnational level as a whole rather than sector specific assessment
- Sub-national level interventions through Child Friendly Communities strategy in GFAs
- CP implementation period: 2012-2016 CP and geographic focus areas: Khuvsgul province and Nalaikh district of Ulaanbaatar city. 2017-2021 CP geographic areas: Zavkhan, Gobi-Altai, Bayankhongor provinces and Bayanzurkh district of Ulaanbaatar city.
- Thematic coverage: all programme components which benefitted from geographical targeting of interventions.

It is also suggested for the evaluation to choose one non-target province/district which provides an opportunity for a comparative analysis of UNICEF's approach at the local level. The evaluation will not cover other provinces and districts and impact of the GTA.

4. Evaluation criteria and key evaluation questions:

The evaluation will assess the relevance, effectiveness, efficiency and sustainability of the UNICEF's local geographic targeting approach. Evaluation questions will be structured against the Organization for Economic Co-operation and Development's Development Assistance Committee (OECD/DAC) criteria for relevance, effectiveness, efficiency and sustainability. As well as equity, gender equality and human

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rights consideration. These will help the evaluators understand the extent to which the GTA is achieving the desired CPD results.

As this is a formative evaluation, the impact criterion will not be considered. The evaluation questions for each stated criterion are not exhaustive and will be further improved and prioritized by the evaluation team in the inception phase.

Overarching questions:

1) To what extent UNICEF contributed to enhance local governments' capacity to effectively plan and manage integrated and equitable service provisions for children in a holistic manner?

2) What approaches should UNICEF use in the future to achieve better results for children? What improvements should be made as compared to the current approach?

Relevance: The extent to which the GTA/ is suited to the priorities and policies of the Mongolian Government.

- To what extent are the geographic targeting approaches adapted and remain valid to the Mongolian context particularly in the decentralized governance system?
- To what extent is the approach aligned with the national and geographic focus areas' policies and needs of the target groups?

Efficiency: measuring the outputs-qualitative and quantative in relation to the inputs

- Was the programme in GFAs implemented in the most efficient way compared to alternatives?
- To what extent were UNICEF resources efficiently used for the GFAs to achieve its objective?
- Were activities cost efficient? Were objectives achieved on time?

Effectiveness: measuring the extent to which the GTA achieved its objectives

- To what extent UNICEF's targeting approach contributes to the CP results for children and reduce inequalities among children in GFAs compared to a non GFA?
- Where were the GTA objectives achieved / are likely to be achieved? What were the major factors contributing to the achievement or non-achievement of the objectives?
- To what extent UNICEF's CP 2017-21 GTA as compared to the CP 2012-16 GTA has effectively influenced national policies and been scaled up?
- To what extent was the approach effective in identifying and addressing the different needs and issues of disadvantaged children (boys/girls children with disabilities, children in remote areas, and ethnic minorities etc.)?
- Are interventions effective to ensure gender sensitive results in service delivery responding the different needs for boys and girls?

Sustainability: Extent to which the interventions at the sub-national level are sustainable

- To what extent are capacities developed at institutional level sustainable?
- What were the major factors which influenced the achievement or non-achievement of sustainability of the programme or project?
- To what extent are child rights issues integrated in local planning and budgeting? Should UNICEF use alternative approaches to make its support to GoMmore sustainable?

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- To what extent the GFA results achieved are likely to continue after UNICEF funding has been withdrawn?

5. Proposed methodology

The evaluation will take mainly a formative approach. It is expected that the evaluation will employ a non-experimental design and use both a theory-based (re-constructing the theory of change) and a mixed-methods approach drawing on key background documents, monitoring frameworks at national and subnational levels and interviews with key informants. Evaluators should also use a utilization-focused and participatory approach. The evaluation will draw the following methods:

- **Desk review** of relevant government policies, orders and relevant laws such as Budget Law, Law on local administration and guidelines, policy papers, plan of actions, National Programme on Child development and protection, Regional and Local Development Plan, national reports and strategies. The desk review will also make use of UNICEF documentation including country programmes, donor and other reports, work plans for GFAs, surveys, assessments, articles, publications, monitoring and evaluation related documents, researches, evaluability assessments and evaluations done in the country (Evaluation on Inclusive Education, Evaluability assessment for the planned evaluations on Inclusive education and Implementation of law on Child protection, Mid-term evaluation of current country programme) and other countries, and, etc. to generate comprehensive information in order to further refine and unfold this TOR and develop the Inception Report,
- **Key Informants interviews** (KII): Face-to-face interviews with officials from the relevant Ministries and agencies including but not limited to the Ministry of Labour and Social Protection (MLSP), Ministry of Finance, the Authority for Family, Child and Youth Development (AFCYD), Cabinet of Secretariat, National Devleopment Agency relevant provincial local governments officials, departments, provincial level CFC coordination committees, Provincial Children's Council in the selected provinces and districts and NGO partners, parents and children;
- **Focus group discussions**: This will include community members, service providers and children with different years of age and women in GFAs.
- KIIs and FGDs are expected to be accurately recorded to allow quotes from participants and used in the evaluation report together with high quality photos to illustrate findings.
- **Case studies**: where appropriate and when full consent is provided, the report should include case studies on adopting the GTACFCI in selected proivince/s that can be demonstrated as good practices. Each case study should include context and background, interventions, challenges, outcomes and human interest and good quotes. It should be between 2-3 pages each.
- A **validation workshop** including feedback session to review findings, conclusions and recommendations with relevant stakeholders and ensure utilisation of the evaluation will be organised.

Based on the purpose and objectives of the evaluation, this section indicates a possible approach, methods and processes for the evaluation. Methodological rigor will be given significant consideration in the assessment of proposals. Bidders are invited to question the approach and methodology outlined in the ToR and improve on it or propose an approach they deem more appropriate and in line with UNICEF's evaluation policy (2018) and the United Nations Evaluation Group (UNEG) Norms

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and Standards (2016). In their proposal, bidders should refer to triangulation, sampling plan and methodological limitations and mitigation measures.

Children's Participation

Methods for consulting effectively with children and young people will need to be developed in consultation with UNICEF with a focus on the 'do-no-harm' principle, i.e., ensuring that the safety and security of families and their kids is not compromised by any actions on the part of the evaluators. Methods will also need to be human rights based, equity focused and gender sensitive. The team needs to ensure that the evaluation processes are fully compliant with the UNEG and UNICEF ethical guidelines provided (details are in the section 11).

In ensuring quality, the evaluation team is required to adhere to the UN Norms and Standards for Evaluation, as well as to the UNICEF's Evaluation Policy (E/ICEF/2018/14), UNICEF Procedure for Ethical Standards in Research, Evaluation and Data Collection and Analysis, UNEG Ethical Guidelines, UNEG Guidance on Integrating Human Rights and Gender Equality in Evaluation, UN SWAP Evaluation Performance Indicator, UNICEF-Adapted UNEG Evaluation Reporting Reports Standards.

6. Duration, process and timeline

Contract duration will be 6months. It is expected that the selected evaluation team delivers in three phases the following outputs:

Phase I – Inception (January 2020):

Conduct inception mission to Ulaanbaatar, commence preliminary desk review, organize meetings with Reference Group comprising different partners and develop the Inception Report. The Inception Report will be instrumental in confirming a common understanding of what is to be evaluated, including additional insights into executing the evaluation. At this stage evaluators will confirm evaluation questions, confirm the scope of the evaluation, further improve the methodology proposed in the TOR, propose reconstructed ToC and their own evaluation proposal to improve its rigor, as well as develop and validate evaluation instruments. The report will include:

- A stand-alone executive summary of two pages;

- Background and context analysis, showing an understanding of local governance, local level programmes and geographical targeting approaches in local level programmes in the context of Mongolia;

- Evaluation purpose and scope, confirmation of objectives and the focus of the evaluation;

- Evaluation criteria and questions, a final set of evaluation questions and evaluation criteria for assessment performance;

- Evaluation methodology, a description data collection and analyses methods and data sources (including a rationale for their selection), draft data collection instruments, a discussion on how to enhance the reliability and validity of the conclusions and utilisation, the limitations of the methodology and how to address them, as well as a description of the quality review process;

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- To what extent the GFA results achieved are likely to continue after UNICEF funding has been withdrawn?

5. Proposed methodology

The evaluation will take mainly a formative approach. It is expected that the evaluation will employ a non-experimental design and use both a theory-based (re-constructing the theory of change) and a mixed-methods approach drawing on key background documents, monitoring frameworks at national and subnational levels and interviews with key informants. Evaluators should also use a utilization-focused and participatory approach. The evaluation will draw the following methods:

- **Desk review** of relevant government policies, orders and relevant laws such as Budget Law, Law on local administration and guidelines, policy papers, plan of actions, National Programme on Child development and protection, Regional and Local Development Plan, national reports and strategies. The desk review will also make use of UNICEF documentation including country programmes, donor and other reports, work plans for GFAs, surveys, assessments, articles, publications, monitoring and evaluation related documents, researches, evaluability assessments and evaluations done in the country (Evaluation on Inclusive Education, Evaluability assessment for the planned evaluations on Inclusive education and Implementation of law on Child protection, Mid-term evaluation of current country programme) and other countries, and, etc. to generate comprehensive information in order to further refine and unfold this TOR and develop the Inception Report,
- **Key informants interviews** (KII): Face-to-face interviews with officials from the relevant Ministries and agencies including but not limited to the Ministry of Labour and Social Protection (MLSP), Ministry of Finance, the Authority for Family, Child and Youth Development (AFCYD), Cabinet of Secretariat, National Devleopment Agency relevant provincial local governments officials, departments, provincial level CFC coordination committees, Provincial Children's Council in the selected provinces and districts and NGO partners, parents and children;
- **Focus group discussions**: This will include community members, service providers and children with different years of age and women in GFAs.
- KIIs and FGDs are expected to be accurately recorded to allow quotes from participants and used in the evaluation report together with high quality photos to illustrate findings.
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- A **validation workshop** including feedback session to review findings, conclusions and recommendations with relevant stakeholders and ensure utilisation of the evaluation will be organised.

Based on the purpose and objectives of the evaluation, this section indicates a possible approach, methods and processes for the evaluation. Methodological rigor will be given significant consideration in the assessment of proposals. Bidders are invited to question the approach and methodology outlined in the ToR and improve on it or propose an approach they deem more appropriate and in line with UNICEF's evaluation policy (2018) and the United Nations Evaluation Group (UNEG) Norms

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- Reconstruct the ToC based on the document review and findings;

- Proposed structure of the final report;

- Evaluation work plan and timeline, a revised work and travel plan, resources requirements; and

- Annexes.

Deliverables: (a) Inception report (approximately 20 pages maximum 8,000 words, not including Annexes) that will be presented at a formal meeting of the Reference Group and (b) a summary (maximum 2 pages), summarizing the purpose, key questions and process for the evaluation.

Phase II – Data collection and preliminary findings (Feb/Mar 2020):

Complete in-depth desk review of all relevant documents, conduct data collection in-country and present preliminary findings to the Reference Group.

Deliverable: (a) Presentation of preliminary findings (power-point).

Phase III – Data analysis, validation and report writing (April/May/June 2020):

Data analysis and review of preliminary findings, stakeholder consultations on recommendations and triangulation of data sources as well as additional interviews when necessary to prepare a presentation for a workshop (validating preliminary findings and formulating recommendations with key stakeholders) and a draft and final evaluation report. The evaluation report will include:

- A stand-alone executive summary (maximum 2-3 pages);

- An analysis of key issues in the geographical targeting approach and implementing CFC strategies

- Statements of findings, well substantiated by the data and evidence and judged against evaluation criteria and conclusions;

- SMART recommendations and a description of how they were validated;

- List of background materials used; and

- Annexes (incl., this TOR, annotated description of the methodology, evaluation matrix, list of people interviewed, etc.).

Deliverables: (a) Presentation for validation workshop (power-point) and (b) draft and final evaluation report (40 pages, maximum 12,000 to 15,000 words, plus Annexes), (c) evaluation brief (4 pages, intended for a broader, non-technical audiences) and d) short video for social media highliting the findings and recommendations.

Reports, power-point presentations and brief will be prepared in English and Mongolian. The first draft of the final report will be received by Evaluation Manager (Monitoring and Evaluation Officer), UNICEF Mongolia, who will work with the team leader on necessary revisions. The second draft will be sent to the Reference Group as well as UNICEF EAPRO advisors (and other UNICEF COs where relevant) for comments. UNICEF Mongolia will consolidate all comments on a response matrix and request the evaluation team to indicated actions taken against each comment in the production of the final draft. The quality of final

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evaluation report will be independently assessed by the Global Evaluation Report Oversight System (GEROS) after the final submission of the report.

The reports should follow UNICEF-Adapted UNEG Evaluation Report Standards (2017), UNEG Norms and Standards for Evaluations (2016) and GEROS Evaluation Quality Assurance Tool (2016). They must be in professional level standard English, language-edited / proof-read by a native speaker. The deliverables (including reports, presentations and briefs) should be in compliance with UNICEF Style Book 2019.

Table 1. Proposed Evaluation Timeline

#	Phase	Deliverable	Times Estimate
1.	Inception phase a) Mission	Draft Inception Report (evaluation framework, methodology, work plan and questionnaires)	3 weeks
	b) Inception Report	Final Inception Report and two-page evaluation summary including data collection tools	
2.	Field phase	Data collection	6 weeks
	Feedback session	Presentation slides for feedback with emerging findings session	
3.	Data analysis, validation and report writing phase	Validation workshop (incl. presentation slides)	9 weeks
		Draft evaluation report to be reviewed by the Reference Group	
	Finalization of evaluation report and other deliverables.	Final evaluation report incorporating feedbacks and comments	
		Final Presentation slides, Evaluation Brief (including infographics, key findings and recommendations for subsequent dissemination) and video	

7. Key skills, technical background and experience required for the evaluation team

For this assignment, UNICEF Mongolia seeks an institution that must have a good track record and extensive experience in planning and conducting evaluations in line with the UNEG Norms and Standards for Evaluation, particularly in evaluation and assessment of local level programmes, geographical targeting for programmes and integration. The composition of the proposed team must be gender balanced to ensure accessibility of both male and female informants during the data collection process. It is expected that it should include two international consultants and two national consultants, however the bidders should use their own expertise in proposing a suitable evaluation team.

A Team Leader (international) should be an evaluation expert with the experiences of evaluating program strategies and approaches preferably evaluation of both national and sub-national level programmes including geographic targeting approaches and of local governance; must have a minimum of 10 years'

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experience leading and conducting evaluations. The team leader is responsible for overall delivery of the evaluation.

The other consultant should have strong expertise inprogramming and budgeting at the sub-national level, CFC implementation strategies, with minimum of 8 years of experience.

The consultants will have an Advanced Degree in Social sciences

In addition, the international consultants should meet the following specific requirements:

- An excellent understanding of evaluation principles and methodologies, including capacity in an array of both qualitative and quantitative evaluation methods, notably process evaluation, evidence of research or implementation expertise in local level development programme, programme targeting approaches and local governance/CFC strategies (having conducted similar evaluations for UNICEF is an asset, having positively rated by UNICEF's quality assurance system is an additional asset), an awareness of human rights (incl. child rights), gender equality and equity in evaluation and UNEG norms and standards.

- Excellent value for money, including competitive consultancy rates, a detailed work-plan and budget, a clear methodology to ensure products will be delivered in line with the agreed costs, a mitigation strategy for financial risk.

- Knowledge and demonstrated experience in systems building from a UN or international NGO perspective, coupled with technical knowledge

- Previous experience of working in an East Asian context is desirable, together with understanding of Mongolia's context and cultural dynamics

- Expertise in communications, dissemination and advocacy around evaluation findings, including a good understanding of the use of evidence-based approaches to influence stakeholders.

- Adaptability and flexibility, client orientation, proven ethical practice, initiative, concern for accuracy and qualityExcellent English communication and report writing skills.

The national consultants should meet the following specific requirements:

- Advanced Degree in social sciences

- 8-10 years of professional experience in conducting evaluation and assessment

- Mongolian nationals with strong working level English.

- Solid understanding of decentralization, local level development, local level programmes and issues related to geographical targeting approaches in development programmes.

- Demonstrated experience in research skills.

- Strong analytical skills.

- Familiarity with UNICEF Mission and mandate

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Firm understanding of child rights, human rights-based approaches, including gender and equity considerations. Successful institutions will be invited to a telephone interview and will be evaluated by the following criteria:

TECHNICAL QUALIFICATION (max. 70 points)
Overall Response (20 points)
• Understanding of tasks, objectives and completeness and coherence of response
• Overall match between the TOR requirements of proposed consultant's competencies.
Technical Capacity (50 points)
• Relevance of institution's and consultants' experience with similar projects and as per required qualifications
• Quality of previous work
• References
FINANCIAL PROPOSAL (max. 30 points)
• Daily rate
• Travel costs
• Total estimated cost of contract (proposed contract fee only)
TOTAL SCORE (max. 100 points)

The consultancy will be published on UNICEF website and relevant networks.

8. Definition of supervision arrangement and support from UNICEF

a.   Evaluation manager

The evaluation team will be directly supervised by the Monitoring and Evaluation Officer, UNICEF Mongolia.

b.   Frequency of performance review

Bi-weekly and as required. Formal performance assessment shall be conducted at the end of the contracting period.

c.   Official travel involved

During this mission to Mongolia, the evaluation team will undertake domestic field trips to selected areas. UNICEF Mongolia will assist the evaluation team with the trip coordination in line with organizational policies. The evaluation team members' international travels shall be based on economy class travel, regardless of the length of travel.

d.   Governance structure

UNICEF will establish a Reference Group to have an oversight of the process and this will be composed of key partners from Government and civil society organisation and will have an advisory role to the Evaluation team and will provide comments and substantive feedback to ensure the quality – from a technical point of view – of the inception, draft and final evaluation reports.

e.   Type of Support to be provided by UNICEF Mongolia

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The Evaluation Manager together with Community Development Specialist, will be available, as/when required to provide the necessary support as follows: 1) Preparation/planning including providing of background documents, data and materials; 2) Coordination of communication via phone, skype and e-mail; 3) Coordinate timely comments to analysis and results; 4) Quality assurance and revision period in coordination with respective officers from UNICEF Mongolia; and 5) Support the organization of a validation workshop in May 2020.

f.   Indicators for evaluation of outputs

- Timeliness

- Achievement of goals

- Quality of work as per GEROS.

9. Estimated cost of the consultancy and amount budgeted, chargeable budget code (FOR INTERNAL USE ONLY)

Budget code: WBS:2880/A0/05/300/303/06

Output 303 Local governance

Activity: Evaluation of CFC

Funding source and amount:

- Regular Resources: 25,000USD
- RTF: 75,000USD

10. Fee and schedule of payments

In the financial quote, interested institutions should include: the total consultancy fee (broken down into daily rate in USD for each individual consultant and number of consultancy days), travel costs (with details of in-country travel) and administrative fees (if applicable, broken down into the separate categories of costs like internet, phone etc.). Please see a Table below:

No	Description of the cost	Proposed amount (in USD)
1.	Consultancy fee (provide details)	
2.	In country travel cost (provide details)	
3.	Administrative fees (provide details)	
Total		

Terms of payment/link of payments to deliverables:

Payment will be made upon submission of expected deliverables certified and accepted by the Contract Supervisor.

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Annex 2 – Evidence Annex

A. Thematic targeting of Outcomes, Outputs and Key Indicator Results specific to GTA in CP 2012-2016

B. Thematic targeting of Outcomes, Outputs and Key Indicator Results specific to GTA in CP 2017-2021

C. CP 2017-2021 Thematic Targeting Examples

D. CP 2017-2021 UNICEF Results Framework

E. CRC Recommendations and UNICEF response

F. CFC Building Blocks: Comparison of implementation status between GFA and the Non-GFA

Annex 2A: Thematic targeting of Outcomes, Outputs and Key Indicator Results specific to GTA in CP 2012-2016

Programme Outcomes/ Outputs	KPIs (key performance indicators)	Results specific to targeting or GFA Observations
Evidence-based policies, pro-child budgeting	Outcome 1	
IR 101 Policies are in line with CRC principles with M&E mechanisms in place	2 KPIs	- 2/2 KPIs are universal in focus; - targeting of disadvantaged children such as CWDs, children of herder families or ethnic minorities were highlighted through advocacy in national law and policy
IR 102 Resources allocated by public and private sectors to reduce child vulnerability	3 KPIs	- 2/3 KPIs are universal focusing on increasing expenditure for children generally, - Equity analysis related to efficiency and effectiveness of public finances is targeted to the need of the most disadvantaged
IR 103 GoM collects and analyses disaggregated data on child and women issues	2 KPIs	- 2/2 KPIs are focused on targeted analysis and research studies through data disaggregation to support human rights-based advocacy and programming
Awareness-raising partnerships between GoM, CSO, media	Outcome 2	
IR 204 Private sector and CSOs engaged in long term partnerships for children	2 KPIs	- 2/2 KPIs focus on private sector partnership with the private sector at national and GFA level that may, in part, be focused on specific disadvantaged children depending on partnership priorities
IR 205 Media plays an active role in social dialogue on child right's issues	2 KPIs	- 2/2 KPIs are nationally oriented, but 1 KPI emphasis is on child rights which highlights the needs of disadvantaged children
Increased services and good practice for child health, nutrition, protection, education	Outcome 3	
IR 306 Health and nutrition intervention for disadvantaged children	5 KPIs	- 4/5KPIs focus on increasing universal access to evidence-based health intervention through the REDS strategy - 1 KPI targets disadvantaged sub-groups access to basic and social services.
IR 307 Access to child-friendly preschools in GFAs	3 KPIs	- 3/3 KPIs focus on universal access to child-friendly preschools and school readiness;
IR 308 Access to quality basic social services for disadvantaged	3 KPIs	- 3/3 KPIs focus on targeting the disadvantaged children specifically to increase access to services (e.g. parental training and community support groups.)
IR 309 Effective emergency preparedness	2 KPIs	- 2/2 KPIs focus on targeting emergency assistance and preparedness at national and GFA levels
Equitable access to child-friendly schools	Outcome 4	
IR 410 Universal access to quality basic education	2 KPIs	- 2/2 KPIs are focused on universal access to education, particularly maths despite the special focus on ethno-linguistic minorities, migrants; - Despite generic indicators, efforts are targeted to subgroups
IR 411 Access to quality WASH in GFAs	3 KPIs	- 3/3 KPIs are universally focused on a facility and good hygiene; no targeting measured through interventions to test WASH container facilities increase access for disadvantaged families
IR. 403 Adolescent health and HIV prevention	2 KPIs	- 2/2 KPIs are universal and generic in orientation (e.g. increased HIV knowledge; reduction in injuries)
IR. 44 Effective child-protection measures and services	3 KPIs	- 3/3 KPIs are partially targeted to raise awareness of child rights in GFAs (likely includes a discussion of disparities), and targeted interventions related to social protection

Annex 2B: Thematic targeting of Outcomes, Outputs and Key indicator results specific to GTA outputs and outcomes in CP 2017-2021

Programme Outcomes /Outputs	KPIs	Results specific to targeting or GFA Observations
1. Health and Nutrition, including WASH	**Outcome 1**	
IR 1.1 MCH, STI/HIV, and Adolescent. Mental Health Prevention and Services	9 KPIs	- 7/ 9 KPIs have universal access focused on access to quality MCH and EPI services through law, national action plans, and guidelines for health professional (e.g. mental health of adolescents); - 2 KPIs have a targeting focus: one related to identifying bottlenecks to child survival and one on behaviour change communication for key populations.
IR 1.2 Nutrition	4 KPIs	- 2/4 KPIs focus on access to universal nutrition services (e.g. IYCF through law, policy and guidelines); - 2/4 KPIs include specific targeting through IYCF counselling centres, for SAM children, and micronutrient supplements for dzud affected herder children and nutrition counselling for disadvantaged families
IR 1.3 WASH/Air Pollution	4 KPIs	- 1/4 KPIs targeted WASH facilities for rights-holders; other KPIs are focused on institutionalization; - WASH containers, smart water kiosks, smog free action plans, WSPs, and CHIPS interventions however were targeted within the GFAs.
2. Access to Education	**Outcome 2**	
IR 2.1 ECD, primary and adolescent learning	3 KPIs	- While access to education has a universal strategy, all KPIs have both a potential targeting focus on CWDs and children facing specific risks; - Specific targeting has focused on inclusion of CWDs through the CDC initiative and Mobile Kindergartens.
IR 2.2 Inclusive ECD and primary education	5 KPIs	- 2/5 KPIs focus on improving the quality of education equality, while 3 KPIs are more targeted; - Targeted interventions focus on supporting schools and providing alternative approaches to teaching for CWDs and other children that have not benefited from ECD - Targeting also focused on creating access for disadvantaged children (e.g. 24-hour kindergartens) and in ger districts
IR 2.3 Life skills, and use of STI prevention services	2 KPIs	- 2/2 KPIs are universally oriented to reach all adolescents; - targeted and partnered implementation of LSE in Zavkhan with MES
IR 2.4 WASH in kindergartens, schools and dormitories	2 KPIs	- 2 KPIs focus on universal national standards for WASH facilities in schools; - Related to 1 KPI, targeting was done through implementation of a partnership model (e.g. public/private) to introduce WASH container facilities as a model in one Bayanzurkh district.
3. Social policy	**Outcome 3**	
IR 3.1 Equity and child focus for national social protection system	2 KPIs	- 2/2 KPIs have a targeting focus on using poverty analysis and other evidence to influence policy, programme design, and budgeting for disadvantaged children; - Specific targeting examples include Kazakh language materials; and Shock Responsive Social Protection for families vulnerable to dzud.
IR 3.2 Legal and policy protections for children from abuse and violence at national and in target areas	3 KPIs	- 3/3 KPIs are universally oriented, but purposed for targeted intervention related to child protection (e.g operationalization of MDTs in the GFAs; data collection on violence and abuse of children)
IR 3.3 Child Friendly Strategies	2 KPIs	- 2/2 KPIs are focused on implementing CFC strategies in the GFAs that included both universal and targeted approaches to reaching disadvantaged children (e.g. targeting LDF allocations for children generally, some focused on special needs
IR 3.4 Private sector implementation of Child Rights and Business Principles	1 KPI	- 1/ 1 is not targeted but rather general good practice to promote child rights
4. Communication, Advocacy and partnerships	**Outcome 4**	NA

Annex 2C: CP 2017-2021 Thematic Targeting Examples166

Outcome 1. Health, Nutrition, WASH		Outcome 2. Access to Education		Outcome 3. Social policy	
Outputs	Example of targeting	Outputs	Examples of targeting	Outputs	Examples of targeting
MCH, STI/HIV, and Adolescent Mental Health prevention and services	BKH has been nationally recognized for its good practice of "ANC by names". UNICEF supported national scale up of e-ANC to increase access to ANC for vulnerable women	ECD, primary and adolescent learning	In BKH, UNICEF supported inclusion of CWDs in school through the CDC initiative In GA, mobile Kindergarten and improved learning environment led to increased rate of ECE enrolment	Equity and child focus for national social protection system	SISS 2018 survey was done in Kazakh language to ensure equity and inclusiveness of Kazakh children's situation into evidence-based policy and planning
Nutrition	In BKH, IYCF counselling supports vulnerable families. 60% of trained health professionals have improved knowledge in nutrition In GA, targeted counselling for pregnant women on IYCF. 60% of health professionals with improved IYCF expertise	Inclusive ECD and primary education	In BKH, 350 children of herder families enrolled in home-based distance learning program through mobile teachers		In ZA, a Shock-Responsive Social Protection (SRSP) Cash transfer measure for children vulnerable to dzud was piloted to generate lessons on whether and how the scale up SRSP to avoid negative coping strategies, such as reduced food consumption, reduced expenditure for health and education during shocks
WASH/Air Pollution	In BKH, climate resilient programming for WASH support in schools In BKH, CHIPS developed and distributed with UNICEF support to vulnerable families relying on traditional coal heaters as a part of "Smog Free Bayankhongor Action Plan, 2019-2022" In GA, UNICEF replicated the Smart Water Kiosk programme increasing water access to 300 remote households in aimag	Life skills, and use of STI prevention services	In BKH and ZA, UNICEF and GA Life skills Programs "My Family" and "My World" rolled out in all schools, targeting adolescents with soft skills training, mental health and STI prevention		

Note: BKH – Bayankhongor, GA – Govi-Altai, ZA – Zavkhan

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166 *The list of thematic targeting examples is not exhaustive but rather illustrative. Outcome 4 is not included as no specific targeting intervention was found.*

Annex 2D: CP 2017-2021 UNICEF Results Framework

COUNTRY PROGRAMME 2017-2021 RESULTS FRAMEWORK- GTA ANNOTATED

Outcome Statement 1: By 2021, the most disadvantaged children in Mongolia benefit from increased access to and utilization of services that promote health and nutrition, including WASH and interventions that mitigate the impact of air pollution.

Indicators:
· Percentage of children aged 0–5 months exclusively breastfed. Baseline:47.1% (2013); Target: 60%; Progress: 47%-50% (2019) (minor progress)
· Percentage of deaths among children under 5 due to pneumonia. Baseline: 15% (2015); Target: 12%; Progress: 10.8% (2018) (achieved)
· Percentage of adolescents aged 15–19 tested for HIV (national/girls/ boys). Baseline: 13.5%/16.5%/10.4% (2014); Target: 20% / 22% / 18%; Progress: NA/11.7%/13.1% (2018) (off-track)
· Percentage of population using improved water sources in UNICEF target areas: Baseline: 70%; Target: 90%; Progress (2018): Bayankhongor (70.1%); Govi-Altai (73.7%); Zavkhan (67.5%); Bayanzurkh district (97.4%); some progress.
· Percentage of population using improved sanitation facilities in UNICEF target areas: Baseline: 69%; Target: 80%; Progress (2018): Bayankhongor (70.3%); Govi-Altai (70.1%); Zavkhan (71.8%); Bayanzurkh district (98.9%); some progress.
· Number of new national policies and programmes on mitigation of impacts of air pollution on child health: Baseline: 0 (2016); Target: 2; Progress: 1 (Smog-free Bayankhongor); on track
 · Percentage of pregnant women with known HIV status: Baseline: 68.6% (2016); Target: 80% (2021); progress: NA
 · Proportion of the population using an improved source of drinking water: Baseline: 57.3% (2017); Target: 70% (2021); Progress: 86.9% (2018); achieved

Obs: Overall, this Outcome is on track despite financial constraints which have limited progress in some technical areas, such as prevention of STI/HIV, EmOC, household level/community sanitation. It is suggested to review the areas of engagement and indicators, particularly of outputs 1 and 2, to focus on key actions achievable by the end of the Country Programme. In addition, it is proposed to create a new Output dedicated to Air pollution, to reflect the programme engagement on this issue (MTR UNICEF 2019).

Output 1.1 National and sub-national health authorities in target areas have improved capacity to rollout and sustain MHCH, STI/HIV prevention and adolescent mental health services, through established sub-national delivery systems. *Observations (Obs): Greater specificity needed to target and measure effect on disadvantaged sub-populations*			Partial targeting; On track;
Indicator	**Progress**	**Assessment**	
1.1.2 DHSS targeted districts in which barriers and bottlenecks related to child survival are monitored	baseline: 0 (2016), target 5 (2021) off track, largely due to lack of resources	GFAs (overall): Unknown Obs: KPI is not sufficiently specific; suggest identification of key bottleneck or barrier to measure progress against	Potential for targeting
1.1.3 Relevant essential commodities registered with the relevant regulation authority and guidelines for use in facilities available	baseline: 0 (2016), target: 5 (2021) on track	Overall: Good progress	na
1.1.4 Mothers and caregivers with knowledge of at least 5 of the UNICEF essential family practices	baseline: 12% (2013), target: 15% (2021) off track, largely due to lack of resources	Overall: Unknown Obs: KPI could include a sub-focus on a disadvantaged population or require greater disaggregation to capture young mothers, rural mothers, ethnic minorities, etc.	Universal; Potential for targeting
1.1.5 Comprehensive behaviour change communication strategy for adolescents and youth including those from key populations	baseline: no; target: yes no evidence	GFAs (overall): Unknown Obs: More specificity on level of disaggregation required (age, gender min.) and key populations targeted suggested	Universal; Partial target of Key Pops
1.1.6 Percentage of UNICEF supported health facilities offering delivery services with functional newborn resuscitation equipment (functional bag and mask in neonatal size)	baseline: 0% (2017); target: 30% (2021) off track, largely due to lack of resources	Overall: Unknown	Universal
1.1.7 Policy for home visits of new-borns is developed and/or revised, adopted and in use	baseline: not updated (2016); target: updated (2019) achieved	Overall: Good completion Obs: KPI could include a sub-focus targeting a disadvantaged population for inclusion in the policy/protocol	Universal; Potential for targeting

Indicator	Progress	Assessment	
1.1.8 IPV introduced into routine immunization schedules	baseline: not introduced (2017); target: introduced (2021) on track	Overall: Good progress	Universal
1.1.9 Number of health care providers trained on adolescent counselling as a result of UNICEF support	baseline: 0 (2016); target: 150 (2021) on track	Overall: Good progress Obs: KPI could include a sub-focus on providers working with disadvantaged populations or in specific locations	Universal; Potential for targeting
Output 1.2 National and sub-national health authorities in target areas have improved capacity to legislate, budget, design and deliver quality and equitable nutrition services. Obs: Potential to add measure on effect for specific disadvantaged sub-populations			Potential for targeting; On track
Indicator	Progress	Assessment	
1.2.1 Community health workers trained with UNICEF support to provide infant and young child feeding counselling services in the reporting year	baseline: 0 (2016); target: 60% of health workers in GFAs (2021) achieved	Overall: Good completion Obs: KPI could include a sub-focus on providers working with disadvantaged populations or in specific locations	Universal; Potential for targeting
1.2.2 Number of primary caregivers of children aged 0-23 months in GFAs who received counselling on IYCF	baseline: 0 (2016); target: At least 70% primary caregivers of children aged 0-23 months in GFAs (2021) achieved	Overall: Good completion Obs: KPI could include a sub-focus on a disadvantaged caregiver or require greater disaggregation to capture young mothers, rural mothers, ethnic minorities, etc.	Universal; Potential for targeting
1.2.3 Adoption of the International Code on Marketing of Breastmilk substitutes as legislation and subsequent relevant World Health Assembly resolution	baseline: score 2: few provisions in law (2016); target: Score 4: full provision in law (2017) achieved	Overall: Good completion	na
1.2.4 Existence of National protocols for the management of SAM based on WHO standards	baseline: no (2016); target: yes (2021) – Status 2019: Achieved	Overall: Good completion	na
Output 1.3 National and sub-national health and environment authorities in target areas have improved capacity to legislate, budget, design, deliver and coordinate WASH services and interventions to mitigate the impact of air pollution on child survival. Obs: Potential to add further specificity on effect for specific disadvantaged sub-populations			Partial targeting; On track
Indicator	Progress	Assessment	
1.3.1 Number of settlements (soum centers) with approved Water Safety Plans in the reporting year only, as a result of UNICEF direct support	Baseline: 0 (2016); Target: 1(2017), 2 (2018), 3 (2019) – Status 2019: 3 + 1 urban area.	GFAs (overall): Good completion Obs: Emphasis could shift to targeted soums (e.g. disadvantaged)	Universal; Potential for targeting
1.3.2 Number of people who gained access to basic sanitation services in the reporting year only, as a result of UNICEF direct support.	Baseline 0 (2017); Target: 10,000 (2018), 10000 (2019) – Status 2019: on track	GFAs (overall): Good progress Obs: Potential to add further specificity on effect for specific disadvantaged sub-populations	Partial targeting
1.3.3 Existence of functioning sector coordination mechanism for water, sanitation and hygiene.	No (weak) (2017; Target: Yes (functional) (2021)- Status 2019: on track	Overall: Good progress	na
1.3.4 WASH sector plans integrating climate resilient development and/or risk management strategies available	Baseline: No (partially available) (2017); Target: Yes (2021) – Status 2019: On track	Overall: Good progress Obs: KPI could include a sub-focus targeting a disadvantaged population for inclusion in the policy/protocol	na
1.3.5 Existence of functioning cluster coordination mechanism for water, sanitation and hygiene in humanitarian situations	Baseline Yes (2017); Target: Yes (sustainable/functional) (2021) – Status 2019: On Track.	Overall: Good progress Obs: Targeted to humanitarian settings	Partial targeting

Output 1.4 The approved RRF includes outcome level indicators under Outcome 1, and output level indicators were initially included under WASH Output 1.3, as follows: RRF Outcome indicator: Number of new national policies and programmes on mitigation of impacts of air pollution on child health- Baseline: 0 (2016); Target: 2	Baseline: No; Target: Yes	Obs: KPI could include a sub-focus targeting a disadvantaged population for inclusion in the policy/protocol	Universal; Potential for targeting

Outcome Statement 2: By 2021, the most disadvantaged children benefit from increased access to and utilization of educational services in an inclusive, healthy and quality learning environment.

Indicators:
· Percentage of children aged 36–59 months attending an ECE programme (national/boys/girls/ poorest quintile): Baseline: 68.2% / 68.1% / 68.2% / 35.8% (2013); Target: 78% / 78% / 78% / 46%; Progress (2018): Total: 73.6% Boys: 71.5%/ Girls 76.1%/ Poorest 34.1%
· Secondary education NER of Kazakh and Tuva minority children (total/boys/girls): Baseline (2013): 85.0%/84.9%/85.2%; Target: 90%/90%/91%; Progress 2019: 86%/85.9%/86.1%
· Enrolment rate of CWDs in general education schools (national): Baseline: 44% (2010); Target: 70%; Progress (2019): Proportion of the students with disabilities enrolled in UNICEF supported schools (excluding NFC) amounted on average to 20%of the total number of CWDs enrolled in school in the particular province (Khuvsgul 19.4%, Gobi-Altai 28.1 %, Bayankhongor 19.2%, Zavkhan 14.1%)
· Proportion heard of HIV among youth aged 15–19 (national: boys/girls) Baseline: 69.5% / 68.6% (2013); Target: 80% / 80%; Progress (NA/80.4%/76.3%) - Note: corrected the indicator as it had provided % of comprehensive knowledge on HIV.
· Proportion of kindergartens, schools and dormitories in UNICEF target areas with improved sanitation facilities in line with national norms and requirements: Baseline: NA (2016); Target: 100%; Progress: NA | Universal and targeting; On track

Output 2.1 The Ministry of Education, Culture and Science's capacity to develop, budget, design and implement equity-focused, gender-sensitive policies, strategies, norms and requirements for ECD, primary and adolescent learning is enhanced.			Good progress; Targeting
Indicator	**Progress**	**Assessment**	
2.1.1 Existence of appropriate law/policy explicitly mentioning the rights of CWDs to receive an education	score (1-4) Status: Achieved	GFAs (overall): Good completion	Targeted
2.1.2 Availability of a risk reduction strategy within the Education Sector Plan/Policy	score (1-4- Baseline:1 (2016); target: 3 (2021) – Status: in progress	GFAs (overall): Good progress Obs: KPI could include a sub-focus targeting a disadvantaged population for inclusion in the policy/protocol	Potential for targeting
2.1.3 Existence of policies on inclusive ECD covering particularly CWDs and other marginalized children	Baseline: 2 (2017); target: 3 (2019) Status 2.5 (2019)	GFAs (overall): Good progress	Targeted
Output 2.2 Decentralized education authorities in target areas have improved capacity to increase access and utilization of quality, inclusive ECD and primary education services.			Partial targeting; Good progress
Indicator	**Progress**	**Assessment**	
2.2.1 School management committees (or parent teacher association or school communities or similar structure) trained with UNICEF funding	Baseline: 0 (2017); target 20 (2021) – Status: on track	Overall: Good progress Obs: KPI could include a sub-focus targeting a disadvantaged populations/schools for training	Universal
2.2.2 ECD centres benefiting from UNICEF interventions	Baseline 0 (2017); target: 25 (2021) – STATUS: 2019: 17 – on track	Overall: Good progress Obs: KPI could include a sub-focus targeting a disadvantaged populations/ECD centers	Potential for targeting
2.2.3 ECD facilitators/teachers who received training with funding provided by UNICEF	Baseline 0 (2017); target: 350 (2021) – Status: 2019 – 380-Achieved	Overall: Good completion Obs: KPI could include a sub-focus targeting a disadvantaged populations/schools for training	Universal

2.2.4 Number of children benefiting from ECE through alternative approaches (such as home-based provision of ECD, accelerated school readiness models, parent education, among others) with support from UNICEF	Baseline 0 (2017); target:10,000 (2021) – Status 2019: 6,365	GFAs (overall): Good progress	Targeted
2.2.5 Schools that were supported by UNICEF to become accessible to CWDs	Baseline:0 (2017); target: 20 (2021) – Status 2019: 12 Schools in 3 provinces- on track	GFAs (overall): Good progress	Targeted
Output 2.3 Education authorities in target areas have improved capacity to design and implement innovative programmes that can enhance life skills, participation and increase utilization of STI prevention services.			**Universal; Good progress**
Indicator	Progress	Assessment	
2.3.1 Proportion of schools in target areas providing psychological counselling service for adolescents	Baseline: 0 (2016); Target: 50% (2021); Status 2019: 30%	Overall: Good progress	Universal
2.3.2 Percentage of adolescents in target areas, reached by school and out of school programmes aimed at building adolescents' skills for life	Baseline: 0 (2016); target: 50% (2021); Status 2019: 25%	Overall: Good progress Obs: Include disaggregated targets for out of school adolescents	Universal; Potential for targeting
Output 2.4. Education authorities in target areas have increased capacity to implement national norms and requirements for WASH in kindergartens, schools and dormitories.			**Partial targeting; Completion**
Indicator	Progress	Assessment	
2.4.1 Number of schools with water and sanitation facilities that meet national standards have been installed in the reporting year only, with UNICEF direct support	Baseline: 0; Target: 3 achieved	Overall: Good completion	na
2.4.2 Number of Early Childhood Development centers that have water, sanitation and hygiene facilities meeting national/JMP standards in the reporting year only, as a result of UNICEF direct support	Baseline 0 (2016); Target: 5 each for 2017, 2018, 2019 achieved	GFAs (overall): Good completion Obs: KPI could include a sub-focus targeting a disadvantaged populations/ECD centers	Targeted
Outcome Statement 3: By 2021, child-related national policies, budgets and systems, including the child protection system, are inclusive and equity-focused. **Indicators:** · Public social protection expenditures for children as percentage of GDP: Baseline: 2.47% (2016); Target: 4.47% (2021)- Status 2019: The status was estimated for 2017 as 2.58% and 2018 as 2.33%. decreased as the budget for the Child Money Programme was cut by the government. It is to be noted however, that for 2018, Social Protection related commitments represented US$606 million, or 14 per cent of the national budget. · Children 1 to 14 years who experience violent disciplinary practices by an adult member of the household: Baseline: 49.3% (2013); Target: 44% (2021)- Status 2019: 49% · Number of companies that incorporate elements of children's rights and business principles (CRBP): Baseline: 0 (2015); Target: 10- Status 2019: on track **Overall progress on the planned results and defined indicators is considered on track (MTR 2019).**			**Partial targeting; On-track**
Output 3.1 National authorities have increased capacity and evidence to make policy, budget and strategy decisions that enhance the equity and child focus of the national social protection system.			**Targeted; good progress**
Indicator	Progress	Assessment	
3.1.1 National policies and programmes are influenced by child poverty analysis and advocacy	Baseline: No; Target: Yes- – Status 2019: on track	GFAs (overall): Good progress	Targeted

3.1.2 Evidence of use of budget and impact analyses for improved programme design/targeting	Baseline: No (no programmes are influenced) (2016); Target: Yes (at least 3 programmes are influenced) (2021) – Status 2019 On track	Overall: Good progress Obs: Greater clarity needed on what constitutes improved programme design/targeting; specify target sub-population	Targeting
Output 3.2 Government's capacity to legislate, plan, budget and to provide child protection services has increased to protect children from violence, abuse and exploitation at the national level and in target areas.\			Partial targeting; Good progress
Indicator	Progress	Assessment	
3.2.1 Number of Multidisciplinary teams in selected target areas fully operationalized to provide integrated child protection services	baseline: 0 (2017); target: 50 (2019); 97 (2021) – Status 2019: Achieved	GFAs (overall): Good completion Obs: KPI could be more specific to ensure targeting also focuses on specific disadvantaged populations within GFAs	Targeted
3.2.2 Public spending on child protection	baseline: 9 billion MNT (2017); target 13 billion MNT (2021) – Status 2019: On track	Overall: Good progress Obs: KPI requires disaggregation for spending on disadvantaged children	Potential for targeting
3.2.3 Data on most forms of violence, exploitation and abuse of children are collected through routine administrative sources	baseline: 0 (2017); target: 50 (2019); 97 (2021) Status 2019: on track	Overall: Good progress Obs: KPI could be revised or extended to focus on use of data	Universal
Output 3.3 Local authorities in target areas have adopted child-friendly strategies, improved knowledge of the situation of children and enhanced capacity to design and deliver integrated and equitable services			Partially targeted; Completion
Indicator	Progress	Assessment	
3.3.1 Child Friendly strategies have been introduced and implemented in target areas	Baseline: 0 (2016); Target: 4 (2021) Fully achieved in 2017	GFAs (overall): Good completion Obs: KPI could be more specific to ensure targeting also focuses on specific disadvantaged populations within GFAs	Targeted
3.3.2 Number of national authorities exposed to advocacy/experience sharing events on child friendly local governance	Baseline 0 (2016); Targets: 25 (2017) 50 (2018)	Overall: Good completion Obs: KPI could include targeting of key decision-makers/ authorities with budget responsibility; less general	Potential for targeting
Output 3.4 The private sector (and in particular the extractive industries) has increased knowledge of and commitment to its responsibility to respect child rights, including implementation of Child Rights and Business Principles.			Potential for targeting; on track
Indicator	Progress	Assessment	
3.4.1 Number of business platforms/associations, industries and companies that become public advocates and champions of children's rights and support UNICEF's key messages	Baseline: 0; target 10 (2021) on track	Overall: Good progress Obs: KPI could include a sub-focus targeting messages for critical disadvantaged population for inclusion in the advocacy events/campaigns	Potential for targeting
Outcome Statement 4: Communications, advocacy and partnerships: UNICEF staff and partners are provided guidance, tools and resources for effective advocacy and partnerships on child rights issues with stakeholders. (In addition to planned activities in each outcome and outputs, the Country Programme structure includes a specific output which is standardized globally)			Partial; status NA
Indicator	Progress	Assessment	
4.2.1 Number of multistakeholder media and public advocacy events/campaigns to increase UNICEF's visibility in the country			na
4.2.2 Number of advocacy initiatives to address selected child rights and equity issues, that are supported by UNICEF			Targeted

Annex 2E: CFC Building Blocks

	GFAs foir CP 2012-2016		GFAs for CP 2017-2021				non-GFA
	Khuvsgul	Nalaikh	Bayankhongor	Govi-Altai	Zavkhan	Bayanzurkh	Uvurkhangai
Children's participation	24 soums in Khuvsgul regularly organise days for children's voices. Children participated through Council meeetings and working groups to integrate children's issues into the governor's development action plans	Children participation in governance is being monitored by LGAs. "Journalist Children" club operates, and "Let's listen to children" campaign is organized. Mini-parliament was established in which children operate as decision makers at the district level.	The delivery 36 ECE playground and 46% public playground in the aimag was jointly evaluated with the 'Research Child' club and child members of the Mini Parliament. The evaluation report is being discussed in the aimag council for recommendations to local policies.	All soums organizing are Children's forum every 2 years, and a "Day to Listen to Children voices" is takes place weeklys However, in aimag centre, this Day is not yet taken up due to changes in local government.	Monthly day for children's voices". Examples of implemented child resquet include the extension of public library houses, provision of a school psychologist, and increase in public street lighting.	Quaterly day for children's voices, yearly Children Forum established. Child requests implemented include provision of school psychologist - finding qualified person remains a challenge.	Children's Forum conducted every two years. Youth Entrepreneurship and Inclusive development project being implemented. Governor makes time for children consultation. Local TedX was organized for children. Development agenda continued despite LGA changes.
A child-friendly legal framework	Legal frameworks a aimag level include: "Child friendly aimag" strategy; "A Developed Khuvsgul 2016-2030"; "Child Friendly Community Sustainability Sub-program". Intersectoral collaboration on pro-child development became functional as a good model.	CFC strategy and priority issues of child development were reflected in district development policies. CFC strategy has been institutionalized and the integrated approach is functional.	New frameworks at aimag-level ("Child-friendly aimag strategy") intend to develop a more integrated response to most urgent child issues. 126 local service providers (school, kindergartens) included in the decision making process and have a child friendly strategy.	Number of pro-child decisions made by LGA increased. Child related issues explicitly on Aimag & Soum Hurals' agenda. M&E process of programme implementation. The number of public and private entities with Child protection policies has been increased by 86.	All public entities in all soums have Child-friendly policies. All public and private entities at the aimag have Parental Committees and Child Protection Polcies. Aimag Coordination Council for Child-friendly Community Programme was established and prepared the CFC Action Plan.	Child-friendly district sub-programme and sub-committee are functional. Local Governor issued series of resolutions on promoting child rights and prevention from abuse against children. Local Governor's Action Plan reflects strategies and activities to promote CFC.	"Equal opportunity" program being implemented. "Child development and protection" program and CFC sub-programme being implemented since 2017 with 70% achievement.
City-wide child rights strategy	CFC strategy effectively combined all sectoral plans on children's issues, and it had key indicators to measure results for children in health, nutrition, education, WASH, child-protection and local governance etc. Local government ownership was strong.	Specific models of child-friendly social services have been piloted with success. CFC Coordination Committee was piloted well which is sustainable up to now.	Strategy for reducing/eliminating violence against children and better targeting of all vulnerable children in its health, education and child protection programs. Specific targeting includes inclusive education for CWDs, WASH facilties in ger kindergartens. Promoting children participation in local decision making has been intensified.	Child Council is consistently working in all 20 soumse. Respect of children views and experiences is one of the strategies of CFC and all agencies reflect it in their pro-child activities. 94 entities at aimag level have prepared Child Protection Policy for the first time.	The CFC appproach is implemented at the family level through sub-programmes such as "Happy Family" to promote child rights and festivals. LGA encouraged children to talk about aimag development (50% reached). Training on "Child-friendly Business" was initiated for the business entities.	Roll-out of a Child Friendly District Programme, including the establishment of the district children council; The District Governor has issued a decision to devote one day per month to listen to children. Most child related institutions now have adopted a child protection policy.	Aimag departments promote CFC but they work independently. The concept of intersectoral collaboration is lacking. The agenda on reaching the goal of becoming a Child-friendly school and Child-friendly kindergarten is functional.
A child rights unit or coordinating mechanism	Multi-sectoral coordination mechanism was set up to monitor progress the agreed child indicators	Multi-sectoral CFC Coordinating Committee are functioning. The committee meets regularly, it plans, implements and monitors over CFC activities.	Quaterly meeting of Children's Council led by Aimag Governor.	Aimag has the CFC Sub-Committee composed of representatives of all the stakeholders. The committee meets regularly and discuss the urgent issues, plans and implementation progress.	CFC Coordination committee is not active, and does not ensure coordination. The Chairman of CFC Coordination committee is a Head of Governor's Office, and Secretary is Head of local AFCYD, causing organizational mismanagement and lack of collaboration.	CFC coordinating committee composed of the representatives of agencies such as Governor's office, Hurals, education dept, health dept, FYCD dept, police dept, and other related agencies. The committee meets regularly, it plans, implements and monitors over CFC activities.	Governor heads the Children's Council, and Head of Citizens' Representative Khural is the Champion of the Children's Council, and secretariat is DFCYD head. These entities work to implement CFC, but there is a lack of coordination between organizations.
Child impact assessment and evaluation	Bottom-up approach of monitoring system was used, i.e. soum conducted self-assessment of implementation of the CFC strategy based on the state monitoring and evaluation.	Local authorities made monitoring as part of their daily activities, and they update the database regularly to identify problems. Monitoring visits are done by working group consisted of all key departments.	Making evidence-based decisions has been improved in the last years. Aimag education department has datasets available. Aimag has dataset of vulnerable children and do monitoring in schools on how they work with CWD.	As a result of field monitoring, doctors of the MTD team initiated a campaign named 'To provide service by coming to you not by making you come' for those who have disabilities and living in remote countryside, and mobile health outpatient service was initiated to help CWDs.	Monitoring and evaluation of the Child Protection-Governance section of the Child friendly Province sub-program was conducted in May 2020 and was rated with 76.9% of achievement. In practice, there is no systematicaccountability mechanism to monitor and assess how LGAs have worked for children.	During COVID, District needed to target those who were in more risky situations and who needed help during COVID. So, they did Rapid assessment and identified the target children who received various support and assistance during COVID.	Absence of assessment and evidence based prevention for children and newborn health. Mainstreaming Social Accountability in Mongolia Project (MASAM) project has been implemented.
Children's budget	Children views reflected in planning, decision-making and budgeting processes. Policies, parents' budgets and child-focused decisions are made. 60 pp increase of child-led orgs receiving funding. Children participating in LDF planning process: 20 pp increase in LDF for children.	UNICEF partnered with ING and Arig bank to renovate WASH facility in 3 kindergarden . In 2012-2016 the district invested 145.723.600₮ for 5 kindergartens. In 2012- 2016, 1342 children enrolled to kindergarten; due to increased budget allocation 6 new kindergartens built.	Specific budget allocations for 5 new kindergarten built over the last 3 years. Aimag approved 4 years action plan with budget allocated by local government to fight air pollution. Substantial increase of local government allocations from LDF.	Dedicated funding in state budget since 2018 for child protection services (60 million MNT). Two full time teachers hired to work for CWD at province centers with local budget, which was exemplary achievement. Government budget supported construction of new buildings with WASH	Aimag is building 5 new schools and 4 new kindergartens, connecting schools to central heating systems in 8 Soums. Allocations from LDF and Governor fund increased: in 2019, 1.4 billion MNT from LDF and 34 million MNT from Governor Fund allocated to children related programmes.	Pro-child budgeting increased 22-fold between 2017 & 2019. LDF allocatios doubled. LDF allocations all based on the views expressed by children. Saving accounts (10,000 MNT monthly) for the children from vulnerable households.	Aimag conducts multiple partnership Save the Children Japan -3 year project 120 million MNT; Taiwan Fund for Children and Families in 2018 donated MNT 60 mln to schools and kindergartens. State Budget allocation 45.1 billion MNT for 2018-19, from LDF 585.6 million MNT on pro-child budget
Children's Report	"Household based quality assurance survey of prevalent preventable diseases in young children" carried out with UNICEF to assess parent's knowledge and behaviour regarding immunization, nutrition and health issues.	Database of children in risky situations developed, with 12 ky indicators. Serves evidence-based programming. To revise the dataset, governor's office works closely with social welfare departments and Multidisciplinary teams.	DFCYD carries out their own survey about vulnerable children disaggregated by sex. Health department also did survey on children with malnutrition leading to doctor mobilisation and nutritional best practice disseminated	Conducted "Situation of Adolescent Mental Health," and uncovered serious mental health problems among adolescents, and thus, created a "Children Room" at the mental health division of the hospital.	DFCYD conducted children's risk assessments and created database of 698 children, providing assistance to a half of them. Common challenges regarding data quality apply, especially with regards to data on CWD, defined differently in local schools to district statistics office.	District has database of children in risky situations. Information is aggregated into 12 key indicators. Based on this information, they select targets for new programs, this database contains information of 50,000 children about stunting, weight loss etc.	Situational report on adolescents especially on STIs conducted, resulting in screening intervention. With World Vision, LGA identified 320 vulnerable households and provided assistance for their children. Planning to conduct in depth study in education sector assessing pupil risk level.
Making child rights known	All local agencies and communities were encouraged to mainstream chld rights issues in their everyday life under CFC. Children's tribunes became traditional to make children voices to be heard.	Governors and local governments played a key role as advocates of the Child Friendly District Strategy.	Governance structures for child's rights further institutionalised. Positive change in parents' attitude towards CWDs' access to education. Increased parental participation in schools (146 parents' coucils in aimag). 2019 'Year of Comprehensive Education for Children's Protection'.	Day of Listening to Children Voices in all soums. Creative activities such as "Let's talk with your children" are initiated where aimag level respected people talk on TV for the public to promote child rights.	Aimag government promotes child rights messages with series of public broadcasts through the local TV station.	Parental awareness towards child rights has been improved through various training and events such as ECE kit at home. Established a "Child Rights Inspector". Children Conferences are regularly held to make children voices known.	CRC principles recognised and adapted in schools and kindergartens. 2 classes in a local school are devoted for children with disabilities.
Independent advocacy for children	Local newspaper" Erkh Chuluu" for information dissemination in rural communities. Many government and local NGOs and private-sector organizations adopted child protection policies, and 44 parents' councils established to consider children's-rights topics.	All types of local mass media were involved in advocacy on CFC and child rights. Parental and community awareness is built well.	Information campaign on promotion of child rights is regularly managed by LGA. Parental and community awareness of child rights have been increased as a result of activities under CFC. 4 newly established lawyers specialised on child rights.	A new position of "Child Rights Inspector" was initiated working in all 20 soums to promote advocacy activities. The number of parents enrolled in pro-child rights advocacy activities has been increased significantly.	Pro-child rights interventions were promoted and publicised cross-sectorally. Public information campaign on prevention of abuse against children organised. 158 institutions, (31 schools, 38 kindergartens, and 89 public organisations) with parent councils established and child protection policies approved.	Capacity of Multi-disciplinary teams is improved which organized monthly initiatives to detect violence in vulnerable households, as well as a series of public awareness activities on VAC/GBV. The hotline receive a lot of calls, numbers not decreasing which also related to increased awareness.	Parents' Council established at each organization having 171 organizations.

Annex 2F: CRC Recommendations and UNICEF response, 2017

Response of CP GTA to CRC Report, 2017

CRC Recommendation: Implement concrete measures to eliminate all forms of violence against children, abolish corporal punishment, and support parents in adopting positive discipline techniques.

> **Response:** provide technical expertise to translate the law into regulations and mechanisms that can help both national counterparts and other duty bearers to effectively deliver services for children as well as addressing child protection risk; strengthening MDTs (social workers, police, teachers) to integrate case-management and enforce newly approved laws.

CRC Recommendation: Strengthen efforts to reform public finance management towards programme or results-based budgeting that includes a child rights perspective, with a M&E tracking system to assess the equitability of the distribution of resources allocated for the implementation of the Convention.

> **Response:** establishment of the "Child Statistics Database" with financial and technical assistance from UNICEF, managed by the National Authority for Children; development of a Quality Assessment Tool with MES to facilitate norms implementation around education; improve the prioritization of expenditures in the budget – allocation of resources to those programmes that maximize cost-benefit; encourage Ministries, Departments and Agencies to improve efficiency and effectiveness of service provision.

CRC Recommendation: Ensure transparent and participatory budgeting through public dialogue, especially with children, and proper accountability of public officials, and intensify efforts to combat corruption and strengthen institutional capacities to effectively detect, investigate and prosecute corruption.

> **Response:** work with professionals across social welfare, health, education and justice sectors to enable the translation of the law into the actual delivery of services that support identification of children at risk; participation of children-led organizations, local school, CDCs and dormitories to formal and informal policy mechanisms in GFAs.

CRC Recommendation: Undertake a study to identify the root causes of inequality and implement effective redistributive and progressive taxation policies that could direct resources towards children in the most vulnerable situations.

> **Response:** introducing social protection cash transfer measures for children to better protect them from dzud and use existing CMP with the aim of testing system performance during shocks, and reaching herder children in a timely manner; strenghening EMIS to enhance the monitoring of children from vulnerable groups, both in and outside the school system.

CRC Recommendation: Establish and implement regulations to ensure that the business sector complies with international and national human rights, labour, environmental and other standards, particularly with regard to children's rights.

> **Response:** promote the Children Rights Business Principles within corporate networks, to leverage corporate leadership, resources and expertise to support the provision of basic social services; targeting training towards women business owners and entrepreneurs on child-friendly business operation; engaging businesses in reducing the availability of child sexual abuse materials

CRC Recommendation: Adopt concrete measures to strengthen compliance with its legislation prohibiting such discrimination and to eliminate stereotypes and attitudes leading to discrimination.

Response: support the development of inclusive education, particularly for students with disabilities; strengthening legal frameworks, enhancing capacity on and around inclusive education, creating behavioural change towards CWDs, and increasing learning opportunities for CWDs and children from ethnic minorities

CRC Recommendation: Immediately adopt child-specific measures to mitigate the impact of air pollution on children, including as a minimum the inclusion of HEPA filters in prenatal care packages, declare access to clean water, sanitation, and air as policy priorities, build local technical knowledge and expertise.

Response: developing clean and efficient 'CHIPS' to be distributed among ger households to replace coal stoves; installation of high-end air quality monitoring stations in GFA aimags (UB and Bayankhongor); installation of Smart Water Kiosks in GFAs to broaden 24/7 access to clean quality drinking water; use of innovative indoor WASH facilities in schools using discarded shipping containers; Community WSPs linking water safety issues and adaptation to changing climate risks.

Annex 3 – Case studies

Case Study 1: Mapping geospatial distribution of deprivation and UNICEF's GTA

Case study 2: Review of UNICEF country programme strategy and impact on local pro-child planning and budgeting

Case Study 1: Mapping geospatial distribution of deprivation and UNICEF's GTA

This case study explores the extent to which the GTA in each of UNICEF Mongolia's thematic areas addresses the unique characteristics and problems faced by children in the selected GFAs during the last two CPs. Geospatial and multivariate analysis of survey data was carried out to map deprivation patterns and hotspots in Mongolia, to assess the appropriateness of the UNICEF GTA methods for tackling child and adolescent poverty, and to recommend future analytic approaches to geo-targeting.

1. UNICEF GTA

The two central functions of geo-targeting for UNICEF are, firstly, the selection of aimags, districts for focussed engagement, intervention and action for vulnerable children. The second is the micro-targeting of vulnerable children and households or marginalised groups within the chosen focus areas.

In terms of selection of aimags and districts, for the 2012-2016 CP, UNICEF's GFAs were chosen to be the Nalaikh district and Khuvsgul province. Three different aimags and a different province were chosen for the CP 2017-2021 (see Figure 11). Finally, Umnugovi province was added for specific interventions starting from 2020. Although there were official criteria used to determine the target areas, many considerations, competing data sources, and political processes were accounted for in the decision. As a result, UNICEF has not necessarily been working in the areas where the most deprived children are, and there may be hotspots left behind. Employing updated geospatial techniques, we explored how the decision-making process could have been informed by creating poverty maps based on 2016 data.
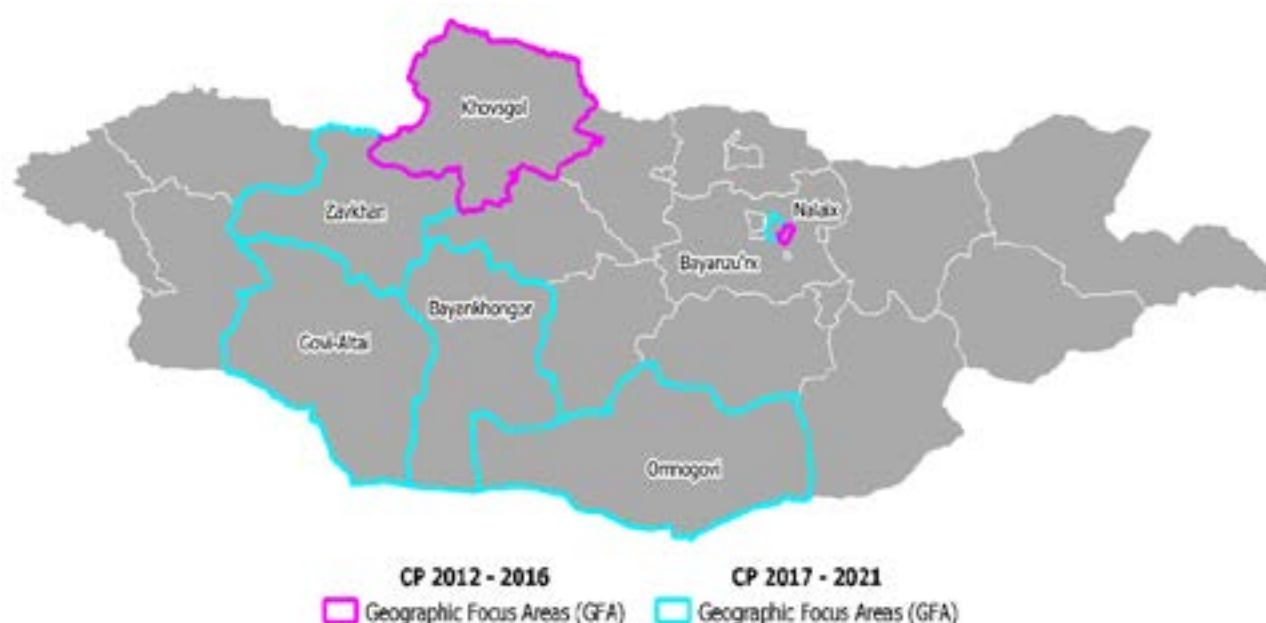
Figure 16. Overview of the targeted aimags and districts in successive country programmes

In terms of micro-targeting within selected GTAs, we compared and reviewed the various approaches that have been taken and the data they are based on, comparing approaches with previously evaluated methods for GTA taken in China and Tajikistan.

2. Analysis and findings

A statistical analysis using Bayesian geospatial modelling techniques[167] was conducted to estimate and map poverty-related variables in the context of the evaluation of UNICEF's GTA in Mongolia. It produced a poverty map for 2016 to assess the deprivation situation that UNICEF was confronted with at the start of the second CP and compared this with the geo-targeting approach that they took. The resulting map is used as a basis for reflection on alternative approaches to targeting and key trade-offs and assessment of the relative merits of alternative approaches to targeting as informed by available data and updated data analysis techniques.

Of note is that deprivation is high in the selected GFAs, particularly in Zavkhan, however Western aimags with their ethnic minority populations remain those in greatest need for the most part. High deprivation is also found elsewhere, with levels not here shown for the UB districts with the largest populations. Further analysis of district data could complement this analysis.

Using an established Mongolian poverty measurement approach, a Multiple Overlapping Deprivation Analysis (MODA) based on child-appropriate dimensions of poverty from the nationally representative (HSES) carried out in 2016 was used to create a multidimensional poverty estimate for each aimag based on a sample of 58,512 surveyed individuals (see Table 1). These data represent the overlap in deprivation across one or more dimensions for each child, ranging from a minimum of zero deprivation dimensions (not at all deprived) to a maximum of seven (deprived across all dimensions). This was calculated for new-borns, children and adolescents separately (see Figure 12).

Figure 17. Multiple Overlapping Deprivation Analysis (MODA) framework showing dimensions of poverty for new-borns, children and adolescents

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[167] *We employed a Bayesian geospatial modelling approach using the R-INLA package within R software. This is particularly useful in situations where survey data were collected and representative at coarser spatial resolutions than the predicted estimates. We included geospatial covariates such as population, elevation, precipitation and temperature, as well as socio-economic indicators such as wealth, accessibility to the nearest urban centre, recent health status, education, etc. to robustly predict child deprivation amongst infants 0 – 23 months and 24 – 59 months. Maps depicting these estimates at the aimag level were produced across the country, in addition to associated model uncertainty in the form of 95% credible interval maps.*

Figure 18. Poverty map for new-borns, child and adolescents based on 2016 MODA deprivation scores [168]

New-born[168]
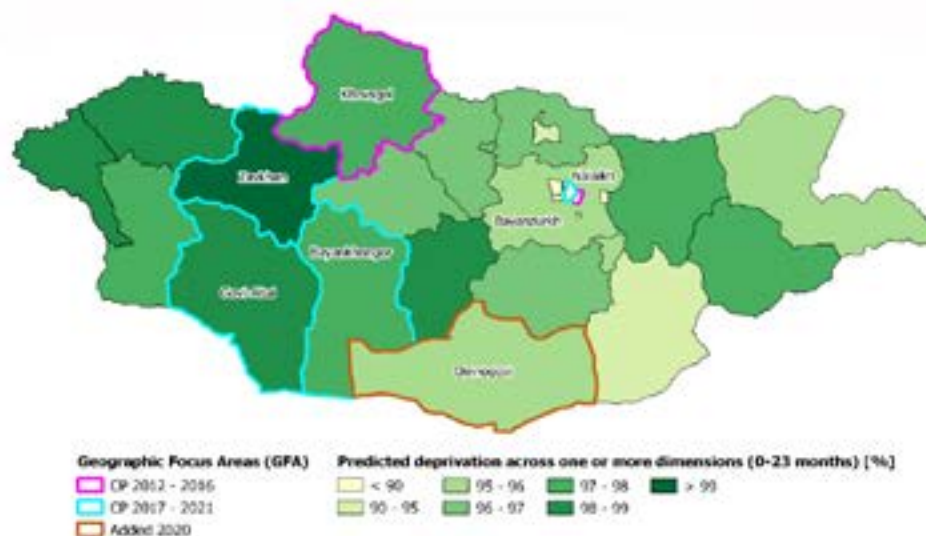
Child
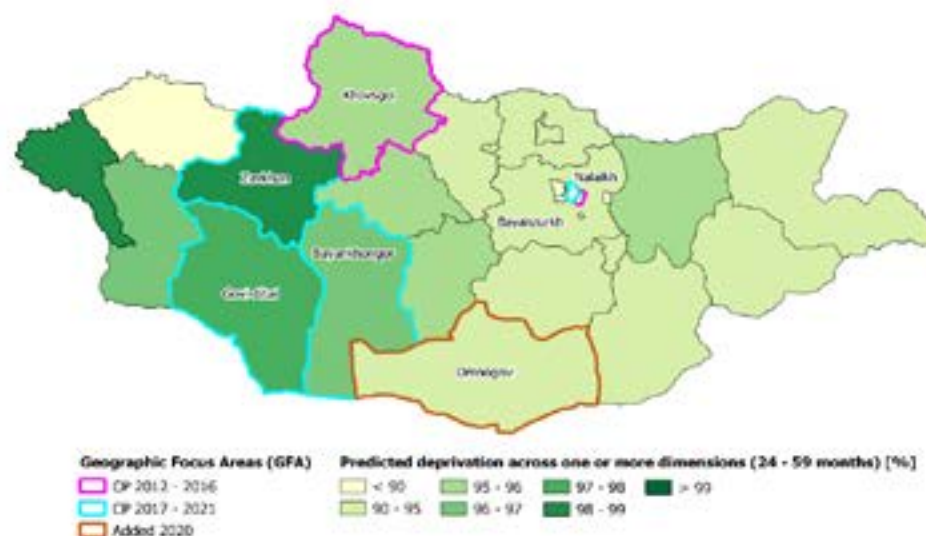
Adolescent

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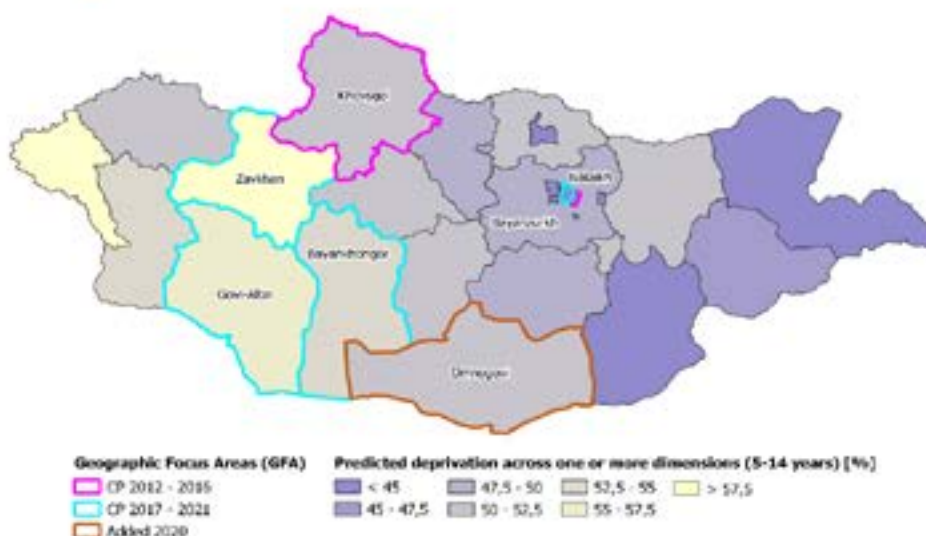
[168] *Source: de Neubourg, C., Karpati,J.,Boon, L., Yang, M. (2016) Study of child poverty in Mongolia using Multiple Overlapping Deprivation Analysis (MODA), Economic Policy Research Institute, UNICEF*

The MODA approach is well established in Mongolia, based on indicators, dimensions, and deprivation thresholds, which are selected using the Convention on the Rights of the Child as a main framework (United Nations, 1989). Further decisions on age groups, dimensions, indicators, and thresholds were originally guided by discourse with UNICEF sector specialists and national and international partners including the Mongolian National Statistics Office (NSO). The final selection of dimensions, indicators and thresholds for Mongolia reflects international standards of well-being, and data availability across questionnaires.

Modelled Aimag Level Deprivation

Modelled results, available at aimag level, show that three of the five most deprived aimags for children aged 24- 59 months were selected at the start of the 2nd CP (see maps in Figure 13). An analysis of child and infant mortality trends over the same time period showed that the recently added target aimag of Umnugovi also experienced recent increases in mortality, even though, at the time of the 2nd CP, the area was not among the very poorest.

In terms of targeting the greatest numbers to show overall effect in child mortality for example, the selected aimags are not representative. Except for Khuvsgul in the previous CP, and Bayanzurkh district in the current CP, the GFAs have relatively small populations. Within the top 6 most deprived aimags, the current GFA focuses on 2-3 depending on the age of the child. The maps also show that Khuvsgul remains an aimag with significant problems for children.

Figure 20. Aimag level deprivation levels for new-borns, children and adolescents 2016

Predicted deprivation across one or more dimensions (24 - 59 months)

Predicted deprivation across one or more dimensions (5 - 14 years)
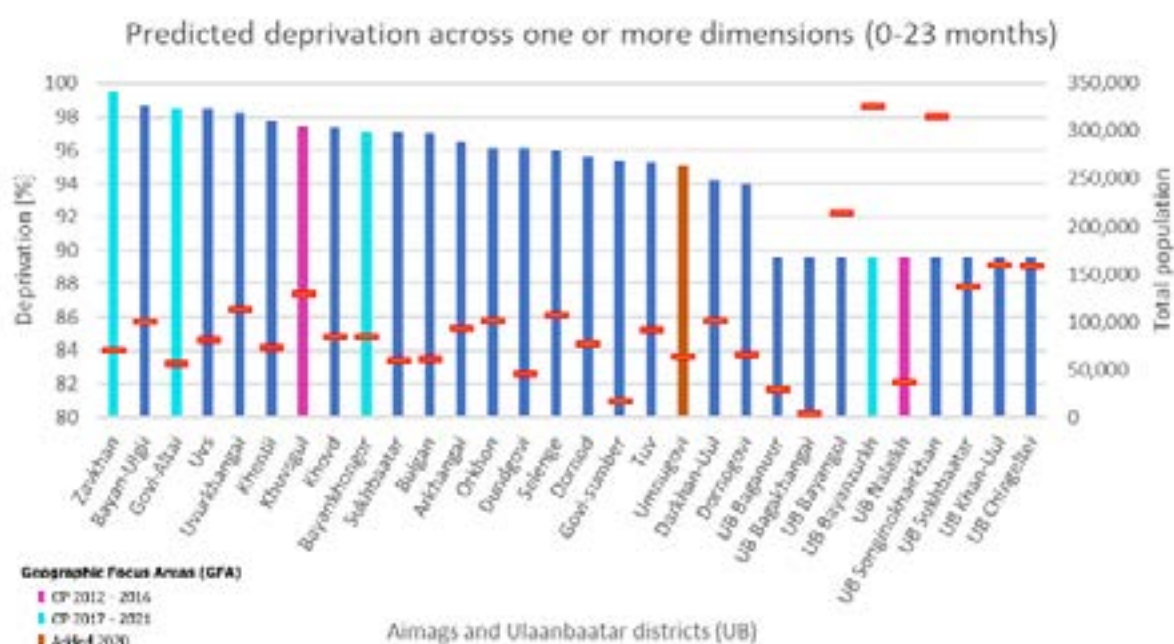
3. Alternative targeting methodologies and trade-offs

UNICEF methodologies in region

China UNICEF's GTA approach (2015-2017)[169]

The UNICEF Health, Nutrition, and WASH Section employed a targeting approach related to the scale up of their Mother and Child Survival Strategy (MCSS) in China. The targeted approach focused on rolling-out the MCSS across China's counties equitably; it was soon followed by the ECD strategy (including social policy, child protection, and education components) and later by the adolescent health strategy. Upstream programming activities related to poverty reduction programmes, economic aspects of social policy programming; and other non-programmatic activities like policy dialogue, advocacy, and data collection and studies within child protection were also not included in the targeting approach; for health, nutrition and WASH they were included.

The targeting approach was introduced to consolidate programming for greater impact. Until 2013, health programmes (e.g. EPI, nutrition, WASH, HIV, MCH, child injury) were being implemented in different provinces and counties. The approach was considered not strategic, too siloed and fragmented as programmes were not working synergistically and intersectorally. For example, the immunisation programme was in some counties and material survival in others, eliminating any multiplier effect from multisector programming. The same was true for the education programme. Each programme had their own ministerial and counterpart relationships and ways of working. While it was not possible to change the counterpart dynamics UNICEF China believed it should be possible to improve the impact of its programming using a GTA approach.

The health programme team understood that to reduce mortality they needed to work holistically on all issues in same place and include all health interventions in the broadest sense. It was also clear that while they were focused on provinces with high under 5 mortality rates, some of those provinces did not make up the bulk of the child mortality in absolute numbers across the country. To make a sizable impact on the number of child deaths (and subsequently on the under 5 mortality rates), it was most logical to focus on a limited number of provinces that contributed the highest proportion of child death as shown in Figure 15 below[170]. In China however it was not politically feasible for the Maternal and Child Survival Strategy to favour some provinces and counties over others.
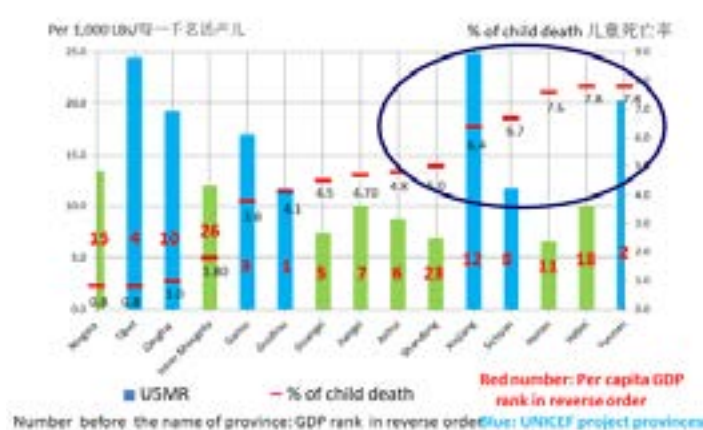
Figure 21. GTA approach to scaling up China's Maternal and Child

UNICEF's aim was to ensure equity in coverage across the country for the MCSS in line with government requests. As comprehensive programming was not feasible due to capacity and cost constraints, they devised a criteria-based approach to targeting that would sequentially cover all counties in China.

From 2011-2015 UNICEF prepared the MCSS and the targeting approach they would take. In 2013 it was decided that UNICEF would shift emphasis to other GFAs; this began the process of sequencing in additional provinces for the 2016-2020 period, while maintaining a

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[169] *Information on China's GTA for the MCSS was kindly provided by Dr Robert Schepbier, former head of the Health, Nutrition and WASH section in China from 2011-2018.*

[170] *Figure 15 shows China's provinces listed by U5 mortality rates. The red line is the proportion of kids that die in relation to absolute mortality. The blue bars are provinces where UNICEF had previously worked in the health domain. The selection of additional GFAs that are more populous indicates UNICEF's commitment to reducing absolute numbers of child deaths; while contributing to reduction in overall U5Mortality rates.*

presence and support in the provinces where they had previously worked. As indicated in Figure 15 above, by 2015-2016, plans for expansion (beyond their pre-existing GFAs) had been consolidated for sequential scale up to all counties in China. The targeted roll-out of the MCSS, was soon followed by the ECD strategy and then adolescent health, each building on the experience of the MCSS.

Specifically, the China health programmes targeting approach took the following steps:

1. Staff listed all programmes in all counties to get overview of where UNICEF was currently working.

2a. Conducted an analysis exercise by province on the current situation for children based on measurable criteria:

- *Provincial share of number of under five deaths nationally*
- *Economic development (wealth of province)*
- *Proportion of counties in province that had not achieved SDG3*

Provincial willingness to participate (political commitment) was added as a softer criterion that would help make GTA decisions in similar situations.

UNICEF categorised the provinces based on their resources: provinces without financial resources; provinces with sufficient resources, and provinces in-between. UNICEF determined it would expand MCSS in all provinces and counties, but UNICEF resources would be used for only for the poorest; and for those in-between, UNICEF could provide only a partial contribution.

2b. In each province, starting with the provinces that had a strong commitment to participate in the MCCS, these analyses were then complemented by a similar analysis done at county level to identify within each province the areas of primary focus.

3. In consultation with staff, added an **efficiency criterion** (not in selection of counties but in the sequencing strategy). Centres of Excellence for training in the MCCS were created, which would attract participants from different geographic locations to be trained more efficiently in adjacent clusters. Application of the efficiency criteria to the other hard criteria allowed the team to select clusters of provinces and counties that were adjacent (i.e. grouping best clusters to respond to criteria – not science an art).

Summary: UNICEF's approach in China was guided by an equity and public health impact focus. They assumed that the provinces and counties with highest number of deaths were by proxy, areas with highest deprivation. Based on these assumptions, a criteria-based analysis guided by UNICEF's aim to have greater impact on child mortality as a moral and public health imperative (death averted) plus efficiency concerns determined how they would scale their health programme strategies. They remained in the provinces and counties where they had previously worked (blue bars in graph), and then established a step-wise process to cover the whole country with their interventions sequentially over time. (See circled provinces in Figure 15 as those with greatest number of child deaths.)

UNICEF Tajikistan Priority Districts approach[171]

UNICEF Tajikistan decided "in an attempt to use the most effective and efficient approaches to CP implementation" for "more tangible and rapid progress toward programme goals", UNICEF decided to focus its work and resources during the programme cycle 2010-2015 on a selected number of districts, which they refer to as "Priority Districts" (PDs).

Given Tajikistan's decentralised approach, UNICEF selected 12 out of 68 districts in the country to be the focus of its support. The selection was done in two phases (2010 and 2011) and, according to a evaluation of the relevance, effectiveness, efficiency and impact of the approach, the targetting was based on the level of deprivation in relation to child rights and some practical considerations regarding the feasibility of a UNICEF partnership with the respective districts. Except Dushanbe, all regions of the country included PDs. The evaluation reports that the "programmatic documents and other available data sources do not provide a clear

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[171] Gheorghe C. *Evaluation of UNICEF Tajikistan's work in priority districts during the 2010-2015 Country Programme,* Final Evaluation Report, January 2016

statement of the intended aggregate number of children and women, as final beneficiaries of the geographical targeting of the programme in the 12 PDs".

As in Mongolia, the GTA in Tajikistan sought to:

- increase access of children and women in disadvantaged districts to diversified and quality basic services based on decentralised service delivery;
- enhance local capacities, in particular of local governments and its key partners, for children's rights mainstreaming in local data collection, analysis, planning and budgeting;
- feed national level policy advocacy, dialogue and reforms through evidence, feedback and innovative practices tested at local level.

Alternative approaches to targeting

Proxy means testing as promoted by International Finance Institutions

In Mongolia, IFIs have promoted and supported the Government of Mongolia to use proxy means testing to identify the poorest households to provide them with welfare benefits such as Child Money programme and food stamps.

The PMT approach is based on national household surveys, relying on self-reported household assets and other indicators—or proxies—to estimate household wealth. These include easy to measure indicators such as demographic characteristics (such as age of household members and size of household), human capital characteristics (such as education of household head and enrolment of children in school), physical housing characteristics (such as type of roof or floor), durable goods (such as refrigerators, televisions or cars) and productive assets (such as land or animals). Based on this information, regression analysis is done to quantify household wealth as a proxy for welfare. As et of proxies are given a weight which is then used to calculate a score for each household. A cut-off point is established and households that fall below the threshold are eligible for social protection programmes. The methodology and its proponents argue that "while individual proxies may be weakly correlated with welfare, multiple proxies show stronger correlations".

An evaluation of PMT in four countries found that the regression analysis is built on many errors, especially when the PMT targets a very low levels of the population (low coverage). They found that "exclusion and inclusion errors vary between 44% and 55% when 20% of the population is covered and between 57% and 71% when 10% is covered". They explain that part of the reason for the poor correlation between proxy measures and household consumption is that the data used comes from only one point in time and thus does not represent the reality for most households. In addition, sampling errors, assumptions, and the quality of the survey (and verification by enumerators of assets) all contribute further to inaccurate result. Other proxies such as education level and person responding to the survey further complicate the results. Finally, and very relevant for a country like Mongolia, PMT does not factor in recent crisis or shocks such as Zud (or even minor ones within a family) that can make a family fall rapidly into poverty without suffering a related change household characteristics and assets used as proxies making them ineligible for social protection benefits.

The study found that the PMT is "inherently inaccurate, especially at low levels of coverage, and it relatively arbitrarily selects beneficiaries. It therefore functions more like a simple rationing mechanism that selects some poor and non-poor but excludes large numbers of eligible poor from receiving benefits and support".[172]

In Mongolia, the PMT is also criticised for similar inaccuracies. It should be noted however that the Child Money programme has none-the-less been credited with lifting many out of poverty and contributing to the relative wealth of Mongolia in recent years. This dichotomy poses questions for how the GoM, and its international institutional donors should resolve such fundamental questions as how to find and reach the most at risk. What is clear is that the based on results of the evaluation, the Proxy Means Test measurement (and administrative data upon which some of the data is based), is sometimes not collected systematically, or objectively, and has missed some of the poorest families within targeted aimags and districts. Experience from neighbouring

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[172] *Australian Aid. Targeting the Poorest: An assessment of the proxy means test methodology. (September 2011) www.ausaid.gov.au*

countries shows that such targeting might neglect needy populations and a Universalist approach to poverty alleviation emerges as a viable solution.

Zero dose kids have multiple deprivation

UNICEF's Equity Reference Group for Immunisation is exploring the use of Zero Dose children as a proxy for identifying those that are most deprived in a community. This proxy offers an alternative targeting approach to ensuring programmes are focused on those with greatest need.

Zero dose children live in the most marginalized communities. Two thirds live below the poverty line. They are likely to live in communities with no regular health services. As routine immunization is a first step towards comprehensive primary healthcare, zero dose children risk poor health outcomes. For example, zero dose children live in communities most likely to generate outbreaks and are least equipped to respond. Zero dose children are most likely to suffer multiple deprivations,

EPI data is often the most accurate in countries given high rates of immunization and oversight of the programme by ministries of health with the support of UNICEF and GAVI. By identifying zero dose children, by default, the most deprived families are also identified and can be targeted for intervention. Zero dose children become a proxy for the most deprived. The GTA can use zero dose children in their GFAs, for example, to support local partners to better target the families and children in greatest need. Trade-offs and opportunities

UNICEF Mongolia's GTA was similar to how targeting was done by UNICEF in China and Tajikistan with some notable differences. While both considered the multiple deprivation levels of children in their selection of GFAs, China took a strategic decision for an equity-based approach which informed their targeting and sequencing of new focus areas over time. In Mongolia, targeting differed by actor. The GoM and the IFIs use PMT to identify families that are most deprived to distribute welfare subsidies. UNICEF and others balance data-driven choice of GFA using deprivation measures (at macro level, coupled with survey data by thematic area) against more practical concerns around feasibility and other factors such as political commitment and the possibility to demonstrate effectiveness of intervention strategies. Tajikistan has also balanced interests in their selection of GFAs. UNICEF is currently discussing alternative approaches such as using zero-dose immunisation as a proxy for multiple deprivation. This approach however will likely not be effective given the very high immunisation rates in the country.

As shown in the model presented in the case study, overcoming data limitations is possible through high resolution modelling of deprivation/poverty at aimag, and if data is available, at soum level. Decision however are needed as to what indicator drive such models, and once complete, the principles by which GFA selection will be made.

4. Observations and recommendations

- *The two central functions of geo-targeting for UNICEF - selecting GFAs and thematic or micro-targeting, should be re-conceptualised and a strategy built for each, supported by agreed reliable databases and a nuanced analysis with structured discussion of trade-offs.*
- Selection of aimags should be supported by analysis of nationally accepted definitions of deprivation, such as MODA, using geospatial models of the highest resolution possible- at least at aimag level as has been demonstrated in this case study- but with available data it may also be possible to estimate a soum level poverty map. Mongolia has substantial and high-quality national databases including

census, surveys and HMIS. More work could be done to inform UNICEF on spatial deprivation for future CPs, and such work could be shared and validated by other agencies too. Selection of districts needs further work based on estimation of deprivation levels within UB.

- For selection of aimags or districts, GFAs should be selected based on impact to be achieved starting with the highest deprivation areas or where mortality is highest. For micro-targeting within GFAs, a universalist approach should be considered to provide engagement across all interventions. To ensure all children receive the basic services they need, especially the most deprived, an equity approach to delivery of a standardised package of interventions/programmes is needed – irrespective of the ability to pay. This universalist rationale has the exception of interventions that need different approaches based on climate and geography e.g. WASH. Itinerant populations need special attention. After universal roll out, an expansion plan can be carried out for additional populations in phases according to local area conditions.

- For those interventions that still require micro-targeting, the range of data options that have been used, such as PMT and administrative data, should be the subject of a scoping study to assess quality of data for poverty measurement at local level. Creating appropriate poverty dimension measures can be based on MODA concepts, or an elaboration which is relevant for urban/ rural areas specificities. Existing administrative data should be analysed to produce very local maps of poverty hotspots which could be validated/ ground-truthed in one or two areas, then used as a tool across the country.

Case study 2: Review of UNICEF country programme strategy and impact on local pro-child planning and budgeting

1. Overview

UNICEF engagement with both the LDF and social sector budgeting processes was explored. The LDF allows much more local flexibility for budget allocations in favour of vulnerable children, and there is evidence (but mixed) of positive impact on LDF allocations for children, but it was not possible to explore this rigorously. The LDF regulatory framework also poses constraints to local pro-child spending, and its use to (co-)fund CFC workplans. Local social sector budgeting is much more constrained by central policy and norms, such that even improved local capacities could not alone greatly impact budget allocations for children. However, successes were registered in changes to the policy framework in several areas. Opportunities were identified to enhance impact on pro-child spending through more concerted advocacy for regulatory changes, more attention to capital budgeting, exploring ways to use the performance contract framework for better pro-child service delivery, for greater engagement with elected khurals, and for leveraging partnerships with other agencies and projects.

2. Scope of case study

As This Case Study explores UNICEF CP activities to impact local government planning and budgeting patterns and to direct more and better targeted spending in favour of children, and especially the more vulnerable. In doing, the case study:

Table 7. Total local government funding and eligible uses (2017)

Revenue source	MNT	Eligible Use
Own revenues	1,165,337,456,713	
Deficit transfers	146,162,127,000	
Special purpose transfers	1,066,608,349,120	Delegated social services (recurrent)

- *focusses on the financing of and spending from local government budgets only over which local authorities have some (but limited) decision powers; it does not address local 'deconcentrated' spending from the central government (state) budget, such as social protection / welfare transfers to individuals or households (notably the CMP) or capital spending (e.g. on schools and kindergartens) over which local authorities have no decision powers – and around which it is not always clear how far UNICEF attempted to engage;*
- *separates CP activities a) to engage with (minor capital) planning and budgeting from the Local Development Fund (LDF), from those b) to engage with (recurrent) planning and budgeting in the social sectors[173] funded by special purpose transfers, given the very different legal framework and government arrangements associated with each, and the very different degrees of local authority discretion allowed for each;*
- summarises for the LDF and the social sectors, and explores issues of **relevance and coherence, effectiveness and efficiency, and impact and sustainability** of UNICEF engagement strategies, with concluding recommendations in each case.
- lastly – considering foregoing assessments- explores issues around the financing of the **Child Friendly Community Workplans**, and sustainability issues.

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[173]   *Namely, Ministry of Education, Culture and Sports, Ministry of Labor and Social Protection and Ministry of Health.*

3. Introduction

UNICEF strategy as set out in the 2017-10 CP Strategy note suggests that the IBL 2011 brought in a substantial degree of decentralisation of responsibilities and decisions to LGAs, and that the focus should be primarily on building awareness and capacities of LGA officials around pro-child planning, budgeting and service delivery issues. While the latter is certainly needed, the Strategy note did not seem to recognize that in practice there is still very little decentralisation of responsibilities or budget decision power to local authorities.

Very limited decentralisation in practice

- Recurrent budgets for pro-child service delivery (salaries, supplies, etc.) are almost entirely funded from special purpose transfers from which spending is highly constrained by central budget norms issued by respective ministries and governed by performance contracts. Even budgets for the small part of local pro-child spending financed from local revenues ('base budgets') is still reviewed and adjusted by MoF.
- Capital budget spending decisions (e.g. for kindergartens, schools, etc. and around which geographic equity concerns have been expressed174) are almost entirely on the state budget and decided by sector ministries.
- Only the LDF allows genuine local decision-making flexibility at the local level for minor capital investments (see also further below).

In fairness, subsequent UNICEF workplans and activities did recognise[175] the need for engagement with central ministries, especially around sector ministry guidelines and budget norms. But – as will be seen- where there are such constraints on budgeting flexibility this suggests that local officials may not always have been able to put to good use the enhanced awareness and capacities imparted to them. Similarly, unless these constraints are addressed and greater local budgeting flexibility introduced, especially on the recurrent budget, the CFC workplan strategy may prove to be too ambitious.

The strategy also appears at times to consider "local government authorities (LGAs)" as unitary bodies, with the governors as leading authorities over local plans and budgets. However, local authorities in Mongolia comprise two legally separate entities[176]: the Governor and the executive arm (itself divided between the departments under the governor's direct control, and the local sector offices who are primarily accountable to the central ministries, esp. in regard to budgeting), and the elected khural which – in principle- is supposed to review and approve (or question)[177] governor's budget proposals, then monitor spending and supervise the management of facilities such as kindergartens.[178] It is not clear how far the implications of this dual setup were recognised in CP activities.

4. Local Development Fund Budgeting

The LDF is the most significant budget resource – and almost the only capital investment resource- over which aimags and soums enjoy any local discretion and over which central government does not make adjustments to locally-approved priorities. While there is little scope for citizen participation in social sector budgets, participation in LDF planning is mandatory. For these reasons, UNICEF CP activities – especially around CFC spending (see section C. below) – have necessarily placed great reliance on LDF budgets.

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[174] E.g. see 'Pre-Primary Education in Mongolia', World Bank, 2017

[175] UNICEF staff respondents also certainly recognized the importance of central regulatory framework constraints on local flexibility.

[176] LATUG 2006

[177] Khurals certainly face capacity problems, party-political dysfunctionalities and other institutional constraints, but they do play a key statutory role, and they do make changes to budget proposals. E.g. according to a KII from Nalaikh "… the khural approves about 80% of the LDF budget proposals" – suggesting that it may replace or change about 20%. Similar comments were made by some other KIIs.

[178] LATUG 2006 and IBL 2011

4.1. Context: the LDF mechanism

How it is financed. The LDF is a transfer mechanism to finance local investment spending, through 2 channels: a) the General Local Development Fund (GLDF), allocated by formula, and also more recently b) specific mineral-extraction-related revenues shared-back with areas of revenue origin (a fraction of all local areas). The overall funding of the national LDF transfer mechanism, the allocation of these funds between local authorities (at the aimag/capital city and soum/district levels), and the eligibility criteria for project funding, is stipulated in the IBL – with several key changes to LDF provisions (under IBL Arts. 59 and 60) being introduced since 2011, and notably: (a) frequent changes to the percentages of national revenues to be allotted to both components of the LDF; (b) in 2017 (after the national budget crisis), a switch from the initial "at least 60%" share of GLDF allocations to be allocated to the soum/district level, to an "at least 30%" share – this was also coupled with a "netting out" of certain base spending from the gross aimag allocation, further reducing LDF funds available for local investment at both levels by some 10%-20%.

At the same time, the decline in national mining revenues from 2014 (key national LDF funding source) led to a sharp decline in LDF funding, which only began to recover from 2019.

Figure 24. LDF trends in overall aimag and soum allocations
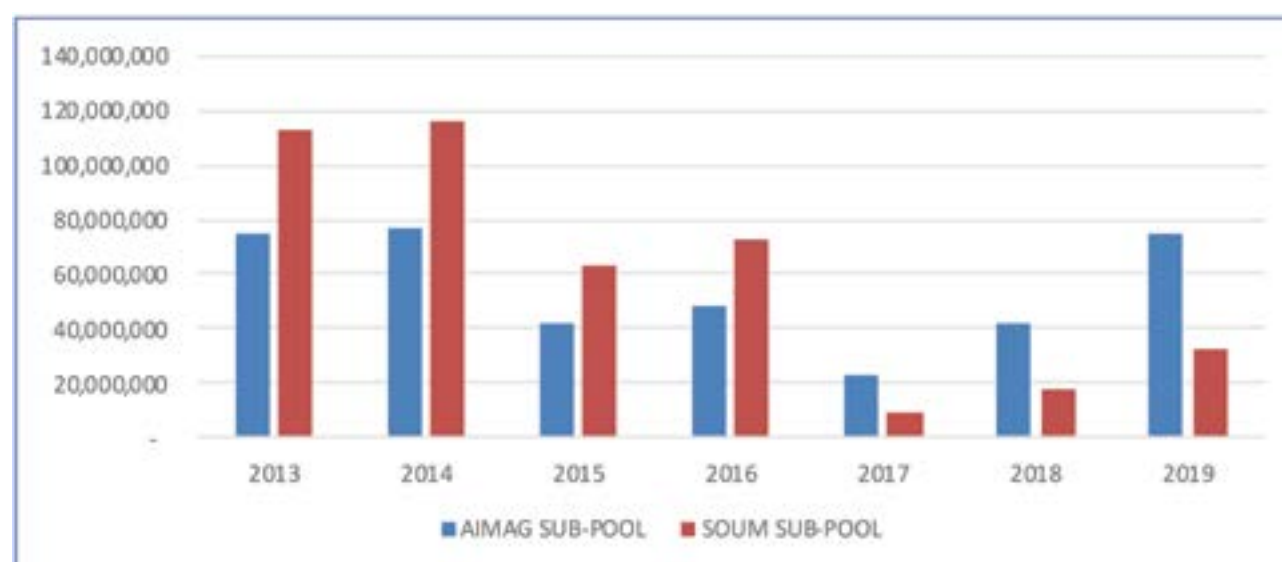
This decline, and the other changes noted, have all posed major challenges to local authorities) and – for a while at least – reportedly undermined local participation in the planning process. Figure 26. Child protection SPTs of 4 GTAs, by thous.MNTFigure 27. LDF MNT per capita allocations across 330 soums, 2018
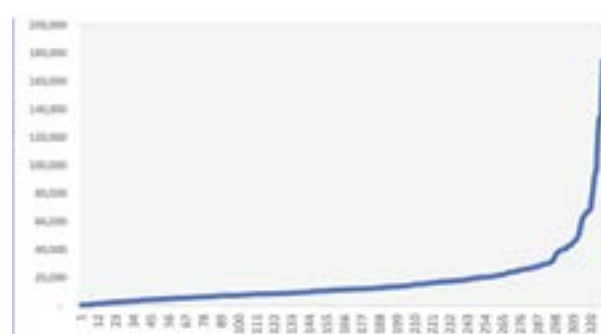
Figure 25. LDF MNT per capita allocations across 330 soums, 2018

At the same time, there is evidence of extreme disparity in per capita allocation of LDF funds between soums. This is in part due to the sharing of certain revenues by origin, obviously favouring mining areas, but also due to problems in formula-based allocation of the GLDF by aimags to soums. This in turn greatly affects **the geographic equity of pro-child spending capacities** between localities.

How LDF projects are planned and approved. The annual planning cycle is spelt out in broad terms in the IBL and more explicitly in the 2018 LDF Regulation.[179]

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[179] *MoF LDF Regulation - Order No. 228, 2018*

4 main steps in the annual LDF project planning process

1. *By end 1st Quarter: Soum / district governors canvas project proposals from households*
2. *2nd Quarter: These proposals are debated and prioritized by vote at meetings led by the bagh / khoroo governor, and submitted to the soum / district governor*
3. *2nd / 3rd Quarter: The incoming proposals are, in turn, screened and prioritised by an LDF taskforce (comprising a few local officials plus often the bagh/khoroo governors) established by the soum / district governor, from where they are submitted either to the soum khural for final review and approval (from the soum LDF budget) - or up to the aimag / MUB governor, if to be funded from the latter LDF budget, in which case they are reviewed and prioritised by the aimag / MUB governors' LDF committee.*
4. *November/December: Separately, at their annual budget approval meetings, the aimag and the soum khurals review, and may amend, and then approve those projects to be funded on their respective LDF budgets.*

Two key features are worth noting. Firstly, all proposals to be funded must emanate from citizen proposals – the local executive is not allowed to submit its own proposals (although the process of course does allow for some manipulation). Secondly, there is no limit to proposals which can be submitted from Steps 1 and 2. In practice, the number and cost of proposals submitted to soum and aimag authorities annually for funding may be 10-50 x more than can be funded from the LDF – so the prioritisation process (whereby 90%-98% of proposals are discarded) is critical. In this regard, the IBL and the LDF Regulation stipulate that priorities must reflect both citizen's votes and local policy priorities. In practice these two criteria can be hard to reconcile and are interpreted differently in different localities – but very often the citizen vote criterion is the overriding factor behind priorities selected (e.g. this is illustrated from Nalaikh LDF planning reports ranking project proposals sent for approval to the khural by # citizen votes only).

4.2. UNICEF strategy: relevance and coherence

No explicit prior analysis of the LDF and problems inherent in the planning and financing mechanism was made available other than a general view that priorities are made and approved without due regard for the needs of children. It should be said, however, that evidence suggests that pro-children's projects have been routinely financed by the LDF since the start of the mechanism by all aimags and soums. Table 8 shows results of a screening by MoF[180] of LDF projects deemed to be pro-child, suggesting a not insignificant overall share (from 4%-12%) of LDF allocated for children, with numbers of pro-child projects fairly steady over the period,[181] but a declining trend in share of pro-child budget allocations.[182]

Table 8. Pro-child LDF allocation by all aimags

	Total LDF allocation (MNT)	Projects for children - all aimags		% Total LDF allocation
		# Projects	Budget (MNT)	
2016	120,316,250,906	135	14,014,442,947	12%
2017	45,861,464,988	76	4,553,388,763	10%
2018	71,388,366,300	120	5,733,874,890	7%
2019	128,696,266,792	123	5,053,636,634	4%

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[180] *MoF budget report on LDF allocations for children 2016-19. It was not possible to obtain the filter criteria used by MoF nor to check how systematically this was applied, but projects listed relate to kindergartens, school improvements, dormitory improvements, parks and playgrounds, etc. Projects indirectly affecting children, such as water supplies, lighting, etc., were not included in the lists.*

[181] *This suggests a trend to smaller pro-child projects. It should be noted that 2017 was an exceptional year when LDF budgets were dramatically reduced after the national budget crisis, perhaps explaining the sharp drop in numbers, although interestingly not of the value, of pro-child projects that year.*

[182] *Which may in part be due to the fact that from 2018 aimags have had to allocate a part of their LDF allocations to certain local 'base expenditures' so have had less 'fiscal space' for spending at their own discretion.*

The question then is how far UNICEF strategy has improved both the levels and the targeting of LDF allocations for children. In practice, it appears that UNICEF's main strategic focus has been:

- in some areas, reportedly, through engagement with **Steps 1 and 2** whereby brochures and sensitisation material were distributed to households to encourage a greater focus on pro-child proposals at the start of the cycle (KII UNICEF, Nalaikh and Bayanzurkh);_

- through general advocacy and training of a range of local officials around the importance of children's' priorities (hence indirectly for **Step 3**), and notably by pressing for a minimum level of 10% of the LDF budget be assigned to child-related projects, and to priorities emerging from CFC planning; this was also reportedly backed up by advocacy to governors from Cabinet Secretariat (KII UNICEF);

- and indirectly through the incentives inherent in the "co-funded" CFC workplans – whereby UNICEF has injected "matching funds" equivalent to a substantial fraction of the aimag LDF budgets – see section on CFCs below.

Conversely, there appears not to have been any more targeted support to the key actors in the LDF planning cycle, namely: bagh/khoroo governors responsible for direct interaction with citizens and for convening the bagh/khoroo meetings where priorities are initially voted (Step 2); the soum/district governors' LDF committees charged with screening and prioritising all proposals (and for discarding 90-98% of them) according to the official criteria (Step 3); and elected khurals who review, possibly amend, and approve proposals at the end year budget meeting.   It is also not clear how far LDF planning support was provided across all soums (themselves in charge of a substantial share of the LDF), rather than mainly (or only) to aimag officials. There was also no reported engagement with MoF in regard to better clarifying the LDF regulatory framework (e.g. to encourage a broader view of 'LDF investments' beyond hard infrastructure), nor around the current geographic equity issues in LDF allocations, especially at soum level.

4.3. UNICEF strategy: effectiveness, impact and sustainability

Respondents generally indicated appreciation of support and greater awareness of children's issues when planning for the LDF. Several GFA aimags have also adopted resolutions committing to allocating $\geq$ 10% for children which are in some cases reportedly still in effect even after the end of UNICEF support, as in Nalaikh. There were also reports of allocation of other budget resources (esp. reserve funds) to pro-child LDF projects. However, the tangible measures of the effectiveness of UNICEF strategy are whether:

a) *at Step 1 there are increased numbers of pro-child projects being proposed by citizens; and/or*

b) *at Steps 2 increased numbers of pro-child projects are being given higher priority by baghs/khoroos as submission to the soum/district governor and/or*

c) *at Step 3 there are increased numbers (values) of pro-child projects being given higher priority for submission to the khural; and/or*

d) *at Step 4, whether the khurals approve greater numbers (values) of pro-child projects for LDF funding.*

The data was simply not available to properly assess a), b) or c). However, it is possible to make some assessment of d), based on final project approvals on the LDF budget by the khurals.   LDF-funded projects in the GFAs and in Uvurkhangai (as 'control') were screened by 2 filters:

- Filter A – projects **directly** benefitting children, related to schools, kindergartens, general education, dormitories, sports facilities, hot water supplies,

- *Filter B – projects indirectly benefitting children: parks and playgrounds, latrines, streetlighting, water supplies, electricity, health facilities.*

Applying these filters to approved LDF projects in Nalaikh, we see a steady trend increase in shares of LDF allocations for both filters until 2016.   But data was not available to track trends after 2016, when UNICEF ended it support, to see if this trend was sustained.

Turning to aimags, the Charts in Figure 19 below show the relative sizes of LDF budget allocations to projects which are likely to directly benefit children (Filter A) and to those which will directly and also indirectly benefit children (Filters A + B) in the 4 GFA aimags and in Uvurkhangai (control) aimag, over the period 2016-19 (some

years' data sets were missing for Khuvsgul and Govi-Altai).

Figure 31. Share of projects benefitting children in LDF budgets for GFAs and control aimag
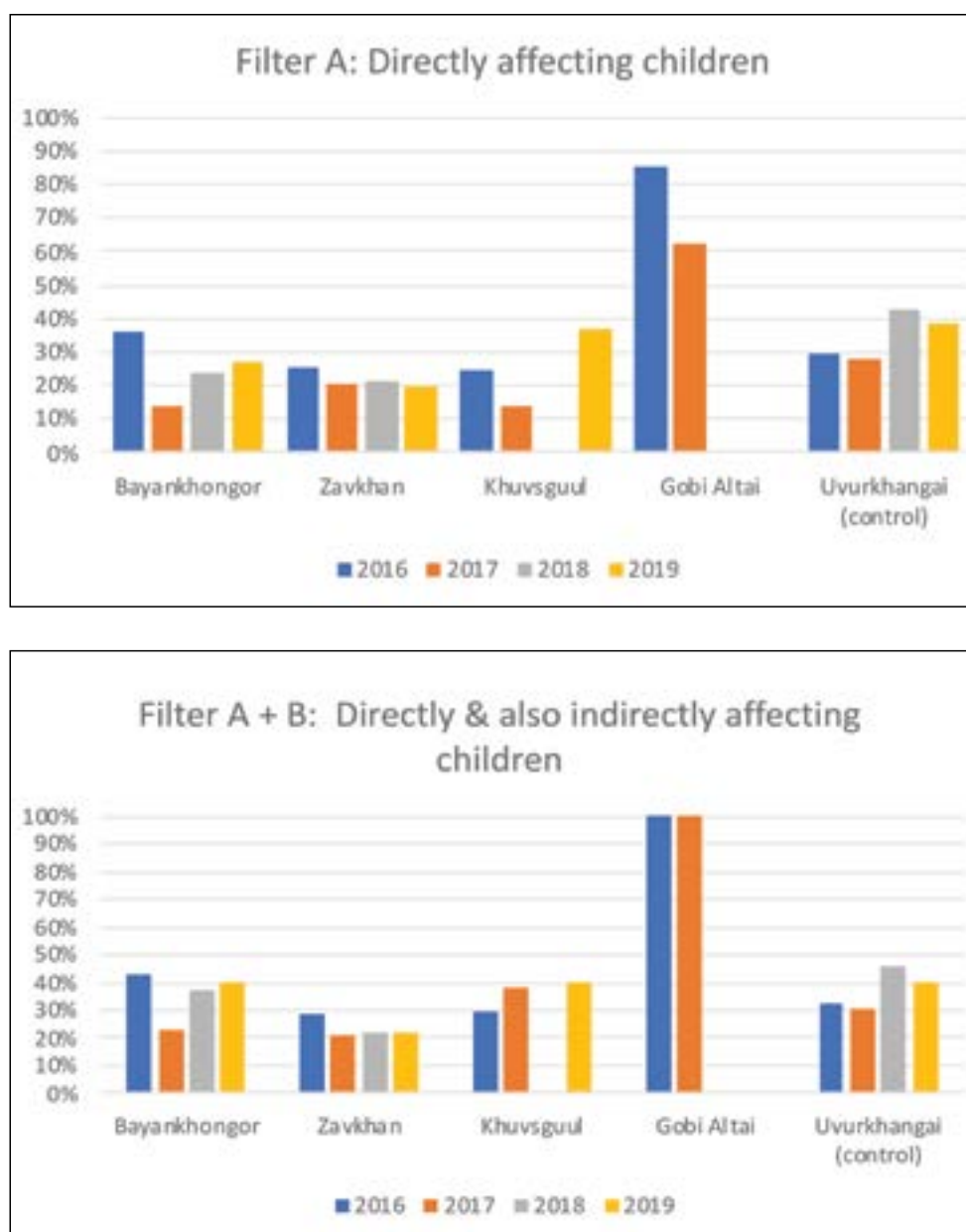
In all years, projects directly benefiting children exceeded 10% of the LDF budget in all GFA aimags, with the lowest point being in 2017 for both Bayankhongor and Khuvsgul, at 14% each, and the highest point in Govi-Altai in 2016, at 85%. Obviously, adding in projects (Filter B) indirectly benefitting children significantly raised these levels in all cases: to over 20% in Bayankhongor and Khuvsgul in 2017, and to 100% for Govi-Altai in 2016.[183] However two points should be highlighted: (a) there are no obvious trend increases over the period in the GFA aimags (though complete annual data may tell a different story);[184] (b) critically, the control aimag itself registers higher levels of pro-child projects (both direct and overall) than the GFA aimags, with the exception

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[183] *A CFC report from Khuvsgul suggested 48% of the 2016 budget allocation as allocated to children - this compares to a 29% estimate from this filtering of projects directly + indirectly benefitting children.   This may well be due to the methodological limitations of the Filter method, and/or perhaps a different interpretation of what constitutes a 'pro-child' project.*

[184] *The same CFC report from Khuvsgul reports that pro-child LDF allocations were only 8.8% of the LDF budget in 2012, rising to 48.1% in 2016 – which does indeed suggest a rapid increase over that period. Data were not available to substantiate this longer-term trend.*

of Govi-Altai for 2016 and 2017.

It is also important to examine pro-child budget allocation patterns from individual soum LDF allocations **within** the aimags. Table 3 shows the variance in the percentage of projects directly benefitting children (Filter A) across the 20 soums of Bayankhongor aimag. Over the 4-year period overall we see a mean allocation of 21%, and a median allocation of 15%, but with a wide range from 3% to 84% between minimum and maximum allocations for projects directly benefitting children. These variance patterns are fairly steady from year to year. Adding in projects indirectly benefitting children (Filter B) raises the mean and median levels, but the wide range between minimum and maximum levels remains. These variance patterns across soums appear similar for other aimags examined, including for Uvurkhangai (control). There is no reason to expect uniform pro-child budget allocations across soums, but such wide variance is striking and relates to the earlier questions about the extent of UNICEF engagement with soum and bagh authorities, rather than just at aimag level, around LDF planning.

Table 10. Bayankhongor: variance of pro-child LDF spending at Soum

	Bayankhongor: % Soum LDF allocations directly for children				
	2016-2020	**2016**	**2017**	**2018**	**2019**
MEAN	*21%*	*14%*	*15%*	*19%*	*25%*
MEDIAN	*15%*	*5%*	*7%*	*9%*	*19%*
MAX	*84%*	*85%*	*77%*	*93%*	*82%*
MIN	*3%*	*0%*	*0%*	*0%*	*0%*

On the surface, the evidence above – and especially comparison of GFAs with the control aimag- suggests that UNICEF engagement may not have greatly impacted LDF allocation patterns in favour of pro-child spending. But the **limitations of this crude assessment** are also recognized:

- there is of course no evidence on counterfactual budgeting scenarios in the GFAs, where pro-child LDF allocations may perhaps have been even lower without UNICEF support.

- lack of data on numbers of LDF proposals through the various planning steps prevented clear analysis of the extent to which UNICEF support may have increased numbers of pro-child projects and/or increased expressed priorities by citizens, bagh/khoroo meetings or the LDF committees – but which may then have been discarded at later steps in the process.

- inability to access complete local budget data meant it was not possible to systematically document the extent to which other local budget resources (governors' reserve funds, etc.[185]) were mobilized to supplement the LDF in funding of pro-child projects – although this must necessarily have been modest;

- the assessment is based on a crude filtering of project titles by name, which may have somehow missed important LDF spending activities for children (although this flaw could apply equally to the control aimag and so cancel out).

- most importantly, this assessment does not capture the extent to which pro-child LDF projects are now of better quality or better targeted to vulnerable children, thanks to UNICEF support, than they otherwise would be. This could only be explored through more in-depth field research.

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[185] *There were certainly frequent reports of such local co-funding, but no data was available to systematically quantify this against LDF funding. General evidence, however, suggests that any such co-funding would be very modest as compared to the relatively large LDF allocations, and may only be forthcoming in 'budget surplus' aimags and soums, which enjoy greater discretion.*

4.4. Local Development Fund: conclusions and recommendations for the future

As UNICEF has perhaps not always engaged directly with what are the real constraints to more effective pro-child planning and budgeting from the LDF. Given the regulations governing LDF planning process there is a limit to the effectiveness of general advocacy or even the issuing of resolutions stipulating 10% thresholds – which can always be neglected or revoked with a newly elected local administration. Local officials are above all concerned to comply with the LDF regulatory framework in a context where there is pervasive fear of central government sanction. So, looking forward:

More targeted, practical support. While general training and advocacy has been important and appreciated, there is also need for more targeted support to key stakeholders in the 4 step planning and prioritisation process (bagh/khoroo governors and LDF committees), and for tools to facilitate the difficult task of prioritization (esp. by the governors' LDF committees) to ensure that pro-child priorities are given due weight alongside other priorities, and can be reconciled with the other prioritization criteria mandated by law. At the same time, greater clarity as to what does and does not) constitute pro-child investment spending would help to address a widespread – and quite understandable - tendency by local officials (see many KIIs) to claim that all local development spending is necessarily pro-child. Lastly, support to the khurals, who make the final amendment / approval of LDF budgets, would also be important – see also further below.

More systematic engagement with Soums. The LDF aimag (and UB) allocations are divided between the aimag (and MUB) and their soums (districts) on a percentage basis. Until 2017 soums received at least 60% of the allocations – this has now been formally reduced to at least 30%, though is often more than that.[186] While soum authorities may be influenced by aimag authorities in regard to LDF priority-setting, soum level LDF decisions are taken separately (esp., but not only, where different parties control governorship and khural at the two levels). Yet it appears that CFC workplans (see C. below), which stipulate local co-funding arrangements, are only signed off between UNICEF and the aimag governor (and not the aimag khural). UNICEF should therefore also consider engaging soum authorities in CFC workplan agreements to better ensure the chance of local co-funding from the LDF.

Promoting clarity around eligible spending from the LDF. It emerged repeatedly that there is a widespread view amongst local officials that 'soft investments' (in training and capacity building) are not eligible for LDF funding, and hence a bias toward infrastructure investments, to avoid risk of sanctions from the National Audit Office (NAO). Read closely, the LDF eligibility criteria (Art 60.3 of the IBL) do in fact seem open to such investments, and indeed these are undertaken in some areas without problem,[187] but the revised MoF LDF Regulation specifies that LDF spending is **not** allowed for "current expenses, unless specified in article 60.11 of the law on the state budget"[188] – which may be interpreted as a veto on many of the 'softer investments' proposed. It is important that UNICEF engage MoF around these issues, to urge that clearer guidance be provided to local authorities on what is and is not eligible for LDF funding; similar engagement with the NAO would also be important.

Advocacy for greater geographic LDF allocation equity. As noted, current soum LDF allocations pose serious geographic equity concerns for LDF spending in general, and for pro-child LDF spending in particular. There is scope for UNICEF to engage with MOF and other central government stakeholders around this issue to press both for caution in further expansion of the mineral revenue-sharing component of the LDF (one major source of disparity, although a politically sensitive topic), and also a review of the manner by which aimags make the 'onward' formula-based allocations of the soum share of GLDF allocations.

Seeking partnerships. In all of these areas there is scope for more active outreach by UNICEF to other partners to take advantage of different institutional comparative advantages, e.g.: the Citizen Representative Khural Project, managed by the Cabinet Secretariat, and supported by UNDP and SDC; the Sustainable Livelihood Project (Phase 3), managed by MoF, and supported by the World Bank and SDC; the Urban Governance Project, managed by MUB, and supported by SDC and The Asia Foundation.

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[186] Art. 59 of the IBL which specifies sharing arrangements was revised in 2017.

[187] Indeed, almost all soums allocate MNT 5 million for Naadam activities every July – a very 'soft investment'!

[188] Art. 4.2.3 of MoF LDF Regulation - Order No. 228, 2018.

5. Social sector budgeting

5.1. UNICEF strategy: relevance and coherence

Despite the comments further above around the Strategy Note, the actual plans and activities adopted by UNICEF, and views expressed by staff, did indeed reflect a much more realistic approach to addressing the constraints at central as well as local level. UNICEF has engaged with social sector budgeting processes through a combination of upstream and downstream strategies:

- **Upstream advisory and advocacy activities** with sector ministries concerning policy, guidelines and recurrent budget norms. To that end, UNICEF has undertaken:

  o *several analytic exercises to identify issues in local sector planning, budgeting and spending, for example:[189] a Health sector review (2015), which stressed the need for more equity, and for move from input to performance budgeting; a WASH review (2016), which details fragmentation of institutional responsibilities (esp. in UB), the mismatch in the capital and recurrent budget processes and allocations and the negative impact on system repair and maintenance, the potential for using the LDF, and the need too for more performance-based budgeting approaches. According to respondents, an initial 2018-20 work plan was prepared for upstream advisory and advocacy activities with quite ambitious targets for revising national norms, but this was then scaled back.[190]*

  o *advocacy around the large Child Money Programme, a widely heralded mechanism, on central government budget in operation since 2005, which some reviews have argued needs better targeting to poorer children[191]. UNICEF issued an initial policy brief[192] which argued for better cost-indexation and the need to explore "forms of targeting which could sustain best the universal social protection floor"; this was followed by a 2020 brief,[193] further arguing for a change to targeting mechanism and an end to what is seen as a cumbersome and ineffective Proxy Means Test methodology.*

It is not clear how far concerns raised in other reviews of the social sectors fed into UNICEF advocacy – e.g. in ECE, under-spending on school supplies essential to education quality, excessive out-of-pocket contributions being asked by schools of parents in some areas to co-fund school meal and other costs, and geographic inequities in kindergarten investments.[194]

- **Periodic local awareness-raising and training** across the GFAs, both in the application of national planning and budget procedures and norms, as well as more generally on child friendly budgeting, across all GFAs.

- **Local piloting of innovations** such as zero-based budgeting (ZBB) in 3 aimags and 19 soums.[195]

There was no reported engagement by UNICEF staff with stakeholders responsible for the sector performance contract mechanism in these sectors nor with sector capital budgeting processes (by which, e.g., kindergarten and school building decisions, key to child access to schooling or to major WASH systems, are made). [196]

Lastly, while central budget norms allow little scope for local changes to the original social sector budgets, the Khurals must approve annual budget revisions and also oversee management of social facilities and budget execution by the executive.[197] It is unclear to what degree UNICEF engaged with Khurals beyond training some members in child friendly budgeting and possibly advocacy.

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[189] There was also a 2015 review of child protection funding arrangements, but this appeared to simply map out current processes rather than identify areas for improvement.

[190] UNICEF Social Policy Workplan 2018-20, KII UNICEF

[191] E.g. 'Social Protection Brief: Reforming Social Welfare Programs in Mongolia', ADB, 2017.

[192] 'Universal Social Protection: the universal child money programme in Mongolia', UNICEF, undated.

[193] Child Money Programme of Mongolia 2020 – brief for the UN Country team, UNICEF, 2020.

[194] 'Pre-Primary Education in Mongolia', World Bank, 2017. Weak capital budgeting decision processes were also underlined in 'Mongolia- growing without undue borrowing: enhancing the efficiency of spending and revenue', World Bank, 2018.

[195] KII UNICEF

[196] However, equity of ECE investments has been raised in other reviews e.g. World Bank 2017

[197] IBL 2011, LATUG 2006

5.2. UNICEF strategy: effectiveness, impact and sustainability

As some successes were registered from national advocacy, notably in increases to child protection spending. Thus, MLSP has increased spending on child protection at central level and through a large increase in the 'outreach' component of the aimag SPTs for child protection, which rose 23 times nationally, from MNT 356 million in 2016 to MNT 8 billion in 2020, thanks to UNICEF advocacy with MLSP, based on a costing exercise undertaken. Figure 20 shows the trend increase of this SPT component (for 'group activities' in blue) against the rest of the SPT transfers, in the 4 GFA aimags. This trend increase also benefitted all other aimags.
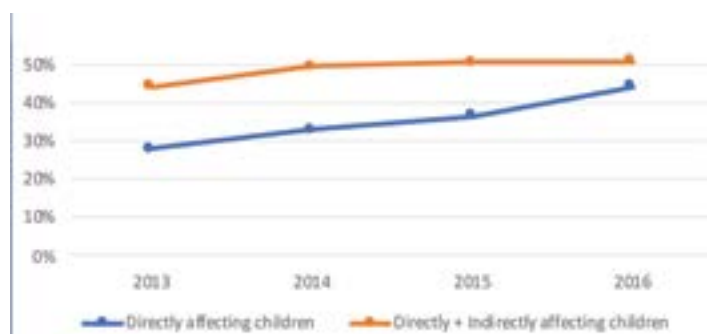
Figure 32. Child protection SPTs of 4 GTAs, by thous. MNT

There has also been central government adoption of consolidated national WASH guidelines, though it is unclear how far these were then translated into changes to central government investment planning criteria to ensure adequate capital financing for WASH. If it was intended that such investments be funded from the LDF, it was not possible to establish whether or how such guidance was transmitted to local officials charged with prioritization of LDF projects.

More recently, thanks to UNICEF advocacy there has been an important revision to the kindergarten education transfer budget norms allowing counting of non-resident children (a major issue in urban areas, but also in certain aimag and soum 'border areas' where children cross to use more nearby, convenient facilities, not necessarily in their own area of residence),[198] although no data were available to substantiate this. There was also reported success in changing the health sector budget norms for Soum hospitals to allow for greater equity.[199]

It was also not possible to establish how effective the advocacy around changes to CMP targeting has been.

Local respondents generally expressed satisfaction with training received, although documentation attributing improvements in pro-child budgeting processes or outcomes by government was inconclusive.[200] Given the general rigidity of budget norms (aside from the one or two areas that UNICEF was able to help change) it would be hard to see how such training could result in any significant changes to budget allocation outcomes regarding children. However, within the given budget constraints, they have hopefully contributed to more efficient and better documented budget proposals being submitted upwards by local authorities, with greater chance of approval. It would also hopefully have alerted local officials to their (limited) powers to change approved budgets – an issue around which there is still much uncertainty and confusion.[201] These basic efficiency gains within the existing system would constitute important impact, although little evidence was available to corroborate this. However, arguably, such 'basic 'training in PFM procedures' may not be an area where UNICEF has a special comparative advantage and might be better handled through routine support by MoF and the sector ministries, perhaps with initial UNICEF Trainer of Trainer support and quality assurance, to improve the quality of this support.

It is unclear if UNICEF provided support to local officials to help them assume the new budget responsibilities for education-related 'fixed costs' assigned to them in 2018 – a change which may pose equity challenges (e.g. between budget 'surplus' and 'deficit' areas) given the significantly varying levels of local revenues from which

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[198] *KII UNICEF*

[199] *KII UNICEF*

[200] *KIIs from Bayankhongor, Govi-Altai, Zavkhan and Bayanzurkh generally expressing satisfaction, but no evidence was made available suggesting changes to social sector budgeting outcomes as a result.*

[201] *Budget rules allow school and kindergarten principals to make changes up to MNT 5 million, and soum / aimag governors up to MNT 10 million, within the same budget category. However local KIIs reported this as an area of much uncertainty – this is also documented in 'Understanding and Monitoring Service Delivery in a Decentralizing Environment in Mongolia: The Case of Education and Health', World Bank, 2015.*

to fund such costs.

Regarding local piloting of zero-based budgeting (ZBB) local respondents[202] generally expressed satisfaction with this support, but others[203] expressed doubts about introducing something so ambitious and possibly unsustainable as ZBB or similar performance-based budgeting methods at this stage. No evidence was available to make any further assessment.

5.3. Context: Social sector budgeting
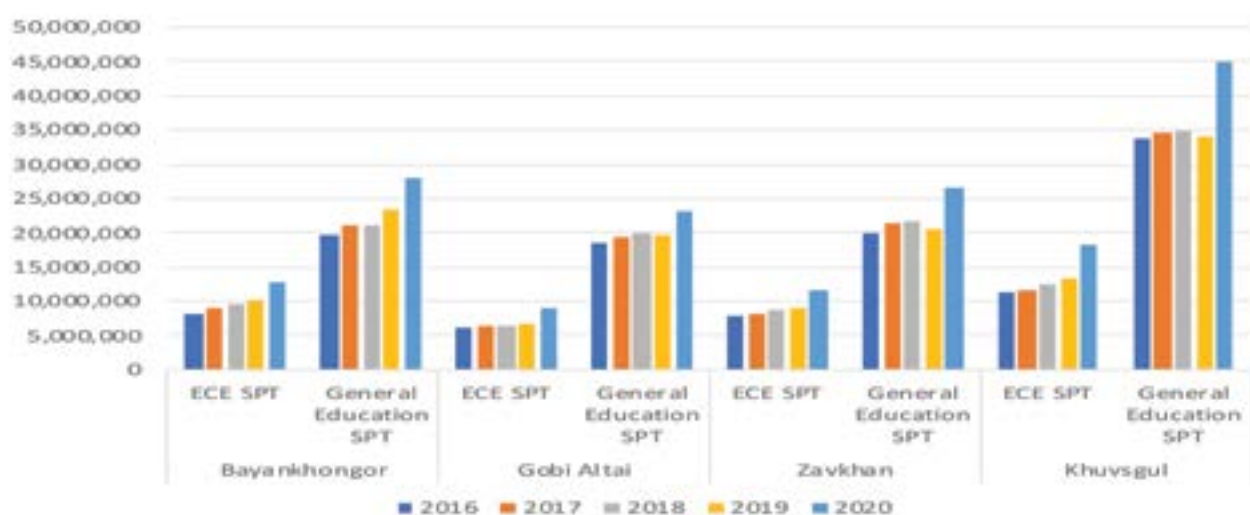
As Under IBL 2011 (Arts. 39.1 and 61.1), budgeting responsibility for key social services has been 'delegated' to aimags (and, partly also, from aimags to soums). Under this arrangement, central government each year allocates SPTs to aimags for these services, from which local authorities spend on the delegated services. The two education SPTs (for ECE and general education) are the main transfer, accounting for over 90% all SPTs. Figure 21 shows the steadily rising trend for education for 4 GFA aimags. The other two main SPTs are for primary health, and for child protection. SPTs are by far the main – indeed often the only- funding source for these delegated services.[204]

All local recurrent spending from SPTs is very tightly regulated by ministry budget norms (e.g. for education, specifying allowable spending levels 'per student' on different categories of expense, with coefficient variations by geographic/urban-rural context, etc.); all local budget proposals for SPT spending are submitted to the sector ministry where they are adjusted for consistency with these budget norms.[205]

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[202] *KII Bayankhongor, Govi-Altai, Zavkhan and Bayanzurkh*

[203] *KII Policymakers*

[204] *In 2018, one category of education spending (utility and maintenance costs of kindergarten and school facilities – referred to as 'fixed costs') was switched to be a local 'base budget' responsibility, and hence to be financed from local own-revenues and deficit transfers, and no longer from education SPTs. In principle this type of spending enjoys greater local discretion, but even these budget proposals are submitted to MoF which will adjust them according to MoF considerations – e.g. of spending precedent.*

[205] *E.g. see 'Pre-Primary Education in Mongolia', World Bank, 2017*

Figure 37. Education Budget norm illustration

Cost items[206]	Kindergarten	School
Variable expenses: average expenses per child per year – '000 MNT 2020		
Soum and aimag centres	905.3	437.9
Capital city	807.8	374.0
Dormitory		387.5
Meals: average daily expenses - MNT		
Meals /per day/	2.475	
Dormitory baby food /per day/	3475.0	
Lunch / per day/ grades 1-5		900.0
Special / CWD / school lunch /per day/		2,400.0

As noted, SPTs cannot be used to finance capital investment spending in these sectors – this is almost entirely on the state budget, to which local authorities may submit proposals but where decisions are made by central ministries.[207] The problems arising from lack of local decision-making power over social sector budgets, and impact on service delivery equity and effectiveness, have been raised in several recent reviews.[208]

Each year, sector ministries stipulate a contract for the services to be delivered from these SPTs, signed off with aimag governors; in turn, aimags usually (but not always) have similar contracts with soums. These are reported[209] to be key tools to monitor the level and quality of service delivery performance.

5.4. Social sector budgeting: conclusions and recommendations for the future

As highlighted, formal strategy did not appear to fully recognize that in practice there is still very little decentralisation of responsibilities or budget decision powers. It also appears that while there were several initial analytic exercises to explore policy framework issues and constraints, to inform programming, these were conducted separately, outcome by outcome, such that an overall strategy for advocacy to reform local government planning and budgeting across the social sectors does not emerge clearly. It is also not clear how far UNICEF took on board the analyses of other donor agencies (noting that there may of course have been legitimate disagreements) or aimed to work with them on these agendas in concerted advocacy. Looking forward, there are some areas UNICEF may wish to explore:

Ensuring a clear baseline analysis of social sector financing and budgeting policy issues to be addressed **across sectors** as basis for strategy, with an identification of those issues which may be addressed by general advocacy, and those which may require initial local piloting of reforms as a basis for later advocacy.

Making strategic distinction between types of 'local support activities':

a) *those which require introducing some form of local innovation or 'pilot' (as above). For these it would be important to ensure advance central government buy-in to such pilot activities and their rationale will also be key if lessons are to be taken up later on, to select GFAs where there is prior commitment to implement them and also which provide representative context: e.g. in further pursuing revision of sector norms (e.g. in general education or health) to allow inclusion of non-resident children it may be useful to pilot mechanisms in those soums which are 'border areas' having to service non-resident children. It will also be important to avoid embarking on pilots in activities – such as ZBB or performance-based budgeting variants - which international experience have shown to be very hard to manage and sustain without external support.*

b) *more routine general training and awareness raising.   While there is clearly a role for UNICEF in*

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[206] *As issued in Government Resolutions 242 of 2016, and 450 of 2019.*

[207] *Local aimag KIIs expressed some frustration with this arrangement, the lack of dialogue with central government around approved priorities (esp. since locally submitted priorities can be changed) and the frequent interference of national MPs in the process.*

[208] *E.g. see 'Understanding and Monitoring Service Delivery in a Decentralizing Environment in Mongolia: The Case of Education and Health', World Bank, 2015.*

[209] *KII, Policy makers*

local capacity building, it should engage in this with an eye to supporting an institutional mechanism which will ensure its continuity. E.g. in the case of basic training in budget preparation processes consistent with central budget norms, thought could be given to building up existing capacity outreach mechanisms (via preparation of tailored modules, ToT, etc.) with MoF or sector ministry staff in the aimags, National Academy of Governance staff (a major channel for training of local officials in public administration) and specialised NGOs. This could allow UNICEF to withdraw from a 'retail' role in areas not perhaps of its comparative advantage and focus more on upstream policy issues.

Explore scope for using the performance contract mechanism. This government mechanism could potentially offer an entry point that UNICEF might exploit to encourage more pro-child service delivery by aimags and soums. Engagement could be through:

a) *dialogue with the sector ministries around the performance criteria in the agreements, and their possible revision / development to ensure they take due account of service delivery performance for children generally, and vulnerable groups in particular;*

b) *exploring ways to more effectively monitor actual performance against these agreements, to ensure it is more than just a bureaucratic box-checking exercise. For example, UNICEF might pilot more consultative local procedures to ensure a wider range of feedback in the monitoring. There may indeed be scope to pilot incentives within such arrangements, e.g. by small budget increases to top-performing aimags or soums.*

Such engagement would need to be both around the ministry-aimag performance agreements, but also (perhaps especially) with the aimag-soum agreements, an area which seems to be widely neglected.

Engage with local elected khurals. As noted, khurals play a key statutory role in review and approval of governors' budget proposals, and also – just as important but often ignored- in monitoring of actual spending on service delivery by the executive branch.[210] While central budget norms allow little scope for local changes to the original social sector budgets, the khurals must approve annual budget revisions, monitor budget execution and also oversee management of social facilities and assets (such as kindergartens, clinics, youth clubs, parks).[211] UNICEF could explore the scope for broader outreach and support (e.g. budget literacy or service delivery monitoring) to the khurals. This could be direct, or through partnerships, e.g. with the UNDP/SDC Citizen Representative Khural Project, managed by the Cabinet Secretariat.

6. Child-friendly Community Workplans and Budgets

As Having outlined issues around the LDF and social sector financing and budgeting, it is useful to explore now financing issues around the CFC workplans and budgets. Some partial workplan budget data was obtained, with the most complete set for Zavkhan, from 2017-21. Two of the workplans and budgets were for 2 years, and one just for one year. Activities in these workplans seem to be primarily related to training, consultation workshops, capacity building, development of plans, etc.

It is not clear what local co-funding sources were envisaged for these workplans. While the levels of local budget spending look substantial, as highlighted above local budget resource flexibility is highly constrained and so the LDF is really the only sizeable budget resource which could be used (aside from very minor resources where there is a governor's reserve fund, or where local NGOs may be willing to co-fund).

Expenses in the CFC workplans are mainly non routine expenditures on 'soft investments' of the sort which should be in principle fundable from the LDF – although the present unclarity in the LDF Regulation can make this problematic (see further above). Conversely, it is very hard to see how they might be funded from the special purpose grants for which budget norms allow spending only on standard routine operating costs. However, funding from the LDF poses two challenges: firstly, according to the LDF regulatory framework, such activities would need to originate in citizens' proposals, and emerge as top priorities from the annual planning process; secondly, they would of course need to be affordable.

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[210] *IBL 2011, LATUG 2006*

[211] *Ibid.*

Table 13. Zavkhan aimag CFC workplan costs and financing levels

	CFC Workplan costs - USD		
	2017-18	**2019**	**2020-21**
Total Workplan Cost	**365,600**	**809,050**	**2,247,125**
Workplan Funding:			
UNICEF commitments	231,600	496,600	1,688,375
Local co-funding expected	134,000	312,450	558,750
Expected co-funding as % of Gross LDF allocations:			
Total LDF allocation	**6%**	**15%**	**13%**
Aimag allocation	11%	23%	21%
Soum allocation	15%	39%	34%
Workplan cost as % of Gross LDF allocations			
Total LDF allocation	**17%**	**38%**	**52%**
Aimag allocation	30%	61%	84%
Soum allocation	40%	100%	139%

The Table below shows the total costs of activities in each workplan, and the funding sources: (a) committed funding (which is assumed to be only from UNICEF, since no details of local funding commitments were shown) and (b) the funding gap, which it was hoped would be covered from local financing sources.

No complete details were available as to how far this expected local co-funding was forthcoming for Zavkhan.

However, as a measure of **likely affordability** and **sustainability**, the expected co-funding requirements were compared to the gross[212] LDF allocations (total, and then the aimag and soum shares) for those years. Distinguishing the aimag share of the gross LDF allocations is important because it appears that workplans were only agreed with aimag authorities, not with soum authorities who are responsible for their own shares of the LDF allocations. Thus, we see that, even if such workplan activities emerged as priorities through the LDF planning process, there are financing challenges:

a) *Expected co-funding levels were equivalent to from 6%-13% of total LDF allocations, but to 11%-21% of the gross aimag share of those allocations. In other words, co-funding of workplans from LDF resources would require allocation of a significant share of local LDF resources, and – since LDF funding levels are fixed - sizeable switching from other local priorities, which may pose problems. Of course, while UNICEF is providing such substantial funding to the workplan, aimags may see strong incentives to set aside part of their LDF allocations to co-fund the workplan, if this is seen as key to attracting the much greater volume of external funds to the aimag.*

b) *Overall workplan costs were equivalent to from 17% to 52% of gross aimag LDF allocations, but to from 30% to 84% of the gross aimag share of those allocations. Therefore, continuation of workplan activities at the present levels and costs after UNICEF exit would obviously require a much greater allocation – requiring indeed almost the entirety of the aimag LDF allocation to be deployed to pro-child spending. This looks infeasible.*

Going forward UNICEF should consider:

- Reviewing the types of CFC activities to be funded to ensure that they are likely to be of broad community benefit and thus more likely to be voted as priorities.

- Exploring the 'sizing' of annual CFC plans and budgets around realistic assessments of likely future local budget resource availability.

- Engaging soums more systematically given their control over a substantial share of the LDF allocations.

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[212] *Gross allocation because a part of the total is pre-empted by deduction of certain base expenditures, reducing the net LDF resources for local discretionary spending.*

Annex 4 – Data Collection Tools

INTERVIEW PROTOCOL / GUIDE

UNICEF Staff

Purpose: *The most important points of this interview with UNICEF staff is to find out whether UNICEF support is reaching the most vulnerable in the areas where they work. The results of this evaluation will help UNICEF plan internally and with the government, how to improve their support over the coming years*

Logistics:

- *Duration between 60-90 min*
- *1 main interviewer, 1 note taker*
- *Have informed consent signed and get personal information (name, organization, gender, age) for participant list*

Introduction:

- *Introduce yourself, present the evaluation and also present the main purpose of the interview, that is, why it is important to have an interview with the informant.*
- *Explain confidentiality aspects as well as how the responses of the interviewee will be treated and processed on the basis of what it is stipulated in the UNEG evaluation standards.*

Introduction (in full):

UNICEF provides support at the national, provincial and community level through their implementing partners including local government authorities to strengthen services and support for the most vulnerable children and their families. **To ensure the support reaches the most vulnerable, they TARGET their support to specific Aimags and districts.** *Within programmes, such as education and health,* **they also try to target the most disadvantaged children and families.** *Together, these two approaches make up UNICEF's Geographical Targeting Approach.*

UNICEF also uses this approach to select where in Mongolia they work. During the period 2012-2016 they worked in Khuvsgul Aimag and Nalaikh District. In the current period of 2016-2021, UNICEF works primarily in Govi-Altai, Zavkhan, Bayankhongor Aimags, and Bayanzurkh Districts.

This interview is part of an evaluation of precisely UNICEF's geographic targeting approaches that aim to ensure their support is reaching the most vulnerable in Mongolian society. The results of this evaluation will help UNICEF plan internally and with the government, how to improve their support over the coming years.

Everything we discuss today will remain private. Your name will not be associated with your responses and all data will be anonymous. We will not share what you say with anyone, so please be honest and tell us what you really think about these issues. Your responses will help UNICEF to improve their programming and support, and ensure their future work continues to be strategically targeted.

Please feel free to answer only those questions you are comfortable with. With your permission, we would like to tape the interview to allow the interviewer to go back and check their notes to be sure they did not miss anything. Once the notes are verified, the tapes will be destroyed.

Do you agree to participate? Yes/No

_____

RELEVANCE

EQ1. To what extent are UNICEF's national and sub-national geo-targeting approaches (GTAs) to reach the most vulnerable children and their families prioritized in law, policy, regulation, strategies and plan of the Mongolian Government?

Alignment to government priorities

1. In your opinion, is UNICEF's targeting approach **aligned with national approaches to targeting r**esources to reach the most vulnerable in strategies, policies, budgeting and planning? If not, how do they differ? [1.1a]

   - In which thematic areas are UNICEF's targeting approaches most aligned to those of the GoM? (1.1b)

   - What are the opportunities and challenges when it comes to targeting the most vulnerable? Lessons learned? (1.1c)

   - How has the pandemic affected the targeting of disadvantaged children and their families for both UNICEF and the government? (1.1d)

Intersectoral approach

2. What are the **greatest (intersectoral/diverse) needs** of vulnerable children and their families in the area (sector) where your work, and who is responsible for helping to meet those needs in the community, soum, aimag, District? (1.2a-b)

3. How is **UNICEF working intersectorally with [*ministrys/agency*'s]** to meet the diverse needs of the vulnerable children and their families? Give examples (1.2c)

   - What are ways/recommendations to improve intersectoral coordination mechanism?

Sub-probes: Opportunities and challenges? Lessons learned? Effect of Covid pandemic? Integrated a gender, equity and human rights-based approach? [1.2d-f]

EQ2 To what extent has the GTA in each output/thematic area aligned to the unique characteristics and problems faced by children in the selected GFAs during the last 2 CPs?

GTA alignment to the problem

4. In your opinion, **what are the biggest challenges** in reaching vulnerable children? Is UNICEF's support focused on where the biggest problems are? Are the Aimags (Govi-Altai, Zavkhan, Bayankhongor, Khuvsgul) and districts (Bayanzurkh and Nalaikh) where UNICEF is/was supporting, the ones with the greatest need? Why? (2.1a)

   - Are there **any significant hotspots** for specific types of deprivation (e.g. education, HIV, violence) that fall outside the aimags and districts supported by UNICEF (GFAs)?[2.1b]

   - Is **UNICEF addressing the most challenging issues** and problems in their selected aimags and districts? (2.1b)

   - **Can these significant issues be adequately targeted** through programming? If not, why not? [2.1c]

   - Are there **other areas** outside the GFAs which should be targeted by some thematic activities in the CP? [2.1d]

   - How has the **pandemic** affected the distribution of disadvantaged children and their families and what are the implications for targeting? What measures are the government (and UNICEF) taking in light of this? (2.1e)

Targeting approach

5. Are there **alternative approaches to targeting** that would be better suited to address specific thematic issues? why? Why not? (2.2a)

- What are the key **trade-off**s in the decisions surrounding the geographical targeting? (2.2b)
- How has the **pandemic** affected the distribution of disadvantaged children and their families and what are the implications for targeting? What measures are the government (and UNICEF) taking in light of this? (2.2c)
- To what extent do the GTA and other approaches integrate a **gender, equity and human rights**? (2.2d)

EFFECTIVENESS

EQ3. To what extent has UNICEF's GTA contributed to the Country Programme's (CP) results and learning at the national and sub-national level reduced inequalities for children in a sustainable way (in GFAs compared to a non-GFAs)?

National policy advocacy

6. Did best practices from CP 2012-2016 translate into best practice in the current CP? Give examples. (3.1a)
   - Has UNICEF informed their CP output activities through an assessment of **the various "national policy" constraints** that affect the different types of services delivered locally for vulnerable families? (3.1b)
   - Were **output activities designed to pilot or demonstrate** how such policies, guidance or administrative mechanisms could be reformed/adjusted to better meet the needs of the most vulnerable children? (3.1c)
7. How has UNICEF used the results of the **activities to influence national policies**? Which national polices been amended? Give examples. (3.1d)
   - What is the sustainability of these efforts? Has there been wider scale up through government resources? Give examples. (3.1e)
   - Was that good practice then financed with Central government budget? (3.1e)

Sub-probes: Opportunities and challenges? Lessons learned? Effect of Covid pandemic? Integrated a gender, equity and human rights-based approach? (3.1f-g)

Convention on the Rights of the Child (CRC)

8. Do national authorities and partners easily recognize the principles of the **Convention on the Rights of the Child**? (3.2a)
   - To what extent is the **principle non- discrimination** embedded in national strategies, and approaches in practice? (i.e. children are supported regardless of their race, gender) If not, why not? Give examples. (3.2b)
     - … principle of respecting the views of the child (3.2c)
     - … **principle of children's rights to survival and development** (3.2d)
     - … **principle that the best interest of the child** (3.2e)
   - *What is the sustainability of efforts to embed Child Rights into the work that is being done at the sub-national level? Give examples. (3.2f)*
     - *Has there been wider scale up through government resources? ..at central or local government budgets level?*
     - *Were there any amendments made in any ministry norms, regulations, strategies and regulations due to reflecting the CRC principles?*

Capacity building

9. Has UNICEF supported **capacity building** of its implementing partners at the national and sub-national levels to better target integrated services to vulnerable and disadvantaged children? Who receive capacity building? For what? (3.3a)

10. Is there **evidence that policymakers** (line ministries, government agencies at the Municipal level, district authorities and governor's office or hurals at both soum, aimag and district level) **have used their new skills to better target interventions** to reach vulnerable children and families? Please give examples. (3.3b)

- *Has involvement of high-level officials in trainings improved advocacy and available staff to support targeting efforts at the sub-national level? (3.3c)*
- *What is the sustainability of these efforts? Has there been wider scale up through government resources? If so, financed by central or local government budgets? (3.3d)*

Sub-probes: Lessons learned? Effect of COVID pandemic? Integrated a gender, equity and human rights-based approach? (3.3e-g)

LGA Planning and Budgeting

11. Did UNICEF engage all the appropriate local stakeholders the aimag level (aimag line dept staff, aimag governors / staff, aimag khural members)? (3.4a)

- Were there **differences in strategy** between UNICEF engagement with the regular social sector budgeting processes, and with the LDF budget process? (3.4b)
- Was the **support aimed at improving current practice /procedure** in a manner (e.g. at levels of per capita funding which government can sustain without external support; working through present budgeting procedures and institutional arrangements etc.) which could be sustained / replicated through regular budget and spending systems? (3.4c)
- Were the **annual workplans agreed with aimags** (e.g. Zavkhan) co-funded from aimag/soum budgets? Were there incentives for co-funding? (3.4c)
- Did **strategies distinguish between child-related services under aimags (under Budget Law, etc.) and central government authority** (such as capital investments – aside from the LDF - or MLSP transfers)? (3.4d)
  - o If yes, **did strategies properly assess the various policy, financing and other systemic constraints** on local discretion arising from different types of decentralization and delegation?
  - o Which budgets (e.g. local revenue sources; special purpose transfers, other) or delivery arrangements were used to support the UNICEF intervention strategies?
  - o To what extent, have LDF been used to support vulnerable children (e.g. from soum/khoroo or aimag/district LDF allocations)? Give examples.
  - o Were there any difficulties arising from the LDF or other regulations, or in the budget process, to giving such priority for vulnerable children?
- Are there any example of involvement/investment of private sector as a result of UNICEF's engagement/sensitization? (3.4e)
- Were the lessons well communicated to appropriate national authorities to promote changes in the policy and 'systemic' framework for local service delivery? Explore why it worked or didn't work in the GFA. What was the most challenging part of policy changing communication process (3.4f)
- What role hurals have played in planning, budgeting for those activities which were submitted for the local budget (whether for LDF funding or for special purpose grant funding)- did they approve, or change, or reject- what and why? And did hural members play any role in the planning activities before budget submission? (3.4g)

Sub-probes: Effect of COVID pandemic? Integrated a gender, equity and human rights-based approach?(3.4h-i)

Data

12. To what extent did UNICEF contribute to **building the evidence bas**e on the needs of vulnerable children and their families and how to address them? (3.5a)

- Did the **situation analyses and other evidence generation activities effectively help in identifying and targeting** the needs and issues of disadvantaged children (boys/girls (gender); children with disabilities, children in remote areas, and ethnic minorities etc.)? Give examples. (3.5b)

- How well or to what extent do you **use monitoring data/reports to adjust and improve** your planned activities or future plans? (3.5b)

- How has the **COVID-19 pandemic** affected the availability of data for targeting disadvantaged children and their families and what measures is UNICEF taking to overcome gaps or shortfalls? (3.5c)

- To what extent is the available data able to support targeting with a **gender, equity and human rights-based approach**? Please explain. (3.5d)

EQ4 To what extent has the UNICEF Child Friendly Community (CFC) approach helped to create an integrated, holistic, multisectoral safety net at sub-national levels to help meet the needs of the most disadvantaged children in the GFA (compared to non-GFA)?

Child Friendly Community

13. Is the **CFC approach functional** (actively meeting, targeting resources, extending services etc) in the targeted Aimags and districts, or beyond? Give examples. (4.1a)

- How are CFC arrangements established within the context of other official local institutional arrangements (e.g. CFC interdisciplinary team/ multi-sectoral committee)? Please describe the institutional arrangements. (4.1b)

- Did **materials and information** from the LGA include the CFC principles? Were there other ways in which the principles were evident in the work of the LGA? (4.1c)

- How are **CFC activities and institutional arrangements financed** (e.g. which sources; budgets, financing agreements)? (4.1d)

- What were the **opportunities and challenges** in promoting Child Friendly Communities (CFC) intersectoral cooperation at the policy level in Mongolia (National Council for Children under the Prime Minister)? (4.1e)

- What is the sustainability of these efforts? Has there been wider scale up through government resources? Give examples. (4.1f)

- What are some specific challenges in reaching the most disadvantaged children, and is the CFC approach effective in overcoming these? (4.1g)

Sub-probes: Effect of Covid pandemic? Integrated a gender, equity and human rights-based approach? (4.1h-i)

EFFICIENCY

EQ5 – To what extent has UNICEF targeting approach been implemented in a resource, time, and technically efficient manner?

Efficiency of GTA

14. Has the GTA facilitated efficiency in addressing thematic issues (output areas)? (5.1a)

- Has the **targeting of vulnerable children subgroups facilitated collaboration** with other national and international stakeholders working on similar issues in the area? Why, why not? (5.1b)

- Has UNICEF supported targeting by the Government partners **facilitated collaboration between ministries, agencies, sectors**? Was duplication of efforts avoided? (5.1b)

- Has UNICEF **targeting of subgroups** been strategic from an efficiency point of view (e.g. best use of human and financial resources, time)? Please explain. (5.1c)

- Are there other **synergies and value add** to the specific approaches to make them more efficient for reaching their target subgroups? Give examples of successful, synergistic approaches. Note challenges in terms of operational efficiency. (5.1d)

- Are there any **other international/national/private players** who contribute to UNICEF and the government's efforts in reaching the vulnerable children more efficiently? (5.1e)

- How has the **pandemic** affected the efficiency of the targeting approaches and what measures are

the government (and UNICEF) taking to overcome gaps or shortfalls? (5.1f)

Efficiency of GTA approach

15. Were UNICEF **financial and human resources used efficiently** (avoiding duplication of efforts with other partners, funds released in a timely manner; sufficient staffing and follow up to ensure programme continuity, strong partnerships, etc.) Give examples (5.2a)

- How has the pandemic affected the efficiency of the targeting of disadvantaged children and their families and what measures are the government (and UNICEF) taking to overcome gaps or shortfalls? (5.2b)

SUSTAINABILITY

EQ6 To what extent are GFA results achieved likely to continue after UNICEF funding has been withdrawn?

Sustainability

16. Which **targeting approaches advanced by UNICEF were the most sustainable**? Why? (6.1a)

- Are there **alternative approaches** to targeting that UNICEF could have taken to make its support to Government more sustainable? (6.1b)
- Which of UNICEF's specific programmes and interventions are **likely to continue** after UNICEF funding is withdrawn? How would they be financed and from which budget? (6.1c)
- Are the **geographical focus areas the right context** to showcase UNICEF's targeting strategies including the Child Friendly Community (CFC) approach? (6.1d)
- How has the **pandemic** affected likelihood that UNICEF's programmes and interventions will be continued after funding is withdrawn? (6.1e)

INTERVIEW PROTOCOL / GUIDE

Donors/NGO Partners (non-beneficiaries)

Purpose: The most important points of this interview with Donors and other stakeholders is to find out whether UNICEF appears to be helping national actors to reach the most vulnerable in the areas where they work. The results of this evaluation will help UNICEF plan internally, and with the government, how to improve their support over the coming years

Logistics:

- *Duration between 60-90 min*
- *1 main interviewer, 1 note taker*
- *Have informed consent signed and get personal information (name, organization, gender, age) for participant list*

Introduction:

- *Introduce yourself, present the evaluation and also present the main purpose of the interview, that is, why it is important to have an interview with the informant.*
- *Explain confidentiality aspects as well as how the responses of the interviewee will be treated and processed on the basis of what it is stipulated in the UNEG evaluation standards.*

Introduction (in full):

*UNICEF provides support at the national, provincial and community level through their implementing partners including local government authorities to strengthen services and support for the most vulnerable children and their families. **To ensure their support reaches the most vulnerable, they TARGET their support to specific Aimags and districts.** Within programmes, such as education and health, **they also try to target the most disadvantaged children and families.** Together, these two approaches make up UNICEF's Geographical Targeting Approach. They also use this approach to select where in Mongolia they work. During the period 2012-2016 they worked in Khuvsgul Aimag and Nalaikh District. In the current period of 2016-2021, they have selected to work primarily in Govi-Altai, Zavkhan, Bayankhongor Aimags, and Bayanzurkh Districts.*

***This interview is part of an evaluation of UNICEF's geographic targeting approaches that aim to ensure their support is reaching the most vulnerable in Mongolian society.** The results of this evaluation will help UNICEF plan with the government, how to improve their support over the coming years.*

Everything we discuss today will remain private. Your name will not be associated with your responses and all data will be anonymous. We will not share what you say with anyone, so please be honest and tell us what you really think about these issues. Your responses will help UNICEF to improve their programming and support, and ensure their future work continues to be strategically targeted.

Please feel free to answer only those questions you are comfortable with. With your permission, we would like to tape the interview to allow the interviewer to go back and check their notes to be sure they did not miss anything. Once the notes are verified, the tapes will be destroyed.

Do you agree to participate? Yes/No

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RELEVANCE

EQ1. To what extent are UNICEF's national and sub-national geo-targeting approaches (GTAs) to reach the most vulnerable children and their families prioritized in law, policy, regulation, strategies and plan of the Mongolian Government?

Alignment to government priorities

1. In your opinion, is UNICEF's targeting approach **aligned with national approaches to targeting r**esources to reach the most vulnerable in strategies, policies, budgeting and planning? If not, how do they differ? [1.1a]

- *Are there synergies (complementarity) between your approach and UNICEF's approach to targeting the most vulnerable? Please explain.*
- *In which thematic areas do you collaborate with UNICEF to reach the vulnerable children? (1.1b)*
- *Have these approaches been successful in reaching the targeted groups?*

Sub-probes: Opportunities and challenges? Lessons learned? Effect of Covid pandemic? Integrated a gender, equity and human rights-based approach? [1.1c-d]

Intersectoral approach

2. What are the **greatest (intersectoral/diverse) needs** of vulnerable children and their families in the sectors where your work? (1.2a-b)

- *Please describe the funding landscape, describing who is responsible amongst the different donors for the health and welfare of vulnerable children and how your organisation fits into this landscape.*

3. In your experience, is **UNICEF working intersectorally with LGAs** to meet the diverse needs of the vulnerable children and their families? Give examples (1.2c)

- To what extent, has your organisation **collaborated with UNICEF and other** partners to reach vulnerable children in the context of UNICEF supported activities? Please give examples.

Sub-probes: Opportunities and challenges? Lessons learned? Effect of Covid pandemic? Integrated a gender, equity and human rights-based approach? [1.2d-f]

EQ2 To what extent has the GTA in each output/thematic area aligned to the unique characteristics and problems faced by children in the selected GFAs during the last 2 CPs?

GTA alignment to the problem

4. In your opinion, **what are the biggest challenges** in reaching vulnerable children?

- Are there **any significant hotspots** for specific types of deprivation (e.g. education, HIV, violence)? Where? [2.1b]
- **Can these significant issues be adequately targeted** through programming? If not, why not? [2.1c]
- How has the **pandemic** affected the distribution of disadvantaged children and their families and what are the implications for targeting? What measures are the government (and partners) taking in light of this? (2.1e)

Targeting approach

5. Does your organisation have a particular approach to ensure your activities and intervention reach the most vulnerable families? (2.2a)

- What are the **key trade-offs** in the decisions surrounding the geographical targeting? (2.2b)
- How has the **pandemic** affected the distribution of disadvantaged children and their families and what are the implications for targeting? What measures are the government (and your organisation) taking in light of this? (2.2c)
- To what extent do your taregting approaches integrate a **gender, equity and human rights**? (2.2d)

EFFECTIVENESS

EQ3. To what extent has UNICEF's GTA contributed to the Country Programme's (CP) results and learning at the national and sub-national level reduced inequalities for children in a sustainable way (in GFAs compared to a non-GFAs)?

National policy advocacy

6. In your experience, has UNICEF used the results of the **activities they supported to inform national policies, guidance or administrative mechanisms**? How? Give examples. (3.1c)

- What is the sustainability of these efforts? Has there been wider scale up through government resources? Give examples. (3.1d)

- Do you know whether there was there are any good practice that can be scaled up to national level? Has this happened? If not, what have been the obstacles? (3.1d)

Sub-probes: Effect of Covid pandemic? Integrated a gender, equity and human rights-based approach?(3.1e-f))

Convention on the Rights of the Child (CRC)

7. Do national authorities and partners easily recognize the principles of the **Convention on the Rights of the Child**? (3.2a)

- How familiar are you with the CRC principles (9 building blocks)?
  - o To what extent is the **principle non- discrimination** embedded in national strategies, and approaches in practice? (i.e. children are supported regardless of their race, gender) If not, why not? Give examples. (3.2b)
  - o … principle of respecting the views of the child (3.2c)
  - o … **principle of children's rights to survival and development** (3.2d)
  - o … **principle that the best interest of the child** (3.2e)

- *What is the sustainability of efforts to embed Child Rights into the work that is being done at the national level? Give examples. (3.2f)*
  - o *Has there been wider scale up through government resources? ..at central (or local) government budgets level?*
  - o *Were there any amendments made in any ministry norms, regulations, strategies and regulations due to reflecting the CRC principles?*

Capacity building

8. Has UNICEF supported **capacity building** of national level partners to better target integrated services to vulnerable and disadvantaged children? Who received capacity building? For what? (3.3a)

- Is there **evidence that policymakers have used their new skills to better target interventions** to reach vulnerable children and families? Please give examples. (3.3b)

- *Has involvement of high-level officials in trainings improved advocacy and available staff to support targeting efforts at the sub-national level? (3.3c)*

- *What is the sustainability of these efforts? Has there been wider scale up through government resources? If so, financed by central or local government budgets? (3.3d)*

Sub-probes: Integrated a gender, equity and human rights-based approach? (3.3g)

LGA Planning and Budgeting

9. Did UNICEF engage **relevant officials at LGA level** in planning and budgeting processes to improve support and services for the most vulnerable children and their families? IN your observation, were **resources available** *to support targeting of vulnerable children? (3.4a)*

Data

10. To what extent did UNICEF contribute to **building the evidence bas**e on the needs of vulnerable children and their families and how to address them? (3.5a)

- Did the **situation analyses and other evidence generation activities effectively help partners in identifying and targeting** the needs and issues of disadvantaged children (boys/girls (gender); children with disabilities, children in remote areas, and ethnic minorities etc.)? Give examples. (3.5b)

- How well or to what extent do you **use UNICEF monitoring data/reports to adjust and improve** your planned activities or future plans? (3.5b)

- How has the **COVID-19 pandemic** affected the availability of data for targeting disadvantaged children and their families and what measures are the government and partners taking to overcome gaps or shortfalls? (3.5c)

- To what extent is the available data able to support targeting with a **gender, equity and human rights-based approach**? Please explain. (3.5d)

EQ4 To what extent has the UNICEF Child Friendly Community (CFC) approach helped to create an integrated, holistic, multisectoral safety net at sub-national levels to help meet the needs of the most disadvantaged children in the GFA (compared to non-GFA)?

Child Friendly Community

11. Are you aware of the **CFC approach advocated by UNICEF? In your experience, is it functional** (actively meeting, targeting resources, extending services etc) in the targeted Aimags and districts, or beyond? Give examples. (4.1a)

EFFICIENCY

EQ5 – To what extent has UNICEF targeting approach been implemented in a resource, time, and technically efficient manner?

Efficiency of GTA

12. Has the **targeting of vulnerable children subgroups facilitated collaboration** with other national and international stakeholders working on similar issues in the area? Why, why not? (5.1a)

- *Are there synergies and value add to the specific approaches of UNICEF to make them more efficient at reaching their target subgroups? Give examples of successful, synergistic approaches. Note challenges in terms of operational efficiency. (5.1d)*

- *Are there any other international/national/private players who contribute to UNICEF and the government's efforts in reaching the vulnerable children more efficiently? (5.1e)*

- *How has the pandemic affected the efficiency of the targeting of disadvantaged children and their families and what measures are the government (and UNICEF) taking to overcome gaps or shortfalls? How has the pandemic affected the efficiency of the targeting approaches and what measures are the government (and UNICEF) taking to overcome gaps or shortfalls? (5.1e)*

Efficiency of GTA approach

14. In your observation, were UNICEF's financial and human resources used efficiently (avoiding duplication of efforts with other partners, funds released in a timely manner; sufficient staffing and follow up to ensure programme continuity, current organizational structure of UNICEF Mongolia, strong partnerships, etc.) Give examples (5.2a)

- How has the pandemic affected the efficiency of the targeting of disadvantaged children and their families and what measures are the government (and UNICEF) taking to overcome gaps or shortfalls? (5.2b)

SUSTAINABILITY

EQ6 To what extent are GFA results achieved likely to continue after UNICEF funding has been withdrawn?

Sustainability

15. Which **targeting approaches advanced by UNICEF were the most sustainable**? Why? (6.1a)

Are there **alternative approaches** *to targeting that UNICEF could have taken to make its support to Government more sustainable? (6.1b)*

INTERVIEW PROTOCOL / GUIDE

Policymakers

Purpose: The most important points of this interview with policymakers is to find out whether UNICEF support is helping national actors to reach the most vulnerable in the areas where they work. The results of this evaluation will help UNICEF plan internally, and with the government, how to improve their support over the coming years

Logistics:

- *Duration between 60-90 min*
- *1 main interviewer, 1 note taker*
- *Have informed consent signed and get personal information (name, organization, gender, age) for participant list*

Introduction:

- *Introduce yourself, present the evaluation and also present the main purpose of the interview, that is, why it is important to have an interview with the informant.*
- *Explain confidentiality aspects as well as how the responses of the interviewee will be treated and processed on the basis of what it is stipulated in the UNEG evaluation standards.*

Introduction (in full):

UNICEF provides support at the national, provincial and community level through their implementing partners including local government authorities to strengthen services and support for the most vulnerable children and their families. **To ensure their support reaches the most vulnerable, they TARGET their support to specific Aimags and districts.** *Within programmes, such as education and health,* **they also try to target the most disadvantaged children and families.** *Together, these two approaches make up UNICEF's Geographical Targeting Approach. They also use this approach to select where in Mongolia they work. During the period 2012-2016 they worked in Khuvsgul Aimag and Nalaikh District. In the current period of 2016-2021, they have selected to work primarily in Govi-Altai, Zavkhan, Bayankhongor Aimags, and Bayanzurkh Districts.* **This interview is part of an evaluation of precisely UNICEF's geographic targeting approaches that aim to ensure their support is reaching the most vulnerable in Mongolian society.** *The results of this evaluation will help UNICEF plan with the government, how to improve their support over the coming years.*

Everything we discuss today will remain private. Your name will not be associated with your responses and all data will be anonymous. We will not share what you say with anyone, so please be honest and tell us what you really think about these issues. Your responses will help UNICEF to improve their programming and support, and ensure their future work continues to be strategically targeted.

Please feel free to answer only those questions you are comfortable with. With your permission, we would like to tape the interview to allow the interviewer to go back and check their notes to be sure they did not miss anything. Once the notes are verified, the tapes will be destroyed.

Do you agree to participate? Yes/No

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RELEVANCE

EQ1. To what extent are UNICEF's national and sub-national geo-targeting approaches (GTAs) to reach the most vulnerable children and their families prioritized in law, policy, regulation, strategies and plan of the Mongolian Government?

Alignment to government priorities

1. In your opinion, is UNICEF's targeting approach **aligned with national approaches to targeting r**esources to reach the most vulnerable in strategies, policies, budgeting and planning? If not, how do they differ? [1.1a]

- *When your [Ministry/Agency/Sector's] defines vulnerable children, what criteria are included?*
- *How does your [Ministry/Agency/Sector (e.g. health, education, etc)] target resources to the most vulnerable children and their families? Are these approaches written into law, policy or regulations? Which ones?*
- *In your opinion, are there synergies (complementarity) between line ministries' policies and strategies and UNICEF's approach to target the most vulnerable?*

2. In which **thematic areas** are UNICEF's targeting approaches most aligned to those of the GoM? [1.1b]

- *In which thematic areas and Aimags/Districts, do you collaborate with UNICEF to reach the vulnerable children?*
- *Have these approaches been successful in reaching the targeted groups?*

Sub-probes: Opportunities and challenges? Lessons learned? Effect of Covid pandemic? Integrated a gender, equity and human rights-based approach? [1.1c-d]

Intersectoral approach

3. What are the **greatest (intersectoral/diverse) needs** of vulnerable children and their families in the area (sector) where your work, and at what level of government is responsible for helping to meet those needs in the community, soum, aimag, District? (1.2a-b)

4. In your experience, is **UNICEF working intersectorally with LGAs** to meet the diverse needs of the vulnerable children and their families? Give examples (1.2c)

- To what extent, has your [*Ministry/Agency/Sector*] been **collaborating with other line ministries**, national and international partners to reach vulnerable children in the context of UNICEF supported activities. Please give examples.

Sub-probes: Opportunities and challenges? Lessons learned? Effect of Covid pandemic? Integrated a gender, equity and human rights-based approach? [1.2d-f]

EQ2 To what extent has the GTA in each output/thematic area aligned to the unique characteristics and problems faced by children in the selected GFAs during the last 2 CPs?

GTA alignment to the problem

5. In your opinion, **what are the biggest challenges** in reaching vulnerable children? Is the support from UNICEF, well focused on where the biggest problems are? Are the Aimags (Govi-Altai, Zavkhan, Bayankhongor, Khuvsgul) and districts (Bayanzurkh and Nalaikh) where UNICEF is/was supporting, the ones with the greatest need? Why? (2.1a)

- Are there **any significant hotspots** for specific types of deprivation (e.g. education, HIV, violence) that fall outside the aimags and districts supported by UNICEF (GFAs)? [2.1b]
- **Can these significant issues be adequately targeted** through programming? If not, why not? [2.1c]
- **Should UNICEF be working in other Aimags** to better address the needs of the most vulnerable children in Mongolia? (2.1d)
- How has the **pandemic** affected the distribution of disadvantaged children and their families and what are the implications for targeting? What measures are the government (and UNICEF) taking in

light of this? (2.1e)

Targeting approach

6. Are there **alternative approaches to targeting** that would be better suited to address specific thematic issues? Why? Why not? (2.2a)

- What are the **key trade-offs** in the decisions surrounding the geographical targeting? (2.2b)
- How has the **pandemic** affected the distribution of disadvantaged children and their families and what are the implications for targeting? What measures are the government (and UNICEF) taking in light of this? (2.2c)
- To what extent do the GTA and other approaches integrate a **gender, equity and human rights**? (2.2d)

EFFECTIVENESS

EQ3. To what extent has UNICEF's GTA contributed to the Country Programme's (CP) results and learning at the national and sub-national level reduced inequalities for children in a sustainable way (in GFAs compared to a non-GFAs)?

National policy advocacy

7. Has UNICEF engaged with your (Ministry/Agency/Sector) to **assess the various "national policy" constraints** that affect the different types of services delivered locally for vulnerable families? (3.1b)

8. In your experience, has UNICEF used the results of the **activities they supported to inform national policies, guidance or administrative mechanisms**? How? Give examples. (3.1c)

- What is the sustainability of these efforts? Has there been wider scale up through government resources? Give examples. (3.1d)
- Do you know whether there was there are any good practice that can be scaled up to national level? Has this happened? If not, what have been the obstacles? (3.1d)
- Was that good practice then financed with Central government budget? (3.1d)

Sub-probes: Effect of Covid pandemic? Integrated a gender, equity and human rights-based approach? (3.1e-f))

Convention on the Rights of the Child (CRC)

9. Do national authorities and partners easily recognize the principles of the **Convention on the Rights of the Child**? (3.2a)

- How familiar are you with the CRC principles (9 building blocks)?
  - o To what extent is the **principle non- discrimination** embedded in national strategies, and approaches in practice? (i.e. children are supported regardless of their race, gender) If not, why not? Give examples. (3.2b)
  - o … principle of respecting the views of the child (3.2c)
  - o … **principle of children's rights to survival and development** (3.2d)
  - o … **principle that the best interest of the child** (3.2e)
- *What is the sustainability of efforts to embed Child Rights into the work that is being done at the national level? Give examples. (3.2f)*
  - o *Has there been wider scale up through government resources? ..at central (or local) government budgets level?*
  - o *Were there any amendments made in any ministry norms, regulations, strategies and regulations due to reflecting the CRC principles?*

Capacity building

10. Has UNICEF supported capacity building of national level partners to better target integrated services to vulnerable and disadvantaged children? Did you participate? What training did you receive? (3.3a)

11. Is there evidence that policymakers (line ministries, government agencies at the Municipal level, district authorities and governor's office or hurals at both soum, aimag and district level) have used their new skills to better target interventions to reach vulnerable children and families? Please give examples. (3.3b)

- *Has involvement of high-level officials in trainings improved advocacy and available staff to support targeting efforts at the sub-national level? (3.3c)*
- *What is the sustainability of these efforts? Has there been wider scale up through government resources? If so, financed by central or local government budgets? (3.3d)*

Sub-probes: Lessons learned? Effect of COVID pandemic? Integrated a gender, equity and human rights-based approach? (3.3e-g)

LGA Planning and Budgeting

12. Did UNICEF engage **relevant officials of your Ministry** in planning and budgeting processes to improve support and services for the most vulnerable children and their families? Were **national level resources available** to support targeting of vulnerable children? (3.4a)

- Are you familiar with an example of **UNICEF engagement in LDF planning or regular government sector budgeting** process or to address needs of vulnerable children? provided in planning and budgeting? Give examples.
- Were there **differences in strategy** between UNICEF engagement with the regular social sector budgeting processes, and with the LDF budget process? (3.4b)
- Was this **support aimed at improving current practice /procedure** in a manner (e.g. at levels of per capita funding which government can sustain without external support; working through present budgeting procedures and institutional arrangements etc.) which could be sustained / replicated through regular budget and spending systems? (3.4c)
- Did **strategies distinguish between child-related services under aimags (under Budget Law, etc.) and central government authority** (such as capital investments – aside from the LDF - or MoLSP transfers)? (3.4d)
  - o If yes, **did strategies properly assess the various policy, financing and other systemic constraints** on local discretion arising from different types of decentralization and delegation?
  - o Which budgets (e.g. local revenue sources; special purpose transfers, other) or delivery arrangements were used to support the UNICEF intervention strategies?
  - o To what extent, have LDF been used to support vulnerable children (e.g. from soum/khoroo or aimag/district LDF allocations)? Give examples.
  - o Were there any difficulties arising from the LDF or other regulations, or in the budget process, to giving such priority for vulnerable children?
- Are there any example of involvement/investment of private sector as a result of UNICEF's engagement/sensitization? (3.4e)
- Were the lessons well communicated to appropriate national authorities to promote changes in the policy and 'systemic' framework for local service delivery? Explore why it worked or didn't work in the GFA? (3.4f)
- What role hurals have played in planning, budgeting for those activities which were submitted for the local budget (whether for LDF funding or for special purpose grant funding)- did they approve, or change, or reject- what and why? And did hural members play any role in the planning activities before budget submission? (3.4g)

Sub-probes:Effect of COVID pandemic? Integrated a gender, equity and human rights-based approach?(3.4h-i)

Data

13. To what extent did UNICEF contribute to **building the evidence bas**e on the needs of vulnerable children and their families and how to address them? (3.5a)

- Did the **situation analyses and other evidence generation activities effectively help in identifying and targeting** the needs and issues of disadvantaged children (boys/girls (gender); children with disabilities, children in remote areas, and ethnic minorities etc.)? Give examples. (3.5b)
- How well or to what extent do you **use monitoring data/reports to adjust and improve** your planned activities or future plans? (3.5b)
- How has the **COVID-19 pandemic** affected the availability of data for targeting disadvantaged children and their families and what measures are the government (and UNICEF) taking to overcome gaps or shortfalls? (3.5c)
- To what extent is the available data able to support targeting with a **gender, equity and human rights-based approach**? Please explain. (3.5d)

EQ4 To what extent has the UNICEF Child Friendly Community (CFC) approach helped to create an integrated, holistic, multisectoral safety net at sub-national levels to help meet the needs of the most disadvantaged children in the GFA (compared to non-GFA)?

Child Friendly Community

14. Is the **CFC approach functional** (actively meeting, targeting resources, extending services etc) in the targeted Aimags and districts, or beyond? Give examples. (4.1a)

- How are CFC arrangements established within the context of other official local institutional arrangements (e.g. CFC interdisciplinary team/ multi-sectoral committee)? Please describe the institutional arrangements. (4.1b)
- Did **materials and information** from national government (Ministries/Agencies/Sectors) include the CFC principles? Were there other ways in which the principles were evident in the work of the GoM? (4.1c)
- How are **CFC activities and institutional arrangements financed** (e.g. which sources; budgets, financing agreements)? (4.1d)
- What were the **opportunities and challenges** in promoting Child Friendly Communities (CFC) intersectoral cooperation at the policy level in Mongolia (National Council for Children under the Prime Minister)? (4.1e)
- What is the sustainability of these efforts? Has there been wider scale up through government resources? Give examples. (4.1f)
- What are some specific challenges in reaching the most disadvantaged children, and is the CFC approach effective in overcoming these? (4.1g)

Sub-probes: Effect of Covid pandemic? Integrated a gender, equity and human rights-based approach? (4.1h-i)

EFFICIENCY

EQ5 – To what extent has UNICEF targeting approach been implemented in a resource, time, and technically efficient manner?

Efficiency of GTA

15. Has the **targeting of vulnerable children subgroups facilitated collaboration** with other national and international stakeholders working on similar issues in the area? Why, why not? (5.1a)

- Have the UNICEF supported targeting through your [*Ministry/Agency/Sector*] **facilitated collaboration with other ministries, agencies, sectors**? Was duplication of efforts avoided? (5.1b)
- Has UNICEF **targeting of subgroups** been strategic from an efficiency point of view (e.g. best use of human and financial resources, time)? Please explain. (5.1c)
- Are there **other ways to provide support** to vulnerable families that could have been more efficient, or synergistic? Give examples of successful, synergistic approaches. (5.1d)
- Are there any **other international/national/private players** who contribute to UNICEF and the government's efforts in reaching the vulnerable children more efficiently? (5.1e)
- How has the **pandemic** affected the efficiency of the targeting approaches and what measures are the government (and UNICEF) taking to overcome gaps or shortfalls? (5.1f)

Efficiency of GTA approach

16. In your observation, were UNICEF's financial and human resources used efficiently (avoiding duplication of efforts with other partners, funds released in a timely manner; sufficient staffing and follow up to ensure programme continuity, current organizational structure of UNICEF Mongolia, strong partnerships, etc.) Give examples (5.2a)

- How has the pandemic affected the efficiency of the targeting of disadvantaged children and their families and what measures are the government (and UNICEF) taking to overcome gaps or shortfalls? (5.2b)

SUSTAINABILITY

EQ6 To what extent are GFA results achieved likely to continue after UNICEF funding has been withdrawn?

Sustainability

17. Which **targeting approaches advanced by UNICEF were the most sustainable**? Why? (6.1a)

- Are there **alternative approaches** to targeting that UNICEF could have taken to make its support to Government more sustainable? (6.1b)
- Which of UNICEF's specific programmes and interventions are **likely to continue** after UNICEF funding is withdrawn? How would they be financed and from which budget? (6.1c)
- Are the **geographical focus areas the right context** to showcase UNICEF's targeting strategies including the Child Friendly Community (CFC) approach? (6.1d)
- How has the pandemic affected likelihood that UNICEF's programmes and interventions will be continued after funding is withdrawn? (6.1e)

INTERVIEW PROTOCOL / GUIDE

Government and NGO Implementing Partners (IPs)

Purpose: The most important points of an interview with government officials and practitioners is to find out whether UNICEF support is reaching the most vulnerable in the areas where they work. The results of this evaluation will help UNICEF plan with the government, how to improve their support over the coming years

Logistics:

- *Duration between 60-90 min*
- *1 main interviewer, 1 note taker*
- *Have informed consent signed and get personal information (name, organization, gender, age) for participant list*

Introduction:

- *Introduce yourself, present the evaluation and also present the main purpose of the interview, that is, why it is important to have an interview with the informant.*
- *Explain confidentiality aspects as well as how the responses of the interviewee will be treated and processed on the basis of what it is stipulated in the UNEG evaluation standards.*

Introduction (in full):

UNICEF provides support at the national, provincial and community level through their implementing partners including local government authorities to strengthen services and support for the most vulnerable children and their families. **To ensure their support reaches the most vulnerable, they TARGET their support to specific Aimags and districts.** *Within programmes, such as education and health,* **they also try to target the most disadvantaged children and families.** *Together, these two approaches make up UNICEF's Geographical Targeting Approach. They also use this approach to select where in Mongolia they work. During the period 2012-2016 they worked in Khuvsgul Aimag and Nalaikh District. In the current period of 2016-2021, they have selected to work primarily in Govi-Altai, Zavkhan, Bayankhongor Aimags, and Bayanzurkh Districts.* **This interview is part of an evaluation of precisely UNICEF's geographic targeting approaches that aim to ensure their support is reaching the most vulnerable in Mongolian society.** *The results of this evaluation will help UNICEF plan with the government, how to improve their support over the coming years.*

Everything we discuss today will remain private. Your name will not be associated with your responses and all data will be anonymous. We will not share what you say with anyone, so please be honest and tell us what you really think about these issues. Your responses will help UNICEF to improve their programming and support, and ensure their future work continues to be strategically targeted.

Please feel free to answer only those questions you are comfortable with. With your permission, we would like to tape the interview to allow the interviewer to go back and check their notes to be sure they did not miss anything. Once the notes are verified, the tapes will be destroyed.

Do you agree to participate? Yes/No

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RELEVANCE

EQ1. To what extent are UNICEF's national and sub-national geo-targeting approaches (GTAs) to reach the most vulnerable children and their families prioritized in law, policy, regulation, strategies and plan of the Mongolian Government?

Alignment to government priorities

1. In your opinion, is UNICEF's targeting approach **aligned with national approaches to targeting r**esources to reach the most vulnerable in strategies, policies, budgeting and planning? If not, how do they differ? [1.1a]

- *When your [Ministry/Agency/Sector's] defines vulnerable children, what criteria are included?*
- *How does your [Ministry/Agency/Sector (e.g. health, education, etc)] target resources to the most vulnerable children and their families? Are these approaches written into law, policy or regulations? Which ones?*
- *In your opinion, are there synergies (complementarity) between line ministries' policies and strategies and UNICEF's approach to target the most vulnerable?*

2. In which **thematic areas** are UNICEF's targeting approaches most aligned to those of the GoM? [1.1b]

- *In which thematic areas, do you collaborate with UNICEF in [name of Aimags] to reach the vulnerable children?*
- *Have these approaches been successful in reaching the targeted groups?*

Sub-probes: Opportunities and challenges? Lessons learned? Effect of Covid pandemic? Integrated a gender, equity and human rights-based approach? [1.1c-d]

Intersectoral approach

3. What are the **greatest (intersectoral/diverse) needs** of vulnerable children and their families in the area (sector) where your work, and who is responsible for helping to meet those needs in the community, soum, aimag, District?? (1.2a-b)

4. How is **UNICEF working intersectorally with [*ministrys/agency*'s]** to meet the diverse needs of the vulnerable children and their families? Give examples (1.2c)

- To what extent, has your [*Ministry/Agency/Sector*] been **collaborating with other line ministries**, national and international partners to reach the vulnerable children under UNICEF programme/ activities. Please give examples.

Sub-probes: Opportunities and challenges? Lessons learned? Effect of Covid pandemic? Integrated a gender, equity and human rights-based approach? [1.2d-f]

EQ2 To what extent has the GTA in each output/thematic area aligned to the unique characteristics and problems faced by children in the selected GFAs during the last 2 CPs?

GTA alignment to the problem

5. In your opinion, **what are the biggest challenges** in reaching vulnerable children? Is the support from UNICEF, well focused on where the biggest problems are? Are the Aimags (Govi-Altai, Zavkhan, Bayankhongor, Khuvsgul) and districts (Bayanzurkh and Nalaikh) where UNICEF is/was supporting, the ones with the greatest need? Why? (2.1a)

- Is **UNICEF addressing the most challenging issues** and problems in their selected aimags and districts? (2.1b)
- Are there **any significant hotspots** for specific types of deprivation (e.g. education, HIV, violence) that fall outside the aimags and districts supported by UNICEF (GFAs)?[2.1b]
- **Can these significant issues be adequately targeted** through programming? If not, why not? [2.1c]
- **Should UNICEF be working in other Aimags** to better address the needs of the most vulnerable children in Mongolia? (2.1d)

- How has the **pandemic** affected the distribution of disadvantaged children and their families and what are the implications for targeting? What measures are the government (and UNICEF) taking in light of this? (2.1d)

Targeting approach

6. Are there **alternative approaches or trade-offs to targeting** that would be better suited to address specific thematic issues? why? Why not? (2.2a-b)

- How has the **pandemic** affected the distribution of disadvantaged children and their families and what are the implications for targeting? What measures are the government (and UNICEF) taking in light of this? (2.2c)
- To what extent do the GTA and other approaches integrate a **gender, equity and human rights**? (2.2d)

EFFECTIVENESS

EQ3. To what extent has UNICEF's GTA contributed to the Country Programme's (CP) results and learning at the national and sub-national level reduced inequalities for children in a sustainable way (in GFAs compared to a non-GFAs)?

National policy advocacy

7. Has UNICEF, to your knowledge, **assessed the various "national policy" constraints** that affect the different types of services delivered locally for vulnerable families? (3.1b)

8. How has UNICEF used the results of the **activities they supported to influence national policies**? Which national polices been amended? Give examples. (3.1c)

- Do you know whether there was there are any good practice that can be sustained and scaled up to national level? Has this happened? If not, what have been the obstacles? (3.1d)
- Was that good practice then financed with Central government budget? (3.1e)

Sub-probes: Opportunities and challenges? Lessons learned? Effect of Covid pandemic? Integrated a gender, equity and human rights-based approach? (3.1f-g)

Convention on the Rights of the Child (CRC)

9. Do national authorities and partners easily recognize the principles of the **Convention on the Rights of the Child**? (3.2a)

- How familiar are you with the CRC principles (9 building blocks)?
  - To what extent is the **principle non- discrimination** embedded in national strategies, and approaches in practice? (i.e. children are supported regardless of their race, gender) If not, why not? Give examples. (3.2b)
  - ... principle of respecting the views of the child (3.2c)
  - ... **principle of children's rights to survival and development** (3.2d)
  - ... **principle that the best interest of the child** (3.2e)
- *What is the sustainability of efforts to embed Child Rights into the work that is being done at the sub-national level? Give examples. (3.2f)*
  - *Has there been wider scale up through government resources? ..at central or local government budgets level?*
  - *Were there any amendments made in any ministry norms, regulations, strategies and regulations due to reflecting the CRC principles?*

Capacity building

10. Has UNICEF supported **capacity building** of its implementing partners at the national and sub-national levels to better target integrated services to vulnerable and disadvantaged children? Did you participate? What training did you receive? (3.3a)

11. Is there **evidence that policymakers** (line ministries, government agencies at the Municipal level, district authorities and governor's office or hurals at both soum, aimag and district level) **have used their new skills to better target interventions** to reach vulnerable children and families? Please give examples. (3.3b)

- *Has involvement of high-level officials in trainings improved advocacy and available staff to support targeting efforts at the sub-national level? (3.3c)*
- *What is the sustainability of these efforts? Has there been wider scale up through government resources? If so, financed by central or local government budgets? (3.3d)*

Sub-probes: Lessons learned? Effect of COVID pandemic? Integrated a gender, equity and human rights-based approach? (3.3e-g)

LGA Planning and Budgeting

12. Did UNICEF engage **relevant officials of your Ministry** in planning and budgeting processes to improve support and services for the most vulnerable children and their families? Were **local resources available** to support targeting of vulnerable children? (3.4a)

- Are you familiar with an example of **UNICEF engagement in LDF planning or regular government sector budgeting** process or to address needs of vulnerable children? provided in planning and budgeting? Give examples.
- Were there **differences in strategy** between UNICEF engagement with the regular social sector budgeting processes, and with the LDF budget process? (3.4b)
- Was this **support aimed at improving current practice /procedure** in a manner (e.g. at levels of per capita funding which government can sustain without external support; working through present budgeting procedures and institutional arrangements etc.) which could be sustained / replicated through regular budget and spending systems? (3.4c)
- Did **strategies distinguish between child-related services under aimags (under Budget Law, etc.) and central government authority** (such as capital investments – aside from the LDF - or MoLSP transfers)? (3.4d)
  o If yes, **did strategies properly assess the various policy, financing and other systemic constraints** on local discretion arising from different types of decentralization and delegation?
  o Which budgets (e.g. local revenue sources; special purpose transfers, other) or delivery arrangements were used to support the UNICEF intervention strategies?
  o To what extent, have LDF been used to support vulnerable children (e.g. from soum/khoroo or aimag/district LDF allocations)? Give examples.
  o Were there any difficulties arising from the LDF or other regulations, or in the budget process, to giving such priority for vulnerable children?
- Are there any example of involvement/investment of private sector as a result of UNICEF's engagement/sensitization? (3.4e)
- What role hurals have played in planning, budgeting for those activities which were submitted for the local budget (whether for LDF funding or for special purpose grant funding) - did they approve, or change, or reject - what and why? And did hural members play any role in the planning activities before budget submission? (3.4f)

Sub-probes: Effect of COVID pandemic? Integrated a gender, equity and human rights-based approach? (3.4g-i)

Data

13. To what extent did UNICEF contribute to **building the evidence bas**e on the needs of vulnerable children and their families and how to address them? (3.5a)

- Did the **situation analyses and other evidence generation activities effectively help in identifying and targeting** the needs and issues of disadvantaged children (boys/girls (gender); children with disabilities, children in remote areas, and ethnic minorities etc.)? Give examples. (3.5b)
- How well or to what extent do you **use monitoring data/reports to adjust and improve** your planned activities or future plans? (3.5b)
- How has the **COVID-19 pandemic** affected the availability of data for targeting disadvantaged children and their families and what measures are the government (and UNICEF) taking to overcome gaps or shortfalls? (3.5c)
- To what extent is the available data able to support targeting with a **gender, equity and human rights-based approach**? Please explain. (3.5d)

EQ4 To what extent has the UNICEF Child Friendly Community (CFC) approach helped to create an integrated, holistic, multisectoral safety net at sub-national levels to help meet the needs of the most disadvantaged children in the GFA (compared to non-GFA)?

Child Friendly Community

14. Is the **CFC approach functional** (actively meeting, targeting resources, extending services etc) in the targeted Aimags and districts, or beyond? Give examples. (4.1a)

- How are CFC arrangements established within the context of other official local institutional arrangements (e.g. CFC interdisciplinary team/ multi-sectoral committee)? Please describe the institutional arrangements. (4.1b)
- Did **materials and information** from the LGA include the CFC principles? Were there other ways in which the principles were evident in the work of the LGA? (4.1c)
- How are **CFC activities and institutional arrangements financed** (e.g. which sources; budgets, financing agreements)? (4.1d)
- What were the **opportunities and challenges** in promoting Child Friendly Communities (CFC) intersectoral cooperation at the policy level in Mongolia (National Council for Children under the Prime Minister)? (4.1e)
- What is the sustainability of these efforts? Has there been wider scale up through government resources? Give examples. (4.1f)
- What are some specific challenges in reaching the most disadvantaged children, and is the CFC approach effective in overcoming these? (4.1g)

Sub-probes: Effect of Covid pandemic? Integrated a gender, equity and human rights-based approach? (4.1h-i)

EFFICIENCY

EQ5 – To what extent has UNICEF targeting approach been implemented in a resource, time, and technically efficient manner?

Efficiency of GTA

15. Has the **targeting of vulnerable children subgroups facilitated collaboration** with other national and international stakeholders working on similar issues in the area? Why, why not? (5.1a)

- Have the UNICEF supported targeting through your [*Ministry/Agency/Sector*] **facilitated collaboration with other ministries, agencies, sectors**? Was duplication of efforts avoided? (5.1b)
- Has UNICEF **targeting of subgroups** been strategic from an efficiency point of view (e.g. best use of human and financial resources, time)? Please explain. (5.1c)
- Are there **other ways to provide support** to vulnerable families that could have been more efficient, or synergistic? Give examples of successful, synergistic approaches. (5.1d)
- Are there any **other international/national/private players** who contribute to UNICEF and the government's efforts in reaching the vulnerable children more efficiently? (5.1e)
- How has the **pandemic** affected the efficiency of the targeting approaches and what measures are the government (and UNICEF) taking to overcome gaps or shortfalls? (5.1f)

Efficiency of GTA approach

16. Were UNICEF financial and human resources used efficiently (avoiding duplication of efforts with other partners, funds released in a timely manner; sufficient staffing and follow up to ensure programme continuity, current organizational structure of UNICEF Mongolia, strong partnerships, etc.) Give examples (5.2a)

- How has the pandemic affected the efficiency of the targeting of disadvantaged children and their families and what measures are the government (and UNICEF) taking to overcome gaps or shortfalls? (5.2b)

SUSTAINABILITY

EQ6 To what extent are GFA results achieved likely to continue after UNICEF funding has been withdrawn?

Sustainability

17. Which **targeting approaches advanced by UNICEF were the most sustainable**? Why? (6.1a)

- Are there **alternative approaches** to targeting that UNICEF could have taken to make its support to Government more sustainable? (6.1b)
- Which of UNICEF's specific programmes and interventions are **likely to continue** after UNICEF funding is withdrawn? How would they be financed and from which budget? (6.1c)
- Are the **geographical focus areas the right context** to showcase UNICEF's targeting strategies including the Child Friendly Community (CFC) approach? (6.1d)
- How has the pandemic affected likelihood that UNICEF's programmes and interventions will be continued after funding is withdrawn? (6.1e)

FOCUS GROUP DISCUSSION PROTOCOL / GUIDE

Social Workers and Teachers

Purpose: The most important points of the focus group discussion with Social workers and teachers is to find out whether UNICEF support is reaching the most vulnerable in GFAs. The results of this evaluation will help UNICEF plan with the government, how to improve their support over the coming years

Logistics:
- *Duration between 90 min*
- *1 main facilitator, 1 note taker*
- *Have informed consent signed and get personal information (name, organization, gender, age) for participant list*

Introduction:
- *Introduce yourself, present the evaluation and also present the main purpose of the interview, that is, why it is important to have an interview with the informant.*
- *Explain confidentiality aspects as well as how the responses of the interviewee will be treated and processed on the basis of what it is stipulated in the UNEG evaluation standards.*

Introduction (in full):

UNICEF provides support at the national, provincial and community level through their implementing partners including local government authorities to strengthen services and support for the most vulnerable children and their families. To ensure their support reaches the most vulnerable, they target their support to specific aimag and districts. Within programmes, such as education and health, they also try to target the most disadvantaged children and families. This interview is part of an evaluation of UNICEF's geographic targeting approaches that aim to ensure their support is reaching the most vulnerable in Mongolian society. The results of this evaluation will help UNICEF plan with the government, how to improve their support over the coming years.

You have been invited to participate in this focus group because you are the people most familiar with the needs of children and their families in the community.

Everything we discuss today will remain private. Your name will not be associated with your responses and all data will be anonymous. We will not share what you say with anyone, so please be honest and tell us what you really think about these issues. Your responses will help UNICEF to improve their programming and support, and ensure their future work continues to be strategically targeted. Please feel free to answer only those questions you feel comfortable with. With your permission, we would like to tape the FGD to allow the facilitator to go back and check their notes to be sure they did not miss anything. Once the notes are verified, the tapes will be destroyed.

Do you agree to participate in the focus group discussion? Yes/No

Relevance: Targeting and reaching the most vulnerable children and families (EQ2.1 and 2.2)

1. In your school/social service, what are the biggest challenges in reaching vulnerable children in your aimag/ district? Are the problems different for girls and boys? [*Note down problems mentioned*] (2.1a)

2. When compared to other Aimag/districts, how big are these problems for the education and social protection sectors? (2.1b)

3. Is there **special support provided to families and children** that need it the most? Are there situations where some families/children are prioritised by the system? When? (2.1c)

- *Are those systems fair and do they successfully reach those in most need? (2.1c)*

4. Are there **other approaches** to targeting that would be better suited to meet the needs of the most vulnerable families in any of the specific areas? (2.2a)

- *What are the benefits and disadvantages of the particular targeting approaches that are currently taking place? In practice, are they useful in identifying and targeting those that need it most? (2.2b)*

5. *How has the pandemic affected your ability to reach the most vulnerable? (2.2c)*

Effectiveness: How effective has the targeting approach been in your community?

*Local aimags/districts and even the national government has been working to implement the **Convention on the Rights of the Child** with UNICEF support. The following questions are to about how well they are integrated child rights into their support for children and families in the community.*

6. Have you heard of principles of the Convention on the Rights of the Child? (3.2a)

- *Here are some ideas about children's rights. Can you say if you think each one applies to you/ your child in your life?*
    - Every child and young person is treated fairly, whatever their age, gender, ethnicity, religion, language, family background or any other status. (Non-discrimination) (3.2b)
    - Children and young people are involved in deciding what is best for them. Children have a say in things that affect them and have their views taken seriously. (3.2c)
    - Children are be treated with care and respect in all circumstances – in schools, hospitals, police stations, public spaces or children's homes. (Survival and development) (3.2d)
    - The best interests of the child are always top priority in decisions and actions that affect children and young people. (3.2e)

Do you think that the LGA has the capacity to successfully reach the most vulnerable families in your community? (EQ3.3)

7. In your opinion, is the **LGA reaching the children and families most in need**? Do you feel that the local government has improved services and support for vulnerable children over the past 4 years? 8 years? If so, can you give examples? (3.2a)

- *Did UNICEF's support increase the capacity of local authorities to provide integrated services for vulnerable children E.g. Children Friendly communities; multi-sector committees; Children's councils? other? Give examples. (3.2b)*

CFC: In the GFAs, the UNICEF Child Friendly Community (CFC) approach has helped to create an integrated, holistic, multisectoral safety net at sub-national levels to help meet the needs of the most disadvantaged children.

8. Has a Child friendly Community Approach been implemented in your aimag/district?

- *Generally, do you think that the following things are true about your community? (4.1a)*
    - Children are protected from exploitation, violence and abuse.
    - Children have a good start in life and grow up healthy and cared for.

- Children have access to quality social services.
- Children experience quality, inclusive and participatory education and skills development.
- Children express their opinions and influence decisions that affect them.
- Children participate in family, cultural, city/community and social life.
- Children live in a safe secure and clean environment.
- Children meet friends and have places to play and enjoy themselves.
- Children have a fair chance in life regardless of their ethnic origin, religion, income, gender or ability.

- *Were you part of the activities under CFC? If so, give at least one example.*

Sustainability

9. Do you have any recommendations for UNICEF or the LGAs on how the most vulnerable families could be better supported? (General)

That is the end of our questions. Is there anything you would like to add? Do you have any questions?

Thank you for taking the time to talk with us.

FOCUS GROUP DISCUSSION PROTOCOL / GUIDE

Children and Families

Purpose: The most important points of the focus group discussion with children and families is to find out whether UNICEF support is reaching the most vulnerable in GFAs. The results of this evaluation will help UNICEF plan with the government, how to improve their support over the coming years

Logistics:
- *Duration between 90 min*
- *1 main facilitator, 1 note taker*
- *Have informed consent signed and get personal information (name, organization, gender, age) for participant list*

Introduction:
- *Introduce yourself, present the evaluation and also present the main purpose of the interview, that is, why it is important to have an interview with the informant.*
- *Explain confidentiality aspects as well as how the responses of the interviewee will be treated and processed on the basis of what it is stipulated in the UNEG evaluation standards.*

Introduction (in full):

UNICEF provides support at the national, provincial and community level through their implementing partners including local government authorities to strengthen services and support for the most vulnerable children and their families. To ensure their support reaches the most vulnerable, they target their support to specific aimag and districts. Within programmes, such as education and health, they also try to target the most disadvantaged children and families. This interview is part of an evaluation of UNICEF's geographic targeting approaches that aim to ensure their support is reaching the most vulnerable in Mongolian society. The results of this evaluation will help UNICEF plan with the government, how to improve their support over the coming years.

Everything we discuss today will remain private. Your name will not be associated with your responses and all data will be anonymous. We will not share what you say with anyone, so please be honest and tell us what you really think about these issues. Your responses will help UNICEF to improve their programming and support, and ensure their future work continues to be strategically targeted. Please feel free to answer only

those questions you feel comfortable with. With your permission, we would like to tape the FGD to allow the facilitator to go back and check their notes to be sure they did not miss anything. Once the notes are verified, the tapes will be destroyed.

Your children will be asked a few questions about which children they think need additional support and how the schools, and local government services should be supporting them. Their names and opinions will be kept confidential and no names will be linked to responses.

Do you agree to participate and to allow your child to be asked a few questions? Yes/No

Relevance: Targeting and reaching the most vulnerable children and families (EQ2.1 and 2.2)

1. In your community, are there many **families and children affected by problems** relating to water, sanitation, hygiene (WASH), nutrition, social protection (and other issues)? (2.1a)

2. For each thematic issue (e.g. WASH, nutrition, social protection etc), is there **special support provided to families and children** that need it the most? (2.1c)

- *Are there situations where some families/children are prioritised by the system? When?*
- *Are those systems fair and do they successfully reach those in most need?*

3. How has the pandemic affected the problems facing disadvantaged children and their families? Has there been any response from UNICEF/the government to support at this time?

4. Are there other approaches to targeting that would be better to meet the needs of the most vulnerable families in any of the specific areas? (2.2a)

Effectiveness: How effective has the targeting approach been in your community? [EQ3.2, 3.3, 3.4]

*Local aimags/districts and even the national government has been working to implement the **Convention on the Rights of the Child** with UNICEF support. The following questions are to about how well they are integrated child rights into their support for children and families in the community.*

5. Have you heard of principles of the Convention on the Rights of the Child? (3.2a)

- *Here are some ideas about children's rights. Can you say if you think each one applies to you/ your child in your life?*
  - Every child and young person is treated fairly, whatever their age, gender, ethnicity, religion, language, family background or any other status. (Non-discrimination) (3.2b)
  - Children and young people are involved in deciding what is best for them. Children have a say in things that affect them and have their views taken seriously. (3.2c)
  - Children are be treated with care and respect in all circumstances – in schools, hospitals, police stations, public spaces or children's homes. (Survival and development) (3.2d)
  - The best interests of the child are always top priority in decisions and actions that affect children and young people. (3.2e)

Do you think that the LGA has the capacity to successfully reach the most vulnerable families in your community? (EQ3.3)

6. In your opinion, is the **LGA reaching the children and families most in need**? Do you feel that the local government has improved services and support for vulnerable children over the past 4 years? 8 years? If so, can you give examples? (3.2a)

CFC: In the GFAs, the UNICEF Child Friendly Community (CFC) approach has helped to create an integrated, holistic, multisectoral safety net at sub-national levels to help meet the needs of the most disadvantaged children.

7. Is your aimag/district a Child Friendly Community?
- *Generally, do you think that the following things are true about your community? (4.1a)*

- Children are protected from exploitation, violence and abuse.
- Children have a good start in life and grow up healthy and cared for.
- Children have access to quality social services.
- Children experience quality, inclusive and participatory education and skills development.
- Children express their opinions and influence decisions that affect them.
- Children participate in family, cultural, city/community and social life.
- Children live in a safe secure and clean environment.
- Children meet friends and have places to play and enjoy themselves.
- Children have a fair chance in life regardless of their ethnic origin, religion, income, gender or ability.

- *Can you name any activities of the Child friendly Community approach?*

8. Do you have any recommendations for UNICEF or the LGAs on how the most vulnerable families could be better supported? (General)

That is the end of our questions. Is there anything you would like to add? Do you have any questions?

Thank you for taking the time to talk with us.

Annex 5 – List of References

1. Government of Mongolia (2020) Action Plan of the Government of Mongolia (2020-2024). Ulaanbaatar, Mongolia

2. Asian Development Bank. (2017). Reforming Social Welfare Programs in Mongolia. Ulaanbaatar, Mongolia.

3. New Frontier LLC (2016). Budget Analysis and Costing of the Child Protection Services in Mongolia: Synthesis Report. Ulaanbaatar, Mongolia

4. Budget Law. (2011, December 23). Ulaanbaatar, Mongolia.

5. Citizens' Representatives Hural of Bayanzurkh. (2019). Approving the Ensuring gender equality subprogram 2020-2025. Ulaanbaatar, Mongolia.

6. Consultation Meeting of Midline Evaluation of Programme. (2019). Ulaanbaatar, Mongolia: Social Development Department of Bayanzurkh district.

7. Economic Policy Research Institute. (2016). Study of Child Poverty in Mongolia Using Multiple Overlapping Deprivation Analysis, Mongolia

8. Enkhbat, T., and Banzragch, U. (2018). Child Rights Situation in Mongolia. Ulaanbaatar: Save the Children.

9. Five-year General Guidelines for the Development of Mongolia in 2021-2025. (2020, August 28). Ulaanbaatar, Mongolia.

10. Government of Mongolia. (2016, May 22). Government Resolutions 242. Ulaanbaatar, Mongolia.

11. Government of Mongolia, UNICEF, & National Authority for Children. (2014). Analysis of the Situation of Children in Mongolia. Ulaanbaatar.

12. Government of Mongolia. (2006). The Mongolian Law on Administrative and Territorial Units and Their Governance.

13. Government of Mongolia. (2011). Integrated Budget Law.

14. Government of Mongolia. (2011). Unofficial translation of Revised Budget Law. Ulaanbaatar, Mongolia.

15. Government of Mongolia. (2012, September 15). Translation of resolution No.30 of the Government of Mongolia. Ulaanbaatar, Mongolia.

16. Government of Mongolia. (2019, December 18). Government Resolutions 450. Ulaanbaatar, Mongolia.

17. Governor of Bayanzurkh District. (2019, December 17). 2020 Budget Approval of Bayanzurkh District. Ulaanbaatar, Mongolia.

18. Governor of Bayanzurkh District. (2020, January 22). 2020 Budget of 3rd Kindergarten in Bayanzurkh District. Ulaanbaatar, Mongolia.

19. Governor's Office of Bayanzurkh District. (n.d.). Local Investments of Bayanzurkh District.

20. Independent Research Institute of Mongolia. (2019). Real Time Monitoring of the Impact of Planned Fiscal Tightening and Changes in Social Welfare Spending. Ulaanbaatar: Independent Research Institute of Mongolia.

21. J.TH.Bloemen, H. (2020). Reducing Impacts of Air Pollution on Maternal and Child Health: A Rapid Assessment of Intervention Strategies in Bayankhongor, Mongolia. Ulaanbaatar: National Institute for Public Health and the Environment and UNICEF Mongolia. Retrieved from https://www.unicef.org/mongolia/media/1931/file/A%20rapid%20assessment%20of%20intervention%20strategies%20in%20Bayankhongor,%20Mongolia.pdf

22. Langan, O. (2015). Evaluation Report of the Child Friendly Community Strategy. Ulaanbaatar.

23. Law of Mongolia on Education. (2016, December 22). Ulaanbaatar, Mongolia.

24. Law of Mongolia on Fiscal Stability. (2010, June 24). Ulaanbaatar, Mongolia. Retrieved from Эрх Зүйн Мэдээллийн Нэгдсэн Систем вэб сайт: https://www.legalinfo.mn/law/details/503

25. Law on Child Protection. (2016, February 5). Ulaanbaatar, Mongolia.

26. Law on Combating Domestic Violence. (2016, February 5). Ulaanbaatar, Mongolia.

27. Law on Development Policy and Planning and Administration. (2020, May 7). Ulaanbaatar, Mongolia.

28. Law on Pre-school Education. (2002, June 27). Ulaanbaatar, Mongolia.

29. Law on Promotion of Youth Development. (2017, May 18). Ulaanbaatar, Mongolia.

30. Law on Social Welfare. (2008, May 3). Ulaanbaatar, Mongolia.

31. Law on the Rights of the Child. (2010, February 3). Ulaanbaatar, Mongolia.

32. Local Development Fund, National and Capital Budget Distribution for Children. (2020).

33. Ministry of Finance. (2018, September 12). Local Development Fund Regulation Order No.228. Ulaanbaatar, Mongolia.

34. Ministry of Finance. (2019, November 12). Annex 2 - Resolution of Aimag/Capital City's Citizens' Representatives Hural. Ulaanbaatar, Mongolia.

35. Ministry of Finance. (2019, November 12). Approval for Procedure of Formulation of Local Budget Proposal. Ulaanbaatar, Mongolia.

36. Ministry of Finance. (2019, November 12). Local Development Fund Forms for Obtaining Citizens' Comments and Suggestions. Ulaanbaatar, Mongolia.

37. Ministry of Health, National Center for Public health, & UNICEF Mongolia. (2017). Assessment Report on Hygienic and Sanitary Conditions and the Indoor Air Quality of Schools. Ulaanbaatar.

38. Ministry of Health, National Center for Public Health, & UNICEF. (2017). Nutrition Status of the Population of Mongolia: Fifth National Nutrition Survey Report. Ulaanbaatar.

39. Mongolian Statistical Information Service. (n.d.). Retrieved from Mongolian Statistical Information Service Web site: http://1212.mn/

40. Muller, N. (2019, October 31). The Diplomat. Retrieved from The Diplomat: https://thediplomat.com/2019/10/ulaanbaatar-growing-strong-and-sick/

41. National Center for Public Health, & UNICEF Mongolia. (2018). Mongolia's Air Pollution Crisis: A Call to Action to Protect Children's Health. Ulaanbaatar, Mongolia.

42. National Nutrition Program. (2015, November 16). Ulaanbaatar, Mongolia.

43. National Program on Reduction of Air and Environmental Pollution (2017-2025). (2017, March 20). Ulaanbaatar, Mongolia.

44. National Program on Supporting Rights of People with Disabilities, Their Participation and Development. (2017, November 29). Ulaanbaatar, Mongolia.

45. National Programme on Child Development and Protection for 2017-2021. (2017, September 20). Ulaanbaatar, Mongolia.

46. National Programme on Maternal, Child and Reproductive Health (2020-2024). (2020, May 27). Ulaanbaatar, Mongolia.

47. National Statistics Office of Mongolia. (2012). Household Socio-Economic Survey. Ulaanbaatar, Mongolia: UNICEF.

48. National Statistics Office of Mongolia. (2018). The Mongolia Social Indicator Sample Survey. Ulaanbaatar, Mongolia: United Nations Children's Fund and United Nations Population Fund.

49. Regional Support Mission Report on the Evaluability of the UNICEF Mongolia Country Programme 2017–2021. Evaluation Section UNICEF EAPRO (2017, November 6). Ulaanbaatar, Mongolia.

50. Save the Children Japan. (2018). Child Rights Situation in Mongolia. Ulaanbaatar: Save the Children Japan.

51. State Policy on Education (2014-2024). (2015, January 29). Ulaanbaatar, Mongolia.

52. State Policy on Health (2017-2026). (2017, January 18). Ulaanbaatar, Mongolia.

53. The 2010 Population and Housing Census. (2011). Ulaanbaatar, Mongolia.

54. The 2015 Population and Housing Census. (2016). Ulaanbaatar, Mongolia.

55. The World Bank, & National Statistics Office of Mongolia. (2017, October 17). Poverty Profile- 2016. Ulaanbaatar, Mongolia.

56. UNICEF. (2019). Mid-Term Review of the Country Programme 2017-2021. Ulaanbaatar, Mongolia.

57. UNICEF. (2015). Multiple Indicator Cluster Survey. Ulaanbaatar.

58. UNICEF. (2016). Child Friendly Community Report Khuvsgul.

59. UNICEF. (2017). Child Friendly Community Workplan Zavkhan 2017-2018.

60. UNICEF. (2018). Child Friendly Community Workplan Zavkhan 2019. Mongolia.

61. UNICEF. (2019). Child Friendly Community Workplan Zavkhan 2020-2021. Mongolia.

62. UNICEF. (2020). Child Money Programme of Mongolia 2020 – Brief for the UN Country team.

63. UNICEF East Asia & Pacific. (2016). Equity in Public Financing of WASH Analysis East Asia. UNICEF East Asia and Pacific Regional Office.

64. UNICEF Mongolia. (2016). Mongolia: Education Equity Profile. Ulaanbaatar, Mongolia.

65. UNICEF Mongolia. (2017). Country Office Annual Report. Ulaanbaatar: UNICEF Mongolia.

66. UNICEF Mongolia. (2017). Mongolia: Health Equity Profile. Ulaanbaatar, Mongolia.

67. UNICEF Mongolia. (2018). Annual Report Presentation of the UNICEF Programme 2017-2021. Ulaanbaatar, Mongolia: UNICEF Mongolia.

68. UNICEF Mongolia. (2018). Country Office Annual Report. Ulaanbaatar: UNICEF Mongolia.

69. UNICEF Mongolia. (2018). Mongolia: HIV/AIDS Equity Profile. Ulaanbaatar, Mongolia.

70. UNICEF Mongolia. (2019). Mongolia: Nutrition Equity Profile. Ulaanbaatar, Mongolia.

71. UNICEF Mongolia. (n.d.). Distance Learning Kit for Children. Ulaanbaatar: UNICEF Mongolia.

72. UNICEF Mongolia. (n.d.). Learning and Recreational Center for Children with Disabilities. Ulaanbaatar, Mongolia: UNICEF Mongolia.

73. UNICEF Mongolia, & Governor's Office of Bayanzurkh District. (2018, December 10). Annual Report of Bayanzurkh District on "Child friendly district". Ulaanbaatar, Mongolia.

74. UNICEF Mongolia. Ministry of Finance, & Ministry of Health. (2015). Integrated Methodology of Health Sector Budgeting. Ulaanbaatar, Mongolia.

75. UNICEF Mongolia. (2015). Mongolia: Child Protection Equity Profile. Ulaanbaatar, Mongolia.

76. UNICEF Mongolia. (2016). Child Issues, Programme Structure and Package of Results. Ulaanbaatar: UNICEF Mongolia.

77. UNICEF Mongolia. (2016). Equity in Public Financing of WASH Analysis Mongolia. UNICEF East Asia and Pacific Regional Office.

78. UNICEF Mongolia. (2016, February). UNICEF Mongolia Country Programme Strategy Note. Ulaanbaatar, Mongolia.

79. UNICEF Mongolia. (2017). Child protection: Sectoral and OR+ (Thematic) Report. Ulaanbaatar: UNICEF Mongolia.

80. UNICEF Mongolia. (2017). Khuvsgul Sustainability Plan for Programme. Ulaanbaatar, Mongolia.

81. UNICEF Mongolia. (2017). Nutrition: Sectoral and OR+ (Thematic) Report. Ulaanbaatar: UNICEF Mongolia.

82. UNICEF Mongolia. (2017). RAM Output Report: Outcome 100. 21: November.

83. UNICEF Mongolia. (2018). Fighting Malnutrition by Helping Mothers. Ulaanbaatar, Mongolia: UNICEF Mongolia.

84. UNICEF Mongolia. (2018, February). Mongolia's Air Pollution Crisis: Children's Health. Ulaanbaatar, Mongolia.

85. UNICEF Mongolia. (2018). Nutrition: Sectoral and OR+ (Thematic) Report. Ulaanbaatar: UNICEF Mongolia.

86. UNICEF Mongolia. (2018). WASH: Sectoral and OR+ (Thematic) Report. Ulaanbaatar: UNICEF Mongolia.

87. UNICEF Mongolia. (2019). Exploring the Potential for Using Shock Responsive Social Protection in Mongolia. Ulaanbaatar.

88. UNICEF Mongolia. (2019). Main Findings, Solutions & Plan to Improve Indoor Air Quality Control in Kindergartens and Health Centers. Ulaanbaatar: UNICEF Mongolia.

89. UNICEF Mongolia. (2020). Mongolia: Social Inclusion Equity Profile. Ulaanbaatar, Mongolia.

90. UNICEF Mongolia. (n.d.). Mongolia: WASH Equity Profile. Ulaanbaatar, Mongolia.

91. UNICEF Mongolia. (n.d.). WASH for Children in Mongolia. Ulaanbaatar, Mongolia.

92. UNICEF Mongolia, & Government of Mongolia. (2019, December 2). Zavkhan Multi-year Work Plan 2020-2021. Uliastai, Mongolia.

93. UNICEF Mongolia, & Government of Mongolia. (2017). Zavkhan Multi-year Work Plan 2017-2018. Uliastai, Mongolia.

94. UNICEF Mongolia, USAID, & SICA. (2019). Rapid Social Impact Assessment on Social and Protection Services for Children and Families during School Closure due to Prevention from COVID. Ulaanbaatar.

95. UNICEF Programme in Bayankhongor. (2019). Bayankhongor Child Friendly Profile. Bayankhongor.

96. UNICEF. (n.d.). Universal Social Protection: The Universal Child Money Programme in Mongolia. Ulaanbaatar, Mongolia.

97. Unified Children's Counsel of Khuvsgul Aimag. (2018). Child Friendly Community Documentation. Murun.

98. United Nations Children's Fund, World Health Organization, World Bank Group. (n.d.). UNICEF/WHO/ The World Bank Group Joint Child Malnutrition Estimates: Levels and Trends in Child Malnutrition. Retrieved from World Health Organization Web site: https://www.who.int/publications/i/item/jme-2020-edition

99. United Nations Evaluation Group. (2011, March). The UNEG Handbook "Integrating Human Rights and Gender Equality in Evaluation –Towards UNEG Guidance.

100. Vision-2050: Mongolia's Long-term Policy Document. (2020, May 23). Ulaanbaatar, Mongolia.

101. World Bank. (2015). Understanding and Monitoring Service Delivery in a Decentralizing Environment in Mongolia: The Case of Education and Health'.

102. World Bank. (2017, May 4). Pre-Primary Education in Mongolia: Access, Quality of Service Delivery, and Child Development Outcomes.

103. World Bank Group. (2018, June 1). Mongolia - Public expenditure review: Growing without Undue Borrowing- Enhancing Efficiency of Spending and Revenue: Summary (Mongolian). Washington, D.C.

103. Written Record of 108 Call Cases #1, 1 (2020).

104. Written Record of 108 Call Cases #2, 2 (2020).

106. Yankah, E. (2016). Situation Analysis of Adolescents. Ulaanbaatar: UNICEF Mongolia.