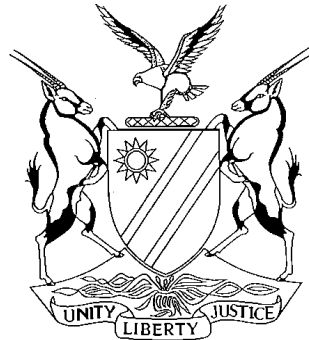




**UNITED NATIONS DEVELOPMENT  
ASSISTANCE FRAMEWORK  
2006-2010  
(UNDAF)**



**NAMIBIA**

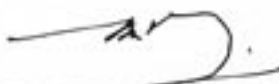
## Declaration of Commitment

The UN in Namibia is committed to the achievement of Namibia's Vision 2030 and to make it possible for all Namibians to live longer, healthier and more prosperous lives, full of choices and opportunities by promoting the human freedoms of all Namibians. The United Nations Development Assistance Framework (UNDAF) is the translation of that commitment to focus the UN System's resources on Namibia's most critical challenges: the Triple Threat of HIV/AIDS, food insecurity and the weakening capacity of institutions to provide critical socio-economic services.

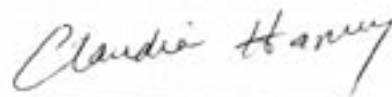
The UN System will ensure that the results defined in the UNDAF will be achieved through joint and complementary programming and by increasing financial resources allocated to HIV/AIDS and mitigation of its multiple impacts.



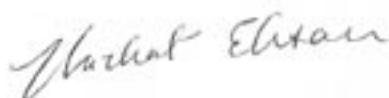
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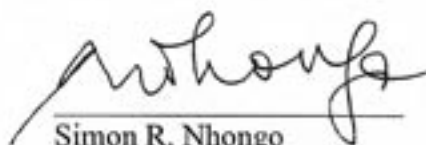
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(and on behalf of Non-Resident UN Agencies)

## Preface

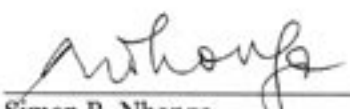
The impact of the HIV/AIDS epidemic is compromising the many important socio-economic development achievements in Namibia since independence. The Common Country Assessment, which was undertaken as preparation for the compilation of this United Nations Development Assistance Framework (UNDAF), has emphasised that the Triple Threat of HIV/AIDS, Food Insecurity and Weakening Service Delivery Capacities will become even more pronounced in the future. It is, therefore, particularly important that the Government and the UN System in Namibia base their next strategic framework on supporting and facilitating interventions that address these national priorities.

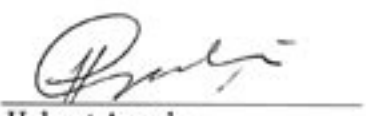
The 2006 to 2010 UNDAF for Namibia will require both an effective as well as an efficient implementation process which complements the inputs from all our partners and stakeholders, minimizes resource wastage and builds on and expands those existing coordination mechanisms that have been proven to be effective. Underlying this consideration is the realization that the UNDAF will form an essential part of, and run concurrently with, Namibia's Second and Third National Development Plans as well as the Third and Fourth Medium-Term Plans for HIV/AIDS.

Particularly with regard to the fight against HIV/AIDS, it is clear to all of us by now that the time factor remains of the absolute essence. We have to become more proactive, more effective and more efficient in addressing the HIV/AIDS epidemic in order to overcome the latter. HIV/AIDS is a very broad development issue, but at the same time is also making broad development – in a very poignant way – a matter of life or death. It is, therefore, incumbent upon all of us as “development workers” to realise that change is necessary, including in the way we conduct our business. This UNDAF is part of the effort in this regard and further supports our strategy to integrate development initiatives across the various sectors. Similarly, the UNDAF strongly supports the move towards introducing a results-based development framework that is strongly focused on accountability and transparency through an effective Monitoring and Evaluation (M&E) plan.

However, the integration of efforts among the UN agencies is not enough by itself. It will be equally critical that the UN agencies even more effectively engage with the Namibian Government and stakeholders through the existing multisectoral committees and working groups. In addition, more joint efforts and opportunities for planning and review of UN assistance activities, especially for common counterpart ministries or even common counterpart programme areas, are required. What we can certainly ill afford is the creation of parallel or additional structures. Similarly, there is need to consider how even closer and more detailed synchronisation with the Namibian fiscal year and rolling medium term expenditure framework cycles can be achieved and also how the programmes and projects to be implemented under the UNDAF can effectively dovetail with the various public sector reform initiatives currently underway in Namibia.

Finally, we would like to extend our thanks and sincere appreciation to those many colleagues in Government, UN Agencies, development partners and Civil Society who worked with us on getting this programme framework together. We are particularly grateful to the members of the Core Working Group for leading this process. It has been said that the process involved in the compilation of a plan is just as important as its eventual implementation. That does indeed augur very well for this UNDAF.

  
Simon R. Nhongo  
UN Resident Coordinator

  
Helmut Angula  
Director General  
National Planning Commission



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# List of Acronyms

AIDS	Acquired Immune Deficiency Syndrome	OCHA	Office for the Coordination of Humanitarian Affairs
ART	Anti-retroviral Therapy	OPM	Office of the Prime Minister
CBO	Community based organisation	OSH	Occupational Safety and Health
CCA	Common Country Assessment	OVC	Orphans and Vulnerable Children
DAC	District AIDS Committees	PLWHA	People living with HIV/AIDS
DHS	Demographic and Health Survey	PHC	Primary Health Care
DOTS	Directly Observed Treatment Short-course	PMTCT	Prevention of Mother-to-Child Transmission
ECD/ECCD	Early Childhood Care & Development	QPAMR	Quarterly Programme Activity Monitoring Report
EFA	Education for All	RC	Regional Council
EMIS	Education Management Information System	REMU	Regional Emergency Management Unit
EMU	Emergency Management Unit	SADC	Southern African Development Community
EPI	Expanded Programme on Immunisation	SIDA	Swedish International Development Agency
ESPAG	Education Sector Planning and Advisory Group	SMA	Social Marketing Association
ETSIP	Education and Training Sector Improvement Programme	SME	Small or Medium Enterprise
FAO	Food and Agricultural Organisation	SRH	Sexual and Reproductive Health
FIVIMS	Food Insecurity and Vulnerability Information Mapping System	STI	Sexually Transmitted Infection
GRN	Government of the Republic of Namibia	UN	United Nations
HIS	Health Information System	UNAIDS	Joint United Nations Programme on HIV/AIDS
HIV	Human Immuno-deficiency Virus	UNAM	University of Namibia
IAEA	International Atomic Energy Agency	UNCT	United Nation Country Team
IFAD	International Fund for Agricultural Development	UNDAF	United Nations Development Assistance Framework
ILO	International Labour Organisation	UNDP	United Nations Development Programme
M&E	Monitoring and Evaluation	UNEP	United Nations Environment Programme
MAWF	Ministry of Agriculture, Water and Forestry	UNESCO	United Nations Education, Science and Culture Organisation
MOE	Ministry of Education	UNFPA	United Nations Population Fund
MDG	Millennium Development Goal	UNGASS	United Nations General Assembly Special Session on HIV/AIDS
MET	Ministry of Environment and Tourism	UNHCR	United Nations High Commission for Refugees
MFA	Ministry of Foreign Affairs	UNICEF	United Nations Children's Fund
MOHI	Ministry of Home Affairs and Immigration	UNIDO	United Nations Industrial Development Organisation
MIB	Ministry of Information and Broadcasting	UNIFEM	United Nations Development Fund for Women
MOLR	Ministry of Lands and Resettlement	USD	United States Dollar
MOHSS	Ministry of Health and Social Services	VCT	Voluntary Counselling and Testing
MOLSW	Ministry of Labour and Social Welfare	WFP	World Food Programme
MRLGHRD	Ministry of Regional, Local Government, Housing and Rural Development	WHO	World Health Organisation
MTEF	Medium Term Expenditure Framework	WB	World Bank
MTP	Medium-term Programme		
MTI	Ministry of Trade and Industry		
MTP-III	National Strategic Plan on HIV/AIDS (Third Medium Term Plan)		
MGECW	Ministry of Gender Equality and Child Welfare		
NAEC	National AIDS Executive Committee		
NDP	National Development Plan		
NGO	Non-governmental Organisation		
NPCS	National Planning Commission Secretariat		
NPRAP	National Poverty Reduction Action Plan		
NSP	National Statistical Plan		

## Executive Summary

The UNDAF 2006-2010 is the strategic response by the UN to the development challenge of the Triple Threat – increasing vulnerability of households and eroding institutional capacity caused by the impact of HIV/AIDS. The UNDAF for Namibia was developed during 2004 in a fully participatory process with government and civic society counterparts. Part of that process included the analysis of root causes, detailed in the Common Country Assessment, which formed the basis for the UNDAF Outcomes. The UN’s contribution towards these national priorities is further clarified in the Country Programme Outcomes which are summarised below.

**Table to show key areas where the UN System will support national goals**

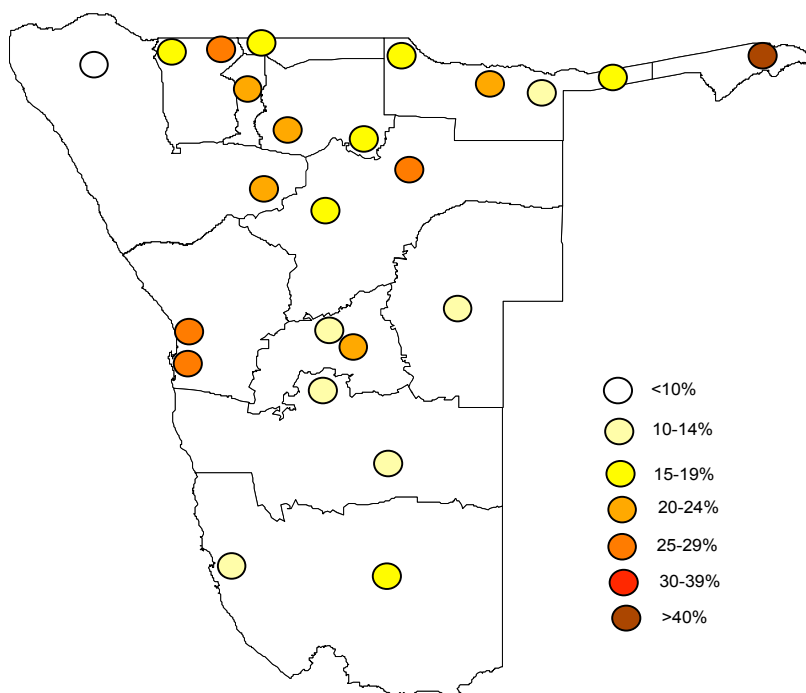
<b>UNDAF Outcome 1: HIV Response is strengthened</b>	<b>UNDAF Outcome 2: Livelihoods and food security are improved</b>	<b>UNDAF Outcome 3: Capacity to deliver essential services is strengthened</b>
<ol style="list-style-type: none"> <li>1. Strengthened commitment and leadership</li> <li>2. Reduced risk behaviour among vulnerable groups</li> <li>3. Increased access, uptake and provision of comprehensive high-quality prevention, treatment and care</li> </ol>	<ol style="list-style-type: none"> <li>1. Improved income earning, agricultural productivity and access to food</li> <li>2. Strengthened sustainable land and water management</li> <li>3. Strengthened National/Regional Capacities for emergency management</li> </ol>	<ol style="list-style-type: none"> <li>1. Strengthened institutional and community capacity for effective delivery and uptake of critical services, especially health and education</li> <li>2. Strengthened National Statistical System to ensure effective development and application of tools for evidence-based decision-making, planning, implementation, and M + E</li> <li>3. Increased awareness and capacity for protecting the rights of children, women and other vulnerable groups.</li> </ol>

The UNDAF results matrices outline the commitments of UN Agencies to achieve the expected Outputs and Outcomes and these will be further developed in the respective Country Programme and Projects. Together with the monitoring and evaluation framework, they provide the basic tools for detailed programme planning, monitoring and reviews.

The UN System in Namibia is committed to joint planning among the agencies and with counterparts to further integrate development assistance more effectively and efficiently. The UNDAF will help to focus the work of the UN Agencies and will be the basis for resource mobilisation required to achieve the results. Wherever possible, the UN will work with counterparts in existing coordination and implementation structures and will work towards a closer and more detailed engagement with the Namibian fiscal year and rolling budget cycles.

## Map of Namibia

Map showing the threat of HIV/AIDS: Its HIV prevalence among pregnant women in different sentinel sites, Namibia 2004 (MOHSS)



## Country Profile Data

Key Demographic Indicators	1991	2001
Population	1,409,920	1,830,330
Pop. Growth rate	3.1	2.6
Sex ratio (males per 100 females)	95	94
Urban population (%)	28	31
Avg. household size	5.2	5.1
Total fertility rate (avg. children/woman)	6.1	4.1
Life expectancy at birth (yrs.): Females / Males	63/59	50/48
Age composition (%): Under 5 years	16	13
5-14 years	26	26
15-59 years	51	52
60+ years	7	7
Key Economic Indicators (In % unless otherwise indicated)	1994	2002
Gross National Product per capita (US\$)	1,970	1,463
Gross Domestic Product growth	7.3	3.3
Gross Domestic Product growth, per capita	4.1	0.7
Exchange rate (N\$ per US\$)	3.6	10.5
Inflation	10.8	11.4
Unemployment	19	20 (in 2000)



# **Section 1: Introduction**

## **Rationale for the UNDAF**

The UN Development Assistance Framework (UNDAF), 2006-2010, aims to guide integrated programming among the UN Agencies working in Namibia to support government and civil society to reach Namibia's economic and social development goals, outlined in Vision 2030, the Millennium Development Goals, NDPII and other international commitments signed by the Government of Republic of Namibia (GRN).

The UNDAF enables the UN System in Namibia to focus its collective strength to contribute to the Government's efforts to mitigate the impacts of HIV/AIDS, increase household food security and enhance institutional capacities. The UNDAF ensures enhanced programmatic coherence, collaboration, a harmonisation of effort and coordination of all UN agencies working in Namibia and builds on their comparative advantage in providing assistance. It provides a framework for the UN to respond effectively to national development priorities and objectives. The UNDAF in turn, will guide the development of agency-specific and joint programmes to address the common critical issues.

The UNDAF has incorporated a human rights approach to programming and has identified areas where the UN system can assist the GRN in furthering its success in fulfilling civil and political, economic and social rights for its citizens. It will implement some of Vision 2030's "new ways of thinking" regarding:

- Operating an adaptive, dynamic process approach to development
- Government and society working in full partnership for sustainable development
- Shared decision-making which focuses on achieving outcomes (impact)
- Integrated planning between sectors and institutions.

The UN agencies which are currently resident in Namibia are the FAO, UNAIDS, UNDP, UNESCO, UNFPA, UNICEF, WFP and WHO. UNHCR is in country for the support to the Angolan refugee programme. Non-resident UN agencies such as ILO, UNEP, IAEA and UNIFEM have also committed themselves to this UNDAF.

## **Preparation process of the UNDAF**

The Common Country Assessment (CCA) process, initiated in February 2004, was linked to other national processes through cross participation in the preparation of Namibia's 2004 Millennium Development Goals Report and reviews of its National Development Plan (NDP) II and National Poverty Reduction Action Plan (NPRAP). The process was done under the umbrella of the National Planning Commission Secretariat (NPCS) and was a collaborative effort generating broad participation from government Ministries, non-governmental organisations (NGOs) and development partners. The process focused on sectors and areas in which the UN has a clear mandate and where the UN System already has programmes of cooperation.

The CCA culminated in the presentation of the main findings at a UNDAF Prioritization Workshop with government and civic stake holders that took place in Windhoek from 31 August

-3 September 2004. This workshop initiated the UNDAF preparation with a consensus on the top priorities for the UNDAF. Three priority development challenges which could most benefit from the comparative advantages of the UN system and were most pressing on the Government of the Republic of Namibia were identified, namely:

- Addressing the multiple impacts of HIV and AIDS through prevention, treatment and care with special attention on the most vulnerable households and communities, especially those caring for orphans;
- Ensuring household food security through economic growth and job promotion while ensuring environmental sustainability and addressing deep income poverty and disparities;
- Strengthening the capacities for governance, at the national, regional and local levels, encouraging the deepening of democracy and ensuring effective delivery of critical social services, especially to the most vulnerable groups.

Related to these three areas, known as the Triple Threat, are also a number of key cross-cutting issues and root causes that are common to these three areas, including gender inequality, social-cultural issues, alcohol abuse and the historical legacy.

In addition a number of areas of cooperation for each challenge were identified, which have been refined in the UNDAF document as Country Programme Outcomes.

The UNDAF process thus builds on the foundation of information collection, analysis and prioritization laid by the CCA. A Core Group, co-chaired by the Under-Secretary of Health and Social Services and the Director of Development Cooperation of the National Planning Commission Secretariat, and including members from Government, the NGO Sector and heads of UN agencies, was constituted to guide the UNDAF process. Three Technical Working Groups composed of stakeholders from government, civil society and the relevant UN agencies were established to deal with each of the three development challenges in detail. The Technical Working Groups met regularly throughout October and November to develop the UNDAF Results Matrix and the Monitoring and Evaluation System.

These were reviewed by the Core Group in early November, followed by the UNCT's meeting on joint programming and consolidation of the UNDAF. After further refinements based on feedback from the Regional UN Quality Control Support Group, a final draft was presented to a workshop in Windhoek with wide stakeholder representation for validation on 24 and 25 November 2004.

In undertaking the participatory process, some adjustments had to be made in following the global CCA-UNDAF guidelines. Two significant deviations in the UNDAF relate to the formulation of Country Programme Outcomes (CPOs). The UNDAF Prioritisation Workshop was used to collectively define these CPOs in order to maximise joint ownership and action. Similarly, these CPOs and the related outputs had to be defined in broader terms to accommodate different agencies' perspectives. Hence, for the sake of collective action, the degree of specificity and agency attribution have had to be sacrificed. The product, however, is one that is fully owned by all GRN, non-government and UN organisations that took an active part in its preparation.

## Section 2: Programme Response

### Rationale

HIV/AIDS is increasing the vulnerability of households, eroding institutional capacities and is Namibia's most pressing threat to the fulfilment of rights to life and health and indirectly to the status of all human rights in the nation. The UN's efforts to combat the spread of HIV and the impacts of AIDS must be continued and increased in coordination with other development partners. Chronic and acute food insecurity are persistent problems in Namibia both affecting and effected by HIV and AIDS. Efforts must be made to increase household income and agricultural productivity within the context of the AIDS-weakened capacities of families, communities and institutions. The capacities of national and regional emergency response mechanisms must be a particular focus so that the nation can cope with food emergencies caused by droughts and floods and worsened by the impacts of AIDS. The capacities of governance institutions to function are being eroded by AIDS-related morbidity and mortality. The workforce in both the public and private sectors is becoming strained as productive skills are lost weakening the ability of different sectors, especially health and education, to deliver services just as individuals and families find themselves in greater need of these services and with fewer resources at hand.

Given these inter-linked challenges, the UN system and its partners have identified three UNDAF outcomes to work towards in the 2006-2010 country programmes:

**UNDAF Outcome 1: by 2010, the HIV/AIDS response is strengthened through increased access to prevention, treatment/care and impact mitigation services, especially for vulnerable groups**

**UNDAF Outcome 2: by 2010, livelihoods and food security among most vulnerable groups are improved in highly affected locations**

**UNDAF Outcome 3: by 2010, the capacity of Government and civil society institutions is strengthened to deliver essential/critical services**

The Country Programme Outcomes identified for each UNDAF Outcome, focus on where UN agencies can best complement the efforts of the Government of the Republic of Namibia and its other development partners. A number of development partners are making significant contributions to all these three outcome areas. The Global Fund to Fight AIDS, Tuberculosis and Malaria has agreed to fund aspects of prevention, treatment and care for those three diseases. The U.S. Government's Emergency Plan for AIDS Relief is significantly contributing to HIV and AIDS prevention, treatment and care. A large portion of the Emergency Plan funds are used to assist the Ministry of Health and Social Services (MOHSS) with rolling out anti-retroviral therapy. Funds are also used to support faith-based organisations and non-governmental organisations in mobilizing communities and offering care and support to those infected and affected by HIV and AIDS. The European Commission is supporting the Directorate of Special Programmes (MOHSS) and building capacity within all the regions' HIV/AIDS coordinating committees (RACOCs).

The Ninth European Development Fund has a strong rural development programme including infra-structure development which also addresses HIV/AIDS as a cross-cutting issue. The German Development Cooperation will work in three priority areas during this period: natural

resource management and rural development; promotion of the economy; and transport, with Health and HIV as cross cutting issues as well as continuing with its Basic Education Programme support to decentralisation. French Cooperation has made substantial contributions to Prevention of Mother-to-Child Transmission (PMTCT) and Sexual and Reproductive Health Services within the MOHSS. Swedish International Development Assistance (SIDA) has been a long-standing partner in supporting the work of National Planning Commission and promoting gender and HIV/AIDS mainstreaming. The Education sector receives considerable support from the World Bank and USAID. Some Development Partners have outlined their programmes which relate to the UNDAF in Annex 3.

The rationale for each UNDAF Outcome and the subsequent Country Programme Outcomes are described below. Expected outputs and the role of partners to achieve them are detailed in the results matrices on pages 10-17. At this stage in the planning process, the CP outcomes and outputs are stated in a general manner to ensure that several agencies find common ground to work together towards the same CP outcomes and outputs given the limited resources.

### **UNDAF Outcome 1: HIV Response is strengthened**

**UNDAF Outcome 1: by 2010, the HIV/AIDS response is strengthened through increased access to prevention, treatment, care and impact mitigation services, especially for vulnerable groups**

The continued increase in HIV prevalence and the growing impact of AIDS is not only Namibia's foremost challenge to fulfilling rights to life and health, it is a threat to the fulfilment of all human rights in the nation. The 2002 sero-sentinel survey found that 22% of pregnant women were HIV-positive and this has encouragingly dropped to 19.8% in 2004. The sero-prevalence remains highest in Caprivi at 43%<sup>1</sup>. The negative impact of AIDS on health and longevity is the major factor contributing to a reduction in the population growth rate to 2.6% per annum, down from 3.1%. Likewise, as a result of AIDS Namibia's life expectancy declined from 61 to 49 between 1991 and 2001. Although the rate of new HIV infections may be slowing down, there are now more people falling ill, dying and leaving behind a rising number of orphans and vulnerable children (OVC).

The immediate causes of Namibia's high HIV prevalence are high rates of unprotected sex with an infected person and mother-to-child transmission of HIV. One of the root causes of Namibia's high HIV prevalence is the low status of women. Another is the high level of unemployment and connected high mobility – especially of males in search of employment – contributing to the break-up of family structures and to the accelerated spread of HIV. Youth unemployment may be as high as 60% according to a most recent survey, leading to an increased sense of hopelessness, increasing alcohol abuse and subsequent risky sexual behaviour.

Significant proportions of Namibians, particularly rural women and isolated groups, do not have complete and accurate information about HIV/AIDS prevention or treatment strategies. Many Namibians do not want to get tested for HIV due to stigma and discrimination. The roll out of ARV treatment and PMTCT+ should begin to mitigate the stigma, but access is still limited and understanding of treatment, low. Strong interventions must be implemented at all levels to counter the vicious cycle of stigma, discrimination, fear, lack of human rights of women and

<sup>1</sup> MOHSS Sero-Sentinel Survey, 2004

alcohol abuse. Though improving, there is still relatively weak multi-sectoral coordination of HIV/AIDS prevention, care and support, particularly at local level. The UN system can make an impact by focusing on engendering leadership and community capacity development for HIV/AIDS mitigation and prevention efforts among the younger generations and care and support in the context of achieving the Millennium Development Goals (MDGs).

The Country Programme Outcomes developed to address this situation and to build on the relative strength of different interventions and partner capacities are:

1.1 Strengthened commitment and leadership of Government and other stakeholders to create an enabling environment for scaled-up multi-sectoral responses.

The GRN has shown strong leadership already around HIV and AIDS. Leaders (political, religious, business, youth and traditional) however still require more information and support in order to strengthen and focus their commitment to the multi-sectoral response through advocacy, awareness-raising, and information sharing. People living with HIV/AIDS (PLWHA) will need to be brought into the forefront of this strategy to advocate for positive living and to reduce the widespread stigma and discrimination.

ORC, UNAIDS, WHO, UNDP, UNFPA, UNICEF, FAO and ILO will work with the GRN and civil society towards creating an enabling environment and realising the greater involvement of people living with HIV/AIDS. UN agencies will support the implementation of national and sectoral policies to articulate leadership commitments. The capacity of coordinating bodies at national, regional and local level to support and manage the HIV response will be strengthened. ILO and UNAIDS will help strengthen employers' organisations and trade unions.

1.2 Reduced risk behaviour among vulnerable groups through interventions that address knowledge, attitude, behaviour and practice relating to underlying causes.

The risk factors of HIV identified in the CCA and other research include gender issues, sensitive cultural practices, gender based violence and alcohol abuse. Youth will be one of the main target groups for behaviour change communications and life skills programmes to keep that generation HIV negative. Almost all UN agencies UNICEF, UNFPA, UNAIDS, WHO, UNESCO, ILO & UNIFEM will contribute to strengthening social mobilisation to address gender and cultural issues and to promote responsible drinking.

1.3 Increased access, uptake and provision of comprehensive high-quality prevention, treatment and care including VCT, PMTCT, ART, and reproductive health services.

Namibia is rapidly rolling out ARV treatment and focus will be placed on encouraging uptake of this service and access for hard-to-reach populations. Knowing one's HIV status is the key to behaviour change and to remaining negative or taking adequate steps to prevent re-infection, transmission and obtaining timely health care. UNFPA, UNICEF and WHO will support the provision of youth/adolescent health care and prevention services. The promotion of treatment education and literacy is essential to ensure people know when they should access treatment and comply with it.

WHO will provide support to strengthen institutional capacity of medical and palliative care, laboratories services and Blood Transfusion programmes. It will further assist in strengthening home based care activities, psychosocial support and the training of lay counsellors.

UN agencies will jointly implement a UN comprehensive workplace programme and UNAIDS, ILO and UNESCO will promote workplace programmes in the GRN, private and NGO sectors.

The IAEA has already forged relationships with WHO-Regional Office for Africa to work on a regional project that will assess the impact of nutritional interventions on HIV-infected vulnerable groups using nuclear related techniques that will help provide evidence for policy decisions.

## **UNDAF Outcome 2: Livelihoods and food security are improved**

**UNDAF Outcome 2: By 2010, livelihoods and food security among most vulnerable groups are improved in highly affected locations**

In 2003, following two successive years of drought, combined with successive flooding, approximately one-third of the population was identified as being in need of humanitarian food assistance. More recent figures indicate that some 40% of Namibians are living below the income poverty line and are exposed to chronic food insecurity. In the Common Country Assessment, the three main manifestations of the unfulfilled right to a decent standard of living were identified as high levels of income poverty, high and rising levels of food insecurity and the related area of biodiversity loss. A major factor to low incomes is the reliance of 42% of the population on subsistence farming of low economic value<sup>2</sup>.

Root causes for persistent high levels of income poverty are low economic growth, high levels of unemployment and income inequality, pervasive gender inequality, incapacity and loss of life due to HIV/AIDS and other diseases, inadequate access to and quality of education, and widespread environmental degradation. Natural resources are the main source of livelihood and survival for the vast majority of Namibians, yet processes of impoverishment and environmental degradation interact in ways that reinforce each other.<sup>3</sup>

Although Namibia is one of the few African countries that provides old age pensions and grants for OVC and for people with disabilities, many do not receive their entitlements, usually due to lack of awareness or geographical or social factors. The UN will support efforts that reduce vulnerability and improve the on-going coping mechanisms of communities as well as the response capacity for emergency and crisis situations.

GRN Development Goals, as articulated in the Second National Development Plan (NDPII) sets policy objectives to tackle the key areas of poverty reduction, sustained economic growth, employment creation, the reduction of income inequality, economic empowerment; the reduction of regional inequalities and gender equality and equity.

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<sup>2</sup> NPC (1996) Living Conditions in Namibia: The 1993/1994 Namibia Household Income and Expenditure Survey – Main Report. Windhoek: NPC

<sup>3</sup> NPC 2002 Natural Resources Sector (Theme 6): A Contribution to Vision 2030. Windhoek: NPC

The UNDAF strategies build on the UN System’s long experience and comparative advantage in being able to contribute to policy development and programmes which will improve livelihoods and food security among most vulnerable groups in the some highly affected regions of Namibia.

The Country Programme Outcomes are as follows:

2.1 Improved income earning, agricultural productivity and access to food for vulnerable households

At the heart of the GRN’s poverty reduction strategy is the need to diversify and increase on-farm and off-farm productivity. The impact of HIV/AIDS on reducing agricultural productivity, on reducing cash incomes and diverting expenditure, on diverting labour to caring for increasing numbers of dependents is putting increasing strains on households. FAO will continue to offer support to farmers to adopt improved technology and have increased skills for agricultural productivity, processing and the prevention of crop loss while UNIDO will promote small business development in the agro-processing sectors and supporting non-traditional products. In addition the IAEA will continue to support programmes aimed at increasing crop productivity through improved soil, nutrient and water management in millet and sorghum-based farming systems. Community-based, self-sustaining food production projects will be encouraged.

In areas where an increase in agricultural productivity is unlikely, other income earning opportunities will be encouraged and the ILO, UNIDO and UNESCO will offer a number of strategies for job creation, particularly support to the SME sector.

UNICEF, FAO, WHO, WFP & UNESCO will improve the coping capacities of communities and vulnerable groups by supporting government and NGOs’ efforts to impart skills and strengthen support systems. UNDP, ILO, FAO, UNEP, UNFPA and UNESCO will focus on building institutional capacity of national, regional and local partners to improve needs assessment and service delivery.

2.2 Strengthened sustainable land and water management at community level

Namibia’s community based natural resource management programme meets most of Namibia’s National Development objectives – it creates employment, provides economic and managerial empowerment, enhances rural development, helps poverty alleviation and contributes to biodiversity conservation.

UNDP, UNESCO and FAO will continue to support government and communities’ efforts to build capacity on integrated water management. To strengthen sustainable land-use management, UNDP, UNEP and UNESCO will support initiatives which promote conservation, renewable energy and environmental education. UNDP will continue to provide support to the National Planning Commission to implement the National Poverty Reduction Action Plan with particular focus on participatory poverty assessments, monitoring and evaluation at national and community levels.

2.3 Strengthened national/regional capacities for disaster preparedness, mitigation and emergency humanitarian response

All the UN agencies will contribute to strengthening disaster risk management from national down to local levels. Support will be given to strengthen the coordination capacity of the national emergency management system for early warning preparedness and response to emergency situations. A number of line ministries and civil society institutions have specific responsibilities and individual UN agencies will offer support their counterparts to strengthen capacity to implement their disaster risk management programmes.

### **UNDAF Outcome 3: Capacity to deliver essential services is strengthened**

**UNDAF Outcome 3: By 2010, the capacity of Government and civil society institutions strengthened to deliver and monitor essential/critical health, education and special protection services**

The effects of HIV and AIDS are felt throughout the government and civil society sectors impacting on the quality and availability of public services. Human resources, the principal assets in the fight against the Triple Threat, are eroding at an increasing rate across Southern Africa. Governments are losing personnel, operating costs are increasing and HIV/AIDS is undermining the turnover of the private sector, thereby negatively impacting employment potential and tax revenues. The epidemic is also putting a considerable burden on regional and local authorities.

The root cause of HIV/AIDS threatening the system is the massive impact the disease is having on service providers' ability to meet the increasing demand for certain social and health related services. The high HIV prevalence, poor child health and the heavy burden of preventable diseases all contribute to weakening the delivery system. HIV, poor nutrition and alcohol abuse are the primary underlying causes of exposure to diseases in Namibia. The resurgence of tuberculosis is a prime case in point.

Social service institutions in particular, such as schools, health facilities and special protection units, are faced with an increased burden of clients who are unable to pay for services, need special attention such as psycho-social support and are struggling to care for themselves and family members. The Education sector must cope with increasing levels of absenteeism, and a simultaneous increase in the demands made on schools to provide psycho-social and material support to children. Families caring for large numbers of orphans may find it difficult to send all the children in a household to school. Children themselves are dealing with the serial traumas of losing successive caregivers.

The right to protection is threatened by increasing vulnerability of children due to HIV/AIDS and the pervasiveness of violence against women and children. The root causes of violence against women and children in Namibia and the limited participation of women in the political process are general apathy to such violence, negative cultural attitudes, poverty, slow economic growth and job creation, the lack of education and the inadequacy of policy frameworks and institutional capacities to deal with the violence and alcohol abuse.

This crisis obviously also threatens the good progress that was being made on meeting the national and millennium goals and targets. In order to help Namibia to deal with these threats, the UN development assistance framework strategies will focus on capacity development, improving the efficiency of services and empowering communities to care for themselves. The realisation of this UNDAF Outcome will contribute to a number of national priorities as



articulated in the Millennium Development Goals, the National Poverty Reduction Strategy and the Third Medium Term Plan for HIV and AIDS.

The Country Programme Outcomes address critical services related to immunization, essential obstetric care, malaria control, basic education and special protection particularly against violence and abuse. They are:

3.1 Strengthened institutional and community capacity for effective delivery and uptake of critical services, especially health and education.

The health system was identified as requiring special attention, in particular primary health care interventions for mothers and children, as well as general support for research, policy development and systems strengthening. WHO, UNICEF and UNFPA will work with the MOHSS to strengthen the capacity of the health care sector, particularly to provide quality antenatal and essential obstetric care, preventative care programmes for health and nutrition, to maintain and strengthen the Expanded Programme on Immunisation (EPI) and malaria control, reproductive health and improve commodity provision. In accordance with GRN's plans for the expansion of services to improve the diagnosis of cancer and cancer related diseases, the IAEA will be providing assistance to expand nuclear medicine capabilities in Namibia.

UNICEF and UNESCO will also support Government to provide access to quality basic education for all children, ensuring that vulnerable children have access to and complete their basic education.

3.2 Strengthened national statistical system to ensure effective development and application of tools for evidence-based decision-making, planning, implementation, and monitoring and evaluation.

To strengthen the whole UNDAF, the national capacities for implementation of National Statistical Plan III and the Poverty Monitoring Strategy will be strengthened. The National Planning Commission Secretariat (NPCS) will be given support in the form of capacity development, harmonization of data systems, and regional research capacity. UNFPA and UNDP, with technical inputs from UNICEF, will work to strengthen the capacities of NPCS to implement DevInfo as an umbrella data system for poverty monitoring and analysis, and for advocating pro-poor policy making, taking into account gender and age disaggregated population and development data linkages. Individual research and information collection institutions will be targeted for specific support enabling them to contribute to the national system and to improve monitoring and evaluation country-wide.

3.3 Increased awareness of and capacity for protecting the rights of children, women and other vulnerable groups.

Strategies for protection of vulnerable groups, especially women and children, will be tackled in a three-pronged approach. First, through ensuring that the necessary legislation and policies are enacted, understood by all stakeholders and enforced. Secondly, by supporting studies and social mobilization programmes aimed at addressing the root causes of violence against women and children, including alcohol abuse and gender. Finally, interventions aimed at capacity development of key service providers will be undertaken. UNICEF and ILO will develop capacity of key professionals in government, especially in MOHI and MGECW, NGOs and

CBOs with regard to advocacy for the necessary enactment, implementation and enforcement of key legislation and to offer protection and care to women, children and vulnerable groups preventative measures concerning violence and abuse against women and children.

## Results Matrices

### Outcome 1: UNDAF Results Matrix

<b>NATIONAL PRIORITIES</b> <ul style="list-style-type: none"> <li>• The reduction in incidence of HIV infection to below epidemic threshold (MTP-III)</li> <li>• Combat HIV/AIDS, malaria and other diseases (MDG6)</li> <li>• Combat the spread of HIV/AIDS by supporting multi-sectoral approaches (NDPII)</li> </ul>
<b>UNDAF Outcome 1: By 2010, the HIV/AIDS response is strengthened through increased access to prevention, treatment, care and impact mitigation services, especially for vulnerable groups<sup>4</sup></b>

<b>Country Programme Outcomes</b>	<b>Country Programme Outputs</b>	<b>Role of Implementing / Collaborating Partners</b>	<b>Resource mobilization Targets in US\$ Over 5 years</b>
1.1 Strengthened commitment and leadership of Government and other stakeholders to create an enabling environment for scaled-up multi-sectoral responses.	1.1.1 Increased level of knowledge, understanding and commitment to expanded HIV and AIDS response of national and local leaders  1.1.2 Strengthened capacity of organisations of PLWHA to provide leadership and to participate in decision making.  1.1.3 Reduced HIV-related stigma / discrimination at all levels  1.1.4 National laws and policies as well as sectoral policies in place	1.1.1 All UN agencies will work with NAEC and MIB and MRLGHRD to strengthen advocacy towards leaders in order to address HIV and health as an important developmental prerequisite. UNDP will support NPCSS to facilitate the multi-sectoral response.  1.1.2 UNAIDS will facilitate development of leadership and organizational capacity of organizations of PLWHA.  1.1.3 UNAIDS, UNESCO and other agencies will work with NAEC, MIB and MRLGHRD to support interventions that aim to reduce HIV – related stigma. UNESCO will focus on reduction of stigma and discrimination, working with educational managers and teachers.  1.1.4 UNDP, UNFPA, FAO, UNAIDS, and WHO will support implementation of national and sectoral policies on HIV and AIDS. UNFPA will strengthen national capacity for the promulgation and implementation of relevant laws & policies that support a gender perspective and reproductive health rights.	UNDP – \$ 550,000  UNESCO – \$ 20,000  UNFPA – \$ 750,000  UNICEF – \$ 520,000

<sup>4</sup> vulnerable groups include people living with HIV/AIDS, OVC, women & girls, children, youth, mobile populations, people with disabilities, farm workers, minorities, transactional sex workers, street children, substance abusers, prison inmates and on their release, their families. (MTP-III p41)

<b>Country Programme Outcomes</b>	<b>Country Programme Outputs</b>	<b>Role of Implementing / Collaborating Partners</b>	<b>Resource mobilization Targets in US\$ Over 5 years</b>
	1.1.5 Strengthened networks to coordinate the HIV response at national, regional, district, constituency & community levels.	1.1.5 UNDP and UNAIDS will work with NAEC to strengthen capacity for the decentralised response through support to local, regional & national CBOs & NGOs. ILO and UNAIDS will strengthen employer and employee organisations. UNAIDS Small Grants Fund will support community initiatives.	
1.2 Reduced risk behaviour among vulnerable groups through interventions <sup>5</sup> that address knowledge, attitudes, behaviour and practice relating to underlying causes.	1.2.1 Young people participate in and have access to appropriate HIV /AIDS information and life skills programmes.  1.2.2 Communities mobilized and able to address gender and cultural issues and to promote responsible drinking.	1.2.1 UNFPA, UNESCO, UNICEF, UNAIDS and WHO will support behaviour change communication and life skills prevention programmes targeting young people in support of MOHSS, MIB and MOE and MYNYSSC programmes. UNESCO will promote preventative behaviours among young people in and out of schools and support the strengthening of a network of young TV producers to report on HIV/AIDS issues. FAO will support life skills in farm schools for OVC and women-headed households.  1.2.2 UNICEF, UNFPA, UNAIDS, WHO & UNESCO will work with MGECSW, MOHSS, MOE, MYNYSSC and other partners to strengthen social mobilization efforts to address various gender issues, gender-based violence and alcohol abuse through culturally sensitive approaches. UNFPA will support in-depth analysis of demographic, social, economic, cultural, behavioural and epidemiological factors that promote the rights of women and girls. WHO will provide policy and technical support to MOHSS and its partners to place mental health and substance abuse on the development agendas. ILO will assist its constituents to address specific needs of vulnerable workers.	FAO – \$ 650,000 for 2006  UNESCO – \$ 20,000  UNFPA – \$ 2,000,000  UNICEF – \$ 7,760,000  WHO – (To be determined)  ILO – \$ 225,000
1.3 Increased access, uptake and provision of comprehensive high-quality prevention, treatment and care including VCT, PMTCT, ART	1.3.1 Improved access to VCT and other adolescent friendly health services.  1.3.2 The promotion of treatment education and literacy.	1.3.1 UNICEF, UNFPA, WHO will work with MOHSS to support the provision of youth / adolescent friendly services including sexual and reproductive health services, VCT & integrated HIV prevention for young people. UNAIDS will promote confidentiality in counselling  1.3.2 UNAIDS, WHO and UNESCO will support MIB, MOHSS & MOE, and MYNYSSC to produce and disseminated materials.	IAEA – \$ 200,000  UNESCO – \$ 20,000

<sup>5</sup> Comprehensive interventions that will address knowledge, attitude, behaviour and practice related to underlying causes (gender, alcohol etc).

<b>Country Programme Outcomes</b>	<b>Country Programme Outputs</b>	<b>Role of Implementing / Collaborating Partners</b>	<b>Resource mobilization Targets in US\$ Over 5 years</b>
and reproductive health services.	<p>1.3.3 Strengthened capacity for PMTCT.</p> <p>1.3.4 Strengthened ART delivery and medical and palliative care</p> <p>1.3.5 Comprehensive workplace programmes in place</p>	<p>1.3.3 UNICEF, WHO and UNFPA will work with MOHSS to promote PMTCT – including access to ante-natal, safe delivery and post delivery care &amp; infant feeding policy implementation.</p> <p>1.3.4 WHO will provide support to MOHSS in policy orientation, development of guidelines and standardized materials, capacity building, strengthening of laboratories services, Blood Transfusion programmes and Quality Assurance. UNICEF and WHO will support treatment mechanisms and community support for the ARV treatment of the under 5s. WHO will assist in strengthening home-based care and training of lay counsellors. IAEA will assess the impact of nutritional interventions on HIV-infected vulnerable groups using isotope techniques to provide evidence for policy decisions.</p> <p>1.3.5 UNAIDS, ILO and UNESCO will promote workplace programmes in coordination with NAEC. ILO will also strengthen role of Occupational Safety and Health Services, MOHSS. UNDP and UNAIDS will promote workplace programmes in the private sector. UNESCO will advocate implementing of these programmes in schools and relevant institutions. UNAIDS and ILO will assist in the development of a UN comprehensive HIV workplace programme for joint implementation by all UN Agencies in Namibia</p>	<p>UNFPA – \$ 2,000,000</p> <p>UNICEF – \$ 3,100,000</p> <p>WHO – \$ 100,000</p> <p>ILO – \$ 320,000</p>

## Outcome 2: UNDAF Results Matrix

### NATIONAL PRIORITIES

- Eradicate extreme poverty and hunger (MDG1)
- Economic and social development has been achieved through mobilisation and sustainable utilisation of available resources.(Vision 2030)
- Economic growth, employment creation, economic empowerment, and reduction in poverty, income inequalities & regional inequalities (NDPII)
- Ensuring environmental sustainability (MDG7)

**UNDAF Outcome 2: By 2010, livelihoods and food security among most vulnerable groups are improved in highly affected locations**

Country Programme Outcomes	Country Programme Outputs	Role of Implementing/Collaborating Partners	Resource mobilization Targets in US\$ Over 5 years
<b>2.1 Improved income earning, agricultural productivity and access to food for vulnerable households</b>	2.1.1 Subsistence farmers have adopted improved technology and have increased skills for agricultural productivity, processing and prevention of loss	2.1.1 FAO will support MAWF to assist communities improve staple crops small scale household small-stock, poultry, gardens and other projects and the diversification to high value crops. IAEA will increase capacity of soil scientists to advise on the best strategy to address soil, water and nutrient based constraints in the northern communal areas. UNIDO will support the establishment of viable community-based business projects, with a focus on agro-processing	FAO – (To be determined)
	2.1.2 Community based self sustaining food production strengthened through improved access to land, water, credit and marketing.	2.1.2 FAO & UNESCO will support MAWF, MOE, MOHSS & MGECW, to address food security including urban and peri-urban agriculture, school, communities and institutional gardens, targeting women-headed households & OVC.	UNDP – \$ 500,000 UNESCO – \$ 500,000 UNFPA – \$ 500,000
	2.1.3 Community capacity to address livelihoods, food security and nutrition, and to respond to the impact of HIV/AIDS strengthened	2.1.3 <sup>6</sup> , FAO, UNICEF, WHO, WFP & UNESCO will partner with MGECW, MAWF, MOHSS to strengthen the linkages between livelihoods, monitoring food security, nutrition and community care, particularly for 0-5 yrs & OVC. UNICEF will support MGECW efforts to develop national to community level capacity for integrated child centred approaches and will promote access to services for OVCs. UNESCO will build capacity of OVC care-givers.	UNICEF – \$ 6,160,000 UNIDO – \$ 2,000,000 WFP – \$20,000,000 WHO – \$ 200,000

<sup>6</sup> A JOINT PROGRAMME of UNICEF, UNESCO and FAO to strengthen Community Capacity Development for communities and families made vulnerable by HIV/AIDS.

Country Programme Outcomes	Country Programme Outputs	Role of Implementing/Collaborating Partners	Resource mobilization Targets in US\$ Over 5 years
	<p>2.1.4 Non-agricultural income earning opportunities increased</p> <p>2.1.5 Institutional capacity at all levels strengthened with policies &amp; legislation formulation supported.</p>	<p>2.1.4 ILO, UNESCO will support MTI, MOLSW &amp; MYNYSSC to provide advisory support to promote and support SMEs, job creation , copyrights, indigenous technologies and to increase the job seeking capacity of vulnerable groups. UNDP’s Small Grants Programme will support initiatives that benefit communities, CBOs &amp; NGOs. UNESCO will work with MOE, MYNYSSC and MET to facilitate training for local communities on research, preservation and management of tangible and intangible heritage that could lead to income generation. UNIDO will support the MTI in the development of small-scale indigenous entrepreneurship, with a focus on youth and the Northern regions</p> <p>2.1.5 UNDP, ILO, FAO, IFAD, UNEP will build institutional capacity at all levels &amp; support to develop production &amp; employment policies &amp; legislation. UNDP, UNFPA &amp; UNESCO will support the National Land Reform Programme. UNDP &amp; UNFPA will provide support to the National Planning Commission to implement the National Poverty Reduction Action Plan with particular focus on participatory poverty assessments, monitoring and evaluation at community level.</p>	
<p><b>2.2 Strengthened sustainable land and water management</b></p>	<p>2.2.1 Skills and capacity of community based natural resource management (CBNRM) improved</p> <p>2.2.2 Adoption of integrated land use planning and water management by communities enhanced</p> <p>2.2.3 National initiatives for bio-</p>	<p>2.2.1 UNDP will support MET, MAWF, MOLR, MRLGHRD and relevant NGOs with innovative integrated land and natural resources management practices of communities with gender and HIV mainstreamed. UNESCO will support employment generation activities related to Cultural and eco tourism.</p> <p>2.2.2 UNESCO, FAO, UNDP, UNEP &amp; WB<sup>7</sup> will support MAWF, MET, MRLGHRD and relevant NGOs to adopt integrated water management including strengthening of community water point committees and to strengthen sustainable land use practices. IAEA will enhance national capability for integrating nuclear techniques with hydro-geological and geophysical methods in conducting studies for sustainable development of groundwater resources.</p> <p>2.2.3 UNDP, UNEP, WB, FAO and UNESCO will support initiatives of</p>	<p>UNDP – (To be determined)</p> <p>IAEA – \$ 200,000</p> <p>UNESCO – \$ 150,000</p> <p>FAO – (To be determined)</p> <p>UNDP – \$ 5,200,000</p> <p>UNEP – (To be determined)</p>

<sup>7</sup> A JOINT PROGRAMME of UNDP, UNEP, UNESCO, FAO & WB to strengthen water and land use management.

Country Programme Outcomes	Country Programme Outputs	Role of Implementing/Collaborating Partners	Resource mobilization Targets in US\$ Over 5 years
	diversity conservation strengthened	MET, MME, GRN agencies and NGOs to promote conservation, renewable energy and environmental education.	WB – (To be determined)
<b>2.3 Strengthened National/Regional response capacities for disaster preparedness, mitigation and emergency humanitarian response</b>	<p>2.3.1 Coordination capacity of the national emergency management system for early warning preparedness and response to emergency situations strengthened</p> <p>2.3.2 Implementation capacity of institutional stakeholders for disaster risk management strengthened</p>	<p>2.3.1 WHO, UNFPA, FAO, UNDP &amp; OCHA will support capacity building of national, regional and sub-regional institutions in emergency management and preparedness, including the development of emergency plans. FAO will assist in the formulation of Vulnerability Assistance Committees.</p> <p>2.3.2. WHO, ILO, WFP, UNDP &amp; OCHA will support line ministries and other institutions in capacity development for humanitarian crisis prevention and recovery. UNDP will support capacity building for coordination of disaster risk management. WHO, UNICEF and UNFPA will support MOHSS in strengthening capacity in the health system to design and implement effective emergency preparedness and response with gender mainstreamed.</p>	<p>OCHA – (In kind)</p> <p>FAO – (To be determined)</p> <p>UNDP – \$ 600,000</p> <p>UNFPA – \$ 100,000</p> <p>UNICEF – \$100,000</p> <p>WFP – (To be determined)</p> <p>WHO – \$ 300,000</p>



### Outcome 3: UNDAF Results Matrix

#### NATIONAL PRIORITIES

- Achieve Universal Primary Education (MDG 2)
- Reduce child mortality (MDG 4)
- Improved reproductive health, maternal health and reduced maternal mortality (MDG 5)
- Combat HIV/AIDS, malaria and other diseases (MDG 6)
- Guaranteed access to comprehensive services for 85% of OVC, their caregivers and PLWHA in all 13 regions (MTP 3)
- Promote gender equality and equity (NDP 2) Promote gender equality and empower women (MDG 3)

**UNDAF Outcome 3: By 2010, the capacity of Government and civil society institutions is strengthened to deliver and monitor essential/critical health, education and special protection services**

Country Programme Outcomes	Country Programme Outputs	Role of Implementing/Collaborating Partners	Resource mobilization Targets US\$ over 5 years By CP Outcome
3.1 Institutional and community capacity for effective delivery and uptake of critical services, in health and education maintained and strengthened.	<p>3.1.1 Strengthened PHC with focus on children and mothers.</p> <p>3.1.2 Improved access to and retention in quality basic education, especially for vulnerable children</p>	<p>3.1.1 UNICEF and WHO will work with MOHSS to maintain and strengthen EPI and Malaria control services. WHO will support the MOHSS in strengthening the performance of Health sector's Human Resources, Health Financing, Operational Planning and Operational Research units.</p> <p>UNFPA, UNICEF and WHO will support MOHSS for essential obstetrical care in terms of protocols, services and sensitisation of communities in identified districts. IAEA will expand nuclear medicine capabilities at the Oshakati State Hospital and Windhoek Central Hospital.</p> <p>3.1.2 UNICEF and UNESCO will support efforts to achieve EFA goals. UNICEF will work with the MOE and civic organisations to facilitate access to and retention in primary &amp; secondary education for vulnerable children and for communication and advocacy with special focus on gender equity. UNESCO will train teachers, inspectors and advisory staff in the context of ETSIP with a special focus on science and maths education and with pre-school caregivers, and vulnerable communities on EFA. The ILO and UNDP will work through the SA Capacity Initiative. ILO will concentrate on training of labour inspectors, teachers and health workers. UNDP will provide technical support to strengthen institutional capacities to deliver critical services in basic education.</p>	<p>UNICEF – \$ 5,000,000</p> <p>IAEA – \$ 800,000</p> <p>ILO – \$450,000</p> <p>UNDP – \$ 300,000</p> <p>UNESCO – \$280,000</p> <p>UNFPA – \$ 2,000,000</p> <p>WHO – \$ 2,100,000</p>

<b>Country Programme Outcomes</b>	<b>Country Programme Outputs</b>	<b>Role of Implementing/Collaborating Partners</b>	<b>Resource mobilization Targets US\$ over 5 years By CP Outcome</b>
<p>3.2 The national statistical system is strengthened to ensure effective development and application of tools for evidence-based decision-making, planning, implementation, and monitoring and evaluation</p>	<p>3.2.1 National capacities for implementation of National Statistical Plan III and the Poverty Monitoring Strategy strengthened.</p>	<p>3.2.1 UNFPA and UNDP will work to strengthen the capacities of NPCSS for poverty monitoring and analysis, and for advocating pro-poor policy making. UNFPA will focus on strengthening national, sub-national and regional policies and planning to take into account gender and age disaggregated data and population and development linkages.</p> <p>UNDP and UNFPA will support assessments of national capacities for pro-poor policy research and analysis and design of programmes to address capacity gaps.</p> <p>UNDP and UNFPA, with technical inputs from UNICEF, will support introduction and establishment of DevInfo inter phased and linked to national monitoring systems in GRN and UN for monitoring NDP implementation and MDGs. Agencies working on sectoral systems linked to this process include among others: FAO (FIVIMS in MWARD), WHO (HIS in MOHSS) and UNESCO (EMIS, ETSIP in MOE, MYNYSSC and MGECW), as well as UNAIDS (CRIS in MOHSS).</p>	<p>UNFPA – \$600,000</p> <p>UNDP – \$ 500,000</p> <p>UNESCO – \$100,000</p> <p>FAO – (To be determined)</p> <p>WHO – \$80,000</p>
<p>3.3 Increased awareness and capacity for protecting the rights of children, women and other vulnerable groups.</p>	<p>3.3.1 The rights of women and children and other vulnerable groups are protected through enactment and application of required and existing legislation.</p> <p>3.3.2 Women, children and those in other vulnerable groups are aware of their rights and how to access the services available.</p> <p>3.3.3 Improved capacity of service providers to offer protection from violence and abuse and care to women, children and vulnerable groups.</p>	<p>3.3.1 UNICEF, UNESCO and the ILO will support advocacy for the necessary enactment and/or implementation of key legislation and policies to protect the rights of women, children and vulnerable groups and to ensure their full participation. This includes access to land for women, including inheritance for widows and child-headed households.</p> <p>3.3.2. UNICEF, UNESCO, UNFPA and UNDP will support multi-sectoral advocacy campaigns to address violence against women and children. UNFPA will train and sensitize decision makers, vulnerable groups, and men at community level on gender. UNESCO will continue to support national awareness and advocacy campaigns and education for human rights and democracy.</p> <p>3.3.3 UNICEF and ILO will develop capacity of key professionals in government, especially in MOHI and MGECW, trade unions, employers, NGOs and CBOs with regard to awareness and preventative measures concerning violence and abuse against women and children.</p>	<p>UNICEF – \$ 2,360,000</p> <p>UNFPA – \$ 250,000</p> <p>UNDP – \$ 200,000</p> <p>UNESCO – \$100,000</p> <p>ILO – \$ 120,000</p>

## Section 3: Estimated Resource Requirements

### Estimated Resource Requirements

Agencies have estimated the resources that will be required to achieve the desired Country Programme Outcomes. More accurate costing will be possible only after the detailed programme intervention and project development stage with respective counterparts. Resource commitments can be made only in country programme or project documents, according to procedures and approval mechanisms of each agency. The table below gives the estimated UNDAF resource requirements of UN Agencies over the five year period.

CPO	FAO	IAEA	ILO	UNDP	UNESCO	UNFPA	UNICEF	WFP	WHO	US\$ Est. Totals
1.1			150,000	550,000	20,000	750,000	520,000			1,596,316
1.2	650,000		225,000		20,000	2,000,000	7,760,000			10,427,895
1.3		120,000	320,000		20,000	2,000,000	3,100,000		100,000	5,184,211
2.1		200,000	270,000	500,000	500,000	500,000	6,160,000	20,000,000	200,000	7,752,895
2.2		200,000		5,200,000	150,000					5,350,000
2.3				600,000		100,000	100,000		300,000	1,005,263
3.1			450,000	300,000	280,000	2,000,000	5,000,000		2,100,000	9,580,000
3.2		800,000		500,000	100,000	600,000			80,000	1,280,000
3.3			120,000	200,000	100,000	250,000	2,360,000			2,768,420
	650,000	1,320,000	1,535,000	7,850,000	1,190,000	8,200,000	25,000,000	20,000,000	2,780,000	44,699,000

### Resource Mobilization

Resource flows from Overseas Development Assistance to Namibia since Independence have been on the decline. This can be attributed mainly to Namibia's international classification as a lower middle income country and shifts in donor funding approaches from bilateral to regional funding packages for selected countries that often excludes Namibia. In light of this situation and the crisis brought on by the HIV/AIDS pandemic, deepening food insecurity, and the erosion of governance capacity in the delivery of critical/essential services (the Triple Threat), the UN Country Team in Namibia will work on the formulation of joint resource mobilization initiatives within the context of an integrated advocacy/communication framework. The envisaged strategy will address the following short, medium and long term objectives:

- a) mobilize human and financial resources based on the UNDAF Resource Mobilization targets for a scaled up UN system response to the Triple Threat and UNDAF priorities and outcomes, especially for joint programmes as identified by the UNDAF ;
- b) change national and international donor and other development partner perceptions with regard to the most urgent/immediate and long-term development needs of Namibia ;
- c) develop new partnerships to demonstrate the high-impact benefits of a coordinated UN response ;
- d) provide a mechanism for mobilizing resources from the UN System and other multilateral/bilateral donors as well as NGOs and the Private Sector.

## Section 4: Planning and Implementation

### Joint Programming

Based on the Common Country Assessment and the development of the UNDAF, which will focus attention on the Triple Threat, the UN System will undertake an integrated programming process at the country level. The resident UN Agencies have given commitment to joint planning and reviews of individual agency country programmes and projects. UNDP, UNFPA, UNICEF, WFP, WHO, UNESCO and FAO will prepare, in close collaboration with common partners, their individual Country Programme Documents (CPDs), Country Programme Action Plans, Biennium Plans and Annual Work Plans. Joint Annual and Mid Term Reviews will be undertaken with GRN and civil society partners and increased efforts will be made to work through forums such as the Partnership Forum on HIV/AIDS and sectoral mechanisms such as the Annual Education Sector Review. These Agencies are committed to following the monitoring and evaluation matrix in section 5 below and wherever possible, common monitoring systems and evaluation activities will be used. This joint programming will lead to improved UN coordination, effectiveness, efficiency and reduced transaction costs with government and within the UN itself. The incorporation of the UN agencies' planning into the Government's planning cycle and process will be explored with all counterpart government ministries.

### Joint Programmes

During the UNDAF formulation process, two areas were identified tentatively for potential Joint Programmes and further negotiations with government counterparts and the relevant UN Agencies will follow. These Joint Programmes will strive towards the creation of a joint Steering Committee (preferably an already existing one), an integrated budget and workplan. The already identified Joint Programmes are:

- Water and land use management (UNDP, UNEP, UNESCO, FAO, WB) ;
- Community capacity development for communities and families made vulnerable by HIV/AIDS (FAO, UNESCO, UNFPA, UNICEF, WFP).

These potential joint programmes will be developed during the process of preparing the Country Programme Documents and Country Programme Action Plans and the 2006 Annual Work Plans in 2005, and will build on the following concepts:

**Community capacity development.** Within the UNDAF, the establishment of a Joint Programme is proposed in the Caprivi Region to strengthen community led responses to mitigate the impact of HIV/AIDS. Five UN Agencies plan to join forces in supporting their respective counterpart Ministries in undertaking efforts to develop the coping capacities of families heavily burdened by HIV/AIDS. FAO and WFP will support activities to strengthen the food security for vulnerable households, especially those headed by the elderly, women and adolescents caring for orphans and other vulnerable children (OVC) through youth skills training for improved crop and livestock production and small scale irrigation, and the provision of food assistance households that lack productive capacity through loss of their food or income producers due to HIV/AIDS.

UNESCO will provide assistance to support psychosocial support training to OVC and their caregivers. UNICEF will support efforts to strengthen local community capacity to care for OVC including access to existing schemes and services to provide quality early childhood care, protection from violence and abuse. Both UNESCO and UNICEF will work to improve OVC access and retention to basic education. UNFPA will focus on empowering women, particularly female headed households and girls through increasing access to quality and affordable reproductive health information and services and increased income earning capacity through skills training and linkages to financing systems and marketing opportunities. Through an integrated approach building on the competencies and local experience of different implementing partners in Government and Non-governmental Organizations supported by the 5 UN agencies, the varying needs of families affected by HIV/AIDS will be addressed through community action, ensuring their basic rights are fulfilled and protected.

**Sustainable land and water management.** The proposed joint programme on sustainable land and water management is in the process of developing a framework for integrated land and water management through the promotion and adoption of appropriate and innovative approaches and practices, to ultimately improve livelihoods and food security. The joint programme will be implemented in a phased approach starting in the North-Central Regions. Five UN Agencies would be pooling their resources to support the respective line Ministries achieving their national priorities. UNDP will support the establishment and strengthening of the national coordinating bodies and the adoption of regulation and best practices by communities. UNESCO will support the improvement of the scientific and technological basis for the development of rational water management, including the protection of the environment. FAO would be focusing on the area of Monitoring and Evaluation of the sustainability of land management systems as well as assisting in the development of "tools" and methodologies for monitoring of sustainable land use. WB would be designing the integrated land use planning tools for each region and UNEP will be focusing developing the research components.

## **Coordination and Cooperation within the UN System**

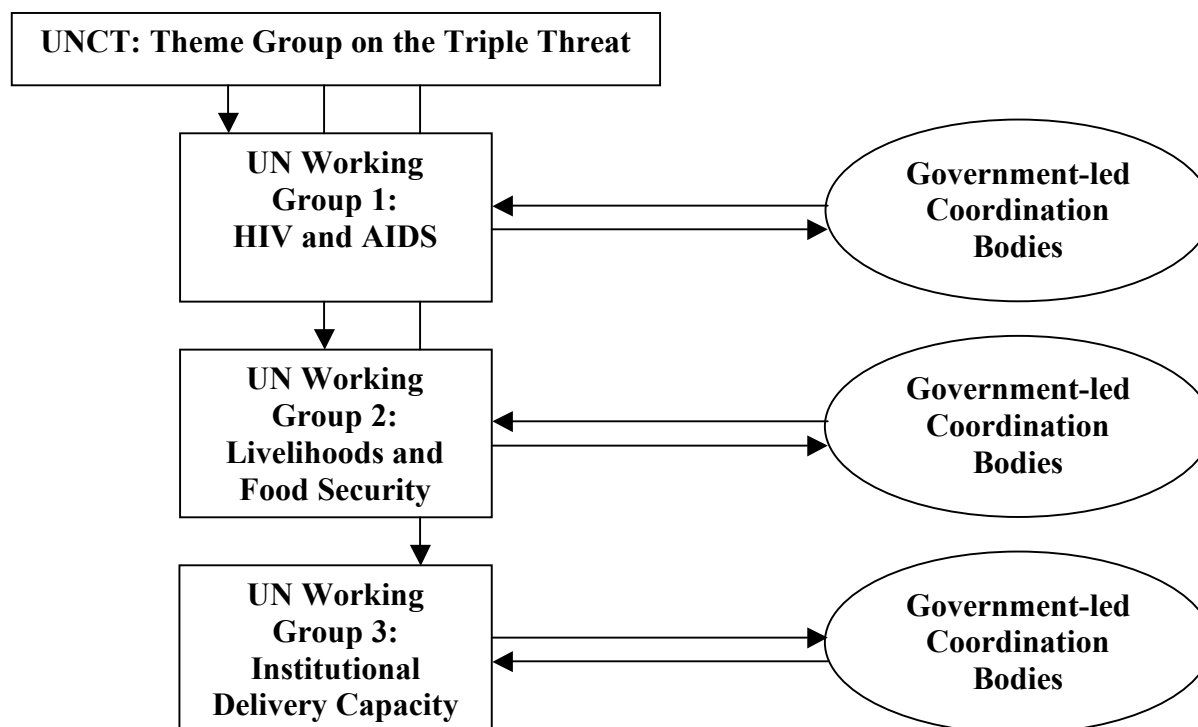
Within the UN System itself, existing mechanisms will be strengthened to coordinate the implementation of the UNDAF, as shown in the diagram overleaf.

The Resident Coordinator (RC) leads the UN Agencies and represents the UN System on matters of common concern. It is recognised that the Office of the Resident Coordinator will need to be strengthened to perform this overall coordinating function. The UN Country Team (UNCT) comprises the Representatives of each of the resident agencies. It will play an increased management and programmatic role in coordinating the UNDAF. To maximise efficiency and effectiveness, there will be only one theme group of the UNCT: the *Theme Group for the Triple Threat Response*.

The Working Group on HIV/AIDS will be the overall coordinating body for UNDAF Outcome 1. Two other Working Groups will be established to oversee the coordination of UNDAF Outcomes 2 (Livelihoods and Food Security) and 3 (Institutional Delivery Capacity). Each of these working groups will be headed by a member of the UNCT on a bi-annual rotational basis and will consist of technical project officers of the UN agencies.

For the coordination of jointly planned activities, the UNDAF Outcome Working Groups will work in close consultation with existing government coordination mechanisms and task forces. Thus, the limited UN technical capacity will be more efficiently and effectively harnessed using the team approach.

### Diagram of the Coordination Structure for UNDAF Implementation



### Coordination & Implementation Mechanisms for UNDAF Outcome 1

The UN Working Group on HIV/AIDS will be the overall coordinating body for the implementation of UNDAF Outcome 1. It will report to the UN Theme Group on the Triple Threat/UN Country Team (UNCT) on a regular basis and liaise with the National Multi-Sectoral AIDS Co-ordination Committee (NAMACOC), working closely with the National AIDS Executive Committee (NAEC). At the technical level, collaboration will be ensured with the following relevant forums:

- Sector Focal Persons (coordinated by Directorate: Special programmes, MOHSS) to reach all the sectors to promote HIV policies & workplace programmes ;
- Adolescent Friendly Health Services Task Force (MOHSS) ;
- Take Control Task Force (Chaired by MIB) for communication and social mobilisation ;

- the Technical Advisory Committee on Patient Care and Disease Control (MOHSS) for the promotion of treatment education and literacy, & strengthened ART delivery ;
- PMTCT technical committee (coordinated by Directorate: Special programmes, MOHSS) ;
- Standing Committee on Condom Provision within MOHSS and MGECW ;
- Interagency Technical Committee on Population and Development in NPCCS.

## **Coordination & Implementation Mechanisms for UNDAF Outcome 2**

The UN Working Group on Livelihoods and Food Security will be the overall internal coordinating body for the implementation of UNDAF Outcome 2 and it will report regularly to the UN Theme Group on the Triple Threat/UNCT. The linkages with government will be maintained by liaising with the existing Food Security Council through the United Nations' participation in the Food Security and Nutrition Technical Committee, as well as the Vulnerability Assessment Committee (VAC) chaired by the Emergency Management Unit (EMU). The UN's work relating to community capacity development for vulnerable families and children will be reported to the National OVC Permanent Task Force and the National ECD Committee. The UN will seek representation on other high-level relevant coordinating mechanisms on land and water management.

The UN will also participate in existing implementation mechanisms at the technical level, such as those within the Directorates of Planning and Rural Water Supply, the Division of Rural Development (MRLGHRD), the Global Environment Facility Small Grants Programme for NGOs and CBOs, as well as the MET forum which coordinates community-based natural resource management. The Ministry of Mines and Energy are responsible for renewable energy projects and have coordination mechanisms to which the UN could contribute. For the Country Programme Outcome 2.3 on emergency management and CP Outcome 2.1 on food security, Food Security Technical Working Groups exist at national level and in all 13 regions where each reports to its Regional Council. These committees are closely monitored by the Emergency Management Unit which falls under the responsibility of the Office of the Prime Minister.

## **Coordination & Implementation Mechanisms for UNDAF Outcome 3**

The UN Working Group on Institutional Capacity will need to link up with the appropriate GRN mechanisms in the relevant areas. Close and regular consultations will be ensured with the following National Coordinating Bodies:

- the Education Sector Planning and Advisory Group (chaired by MOE) and the Education Sector Policy Advisory Group (ESPAG) ;
- the Permanent Task Force on OVC (chaired by the MGECW) ;
- the National Coordinating Committee on Women and Child Protection (chaired by the Namibian Police) ;

- the National Advisory Committee on Gender Based Violence, Sexual Harassment and Legal Affairs, chaired also by MGECW.

The Working Group on Institutional Delivery Capacity will liaise with NPC, serving as a secretariat responsible for the implementation of the National Strategic Framework on Human Resource Development and Capacity Building, and the existing steering committee operating on sectoral levels. In supporting the national statistical system, it is proposed to link with and provide support via the Poverty Coordinating Committee and the newly proposed national statistics advisory council and/or any other coordinating mechanisms outlined in the National Statistical Plan when approved. There are many technical working groups which focus on issues around primary health care such as the Roll Back Malaria and the Inter-agency Coordination Committee on Immunization, among others. The Task Force on GRN/Civic Organisations Partnership Policy Implementation to be established may also be of relevance.



# **Section 5: Monitoring and Evaluation of the UNDAF**

## **Monitoring and Evaluation Plan**

The UNDAF Monitoring and Evaluation (M&E) plan focuses on monitoring and evaluating UNDAF Outcomes and related Country Programme Outcomes and Outputs with special reference to achieving national development goals, including the MDGs. The UNDAF plan itself includes a component in UNDAF Outcome 3 to build the capacity of the GRN to monitor progress towards development goals, by harmonizing data collection systems, providing support for databases and analysis tools, and for improving dissemination of findings.

The GRN has a substantial information management system in place and undertakes regular surveys in many areas including: a National Population and Housing Census every ten years, and Health Information Survey, a Demographic Health Survey, a Sero-sentinel survey every two years, a Household Income and Expenditure Survey, an Annual Education Census to name a few. The Ministry of Health and Social Services uses a Health Information System which captures information on a monthly basis. A monitoring system for the MTP-III has also recently been devised and will soon be operationalized. The compilation of the UN General Assembly Special Session on HIV/AIDS (UNGASS) report is the responsibility of National AIDS Coordination Programme (NACOP), with technical support from the UNAIDS office. The Central Bureau of Statistics within the National Planning Commission Secretariat is responsible for overseeing these activities within different line ministries.

The UNDAF will be greatly assisted by these and other existing information sources. It is important to note that the M and E framework uses indicators where data is available and that capture the trends. It does not and cannot attribute attainment of targets to UN interventions. Special resources may be required to measure impact of the UN on major interventions. The UNDAF monitoring will consist both of a combination of agency monitoring instruments and joint monitoring tools where appropriate. These may include the existing theme groups, joint field assessment and activities with partners. Some specific outcome evaluations will be undertaken during the programme cycle to focus on selected strategies. The responsibility of M&E lies with the UNCT and the Review Team assisted by national partners and existing theme groups as outlined in the Implementation Table.

This M&E Plan is linked to (a) the annual reviews of the agencies' country programme and (b) any joint monitoring plans for collaborative programmes. Annual Review and Mid-Term Reviews will be conducted jointly with common counterpart Ministries under the coordination of the NPC. In cases of single agency activities with unique counterparts, the individual agency's monitoring system will be used.

The UNDAF evaluation will be conducted in 2009 the penultimate year of the programme cycle. The evaluation will consider issues of the impact of the programme on achieving the UNDAF Outcomes in relation to national development, relevance of the outcomes during the programme cycle and for the future, progress made towards meeting country programme outcomes and outputs, the capacity of national partners to sustain progress, and the benefits and synergies accrued from a harmonized UN plan. The UNDAF evaluation will be used to inform the preparation of the next CCA and UNDAF cycle. The M&E Matrix includes indicators which have already been accepted and used either for the monitoring of UNGASS, MDGs the NDP2, the MTP-III or other existing M&E systems



<b>UNDAF and Country Programme Outcomes</b>	<b>Indicators and Baseline</b>	<b>Source of Verification</b>	<b>Risks and Assumptions for each UNDAF and CP Outcome</b>
<p><b>1.1 Strengthened commitment and leadership of Government and other stakeholders to create and enabling environment for scaled-up multi-sectoral responses.</b></p>	<p>1.1.1 Amount of Funds spent by GRN (by ministry) on HIV as per audited accounts (an UNGASS indicator). GRN Development budget:</p> <p><u>Baseline:</u> N\$ 73,814,000 (2003-2004) Operational expenditure ceiling MOHSS <u>Baseline:</u> N\$1,680,956 (2005-06)</p> <p>1.1.2 # of Ministries which have budget lines for HIV/AIDS: <u>Baseline:</u> 2 <u>Target:</u> 23</p> <p>1.1.3 % of constituencies implementing HIV/AIDS community action plans (MTP-III 45) <u>Baseline:</u> - <u>Target:</u> 80/96</p> <p>1.1.4 National Composite Policy Index by component (Strategic Planning, Human Rights, Prevention, Care and Support) (an UNGASS and MTP-III indicator, #6)</p> <p><u>Baseline:</u> 12/20 <u>Target:</u> 20/20</p>	<p>Annual GRN Development Budget</p> <p>Ministry of Finance</p> <p>Minutes of RACOCs</p> <p>RACOC and National Composite Policy Index Questionnaires</p>	

UNDAF and Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome												
<p><b>1.2. Reduced risk behaviour among vulnerable groups through comprehensive interventions.</b><sup>8</sup></p>	<p>1.2.1 % of people reporting the consistent use of a condom during sexual intercourse with a non-regular sexual partner (MTP-III,15)</p> <table border="0" data-bbox="598 332 1039 389"> <tr> <td></td> <td><u>Age group</u></td> <td><u>Baseline</u></td> <td><u>2009</u></td> </tr> <tr> <td>Women</td> <td>15-19</td> <td>48.5%</td> <td>80%</td> </tr> </table> <p>1.2.2 Reduced % of Teenage Pregnancies: <u>Baseline (2000):</u> 17.6% <u>Target:</u> ?</p> <p>1.2.3 % of sexually active respondents who had sex with a non-regular partner within the previous 12 months (MTP-III) <u>Baseline (2000):</u> 19% <u>Target:</u> ?</p>		<u>Age group</u>	<u>Baseline</u>	<u>2009</u>	Women	15-19	48.5%	80%	<p>DHS - AIDS</p> <p>DHS – AIDS</p> <p>DHS – AIDS</p>					
	<u>Age group</u>	<u>Baseline</u>	<u>2009</u>												
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<p><b>1.3 Increased access, uptake and provision of comprehensive high-quality prevention, treatment and care including VCT, PMTCT, ART and reproductive health services.</b></p>	<p>1.3.1 % of clients tested for HIV and receiving their sero-status results in the past 12 months (MTP-III, 25) <u>Baseline (2004):</u> 9,900 <u>Target:</u> 30,800</p> <p>1.3.2 % of adolescent friendly health facilities by region (MTP-III, p45)</p> <p>1.3.3 Reduction of young people 15-24 infected with HIV (UNGASS)</p> <table border="0" data-bbox="619 1063 997 1153"> <tr> <td></td> <td><u>Age group</u></td> <td><u>Baseline</u></td> <td><u>2009</u></td> </tr> <tr> <td></td> <td>15-19 age group</td> <td>11%</td> <td>7%</td> </tr> <tr> <td></td> <td>20-24 age group</td> <td>22%</td> <td>12%</td> </tr> </table> <p>1.3.4 % of health facilities offering PMTCT-Plus services in the past 12 months <u>Baseline (2004):</u> ? <u>Target:</u> ?</p>		<u>Age group</u>	<u>Baseline</u>	<u>2009</u>		15-19 age group	11%	7%		20-24 age group	22%	12%	<p>DHS / AIDS New Start VCT Centres</p> <p>Quarterly Coverage Report (QPAMR)</p> <p>Sentinel surveillance report</p> <p>Quarterly Coverage Report (QPAMR)</p>	
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<sup>8</sup> Comprehensive interventions include Knowledge, Attitude, Behaviour and Practice (KABP) that address underlying causes (gender, alcohol etc).

## UNDAF Outcome 2: Monitoring and Evaluation (M&E) Matrix

UNDAF Outcome 2 & Country Programme Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions for each UNDAF and CP Outcome																																																																				
<b>UNDAF Outcome 2: By 2010, livelihoods and food security among most vulnerable groups are improved in highly affected locations</b>	2.1 Proportion of households living in relative poverty and extreme poverty (MDG1) <table border="1" data-bbox="619 370 1113 495"> <thead> <tr> <th></th> <th>1993/4 Baseline</th> <th>2006 target</th> <th>2010</th> </tr> </thead> <tbody> <tr> <td>Poverty</td> <td>38%</td> <td>28%<sup>9</sup></td> <td>?</td> </tr> <tr> <td>Extreme poverty</td> <td>9%</td> <td>4%</td> <td>?</td> </tr> </tbody> </table> (Baseline: 2004 figures forthcoming)		1993/4 Baseline	2006 target	2010	Poverty	38%	28% <sup>9</sup>	?	Extreme poverty	9%	4%	?	Household and Income Expenditure Survey, Regional Surveys	1. Commitment and ownership from national and international partners to ensure that motivation, interest and support is sustained.  2. Land reform is carried out in an open, transparent and peaceful manner to avoid conflict situations and discord.																																																								
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<b>2.1 Improved income earning, agricultural productivity and access to food for vulnerable households</b>	2.1.1 Yield of subsistence crops per hectare <table border="1" data-bbox="569 581 1220 1265"> <thead> <tr> <th>Type of Crops by Region</th> <th>2003/2004 Baseline (Yield Kg/ha)</th> <th>2006<sup>10</sup></th> <th>2010<sup>11</sup></th> </tr> </thead> <tbody> <tr> <td colspan="4"><u>Caprivi</u></td> </tr> <tr> <td>Mahangu</td> <td>300</td> <td>303</td> <td>309</td> </tr> <tr> <td>Sorghum</td> <td>100</td> <td>101</td> <td>103</td> </tr> <tr> <td>Maize</td> <td>600</td> <td>606</td> <td>618</td> </tr> <tr> <td colspan="4"><u>Kavango</u></td> </tr> <tr> <td>Mahangu</td> <td>300</td> <td>303</td> <td>309</td> </tr> <tr> <td>Sorghum</td> <td>80</td> <td>86</td> <td>88</td> </tr> <tr> <td>Maize</td> <td>400</td> <td>404</td> <td>412</td> </tr> <tr> <td colspan="4"><u>Ohangwena</u></td> </tr> <tr> <td>Mahangu</td> <td>300</td> <td>303</td> <td>309</td> </tr> <tr> <td>Sorghum</td> <td>200</td> <td>202</td> <td>206</td> </tr> <tr> <td>Maize</td> <td>N/A</td> <td></td> <td></td> </tr> <tr> <td colspan="4"><u>Omusati</u></td> </tr> <tr> <td>Mahangu</td> <td>300</td> <td>303</td> <td>309</td> </tr> <tr> <td>Sorghum</td> <td>200</td> <td>202</td> <td>206</td> </tr> <tr> <td>Maize</td> <td>N/A</td> <td></td> <td></td> </tr> </tbody> </table>	Type of Crops by Region	2003/2004 Baseline (Yield Kg/ha)	2006 <sup>10</sup>	2010 <sup>11</sup>	<u>Caprivi</u>				Mahangu	300	303	309	Sorghum	100	101	103	Maize	600	606	618	<u>Kavango</u>				Mahangu	300	303	309	Sorghum	80	86	88	Maize	400	404	412	<u>Ohangwena</u>				Mahangu	300	303	309	Sorghum	200	202	206	Maize	N/A			<u>Omusati</u>				Mahangu	300	303	309	Sorghum	200	202	206	Maize	N/A			CBS-NPC, Annual Agricultural Survey Report 1996-2003	3. The response time of partners does not delay implementation of Joint Programme.  4. Vulnerability Assessment Committees are established.  5. Natural disasters (such as floods, drought) do not increase in severity and frequency.  6. Declining number of community members able to contribute/respond to the programmes.  7. High turnover of implementing staff among UN & partners creates discontinuity and can slow down implementation.
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	<p>2.1.4 Underweight among children under five (MDG4)  <u>2000 Baseline</u>   <u>2006</u>   <u>2010</u>  24%   17%   ?</p> <p>2.1.5 Consumer price index for all items and for food.  (When 'food' prices move upwards faster than 'all items' it is one indicator of worsening accessibility of food relative to other goods)</p> <p><u>Baseline for all items</u>: 100 (1992); 247 (2003)  <u>Baseline for food</u>: 100 (1992); 248 (2003)</p> <p>2.1.6 # of OVC, people with disabilities &amp; pensioners receiving state grants</p> <table data-bbox="619 698 1165 820"> <thead> <tr> <th></th> <th><u>Baseline (2004)</u></th> <th><u>Target</u></th> </tr> </thead> <tbody> <tr> <td>OVC</td> <td>25,000</td> <td></td> </tr> <tr> <td>People with disabilities</td> <td>12,398</td> <td></td> </tr> <tr> <td>Pensioners</td> <td>94,825</td> <td></td> </tr> </tbody> </table>		<u>Baseline (2004)</u>	<u>Target</u>	OVC	25,000		People with disabilities	12,398		Pensioners	94,825		<p>Consumer Price Index</p> <p>MOHSS, MGECW</p>	
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<b>2.2 Strengthened sustainable land and water management at community level</b>	<p>2.2.1 Land area protected to maintain biological diversity, as percentage of all land:</p> <table data-bbox="619 909 1165 1006"> <thead> <tr> <th></th> <th><u>1990 Baseline</u></th> <th><u>2001</u></th> <th><u>2006</u></th> </tr> </thead> <tbody> <tr> <td>Protected areas</td> <td>13.6%</td> <td>16.8%</td> <td>15.1%<sup>12</sup></td> </tr> <tr> <td>Registered conservancies</td> <td>0%</td> <td>4.9%</td> <td>10.9%</td> </tr> </tbody> </table> <p>2.2.2 Increased income from CBNRM activities:  <u>Baseline (2003)</u>: N\$ 4,804,780</p> <p>2.2.3 # of integrated water resources management plans  <u>Baseline</u>: 0 plans to date  <u>Target</u>:</p>		<u>1990 Baseline</u>	<u>2001</u>	<u>2006</u>	Protected areas	13.6%	16.8%	15.1% <sup>12</sup>	Registered conservancies	0%	4.9%	10.9%	<p>NMDG Report 2004 MET</p> <p>Namibia Nature Foundation</p> <p>MAWF</p>	
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Registered conservancies	0%	4.9%	10.9%												

<b>UNDAF Outcome 2 &amp; Country Programme Outcomes</b>	<b>Indicators and Baseline</b>	<b>Source of Verification</b>	<b>Risks and Assumptions for each UNDAF and CP Outcome</b>
<b>2.3 Strengthened National/Regional Capacities for emergency management</b>	<p>2.3.1 N\$ received for emergency management</p> <p><u>Baseline</u>: N\$129,673,144 (59% of requested amount for the 2003-04 programme)</p> <p>2.3.2 # of people affected by drought reached</p> <p><u>Baseline (2003-2004)</u>: 121,510</p> <p>2.3.3 # of people affected by floods reached</p> <p><u>Baseline (2003-2004)</u>: 10,000</p> <p>2.3.4 # of Regional EMU Disaster Contingency Plans prepared</p> <p><u>Baseline (2005)</u>: 1</p> <p><u>Target</u>: 12</p>	<p>EMU</p> <p>EMU</p> <p>EMU</p>	



### UNDAF Outcome 3: Monitoring and Evaluation (M&E) Matrix

UNDAF Outcome 3: CP Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions
<p><b>UNDAF Outcome 3:</b>  <b>By 2010, the capacity of Government and civil society institutions is strengthened to deliver and monitor essential/critical health, education and protection services</b></p>	<p>3.1 % of the public service meeting required competency level (PEMP)  <u>Baseline:</u> None  <u>Target:</u></p> <p>3.2 100% of teachers qualified  <u>Baseline:</u> &gt;60%</p>	<p>NPRAP report  Ministry of Finance</p> <p>EMIS</p>	<p>1. Performance Expenditure Management Programme is fully implemented.</p> <p>2. Level of staff attrition is mitigated by availability and use of ART.</p> <p>3. Other development partners continue and increase contributions to these outcomes and adequate funding from GRN is made available.</p>
<p><b>Outcome 3.1</b></p> <p><b>Strengthened institutional and community capacity for effective delivery and uptake of critical services, especially health and education.</b></p>	<p>3.1.1 Diphtheria Polio Tetanus (DPT 3) immunization coverage sustained at 80% in all districts</p> <p>3.1.2 Maternal mortality (MDG 5) decreased from 271/100,000 (2000) to 120 in (2010)</p> <p>3.1.3 Proportion of pregnant women and children under 5 sleeping under treated bednets to reach 60%</p> <p><u>Baseline</u> (2000): 7% (children only)  <u>Target:</u> 60%</p> <p>3.1.4 National Education Fund accessed by xx% of schools</p> <p><u>Baseline:</u> no fund</p> <p>3.1.5 Proportion of orphans to non-orphans attending school is equal.</p> <p><u>Baseline:</u> none</p> <p>3.1.6 % of children in Grade 7 who are promoted to Grade 8</p> <p><u>Baseline</u> (2002): 76.8%</p>	<p>DHS</p> <p>DHS</p> <p>DHS</p> <p>EMIS</p> <p>EMIS</p> <p>EMIS</p>	<p>4. The EMIS system is refined to collect school-based data on orphan attendance in schools.</p> <p>5. Regional breakdowns of funding unlikely</p> <p>6. DHS is refined to measure numbers of pregnant women sleeping under bednets and maternal mortality data is improved.</p> <p>7. New Central Bureau of Statistics organizational structure is operationalised as defined in NSS</p> <p>8. Adoption and use of database tools by relevant ministries.</p>

UNDAF Outcome 3: CP Outcomes	Indicators and Baseline	Source of Verification	Risks and Assumptions
<p><b>Outcome 3.2</b>  <b>Strengthened national statistical system (NSS) to ensure effective development and application of tools for evidence-based decision-making, planning, implementation, and monitoring and evaluation</b></p>	<p>3.2.1 National Statistical System &amp; Poverty Monitoring Strategy finalised</p> <p>3.2.2 Implementation of Integrated Household Survey Programme  Baseline: subject specific</p> <p>3.2.3 Operationalisation of DevInfo in NPCS linked to all line ministries.  Baseline – not yet in place</p> <p>3.2.4 % NPCS statistical plan followed (Performance Expenditure Management Programme Indicator )</p>	<p>NSS Review</p> <p>NSS Review</p> <p>Medium Term Expenditure Framework</p>	<p>10. The National Statistical Act is passed</p> <p>11. The under reporting of domestic violence cases may make analysis of data difficult.</p>
<p><b>Outcome 3.3</b>  <b>Increased awareness of importance and capacity for protecting the rights of children, women and other vulnerable groups.</b></p>	<p>3.3.1 Reduction of proportion of men agreeing that wife beating is justified for at least selected one reason  <u>Baseline:</u> 44%</p> <p>3.3.2 # of cases handled by Women and Child Protection Units  <u>Baseline (2003):</u>  Reported child abuse cases: 894</p> <p>3.3.3 % of successful prosecutions of rape and child abuse cases (a Performance Expenditure Management Programme indicator)  <u>Baseline:</u> (to be determined first year of programme)</p>	<p>DHS</p> <p>MoHA</p> <p>Court records</p>	

## Annex 1: Millennium Development Goals Status

GOAL	1992	2003	2006 target	Progress towards target
<b>1. Eradicate extreme poverty and hunger</b>				
Proportion of households living in relative poverty	38 %	-	28 %	Lack of data*
Proportion of households living in extreme poverty	9 %	-	4 %	Lack of data*
<b>2. Achieve universal primary education</b>				
Net primary school enrolment	89 %	92 %	95 %	Good
Survival rate for Grade 5	75 %	94 %	95 %	Good
Literacy rate, 15-24 years	89 %	89 %	94 %	Slow
<b>3. Promote gender equality and empower women</b>				
Primary education (girls per 100 boys)	102	100	100	Good
Secondary education (girls per 100 boys)	124	113	100	Good
Tertiary education (girls per 100 boys)	162	111	100	Good
Proportion of seats held by women in National Assembly	9 %	19 %	30 %	Slow
<b>4. Reduce child mortality</b>				
Infant mortality (per 1000 live births)	67	52	36	Slow
Under-five mortality rate (per 1000 live births)	87	71	54	Slow
Proportion of one-year-old children immunised against measles	63 %	72 %	80 %	Good
Underweight among children under five	26 %	24 %	17 %	Slow
<b>5. Improve maternal health</b>				
Proportion of births attended by trained health personnel	68 %	75 %	88 %	Good
Contraceptive prevalence rate	21 %	37 %	50 %	Good
<b>6. Combat HIV/AIDS, malaria and other diseases</b>				
HIV prevalence among 13-19 year old women	6 %	11 %	9 %	Worsening
HIV prevalence among 20-24 year old women	11 %	22 %	15 %	Worsening
TB treatment success rate	58 %	69 %	75 %	Good
<b>7. Ensure environmental sustainability</b>				
Proportion of rural households with access to safe drinking water	45 %	80 %	80 %	Good
Proportion of rural households with access to basic sanitation	15 %	21 %	50 %	Slow
Freehold land	5 %	6.1 %	8.5 %	Slow
Registered conservancies	0 %	4.9 %	10.9 %	Slow
<b>8. Develop a global partnership for development</b>				
Per capita overseas development assistance to Namibia (in US\$)	130	60	90	Worsening

*Note: The table provides a quick overview of progress on selected targets for each of the eight MDGs. The data is grouped to represent the closest year to 1992, 2003 and the medium-term targets for 2006. The last column assesses progress against the medium-term target. Good means that if the rate of progress seen since the early 1990s continues then the target will be met. Slow means that progress since the early 1990s has been positive but is not strong enough to reach the 2006 target. Worsening means that the situation has deteriorated since the early 1990s.*

*\* A new Household Income and Expenditure Survey will be finalised in 2004 which will update the income poverty figures.*

Source: Office of the President/National Planning Commission 2004 "Namibia 2004 Millennium Development Goals"

## **Annex 2: Summary of UN Agencies' Programmes**

### **IAEA**

During the course of the UNDAF cycle, the IAEA will be working on the development of a new Country Programme Framework (CPF) to identify with the Government priority areas and planning opportunities for technical cooperation for the period 2007-2011. One of the purposes of the CPF is to encourage governments to take ownership of the planning process and to integrate it with the UN Development Assistance Framework (UNDAF). It is expected that the IAEA and Government will work closely with both non-resident and resident agencies to ensure that there is a coherent strategy in helping Namibia achieve its development goals.

### **ILO**

The ILO's support to the Government and other constituents and partners in Namibia is geared to contribute towards the attainment of the National Development Plan and the three UNDAF Outcomes identified. In that regard, the programme focuses on promoting decent work as a key instrument for sustained national development. Special attention is given to promoting equal opportunities and access to productive employment by women and men, especially the youth; critical components of Namibia's Poverty Reduction Strategy Programmes. It has been agreed to strengthen the institutional mechanism for Local Economic Development (LED) to enable meaningful dialogue for desired results with development partners at all levels. In addition, the capacity of the Government, trade unions and employers to develop and implement policies and programmes that promote equity and rights at work will be enhanced. This involves the capacities to deal with HIV/AIDS, child labour, gender based inequalities and inequities.

### **OCHA**

The Office for the Coordination of Humanitarian Affairs (OCHA) has committed itself to supporting the UNDAF in "strengthening national/regional response capacities for humanitarian and emergency management" (Outcome 2.3). Contributions will be in-kind only. OCHA will fund the recruitment of a Humanitarian Affairs Officer in the Office of the Resident Coordinator for an initial six-month period to enhance UN inter-agency coordination in the field of disaster preparedness & response at the country-level, provide the UN Country Team with advisory and technical support, and facilitate coordinated support to the Emergency Management Unit and other national mechanisms such as the Vulnerability Assessment Committee (NVAC). Support to the NVAC will also be provided through OCHA's participation in the Regional VAC. OCHA will also help the UN System in Namibia in the area of information management for disaster preparedness and humanitarian response. Finally, OCHA may, in certain circumstances, provide emergency grants to the UN Resident Coordinator to assist with the purchase of relief items in response to a disaster.

## **OHCHR**

The Southern Africa Regional Office, created as part of the Office of the UN High Commissioner for Human Rights' overall regional strategy, is mandated to address common concerns in the field of human rights for the countries in the sub-region. Supporting Governments and civil society in promoting and strengthening national protections systems (Parliaments, the judiciary, national human rights institutions) is aimed to ensure that all human rights – civil, political and socio-economic and cultural, are effectively guaranteed. This assistance and the collaboration with the United Nations Country Teams (UNCTs) in their efforts to develop a rights-based approach to development in individual programmes and common exercises is being to achieve the UN objectives as reiterated by the UN Secretary General's Action 2 programme. Within the framework of the technical assistance it provides, the Regional Office, in response to the Triple Threat of HIV/AIDS, Food Insecurity and challenged Governance and Service delivery capacities faced by Namibia, will provide support to the country through capacity building and the strengthening of implementation of international human rights instruments. It proposes also to share its experience and provide assistance and collaboration with national institutions and other UN agencies to strengthen and mainstream human rights in HIV/AIDS and policies to meet the Millennium Development Goals.

## **UNDP**

The GRN/UNDP Country Programme 2006-10 seeks to support attainment of Vision 2030 and the Millennium Development Goals through three programme components: (1) responding to HIV/AIDS, (2) reducing human poverty and (3) energy and environment for sustainable development. Outcomes and outputs from each programme are directly linked to the three pillars of the UNDAF and the Results Matrix. The programme is framed within the sub-regional Southern Africa Capacity Initiative and focuses on capacity strengthening at national, sub-regional and local levels. Responses are designed directly in the context of the triple threat with emphasis on supporting development management and crisis prevention capacities, maintaining and improving delivery and uptake of critical social services, and strengthening sustainable livelihoods on household level. The resource mobilisation target indicated in the UNDAF and the Country Programme Document is USD 7.145 million.

## **UNESCO**

UNESCO's programme relies on its five sectors, namely, Communications, Culture, Education, Natural Science and Social and Human Science. The Communication's Sector will act inter-sectorally by supporting the media in the advocacy for the triple threat addressed primarily by the UNDAF. The Culture sector will support the UNDAF process through a cultural approach to the HIV prevention and care which is a vital element for its successful implementation. In its support to the Education and Training Sector Improvement Programme (ETSIP), the Education Sector will work with MOE and Civil Society in the provision of education especially to orphans and other vulnerable children. Furthermore, the Sector, by its mandate for educational monitoring from early childhood to tertiary education, will provide support for integrating the current fragmented education monitoring system. The Science Sector having as its front runner the International Hydrological Programme (IHP), will aid in improvement of the scientific and technological basis for

the development of methods for the rational management of water resources, including the protection of the environment (Outcome 2.2, Output 2.2.2).

## **UNFPA**

The next UNFPA Country Programme is wholly focused on and designed to contribute to the 2006-2010 UNDAF. In line with UNFPA's mandate and the 2004-2007 Multi-Year Funding Framework (MYFF), the programme will focus on three programme components namely, Reproductive Health (RH), Population and Development (P&D) and Gender. A key aim of the programme will be to consolidate and build on the achievements related to HIV/AIDS prevention among young people. The new country programme will also take into account lessons learned from the experience of implementing the current country programme. With regard to HIV/AIDS prevention, an important strategy will be community education and mobilization with the focus on achieving behavioural impact among young people. UNFPA will assist the Ministry of Health and Social Services to expand the provision of VCT and adolescent friendly health services in underserved areas. Maternal health will also be addressed by the programme and the provision of EOC in identified sites. In the area of population and development, UNFPA will work to ensure national development policies and programmes take population and gender issues into consideration. A concerted effort will be made to ensure availability and utilization of age and sex disaggregated data for the planning, implementation and maintaining of national development plan and poverty reduction. Given that gender inequality lies at the heart of the HIV/AIDS pandemic, UNFPA will focus on mainstreaming gender in all national and sectoral plans as well as to empower women and girls and raise awareness on gender issues and the rights of women and girls to stem gender based violence.

## **UN-HABITAT**

UN-Habitat (United Nations Human Settlements Programme) will assist the United Nations Country Team to provide coordinated support to the urban sector in terms of good urban governance & urban management and shelter & informal settlement upgrading. UN-Habitat will further assist the Resident Coordinator by providing general programmatic link for relevant development assistance to Namibia, specifically to include shelter and urban sector development. In this connection, UN-Habitat has appointed a Habitat Programme Manager (HPM) to participate actively in the UNDAF and coordinate activities related to shelter and human settlement developments.

## **UNICEF**

The next programme cycle will fully address all three of the UNDAF outcomes covering six of the UNDAF Country Programme Outcomes most relevant to UNICEF's mandate. Hence, the full resource mobilization target of USD 25 million will be 100% according to the UNDAF. The programme will ensure continuity of the earlier focus on HIV/AIDS and disparity reduction through a life cycle approach addressing early childhood health, care and development and the adolescent HIV prevention while special protection needs will span all ages from 0-18 years. With the need for greater focus on HIV/AIDS impact mitigation and on making a significant contribution to the country's efforts on achieving the MDGs, the country programme will direct attention to those most vulnerable groups: 0-3 year olds, adolescents, orphans and other children made vulnerable by

HIV/AIDS and violence in families and communities. Efforts will be made to stem the potential reversal of the positive gains made since independence on critical child survival and development services such as the Expanded Immunization Programme, Malaria Control and access and retention in Basic Education. Underlying causes such as gender and alcohol abuse which runs through all the most critical issues affecting women and children, will be addressed throughout the programme as well as built into the advocacy, monitoring and evaluation components.

## **The World Bank**

The Bank has engaged in discussions with the GRN on developing a framework for cooperation over the next few years. Due to its middle income status, Namibia is not borrowing from the Bank and current involvement focuses on providing technical assistance and analytical support for the government's efforts to reduce poverty and build local capacity. The most recent analytical pieces are the study on Human Capital Development and Knowledge for Economic Growth which was completed in 2004. It was widely discussed with all donors in Namibia and the preliminary findings suggest the need for substantial reform of the education and training sector. A donor round table took place in March 2005 and its outcome will determine a possible IBRD operation to support implementation of the education sector strategic plan.

In 2004, the Bank embarked on preparing a Country Economic Memorandum that will address the issues identified in the GRN's key policy documents such as (a) inequality, growth and poverty; (b) sources of growth and key constraints to achieving potential growth; and (c) Government actions towards growth and poverty reduction.

In the field of HIV/AIDS, an Institutional Development Fund grant for US\$499,000 will support and build capacity for a public-private partnership to implement MTP-III and activities to be funded under the Global Fund, from 2005-2007.

In the environmental and sustainable development area, the Bank is providing support under the Global Environmental Facility (GEF). The first project for Namibia, Integrated Community-based Ecosystem Management for US\$7.1M was approved in 2004. Two more GEF operations are in the pipeline: The Namibia Coast Biodiversity Conservation and Management Project (proposed US\$4.8M) will assist the GRN to put in place a coastal zone management system that will lead to sustainable use of resources and protection of Namibia's biodiversity. Another project (proposed US\$1M) will focus on promoting Environmental Sustainability through Improved Land Use Planning.

## **WFP**

The World Food Programme (WFP) is currently providing food assistance to vulnerable populations in Namibia through two emergency operations. In November 2003, in response to a GRN appeal for drought relief for 642,500 people, WFP established an operation to assist some 111,000 rural orphans and vulnerable children (OVCs) in the six regions most affected by the rising incidence of HIV/AIDS and poverty. This operation is planned to run to the end of June 2005 and WFP is now looking at the feasibility of integrating this caseload into WFP's regional Protracted Relief and Recovery Operation "Assistance to Populations in Southern Africa Vulnerable to Food Insecurity and the impact of AIDS." If implemented in Namibia, this operation would run to the end of 2007

supporting the nutrition and health status of the OVCs as well as government and civil society systems for managing food assistance.

Since 1999 WFP has also been providing food to Angolan refugees with the objectives of sustaining life and maintaining and improving the health and nutritional status of this vulnerable group. As a result of peace in Angola, the number of refugees has gradually decreased as refugees repatriate. The average number of people receiving assistance in 2005 is expected to be around 5,000.

These operations directly contribute to the UN Millennium Development Goals (MDG) of eradicating extreme hunger and poverty, reducing child mortality and combating HIV/AIDS. While not aligning directly with the UNDAF cycle, WFP interventions will contribute towards UNDAF Country Programme outcomes 1, 2 and 3.

## **WHO**

The recently developed WHO Country Cooperation Strategy (CCS) for the period 2004-2007 is being used as a fundamental guide for technical cooperation with the GRN, Development partners and other health stakeholders. It has been inspired by: the Millennium Development Goals (MDGs), the United Nations Development Assistance Framework (UNDAF), the New Partnership for Africa's Development (NEPAD), the WHO global priorities and the African Region orientations, the Namibian Vision 2030, the Country Focus Policy and other relevant global, regional and sub-regional initiatives. It takes into consideration the importance of responding to the *Triple Threat* as defined by the High Level Committee on Programmes<sup>13</sup>, to the health needs as defined by the Namibian National Health Policy and the National Health Sector Strategic Plan, as well as the harmonization with the National Development Plan II (NDP II). The second generation of CCS will be developed subsequently.

HIV/AIDS is one of the selected programmatic areas. Using as broad strategy the provision of sustainable support to the GRN with focus on health sector interventions in promotion of healthy behaviours, prevention, treatment and care (VCT, PMTCT); provision of tools and guidelines for normative guidance; training of health personnel and community based organizations, monitoring, evaluation, surveillance and research. Using 3 by 5 strategies support will be provided to scale up the access to ARVs. During the period into consideration WHO will support the attainment of the main objectives of the health sector as indicated in the National Strategic Plan on HIV/AIDS, MTP-III. Using a results-based planning and budgeting approach and focusing on the WHO strategic functions, the country Office in Namibia will also provide support to the Government in the following 13 AOW: HIV/AIDS; Tuberculosis; Malaria; Organization of Health Services; Health Promotion; Communicable Diseases Prevention and Control; Prevention and Control of Non-communicable Diseases; Mental Health and Substance Abuse; Health and Environment; Reproductive Health; Child and Adolescent Health; Immunization and Vaccine Development; and Emergency Preparedness and Response.



## **Annex 3: Summary of Development Partners’ Programmes vis-à-vis the UNDAF**

### **Royal Danish Embassy**

The Royal Danish Embassy (based in Pretoria, South Africa) is currently providing financial support to two Namibia-related projects. Both of them fall within UNDAF Outcome 3; one is directly related to outcome 3.3 (Increased awareness of and capacity for protecting the rights of children, women and other vulnerable groups), while the other is a regional project, which includes Namibia and relates more generally to good governance.

The first Project – titled “Improving implementation of the rape and maintenance laws in Namibia”, and carried out by the Legal Assistance Centre (LAC), aims to improve the implementation of two key pieces of legislation – the Combating of Rape Act, and the Maintenance Act. Activities include a research project to monitor the implementation of the Rape Act, which will result in a report with recommendations for decision-makers, to be followed by a stakeholders’ workshop. Two training videos will also be produced, one on rape for Prosecutors, another for Maintenance Officers on the Maintenance Act.

The second Project, titled “Consolidating SADC Parliamentary Democracy”, implemented through the South African Institute of International Affairs, seeks to the development and consolidation of parliamentary democracy in Southern Africa as a prerequisite for political, social and economic sustainable development. The intermediate objective is to analyze and record how the parliaments in seven SADC countries, including Namibia, are functioning with regard to legal framework, structure and application; to contribute to the capacity-building of parliaments; and to further the conditions for an active political opposition and public access to and influence on the work of the parliaments.

### **Delegation of the European Commission**

EC assistance to Namibia is provided in support of national priorities as defined in NDP2 and the National Poverty Reduction Action Programme, with the overarching objective being reduction, and in due course, the elimination of poverty. The general orientation of our cooperation with Namibia is stated in the Country Strategy Paper (CSP) that was signed between Namibia and the European Commission in 2002, after wide consultation. The basis of our support to Namibia is the Namibian NDP2: (i) more equitable and efficient delivery of public services; (ii) accelerate equitable and sustainable agricultural expansion; (iii) develop options for non-agricultural income generating activities; and (iv) provide a safety net for vulnerable groups to prevent them from falling into poverty. In that regard, the CSP focuses on rural development and Human Resources Development.

EC assistance to GRN is supportive of the triple threat response in many areas. UNDAF Outcomes 1 and 3, which deal with a strengthened HIV response and capacity to deliver essential services, are mainly supported by the Education Sector Programme to which the EC contributes EUR 21M. in budget support and the Namibia HIV/AIDS Response Capacity Development Programme. UNDAF

Outcome 2 is supported by the EUR 53M. Rural Poverty Programme and various infrastructural and agricultural services programmes. The EC also provides assistance to central GRN functions which are vital for all three UNDAF areas, namely capacity building for national planning and a planned budget support programme for public finance management. The EC is also currently in discussions with the NPCS to launch a capacity support programme for Non-State Actors. Outside the UNDAF Outcome areas, the EC supports regional trade and integration, also with a view to reduce poverty in the long term.

The Country Strategy for the 9<sup>th</sup> European Development Fund runs up to 2007 and it is expected that the programme process for the next period of support 2007-2012 will commence early 2006. We will most certainly take into account the UNDAF framework when programming our support to ensure complementarity and avoid duplication.

### **Finnish Development Assistance**

During the last 15 years Finland has supported the environmental and water sectors (18 % of the total assistance) and the health (40 % of the total assistance) sector through the bilateral programmes. A new bilateral project Support to the Namibian Decentralization Process started in October 2004 (€ 6 M). The aim of the project is to support the Regional Councils and line ministries (ME, MET, MGECW, MHSS, MIB, MLR, MRLGHRD, MWTC and MAWF) in their decentralization processes.

At the moment Finland is developing and using other channels and instruments for the cooperation with Namibia. Among them are NGO cooperation between Finnish and Namibian NGOs, multilateral programmes, various exchange programmes, concessional credits, institutional cooperation and the Fund for Local Cooperation (LC Fund) at the Embassy. The 2006 - 2010 Finnish development assistance to Namibia will be mainly channelled through the LC Fund.

Through supporting the initiatives of the local NGOs, CBOs and Public and other Institutions in Namibia, the overall aim of the LC Fund is the alleviation of widespread poverty. Special attention is given to the fight against HIV/AIDS, initiatives that strengthen civil society development, social equality, gender equality, open civil society participation and human rights. It also aims at strengthening the local cultural identity and supporting vulnerable groups and indigenous minorities.

The identified three UNDAF Outcomes are at the heart of the planned LC Fund development assistance.

UNDAF Outcomes 1, 2 and 3 are supported through Small Grants Fund (SMGF) administered by UNAIDS and Farmer Field and Life Schools (FFLS) for OVCs and women-headed households. The SMGF supports HIV/AIDS related community activities, including capacity building. The FFLS programme in Ohangwena region receives support 2005 - 2007.

Additional priority is to promote institutional linkages between public and private institutions, NGOs and CBOs in Namibia and Finland (institutional collaboration). Especially, increased linkages in trade and investment are encouraged.

## **French Development Assistance**

Since Namibia's Independence, France has, in agreement with the Namibian authorities, devoted the major part of its technical cooperation to the sectors of health and rural development. In the health sector, the fight against HIV/AIDS was particularly emphasised in the recent period. The actions in the rural development sector benefited underprivileged communal farmers in the North-central regions.

With the recent implementation of very important programmes in these areas (the PEPFAR Fund, the Global Fund and the EC programme to fight rural poverty), the French Cooperation has re-orientated some of its actions to be coherent with those of different partners. The way forward in the area of the fight against AIDS as well as possible cooperation in the area of water resources management is being discussed. The French cooperation supports the decentralisation process which aims at bringing citizens closer to the administration in the prospect of improving the services and providing support to the Namibian Police, especially in terms of training.

## **German Development Assistance**

The UN Development Assistance Framework (UNDAF), 2006 – 2010, and the support strategy guiding the German development co-operation programme with Namibia in the coming years will be complementing each other and be mutually reinforcing in assisting Namibia in reaching her medium- to long-term development goals. Common areas of support which will require close co-ordination and co-operation are the fight against HIV/AIDS and the promotion of rural development.

With regard to the fight against HIV/AIDS (UNDAF outcome 1) German development co-operation will focus on strengthening prevention efforts, notably through behaviour change communication (BCC), the social marketing of condoms as well as workplace programmes with private sector companies and the business coalition. Scaling-up the multisectoral response at national and decentralised level will be supported in selected sectors and regions.

Efforts to improve rural livelihoods and food security (UNDAF outcome 2) are matching with the strategy Germany and Namibia are pursuing under the bilateral focal area of co-operation "natural resource management and rural development". With a clear focus on land resources German support is geared towards improved access to land and the sustainable use of natural resources. Fair access to productive resources (esp. land), better management capacities for sustainable resource use (land, water, communal forests, protected areas), provision of rural infrastructure (in the context of land reform) and institutional capacity-building for managing environmental information are key strategic areas of German support. The expansion of the rural road infrastructure as well as programmes to stimulate economic growth in rural areas (e.g., business development services for SME, microfinance) will complement these activities.