



The United Nations Partnership Framework (UNPAF) 2014-2018

A Partnership for Growth, Job Creation and Equity

Namibia Annual United Nations Country Results Report 2016

Summary
of progress
of UNPAF
Results Groups
towards
UNPAF
outcomes
in support
of national
development
priorities

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1. Report Focus and Objectives

This report focuses on the implementation of the UNPAF activities for 2016, and it is limited to the activities that the UN agencies planned under UNPAF. The report further focuses on results achieved at an outcome level with an update on the outputs and the 2017 work plan which are attached as annexes. It further highlights the results achieved and identifies the challenges and key lessons for consideration in future programming.

2. Major Developments in Namibia

The Republic of Namibia continues to enjoy peace, security and political stability. The country's President, Dr. Hage Geingob, who was sworn in on March 2015, has dedicated his presidency to the eradication of poverty and hunger. In his State of the Nation Address delivered on 05 April 2016, President Geingob declared 2016 as a year of implementation for various planning policies and frameworks. These include the Harambee Prosperity Plan (HPP), the Government of the Republic of Namibia (GRN)'s action plan towards prosperity for all Namibians, and the Blue Print on Wealth Redistribution and Poverty Eradication, a policy framework aimed at advancing strategies for eradicating poverty and reducing income inequality in Namibia. These frameworks are in line with Namibia's Vision 2030 and the Sustainable Development Goals (SDGs) particularly SDG 1 on No Poverty and SDG 2 on Zero Hunger.

Namibia has one of the fastest rates of poverty reduction over the past 5 years. Poverty reduced from 28% in 2010/11 to 18% in 2016; while severe poverty has declined from 18% to 11%. Inequality, as measured by the Gini coefficient, has also reduced slightly from 0.59 to 0.57 during the same period. However, no significant job creation was recorded during this period of assessment¹.

During the last two quarters of the year 2016, the GRN grappled with a tough economic situation. In September 2016, the Fitch Rating Agency revised Namibia's economic outlook from stable to negative, specifically affirming a significant fall in the country's sovereign credit rating at the investment grade notch of Better Business Bureau (BBB). This was largely attributed to the country's growing budget deficit, which stood at 8% of the Gross Domestic Product (GDP) in the fiscal year 2014/15, which is above the GRN's 5% target. In addition, the country's debt to GDP ratio increased to 38.5%, which exceeds the target of 35%.

The Ministry of Finance (MoF) tabled in parliament a mid-year budget review for 2016 and announced various control measures which aimed at tightening expenditure at all government ministries. The situation above was caused by a strain in government resources due to a fall in the global commodity prices, which adversely affected Namibia's exports and compressed private sector activity.

Like other Southern African countries, Namibia continues to be vulnerable to environmental shocks and is facing water, energy and food insecurity challenges. Namibia also suffered the effects of the El-Niño phenomenon for four consecutive years, where approximately 700,000 people reportedly faced survival and livelihood protection deficits because of severe drought conditions. This prompted the GRN to declare a national state of emergency on 24 June 2016.

¹State of the Nation Address 2016: His Excellency Dr. Hage G. Geingob

3. The UN System in Namibia: Delivering as One

The GRN declared itself a self-starter/volunteer country to implement the United Nations (UN) Reform Agenda through the Delivering as One UN approach in April 2010. This started the process of cementing a partnership between the GRN and the UN system, particularly in support for Namibia's development agenda. This declaration was supported by the Aide Memoire on "Enhanced GRN-UN Partnership through DaO in Namibia" which later culminated in the development of the United Nations Partnership Framework (UNPAF) 2014 -2018, "A Partnership for Growth, Job Creation and Equity".

The United Nations Partnership Framework (UNPAF) 2014-2018 is the third strategic programme framework prepared by the GRN and the UN system. It describes the collective response of the UN system to priority national development challenges and articulates its comprehensive support to the achievement of national development objectives. The five-year UNPAF was jointly developed with GRN in 2012-13 to be fully aligned with the Fourth National Development Plan (NDP4) April 2012 – March 2017, the Vision 2030 Road Map and other national priorities.

Through the UNPAF and in line with moving towards partnership, the UN System aimed to focus on supporting capacity development of national institutions; fostering multidisciplinary approaches to development; strengthening knowledge generation and management; promoting standards, norms and accountability mechanisms; and providing quality technical expertise and policy advice.

In the context of "Delivering as One", all participating UN programmes/ agencies/ funds agreed to develop joint two-year rolling work plans for each of the 12 UNPAF Outcomes. This tool was expected to foster greater cooperation in planning and reviewing as well as collaboration in implementation of specific activities. It was also expected to allow partners to see the totality of UN support in each outcome area.

UNPAF is a vehicle for strategic partnership and resource planning to drive programmes through which the UN Country Team (UNCT) would support Namibia in the implementation of its development plans and the realization of its development goals under Vision 2030. The UNPAF is organized around four pillars: Institutional Environment; Education and Skills; Health; and Poverty Reduction.

Progress against UNPAF's targeted outcomes is reviewed annually to assess key achievements for the year and contributions of each UN agency against each outcome detailed in the document. There are twelve UNPAF outcomes, to be achieved by 2018, within these four pillars of UNPAF and these are subdivided among UNPAF's four pillars as follows:

The Institutional Environment Pillar

- **Outcome 1:** Policies and legislative frameworks to ensure transparency, accountability and effective oversight of the management of public affairs are in place and are being implemented.
- **Outcome 2:** The Government and partners are promoting and protecting human rights effectively.
- **Outcome 3:** Functional monitoring, and evaluation and statistical analysis systems are in place to monitor and report on progress.
- **Outcome 4:** Namibia complies with most of her international treaties' accession/ ratification, monitoring and reporting obligations.

The Education and Skills Pillar

- **Outcome 5:** Namibia is implementing policies and programmes that improve learning outcomes at all levels.

The Health Pillar

- **Outcome 6:** Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health, and improve health outcomes.
- **Outcome 7:** Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.

The Poverty Reduction Pillar

- **Outcome 8:** Namibia is implementing effectively and in a coordinated manner, policies and strategies to reduce poverty and vulnerability which are informed by evidence on the causes of poverty and vulnerability.
- **Outcome 9:** National Gender Plan of Action and Gender-Based Violence (GBV) Plan of Action are being implemented effectively.
- **Outcome 10:** The National Social Protection system is strengthened and expanded to poor and vulnerable households and individuals.
- **Outcome 11:** Namibia has reviewed, and is implementing, policies and strategies which ensure that severely poor and vulnerable households have access to and are utilizing productive resources and services for food and nutrition security and sustainable income generation.
- **Outcome 12:** Institutional frameworks and policies needed to implement the Environmental Management Act (2007), National Climate Change Policy (2011) and other international conventions are in place and are being implemented effectively.

Summary of progress of UNPAF Results Groups towards UNPAF outcomes in support of national development priorities



The pillars focus on improving effectiveness and efficiency through greater coherence and coordination in the implementation of programme interventions through joint programming where possible, specifically in the areas of Gender, and Data and Strategic Information. In addition, a Joint Programme of Support on HIV/AIDS appended to this Action Plan is implemented as an integral part of the interventions under the Health Pillar.



4. UNPAF Summary of Progress: Key Results 2016

4.1 Pillar I: Institutional Environment

Outcome 1: Policies and legislative frameworks to ensure transparency, accountability and effective oversight of the management of public affairs are in place and are being implemented.

4.1.1 Achievements

Capacity Building and Programme Support

UNESCO supported the Ministry of Information and Communication Technology (MICT) to train community radio stations on election reporting. The training increased the capacity of reporters to promote accountability and provide the public with a platform to air their views and make informed decisions.

UNAIDS supported the Ministry of Health and Social Services (MoHSS) to conduct a National AIDS Spending Assessment for the year 2012/13 -2013/14. The assessment provided expenditures on HIV/AIDS from domestic and external sources, which will be utilized to identify gaps in spending and contribute toward effective and efficient budget planning and monitoring.

UNFPA trained 60 high-level policy and decision makers (parliamentarians, diplomats, GRN officials) on demographic dividend and sexual and reproductive health (SRH)/HIV. This is expected to promote accountability in parliament and public institutions. UN agencies supported the Ministry of Health and Social Services (MoHSS) to develop the 2016-2030 Namibia Investment Case for ending AIDS by 2030 as a public threat, which informed GRN on the domestic funding for HIV response.

Policy and Strategic Guidance

UNESCO supported the Ministry of Information and Communication Technology (MICT) to draft the Access to Information Bill (ATIB) in 2016, Government Communication Strategy, National Information Policy and Social Media Policy to strengthen legislative frameworks within MICT. The framework will contribute towards ensuring transparency, accountability and effective oversight of the management of public information.

UNAIDS, WHO, UNFPA and UNICEF provided technical assistance to the Ministry of Health and Social Services (MOHSS) to conduct the End Term Review of the National HIV Strategic Framework (NSF) for HIV and AIDS Response in Namibia 2010/11 - 2016/17. The review highlights the achievements and challenges encountered in the implementation of the NSF, and its provisions and recommendations will inform the development of the new strategy 2017/18 - 2021/22.

National Planning Commission (NPC) conducted the demographic dividend study supported by UNFPA. The primary objectives of the study were to assess Namibia's prospects for harnessing the demographic dividend and demonstrate priority policy and programme options that the country should adopt to optimize its dividend in the light of its development aspirations. This study informed the development of the Fifth National Development Plan (NDP5).

UNDP supported the Anti-Corruption Commission (ACC) Namibia to develop the national anti-corruption strategy and action plan, which will contribute to strengthening the legislative framework and ensure transparency.

UNDP supported Ministry of Environment and Tourism (MET) to develop national guidelines for the integration of HIV and gender into environmental impact assessments. The guidelines will contribute to overall mainstreaming of HIV prevention in development processes.

Outcome 2: The Government and partners are promoting and protecting human rights effectively.

Capacity Building and Programme Support

UNESCO supported the MICT to train eight (8) community radio stations on human rights and values in the SDGs and development journalism. The training contributed in addressing knowledge gaps among reporters and improved on reporting.

Outcome 3: Functional monitoring and evaluation and statistical analysis systems are in place to monitor and report on progress.

Capacity Building and Programme Support

UNFPA supported the National Statistics Agency (NSA) to strengthen its national statistical system. This led to the commencement of the National Statistics Strategic Plan development process, starting with the conducting of an assessment of the performance of the statistical system for the last five years and, sensitising key stakeholders (academia, private sector, non-government organizations [NGOs], civil society organizations [CSOs] and GRN) on the features of good statistical systems and the importance of utilising official statistics. In addition, UNFPA trained NSA strategic working group members on Balance Score Card (BSC). This equipped the staff to better assess the performance of the national statistical system and improved statistical analysis. UNFPA further trained 572 regional decision makers which enhanced their capacity around statistics and its utilisation.

Knowledge Generation and Management

Through UNFPA's support the Namibia Statistics Agency (NSA) conducted a Situational Analysis on the Status of Children's and Adolescent's Rights 2010 – 2013. Additionally, it supported the NSA to develop monographs and reports on fertility, mortality, draft migration, population projection and 13 Census regional reports to inform planning and programming.

UNFPA supported the MoHSS to train 104 health workers, managers and technical staff from the MoHSS in all 14 Regions on the health district population projections, and how to utilise these projections for planning and decision making as part of the UN's support to GRN to strengthen institutional capacity and skills. UNFPA also supported the National Youth Council to produce its National Youth Status Report using available national statistics from the Census and other national household surveys reports. The report will inform programming and planning on youth related services.

Outcome 4: Namibia complies with most of her international treaties' accession/ ratification, monitoring and reporting obligations.

Capacity Building and Programme Support

UNICEF supported the Child Care and Protection Act (CCPA) to effectively domesticate the provisions of the Convention on the Rights of the Child (CRC) into Namibian legislation. This ensured that the domestic legal framework conforms to international standards.

Knowledge Generation and Management

UNICEF in partnership with Child Rights Network supported the Ministry of Gender Equality and Child Welfare (MGECW) to develop the civil society shadow report on the African Charter on the Rights and Welfare of the Child. In addition, UNICEF supported MGECW to develop its progress report to the Committee on the Rights of the Child, which is due in October 2017. This report provides an update on progress made in the implementation of government interventions aimed at protecting and preserving the rights of children.

4.1.2 Challenges and Lessons Learned

Pillar coordination remains a challenge. The UNPAF 2015 mid-term review indicated that there was no evidence of any Pillar meetings for Pillar 1, both including on the UN agency side, together with other stakeholders, nor any government convened meetings to discuss implementation of this Pillar. The broad and diverse nature of the institutions involved in this Pillar has made it challenging for all stakeholders to meet. GRN leadership will be needed to bring the stakeholders together; NPC will need to work with the Office of the Prime Minister (OPM) to ensure that there is coordination in this Pillar.

4.1.3 Key Prospect/Plans for 2017

In support of the NDP5 priorities, the UN system will continue to support the ministries responsible for institutional environment in the following areas:

- Provisions for child welfare- The UN will support the development of child sensitive budget briefs in selected social sectors budget.
- HIV/AIDS support- The UN will support the development of a Namibian Sustainability Strategy for HIV/AIDS based on the Namibian investment case, and conduct a National AIDS Spending Assessment and Financial Sustainability Study.
- Parliament governance capacity- The UN will support strengthening parliament governance capacity.
- Data collection- The UN will support the training of trainers (TOT) of the national statistical system staff to sample, collect, analyse and disseminate high-quality statistics from administrative information system and household surveys.



4.2 Pillar II: Education and Skills

Outcome 5: Namibia is implementing policies and programmes that improve learning outcomes at all levels.

4.2.1 Achievements

Capacity Building and Programme Support

UNICEF, UNFPA and UNESCO provided support to the Ministry of Education, Arts and Culture (MoEAC) towards the Integrated School Health programme. Following the support, teachers were trained to better understand the health needs of learners, in particular the importance of SRH, hygiene and sanitation, with a focus on the girl child. In addition, UNFPA and UNESCO supported the MoEAC to roll out the comprehensive sexuality education (CSE) online training for teachers.

The School Health Task Force houses a subcommittee dedicated to honoring the Eastern and Southern African Ministerial Commitment for Comprehensive Sexuality Education (CSE), in which through the subcommittee, UNESCO and UNFPA supported the MoEAC to roll out the CSE online trainings for teachers. The trainings aimed to equip teachers with the needed skills to be able to teach CSE in schools. The subcommittee has been actively engaging regional officials and has conducted trainings on SRH and HIV prevention in the school context.

As part of strengthening the provision of comprehensive CSE in Namibia, UNESCO and UNFPA supported the MoEAC to build the capacity of teachers working with young people. The exercise enabled them to deliver quality CSE to young people. 100 life skills teachers from over five regions were also trained on the CSE online course. It is expected that the trained teachers will impart this newly acquired knowledge to young people.

UNICEF supported the MoEAC to develop school based profiles with Education Management Information System (EMIS) data. The new profiles will enhance strategic planning and improve the quality of EMIS. UNESCO supported the MoEAC to integrate key CSE and HIV/AIDS indicators in the EMIS Annual School Census (ASC) form. The integration will contribute to improving the reporting of CSE and HIV/AIDS in EMIS.

Knowledge Generations and Management

UNESCO and UNICEF supported the MoEAC to undertake a study to assess the magnitude of out of school children in Namibia. The findings of the report informed the discussions during the “School Drop-out and Out-of-school Children in Namibia National Conference”. As a result of the conference, an Out-of-school Children Youth Task Force was established, comprising members of the various youth-led organizations which fall under the National Youth Council.

Policy and Strategic Guidance

UNICEF and UNESCO supported the MoEAC to review the Education Act of 2001. Following the review, a draft education bill was developed and presented to the parliamentary standing committee on education. In addition, a brief on the Education Bill and a booklet on what parliamentarians can do to promote the New Education Act was also presented. UNICEF also supported the Learner Pregnancy and the Inclusive Education Policy.

3.2b Challenges and Lessons Learned

The major challenges for the education sector in Namibia are equitable access and disparities in quality outcomes. These inequalities are based on income, geographical divide and socio-economic circumstances of learners, including children with disabilities.

There is slow progress in promotion rates and substantial repetition and drop-out rates, particularly at grades 1, 5 and 8, resulting in only 55% net enrollment rate at secondary level. Moreover, the Demographic and Health Survey 2013 reveals that there is a gap in educational attainment between genders. 12% of females and 14% of males aged 6 have never attended school.

A number of key challenges reflected across a range of policy and research documents have been identified that would be key game changers in accelerating prosperity through education and training.

These include:

1. The need for continuous investment in- and prioritisation of access to early childhood development (ECD) is essential to reduce educational challenges, including school drop-outs, learner pregnancies and high failure rates.
2. There is a need to strengthen the basic literacy and numeracy of children.
3. There is an immediate need for an expanded and better focused system of vocational training.
4. There is need to continue to strengthen the integrated school health programme.
5. In the interest of decentralization and improved service delivery in education and training, stronger planning and administration systems and the use of information and communication technologies (ICTs) are a necessity.
6. There is need to integrate ECD into EMIS data collection efforts.

Inter-ministerial and multi-sectoral collaboration is required to build the capacity of teacher educators and teachers in the use ICTs in education, to strengthening the Education Virtual Forum “Kopano”, and to advance an effective community of practice of education professionals.

Strengthened partnerships through shared project implementation with education stakeholders is required, including the MoEAC, the National Institute for Educational Development, the University of Namibia (UNAM), and the Namibian University of Science and Technology (NUST) and local NGOs working in education.

4.2.3 Key Prospect/Plans for 2017

In support of the NDP 5 priorities, the UN system will continue to support the ministries responsible for education in the following areas:

- Education and training- Under the theme “quality education and training is a shared responsibility”, this area requires partnerships and contributions from all stakeholders including parents, learners, private sector and mass media. This area relies on comprehensive and integrated services for children before entering the formal education and training sector as such ECD will be considered essential in improving education outcomes in the long term. The UNCT will use the opportunity to leverage resources to implement the integrated ECD framework and to promote the use of mother tongue education as central to improved learning and teaching;
- Equity and equality in the education sector- The UN system will promote equality, specifically in relation to gender as central to the development and improvement of the education and training sector;
- Academic achievement- This area relies on comprehensive and integrated services for children before entering the formal education and training sector. For this reason, ECD will be considered essential in improving education outcomes in the long term;
- Teacher capacity development- This area requires continuous investment in both pre- and in-service training. The second phase of the UNESCO-China Funds-in-Trust (CFIT) Project, which commences in 2017, will be an opportunity to address the need for more and better qualified teachers through in-service training. In addition, the report of the Public Expenditure Review of the Basic Education sector and the Draft Education Bill, once promulgated into an Act of Parliament will be used to advocate for investing in pre-and in-service training, infrastructure development and access to connectivity;
- Usage of ICT- To implement the existing ICT Policy for Education, UNCT supported the use of technology for education to address the efficiency of Namibia’s teacher management structures as well implementation of the ICT Policy in Education Policy;
- CSE education- The UN will continue to further strengthen the delivery and monitoring of Comprehensive Sexuality Education (CSE) for young people in Namibia by scaling up the implementation of CSE curricula.
- T4D- To explore possible creative solutions to the above, UNICEF is piloting an innovative Technology for Development (T4D) programme to improve access to quality education with two technological tools: an eLearning portal and a mobile app. This is currently in its development phase. The eLearning portal “Do Like EDU” supports learner performance in key subject areas. The “Talk to Edu” mobile app provide learners with psychosocial support and career guidance. It is the T4D component of the Social Accountability and School Governance (SASG) programme in Namibia which will increase community involvement in education. The project is built considering all aspects of the existing ecosystem. Learners will be encouraged by the school and community to access the tools. Both technologies will be tested during a pilot phase to ensure usefulness and that they do no harm. User involvement will take place with peer to peer modelling, to ensure sustainability. Feedback will be monitored through

performance indicators to ensure a data driven design process and measurability. The tools will be integrated into a backend repository to capture the usage to monitor impact.

- Government expenditure on education and training should continue to increase based on pro-poor and evidence based restructuring and interventions with a focus on the child as primary beneficiary and stakeholder in education.



4.3 Pillar III: Health

Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.

4.3.1 Achievements

Capacity Building and Programme Support

UNICEF provided support to MoHSS to train 65 caregivers and 23 health workers in Oshana and Ohangwena regions. The training reinforced caregiver's support towards adolescents living with HIV including addressing challenges of parental disclosure issues.

UNFPA supported the MoHSS to orient 45 staff and senior management teams (national and regional) on the new guidelines for National Sexual and Reproductive Health and Rights (SRHR), HIV/AIDS and other services guidelines. This will help the MoHSS to prepare scale up plans for the respective regions in 2017.

UNFPA, and UNAIDS supported MoHSS to implement the Pilot SRH/HIV Integration Project in nine health facilities. The pilot project was completed with the GRN making commitment to scale up the initiative in 64 health facilities in the country.

UNAIDS, WHO, UNICEF, and UNFPA supported the GRN and CSOs to prepare and submit the Global Fund reprogramming proposal on HIV, tuberculosis (TB) and malaria. This resulted in Namibia securing USD 45 million to support the implementation in the above mentioned programme areas for the period, 2016-2017.

UNAIDS and UNFPA supported the Office of the First Lady of Namibia (FLON) to mobilized adolescents and young people, to participate in the 'Be Free' initiative, launched by the FLON. The event sparked dialogue between young people, the FLON and, UNFPA and UNAIDS representatives on HIV and SRH issues affecting young people. The event created visibility on the "Be Free" Initiative, which is currently undertaken by the young people under the leadership of the Office of the First Lady of Namibia.

UNFPA supported the Office of the FLON and Ministry of Sport, Youth and, National Service (MSYNS) to organize a high- level policy dialogue on teenage pregnancy. This created a platform for policy makers and young people to raise awareness and to learn about teenage pregnancy. Policy debate policy pertaining to teenage pregnancy among policy makers and young people was also undertaken.

UNFPA and UNAIDS in collaboration with the Southern African Development Community Parliamentary Forum (SADC-PF) supported the strengthening of the capacity on Sexual and Reproductive Health (SRH) of 17 Members of Parliament and 30 parliamentary staff. Parliamentary staff. Following the workshop, a communiqué was released to the media and shared with other parliamentarians. In addition, a report was anticipated to be tabled in parliament by the Gender Committee.

UNAIDS, UNFPA, UNESCO and UNICEF supported the first National AIDS Conference held in Namibia under the theme "Together We Are Ending AIDS in Namibia". The conference adopted "The Swakopmund Declaration for Ending AIDS in Namibia by 2030", which calls for fast tracking the AIDS response by increasing investments and coverage of HIV services to reduce the rate of new infections and AIDS-related deaths.

During the National AIDS Conference, with an audience of 2000 individuals, UNFPA launched the "Tune Me" mobisite, an online platform for Adolescent Sexual and Reproductive Health (ASRH) information for young people. During the National AIDS Conference with an audience of 2000. Young people present at the launch expressed appreciation for the mobisite and were looking forward to further exploring the content of the site online platform.

UNICEF supported the training of 648 principals, teachers and cleaners in Water, Sanitation and Hygiene (WASH) in schools. The exercise contributed to improvements in the following; availability of hand washing facilities, clean school surroundings, and the use of universal primary education funds to address WASH needs by school's management.

Policy and Strategic Guidance

UNICEF supported the Ministry of Agriculture, Water and Forestry (MAWF) to review indicators and annual targets on sanitation. As a result, the 2016 annual sector execution plan incorporated the new indicators on Open Defecation Free (ODF) communities in line with the SDGs. UNICEF further supported the development of ODF protocol, and that will guide the certification of ODF villages. It also supported the development of the Food and Nutrition Security Policy, the policy will contribute towards ensuring food security in the country.

Systems Development and Strengthening

UNICEF supported the MoEAC in mainstreaming HIV/AIDS in the sector. Following the support, the Ministry revived the Education and Youth Sector Steering Committee, which is responsible for the provision of technical guidance on SRH, including HIV and AIDS of among adolescents and young people.

OUTCOME 7: By 2018, Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated, and equitable health care.

Capacity Building and Programme Support

WHO supported the training of master trainers (facilitators) and 33 regional trainers in adolescent health and development using the most recent updates from WHO. The training provided orientation on WHO guidelines to strengthen national responses to the health and development needs of adolescents. It also enabled sharing of country experiences in to building the capacity of health care providers capacity on adolescent health and development.

In addition, the following trainings have also been provided: Integrated Management of Neonatal and Childhood Illness (IMNCI) training was held in 13 regions, training of 35 trainers/supervisors and 85 health workers (midwives and doctors) were trained in Emergency Obstetric and Neonatal Care (EMONC), advanced diploma training of 12 Namibian nurses who received in advanced diplomas in Advance Midwifery and Neonatal Nursing from the University of Johannesburg, South Africa, and training of trainers were held for the Adverse Events Following Immunization (AEFI) Committee as well as adapting of AEFI Guidelines. These efforts are intended to improve the service provision and quality of care at the health facility and communities levels.

Furthermore, WHO supported the training of 29 new surveillance focal persons from the districts and regions, and assisted in conducting an active polio surveillance in Omaheke region

was supported. This will help to strengthen the Expanded Programme on Immunization (EPI) surveillance system in the country.

Another training of 32 health workers from Otjozondjupa, Erongo and Kunene Regions on Nutritional Assessment Counselling and Clinical Inpatient Management of Severe Malnutrition, was supported. The training course focused on hospital-based care of severely malnourished children and was in response to the urgent need to reduce paediatric deaths related to severe malnutrition in many developing countries, including Namibia.

WHO supported the MoHSS in the introduction of a measles and rubella vaccine in line with the global strategy for measles and rubella/ Congenital Rubella Syndrome (CRS) elimination. A mass campaign targeting 9 months to 39 years (covering 80% of the total population) was implemented from 11 – 22 July with coverage of over 95%. The campaign is expected to reduce the herd immunity gap in the population and prevent repeated outbreaks of measles and rubella thereby mitigating the subsequent morbidity and mortality.

UNAIDS supported a total of six support groups of Women Living with HIV (WLHIV) in three constituencies of Katutura who are now participating in the Antiretroviral Therapy (ART) / Prevention of Mother to Child Transmission (PMTCT) ART/PMTCT adherence pilot project. A total of 82 mothers affiliated with these support groups were provided with comprehensive information on all aspects of preventing vertical transmission of HIV, on and how to reporting stigma and discrimination, stocking-out of medicines and testing. This information is shared using mobile phones directly with Namibia Women's Health Network (NWHN), and their support group leaders. The groups contribute towards improving adherence and treatment outcomes among People Living with HIV (PLHIV) who are on ART.

WHO provided support to the MoHSS to strengthen nutrition surveillance through a consultative and orientation workshop. The key outputs from the workshop helped to review the set of nutrition indicators that were submitted for inclusion in national surveys and the Health Information System.

WHO supported MoHSS to undertake a gap analysis on nutrition surveillance. The findings of the gap analysis were used to train 60 health workers from four regions to improve their skills and knowledge in assessing growth according to the WHO Child Growth Standards; and counselling mothers about growth and feeding. This is expected to contribute to improving infant feeding practices and strengthen nutrition surveillance.

UNICEF supported MoHSS to conduct a stakeholders' workshop on newborn care bottleneck analysis in February 2016. The results informed the development of the national Every Newborn Action Plan (ENAP), which led to an increased awareness on the importance of prioritising Maternal and Neonatal Health among policy makers, programme officers and implementers.

The capacity of four technical staff from MoHSS and medicine regulation governing body was strengthened on quality assurance of reproductive health (RH) products, covering international quality standards and laboratory quality control testing of RH products, particularly male latex condoms.

Two medical doctors from the MoHSS participated in the International Society of Obstetric Fistula Surgeons (ISOFS) 6th Biennial General Meeting and Scientific Congress in Abuja, Nigeria under the theme, “Restoring the Past and Securing the Future for Obstetrics Fistula Patients”. As a result, their capacity of Obstetric fistula management, was strengthened on Obstetric fistula management by participating in the International Society of Obstetric Fistula Surgeons (ISOFS) 6th Biennial General meeting and Scientific Congress, Abuja, Nigeria with the theme: “Restoring the past and securing the future for Obstetrics Fistula Patients”. UNFPA is planning to collaborate with these doctors to serve as Fistula champions for advocacy, reporting and repairing in Namibia.

Knowledge Generation and Management

WHO and UNFPA provided technical and financial support to MoHSS to conduct the national Maternal Peri/Neonatal Death Review (MPNDR) process and the preparation of the 2nd national report. The report was shared with senior management of the MoHSS and will be utilized for policy and decision making. WHO also supported the 2nd National EMONC Assessment in September 2016. The findings from these reports will help to address gaps in the health service delivery towards reduction of maternal and childhood morbidity and mortality.

WHO in collaboration with UNICEF supported the MoHSS to conduct a comprehensive review of the National Immunization Program (NIP) which integrated the assessments of surveillance for vaccine preventable diseases (VPD), data quality, and the introduction of Pneumococcal Conjugate Vaccine (PCV), Rotavirus vaccine, Inactivated Polio Vaccine (IPV) and hepatitis B birth dose vaccination with clear recommendations. The review report findings will provide evidence for improved programme planning and implementation.

UNAIDS supported the MoHSS to undertake a HIV-TB Gender Assessment. The recommendations will be integrated in 2017-2022 HIV/AIDS and TB strategic Framework. UNICEF in collaboration with UNAIDS supported the MoHSS to carry out an evaluation of the prevention of mother to child transmission (PMTCT) programme to assess achievement and challenges. The results findings will inform the development of a plan roadmap for the elimination of Mother-to-Child HIV transmission from mother to child by 2020 in Namibia.

UNICEF and UNAIDS supported national efforts to increase the dissemination of HIV information to adolescents and young people. This helps to increase youth participation and raise awareness of adolescents’ issues on the HIV/AIDS agenda. Support has also been provided to MoHSS to carry out the End Adolescents AIDS Initiative through the “All In” phase two bottleneck analysis in the seven high adolescent HIV burden regions. As a result of this support, these seven regions developed work plans that prioritize adolescent HIV related issues.

WHO supported the MoHSS in the assessment and response of the malaria outbreaks in Ohangwena, Kavango East, Kavango West and Zambezi regions. The exercise helped to contain the malaria outbreak in time and prevent avoidable illnesses and deaths. Furthermore, support was provided to the ministry in undertaking the International Health Regulations (IHR) 2005 self-assessment for Joint External Evaluation (JEE). This was followed by the Joint External Evaluation (JEE) which validated the gaps that needed to be addressed. The development of a comprehensive action plan to fulfill the country's IHR obligations will be informed by the JEE Report. It is expected to allow Namibia to establish and strengthen IHR core capacities towards prevention and containment of public health emergencies of international concern.

WHO supported the MoHSS to conduct a comprehensive review of the Tuberculosis (TB) and Leprosy Medium-Term Plan II. The review was accomplished in collaboration with several partners and experts and culminated in a programme review report. The report was subsequently used to guide the development of the 3rd TB and Leprosy Medium-Term Plan.

Policy and Strategic Guidance

UNODC in collaboration with WHO supported the Namibian Correctional Services (NCS) to develop its Health Policy. The Policy was officially launched in May 2016. It makes provision for inmates and staff to access HIV and AIDS prevention, treatment, care and support services.

WHO supported the revision of National ART Guidelines in line with the newly released 2015 WHO guidance. The revised guidelines were launched on World AIDS Day in 2016, which currently guide a nationwide HIV treatment rollout. In addition, guided with guidance by the Programme Review Report, WHO supported the National TB and Leprosy Programme in drafting the next generation of TB and Leprosy medium term plan, which is due for finalization in early 2017. The plan will guide the implementation of TB and leprosy interventions for the coming five years of, i.e. 2017/18-2021/22. In addition, support was also provided to the MoHSS to develop a national Multi-Sectoral Non-Communicable Diseases (NCDs) Prevention and Control Strategy, which is envisaged to be launched in 2017. The strategy will guide the programme planning and implementation across sector ministries for the coming five years.

Systems Development and Strengthening

UNODC supported the Namibia Correctional Services (NCS) to refurbish the Hardap Correctional Facility Health Clinic. This will contribute to improve HIV/AIDS service delivery.

WHO helped the MoHSS to procure and distribute high-tech medical equipment to the central referral hospital, three intermediate hospitals and district hospitals in the Programme for Accelerating the Reduction of Maternal and Child Mortality (PARMaCM) supported regions. This will improve the quality of maternal and child health services.

UNFPA supported the MoHSS to ensure continuous accessibility of contraceptive commodities by providing 150,000 injectable contraceptives, 310,000 female condoms as well as long term contraceptive methods, namely, 2000 sets of Etonogestrel 68 mg (Implanon NXT) and 1500 sets of Levonorgestrel 75 mg (Jadelle implants). This will contribute towards averting unintended pregnancies, unsafe abortions and maternal deaths.

4.3.2 Challenges and Lessons Learned

A number of key challenges in the health sector have been identified:

- Diminishing donor funding for the HIV and AIDS response and late disbursement of funds from the Global Fund to SRs has resulted to delays in programme implementation.
- The lack of effective participation by line ministries in the planning and implementation of HIV and AIDS NSF continues to challenge the multi-sectoral response.
- The private sector and civil society partnerships and coordination have been insufficiently developed.
- Logistical challenges for HIV testing services (HTS), particularly home based HTS is still persistent in remote areas in the country. Remote communities without nearby health facilities hamper referrals from mobile outreach. Follow up is particularly challenging for these populations.
- Data on key populations is scarce, particularly: size estimates, HIV prevalence, behavioural and social issues.
- Widespread stigma and discrimination, gender violence and legal barriers continue to impede the realization of Human Rights and HIV prevention notably among MSM and SW and their clients.
- Shortage of staff due to the high attrition rate is still an ongoing problem impacting the implementation of health programmes and resulting in lean staff struggling to cope with the increased patient volume and reporting tools.
- The capacity of teachers (and lack thereof) to address HIV and sexuality issues and the lack comprehensive sexuality education (CSE) teaching and learning material in the classroom remains a big challenge in the country
- Coordination of adolescents and young people's work is still suboptimal. With numerous initiatives, there is a tendency by various stakeholders to establish additional parallel coordination mechanisms on a single agenda thereby spreading thinly the already stretched human resource capacity.
- SRH/HIV Integration initiative is not fully integrated as part of the MoHSS's mainstream programmes and cuts across two directorates of the MoHSS (Directorate Special Programs and Primary Health Care) which causes coordination of activities to be a challenge.
- Inadequate financial and human resources for the scale up of integrated health services slows the national rollout of integrated health services delivery.
- It is important to reinforce the investment approach across all future interventions and HIV work progress, with the strong messages of resource optimization and efficiency in health programming and implementation.
- The introduction of online CSE training for in-service teachers has strengthened capacity of

teachers to teach sexuality and HIV education lessons in the classrooms.

- Ample advocacy and information sharing on young people's issues must enhance ownership and buy-in amongst ministries and NGOs on young people's issues. This has led to partnerships such as the Regional Youth Health Task Force.
- Capacity building of healthcare workers and teachers, in both SRH and CSE, is crucial to ensure that good quality services and information is provided to adolescents and young people.

4.3.3 Key Prospect/Plans for 2017

In support of the NDP5 priorities, the UN system will continue to support the GRN in the following health-related areas:

- HIV among the youth: Advocate and support enhanced youth empowerment and meaningful participation (especially of young girls) in HIV interventions including the Protect the Goal National Campaign.
- Mobilisation of the youth: Support social mobilization for young people on sexual and reproductive health including HIV through social and behaviour change communication (SBCC) and mass media.
- Capacity of health workers: Strengthen capacity of health workers to deliver integrated SRH and HIV services including for adolescent and sex workers.
- Support the training of health workers on comprehensive RH, maternal, newborn, child health and nutrition (EmONC, family planning [FP], IMNCI, adolescent friendly health services [AFHS]).
- Develop a strategy on CSE and support piloting of CSE and documentation of CSE good practices.



4.4 Pillar IV: Poverty Reduction

Outcome 8: By 2018, Namibia has adopted and is implementing effectively and in a coordinated manner, policies and strategies to reduce poverty and vulnerability which are informed by evidence on the causes of poverty and vulnerability.

4.4.1 Achievements

Knowledge Generation and Management

Through FAO and in support to of the Ministry of Gender equality and Child Welfare (MGECW), a Country Gender Assessment in the Agriculture and Rural Sector was conducted. The findings of the assessment will inform the implementation of the Malabo Declaration linked to gender and SDGs and as well as mainstream gender in the National Agriculture Investment Plan.

Policy and Strategic Guidance

The pillar supported the development of the National Blueprint Print on Wealth Redistribution

and Poverty Eradication and its implementation plan. The Blue Print serves as a guiding document which provides the basis for strategic interventions outlined in the Blue Print Implementation plan.

System Development and Strengthening

UNICEF supported the Ministry of Poverty Eradication and Social Welfare (MPESW) to establish a National Core Team on Social Protection. The establishment of the core team will provide technical support needed for the strengthening of the multi-sectoral coordination of the social protection system reform in the country. Training support on Namibia Tax Benefit Micro Simulation Model (NAMOD) was provided by UNICEF, UNDP and the Resident Coordinator's Office (RCO), on Namibia Tax Benefit Micro Simulation Model (NAMOD). The use of the model will provide evidence on the impact of taxation and social policy changes on poverty reduction.

Outcome 9: By 2018, the National Gender Plan of Action and Gender-Based Violence Plan of Action are being implemented effectively.

Capacity building and Programme Support

WHO supported the MoHSS, to conduct training on evidence-based clinical practice. The training provided skills for identification, screening, management of intimate partner violence (IPV) and sexual violence (SV) including psychosocial and mental health support to physical and sexual assault survivors. In efforts to address harmful socio-cultural attitudes and practices that perpetuates GBV, UNFPA supported an advocacy campaign that reached approximately 22,000 young people nationally.

A draft National Clinical Handbook on IPV and SV was developed in partnership with WHO, the MoHSS and the MGECSW. The handbook provides step by step guidance to health workers to prevent, identify and manage IPV and SV cases.

UNFPA supported the Faculty of Computing and Informatics of the Namibia University of Science and Technology (NUST) in collaboration with the Office of the FLON and stakeholders to hold the first ever 24-hour non-stop GBV hackathon. GBV experts engaged with 85 young developers and computing specialists to develop five interactive mobile-based and three web-based prototypes on GBV prevention and response. The five mobile-based prototypes and three web-based prototypes are designed for diverse users: such as women, men, children and young people all genders and ages, including people living with disabilities (sign language was catered for).

Policy and Strategic Guidance

With the support provided by UNICEF, a coordination mechanism was established for Gender Based violence (GBV) and violence against children. This led to the development of the Online Child and Sexual Abuse and Exploitation programme and also provision of legal assistance on the development of Child Care and Protection Regulations. UNICEF and IOM contributed to

the drafting of the different bills such as the National Human Trafficking Bill and the Electronic Transactions and Cybercrime Bill (ETCB). This will provide the legal framework that will address child online safety and trafficking of persons.

With support provided by UNFPA to the MGECW; Gender equality, GBV, SRH and sex-disaggregated data issues were integrated in the draft NDP5 (2017-2021). As a result, a stand-alone chapter on gender equality and women's empowerment has been developed for NDP5. In addition, with UNFPA's support, the Draft Convention on the Elimination of Discrimination Against Women (CEDAW) National Plan of Action that identifies priority activities for addressing recommendations by the CEDAW committee was developed and is awaiting cabinet review and approval.

Knowledge Generation and Management

UNFPA supported the National GBV baseline study that focused on investigating partner's violence (IPV) by current or former partner(s) and sexual violence by non-partners (rape). The finding of the study will be used to inform policy dialogue and decisions on GBV issues.

UNFPA in collaboration with the Ministry of Justice (MJ) supported the development of a Universal Periodic Review (UPR) Booklet that captures various recommendations raised by peer countries for national implementation.

Outcome 10: By 2018, the National Social Protection System is strengthened and expanded to poor and vulnerable households and individuals.

Policy and Strategic Guidance

UNICEF provided technical assistance for the finalization of a Functional Review of the Child Care and Protection Act. The review findings will inform the social protection reform process and provide recommendations for social work reforms in order to meet the legal requirements on case management and social grant administration.

Systems Development and Strengthening

UNICEF provided technical support to the Ministry of Home Affairs and Immigration (MHAI), to strengthen systems for registration. This will contribute to timely civic registrations which is a prerequisite for access to social grant entitlements. UNICEF initiated and contributed to the drafting of the Population Registration Bill and formation of a Thematic Working Group on E-Health and E-Birth Registration which was initiated with UNICEF support. This has contributed to the strengthening of the birth and death notification system and guided the linking of both e-birth and death notification system to the e-National Population Registration System (MHAINPRS) and the e-Social Assistance System. In addition, the improved systems will inform the modelling in three regional referral hospitals.

Outcome 11: By 2018, Namibia has reviewed, and is implementing, policies and strategies which ensure that severely poor and vulnerable households have access to and are utilising productive resources and services for food and nutrition security and sustainable income generation.

Capacity Building and Programme Support

FAO and UNDP supported the Ministry of Agriculture, Water and Forest (MAWF) to conclude the Communal Agriculture Field Enumeration and initiated the Commercial Agriculture Census. The results will provide new insights for planners, policy makers, researchers and others involved in the agricultural sector in order to provide evidence-based solutions to the challenges faced in the sector. FAO and UNDP supported the programme launch of Comprehensive Conservation Agriculture. Following the launch, training manuals were developed and training provided. This contributed to improved capacity of extensions workers to provide effective services to farmers.

FAO further supported the capacity building efforts of the Ministry of Land Reform (MLR) and MAWF in the areas of areas of virology, veterinary, hygiene and histopathology diagnostic. This support and capacity improvement led to Namibia receiving approval for the export of meat products to China. Technical support provided by FAO to the MAWF on horticulture varieties, has led to improved yield through the adoption of early maturity crops.

Through the China South-South Cooperation (SSC) programme, FAO provided technical assistance to the MAWF in the production of Kalimbeza rice, various horticultural products and integrated pest management training. This will contribute to the eradication of hunger, food insecurity, malnutrition and improvement of horticulture at Green Scheme Projects.

WFP supported the Office of the Prime Minister (OPM), to develop a Food and Nutrition Security Training Manual, which will guide capacity building trainings on enumerator trainings for Food and Nutrition Security Monitoring. WFP also provided technical support in the planning and conducting of the Food and Nutrition Assessment including the Namibian Vulnerability Assessment (NamVAC) and the Urban Vulnerability Assessments. The results produced were used to inform various interventions including the response to the El Niño drought.

In terms of policy advocacy on food and nutrition security, WFP contributed to the development of advocacy tools, including the production of two issues of the Zero Hunger newsletters. The newsletter captures stories and events related to the efforts of the government and other stakeholders towards ending hunger and malnutrition in the country.

Knowledge Generation and Management

FAO provided technical assistance to MAWF to conduct the Post-Harvest Assessment of Food Losses on the Mahangu and Maize sub-sectors. The identification of interventions will help to reduce food losses at identified weak points and improve the food supply chains efficiency.

WFP supported a feasibility study on linking smallholder farmers to school feeding programmes. The findings of the study were shared with stakeholders and will inform the planned diversification of school meals using food commodities sourced from the smallholder farmers. This cross-sectoral linkage will enhance incomes for smallholder farmers while simultaneously improving learners' nutrition. The findings of the study will inform the implementation of the pilot programme for the home-grown school feeding programme in 2017.

WFP further supported the development and validation process of The Zero Hunger Strategic Review and Zero Hunger Road Map. The review provides a comprehensive analysis on the underlying drivers of food insecurity and malnutrition in Namibia. The road map provides a set of actions that will guide the development and implementation of the Zero Hunger Strategies.

Policy and Strategic Guidance

FAO provided technical assistance to the MLR to review Land Reform/Tenure in Namibia including: agricultural commercial tax legislation and regulations, valuation/mass appraisal model, development of an agricultural land price index and development of national valuation and standards. This review will help to improve the governance of tenure and in particular the efficiency, transparency and accountability of land administration and all related land reform policies of the Government. It further provided technical assistance to the review of Namibian Water Regulation Act No. 11 of 2013. The reviewed documents will assist in the proper sustainable management of water resources in the country.

In order to improve preparedness to agricultural threats and crises, FAO supported the OPM and MAWF on potential, known and emerging threats to agriculture, food and nutrition security. This has improved agropastoral production, animal health and nutrition as well as assisted to in the establishment of early warning systems and analysis for Disaster Risk Reduction/Management (DRR/M) and food security at the community level.

WFP supported the MoEAC to develop a school feeding policy which is awaiting cabinet ratification. The goal of the policy is to create an enabling environment for reducing hunger among school children and optimise their health, nutrition and learning.

Systems Development and Strengthening

WFP provided technical support to the OPM to strengthen systems for Food Assistance Management and Food and Nutrition Security Monitoring (FNSM). The data collected enabled the production of two FNSM bulletins for 2016 (March and October). In addition, WFP supported the MoEAC to improve/upgrade the Namibia School Feeding Information System (NaSIS) which was developed in 2012. NaSIS is a web-based system developed to enhance timely data capture, analysis and reporting. It helps to provide real time data to inform planning and decision making on issues related to school feeding. To date, 80% of the schools in Namibia (11,436 schools) are using the system for reporting school feeding activities. Since the improvement of NaSIS, reporting has been consistent, and the accuracy of data entered has also significantly improved.

Outcome 12: By 2018, the institutional frameworks and policies needed to implement the Environmental Management Act (2007), National Climate Change Policy (2011) and international conventions are in place and are being implemented effectively.

Policy and Strategic Guidance

UNDP supported the Ministry of Environment and Tourism (MET), to launch the Law Enforcement and Fire Management Policies. This contributed to the effective implementation of the Environmental Management Act (2007). The policies provide frameworks and regulations on handling of criminal activities and hazards affecting the environment.

UNDP supported the strengthening of the legal framework for sustainable land management in five landscape conservation areas. UNDP further supported the MET to carry-out a strategic environmental assessment. The assessment of findings and recommendations will inform conservation, environment management and potential tourism development in five landscape conservation areas.

4.4.2 Challenges and Lessons Learned

UN agencies in Namibia experienced several challenges and constraints which affected the implementation of outcomes.

1. There is a lack of a strategy for resource mobilization. This limits the 'Delivering as One UN' and by impacting the coordination of leading the pillar, resulting to a slowdown of in the implementation of activities.
2. There is a lack of capacity-building and joint planning with the GRN and civil society as a pillar group leading to inefficiencies in completing activities.
3. GRN mandates in poverty pillar outcomes are fragmented and over-laps. There also exists a lack of coordination between GRN offices/ministries/agencies. For example, mandates regarding social protection are dispersed among five ministries and those regarding GBV and violence against children (VAC) are dispersed among three ministries. This is impacting the ability for the UN to effectively coordinate support.
4. Effective multi-sectoral collaboration for better integrated service delivery is hampered by the absence of a policy framework that facilitate budget accountabilities.
5. There is a slow reform process which hinders implementation of outcome and evaluation of results.
6. Some development issues in the UNPAF are not necessarily aligned with GRN policies such GBV and climate change.
7. Three years of consecutive drought affected the implementation of food security and agricultural planned activities. The GRN, for instance, was not able to discuss the Zero Hunger Strategic Review at Cabinet Level.

In order to overcome these constraints and challenges, some measures are recommended. Firstly, it is necessary to align flagship projects to new GRN policies and plans (i.e. Social Protection Policy, Single Registry, the National Gender Policy, Gender Policy on Agriculture), as to avoid any inefficiency. Secondly, some form of a coordination structure is suggested with the pillar, with other pillars, theme groups and GRN partners. There should also be consistent and relevant members in the Poverty Pillar. Thirdly, it is essential to leverage research/studies conducted by different agencies (i.e. Multiple Deprivation Advocacy). Finally, it is suggested to consider moving GBV and policy frameworks for climate change to the Institutional Environment Pillar.

The development of the National Blueprint Implementation Plan was a good example of how UN agencies can collaborate and provide joint technical support. UN agencies sent five staff members, who distributed themselves across the discussion groups and collaborated closely with direct counterparts, to ensure evidence based strategies and activities based on the SDGs and that impacted the most vulnerable were included.

We observe an appetite of counterparts, including the MGECW and the Office of the Prosecutor General (OPG), for more efficient UN coordinated support provided to GRN in the field of GBV/VAC. This provides an opportunity for UN agencies to better coordinate action on GBV/VAC/Victims of Trafficking (VoT) response, which agencies have started to do already during the development of the NDP5 (Rule of Law/Governance, Gender, Poverty chapters). Moreover, the Office of the Prosecutor (OPG) is rolling out UNICEF and UNODC supported capacity development programmes on handling cases of sexual violence and trafficking, which is a good practice. An opportunity for 2017 is closer collaboration on shelter management for VoT and GBV/VAC survivors, strengthening of the one stop GBV Protection Units and harmful traditional practices including early marriage.

The use of innovation as in the case of WFP supported systems, such as the Namibia School Feeding Information System (NaSIS) and Food and Nutrition Monitoring System, helps to build government capacity to deliver services effectively. As monitoring tools, they help to provide real time data that is required for effective planning and completion of interventions for shock responsive programmes.

Evidence building through assessments and studies, as in the case of the feasibility study on linking small holder farmers to school feeding which was supported by WFP, helps to provide the much-needed information required for effective policy dialogue and decision making. Through the feasibility study supported by WFP, there is now a broader understanding of the opportunities, challenges and risks that exist with linking small holder farmers to school feeding. The study established that it was feasible for schools to purchase locally available fresh foods from smallholder producers in order to complement the blended maize meal that is supplied by the MoEAC. Purchasing of food locally will result in the diversification of school meals, increase nutrition in-take by learners and increase income for smallholder producers.

4.4.3 Key Prospect/Plans for 2017

Several potential opportunities exist to support national partners in integrated development policy and programme development:

- Finalization and follow-up to Human Resource Development Gap Analysis with MGECW
- Costing of the Child Care and Protection Act with MGECW
- Strengthening administrative data systems on VAC and Civil Registration and Vital Statistics (CRVS) with MGECW, MHAI, NSA
- CRC reporting with MGECW and Ministry of Justice (MoJ)
- Finalization of Trafficking in Persons (TiP) and Child Justice Bills with MGECW and MJ
- Follow-up on Budget Brief on Social Welfare and Assistance with MGECW and MPESW
- Social Protection (formalization of core team, research on inclusion/exclusion and SP policy development)
- CCPA implementation guides (Legal Assistance Centre [LAC] and MGECW)
- Strengthening multi-sectoral services for survivors of GBV/VAC (Standard Operating Procedures, clinical protocol, training, modelling in two GBV PUs, prevention/demand creation) with MSS, MGECW and MoHSS
- Update of Police Training Manuals with MSS/Training College
- Social work reform (finalization of Matrix, social auxiliary work) with MGECW and MoHSS.
- Community mobilization and services on VAC, including finalization and roll out of CCPF Guidelines (social norms) with MGECW, Global Fund/CSOs)
- Roll-out of multi-sectoral training of handling child sexual offence cases with OPG, MGECW, MSS
- E-birth notification and registration (E-portal piloting and roll out)
- Integrated services for birth and grant registration in selected hospitals
- Prevention and response to child online sexual abuse and exploitation (institutional capacities of criminal justice and social welfare sectors to respond to online abuse and exploitation of children) with MSS, MGECW and MJ
- Support national food-based social safety nets to enhance their efficiency and effectiveness and enable their scale up: These include the National School Meals Programme, the newly launched Food Bank and the National Emergency Food Assistance.
- Enhance emergency preparedness and response: Strengthen the ability of the government to predict hunger and design appropriate responses to shocks/risks posed by natural hazards, including strengthening food and nutrition security monitoring and early warning systems.
- Support programme cohesion: The MoEAC is exploring ways to diversify school meals using locally produced food. The potential for linking smallholder farmers to school feeding provides an opportunity for WFP to provide technical support to ensure that smallholder farmers are linked to a market provided by Namibia's expanding food assistance programmes.

5. Enhancing Operational Effectiveness in the UN

Namibia imports between 40-80% of its energy from South Africa, which is facing energy shortages and has started scheduled energy cuts. To contribute to GRN's efforts to develop its own energy sources through prioritization of solar energy, the UN System planned to turn the UN building, which was donated by GRN into a self-sustaining, energy efficient building.

This was ongoing with the support of USD 150,000 received for the Business Operations Innovations project. Activities involve updating the existing energy audit for the UN premises, carrying out an economic cost benefit analysis to improve increasing energy efficiency by switching to energy saving devices as well as installing a solar/ photovoltaic energy generation system. This project is still ongoing, and the intention is to learn from prior work and engage the Namibia Energy Institute in technical advisory and support capacity. It is expected that the self-generation and self-consumption of electrical energy will contribute to alleviating the present Namibian power generation and supply shortfall. The recommended system size of 90 kWp will offset 19.3% of annual energy use, with a corresponding reduction in electricity cost of 20.08% annually. The expected internal rate of return when this project is cash financed is 21.48%. This means the UN in Namibia expects to breakeven after five years. The solar panel system is not a backup solution but rather an energy subsidy system. When more energy is being produced by the solar system than is being consumed, the difference will be fed into the national grid, thereby increasing the power available to the City of Windhoek (CoW) for distribution elsewhere in the country.

6. UN System Communicating as One

The UN System in Namibia prioritized support to government to ensure strong local ownership and popularization of the SDGs through advocacy as well as strengthening multi-stakeholder partnership. Following the adoption of the SDG roadmap by the Government in November 2015, the UN System supported the National Planning Commission together with Ministry of International Relations and Cooperation (MIRCO) to launch the Sustainable Development Agenda and the Africa AU Agenda 2063, at National level. The national launch was well attended by approximately 171 participants from different sectors, key line ministries, (eight deputy ministers from various line Ministries plus four permanent secretaries attended), development partners, diplomatic missions, civil society, youth representatives, research institutions, media, academia as well as representatives from the African Union (AU) and others. The event was well covered by national, local media.

The UN System held orientation workshops for various local media houses in the country and UN Staff members. This has been part of the national efforts to strengthen communication on global development issues and further enhance capacity building and knowledge dissemination on SDGs. The UN Country Team Members participated in a series of national consultations under the leadership of the GRN during its national consultations for the development of NDP5 and the SDGs. The objective of consultations was to obtain inputs from regional and local levels on key issues that will form the basis of the prioritization process of the 17 goals and 169 targets for Namibia.

7. Moving Forward

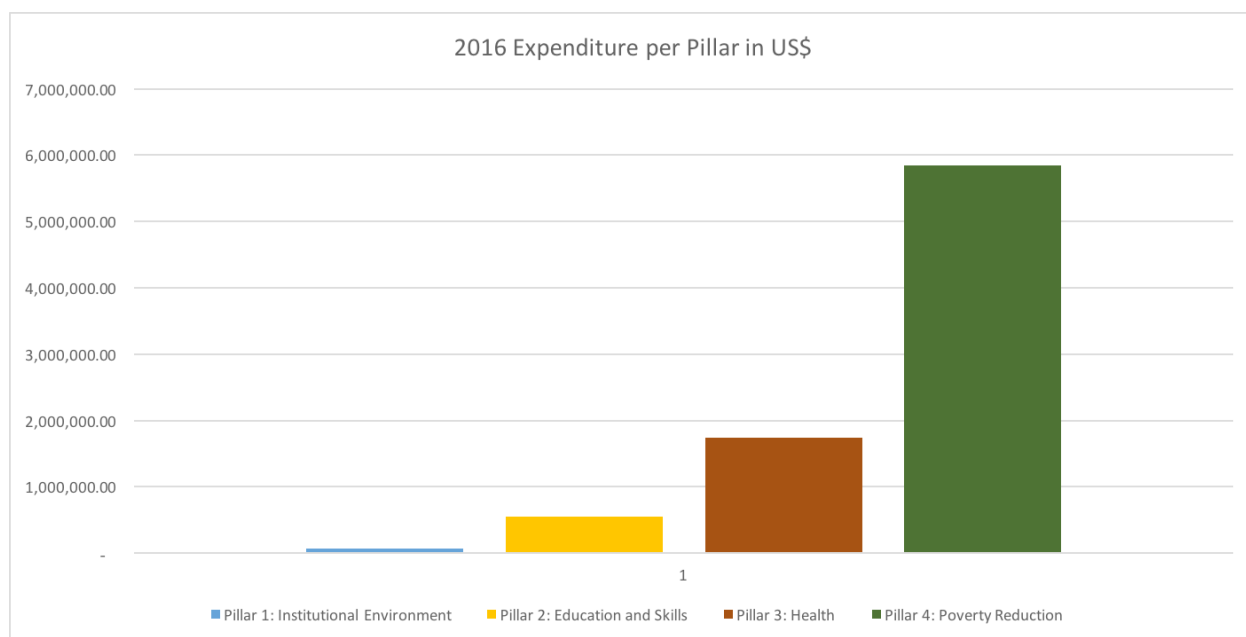
The following below needs to be considered in the development of UNPAF 2.0, the UN and GRN's next strategic partnership framework, and for implementation of the UNPAF activities for 2017/18:

- There is a need to look at the current indicators and review them based on availability of data and the ability to measure them.
- There is a need for establishment of baselines and compilation of a baseline report for the UNPAF 2.0 that will be developed.
- The baselines report will help with the setting up of realistic targets.
- Continued support is required, to strengthen government M&E systems to ensure that, data is available for monitoring of all national indicators.
- Continued to support for the harmonization of the SDGs and African Union (AU) Agenda 2063 indicators with the NDP5 indicators, will help with statutory reporting required for both SDGs and Africa AU Agenda 2063.

8. 2016 Financial Flow Information

As noted in the introduction, this report focuses on the implementation of UNPAF activities for 2016, and it is limited to the activities that the UN agencies planned under the UNPAF. Below is the summary of expenditure against the budget per UNPAF pillar.

UNPAF PILLAR	2016 Budget (USD)	2016 Expenditure (USD)
Pillar 1: Institutional Environment	131,000.00	73,400.00
Pillar 2: Education and Skills	490,340.00	550,340.00
Pillar 3: Health	1,570,000.00	1,737,022.00
Pillar 4: Poverty Reduction	5,985,693.00	5,841,944.00
TOTAL	8,177,033.00	8,202,706.00



ANNEX I: Proposed 2017 Work plan

PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Institutional Environment	Outcome 1: Policies and legislative frameworks to ensure transparency, accountability and effective oversight of the management of public affairs are in place and are being implemented.	1.1 National anti-corruption and access to information frameworks developed and implemented	Provide Technical support to develop access to information policy and other related initiatives	ICT, media, Parliament, LRDC, MISA, FES media, Editors Forum, Media Ombudsman, EU, National commission for UNESCO	5,000.00
Institutional Environment	Outcome 1: Policies and legislative frameworks to ensure transparency, accountability and effective oversight of the management of public affairs are in place and are being implemented.	1.3 Social Sector ministries have demonstrated capacity (systems, processes, tools, skills, knowledge) for effective and efficient budget planning and monitoring.	Development of a Children's Budget	MoF and line Ministries	30,000.00
Institutional Environment	Outcome 1: Policies and legislative frameworks to ensure transparency, accountability and effective oversight of the management of public affairs are in place and are being implemented.	1.4 Domestic funding of the HIV response has increased to 80% in line with the 2013 Abuja declaration target.	Provide Support to develop Namibian sustainability strategy for HIV/AIDS based on Namibian investment case, National AIDS Spending Assessment and Financial Sustainability Study	JUTA, Parliament, MoHSS	15,000.00
Institutional Environment	Outcome 1: Policies and legislative frameworks to ensure transparency, accountability and effective oversight of the management of public affairs are in place and are being implemented.	1.4 Domestic funding of the HIV response has increased to 80% in line with the 2013 Abuja declaration target.	Advocate at political level to implement Namibian sustainability strategy for HIV/AIDS target.	Parliament, MoHSS, NAEC, COS/PLWHA National network	-
Institutional Environment	Outcome 1: Policies and legislative frameworks to ensure transparency, accountability and effective oversight of the management of public affairs are in place and are being implemented.	1.4 Domestic funding of the HIV response has increased to 80% in line with the 2013 Abuja declaration target.	Provide Support to develop Namibian sustainability strategy for HIV/AIDS based on Namibian investment case, National AIDS Spending Assessment and Financial Sustainability Study	JUTA, Parliament, MoHSS	15,000.00
Institutional Environment	Outcome 2: The Government and partners are promoting and protecting human rights effectively.	2.2 By 2018, government, CSO and the general public have enhanced knowledge and communication tools to be better able to protect human rights	Facilitate annual National Dialogues on Human Rights	HRC (UNAM), OPM, NPC, Ombudsman office, Parliament	10,000.00

Summary of progress of UNPAF Results Groups towards UNPAF outcomes in support of national development priorities

PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Institutional Environment	Outcome 2: The Government and partners are promoting and protecting human rights effectively.	2.2 By 2018, government, CSO and the general public have enhanced knowledge and communication tools to be better able to protect human rights	Facilitate annual National Dialogues on Human Rights	HRC (UNAM), OPM, NPC, Ombudsman office, Parliament	-
Institutional Environment	Outcome 2: The Government and partners are promoting and protecting human rights effectively.	2.2 By 2018, government, CSO and the general public have enhanced knowledge and communication tools to be better able to protect human rights	Strengthen Children's Parliament to become more representative of children in Namibia	Children's Parliament	
Institutional Environment	Outcome 2: The Government and partners are promoting and protecting human rights effectively.	2.2 By 2018, government, CSO and the general public have enhanced knowledge and communication tools to be better able to protect human rights	Strengthen the commitment and capacity of media to report responsibly on key human rights issues and to deliver initiatives to reduce violence in local communities.	MISA, community media, PoN, NANGOF, NAMRIGHTS,	-
Institutional Environment	Outcome 3: Functional monitoring and evaluation and statistical analysis systems are in place to monitor and report on progress.	3.1 By 2018, national statistical system consistently produces, disseminates and utilizes high quality disaggregated statistical data.	Training of national statistical system staff to sample, collect, analyse and disseminate high-quality statistics from administrative information system and household surveys	NSA, MoHSS	20,000.00
Institutional Environment	Outcome 3: Functional monitoring and evaluation and statistical analysis systems are in place to monitor and report on progress.	3.1 By 2018, national statistical system consistently produces, disseminates and utilizes high quality disaggregated statistical data.	Support MHAI to setup/ strengthen database for vital/ civil registration system (birth, death and migration registration)	MHAI, MoHSS, OPM	-
Institutional Environment	Outcome 3: Functional monitoring and evaluation and statistical analysis systems are in place to monitor and report on progress.	3.2 By 2018, Government programmes and National Development Plans are continuously and effectively monitored and evaluated.	Support the strengthening of parliament governance capacity	National Parliament	40,000.00

Summary of progress of UNPAF Results Groups towards UNPAF outcomes in support of national development priorities

PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Institutional Environment	Outcome 3: Functional monitoring and evaluation and statistical analysis systems are in place to monitor and report on progress.	3.2 By 2018, Government programmes and National Development Plans are continuously and effectively monitored and evaluated.	Support the development of the national M&E Framework	NPC, MGECW, SADC	-
Institutional Environment	Outcome 4: Namibia complies with most of her international treaties' accession/ ratification, monitoring and reporting obligations.	4.2 By 2018, the government with participation of civil society complies with treaty monitoring and reporting obligations on time	Technical support provided to strengthen independent monitoring of the implementation of regional and international treaty obligations	MGECW, MoJ, Ombudsman's Office, Child Rights Network	-
Institutional Environment	Outcome 4: Namibia complies with most of her international treaties' accession/ ratification, monitoring and reporting obligations.	4.2 By 2018, the government with participation of civil society complies with treaty monitoring and reporting obligations on time	Technical support to strengthen capacity of CSOs to actively engage in human rights treaty monitoring and reporting	MGECW, NANGOF, Child Rights Network	-
Institutional Environment	Outcome 4: Namibia complies with most of her international treaties' accession/ ratification, monitoring and reporting obligations.	4.3 By 2018, the government is effectively implementing recommendations from regional and international human rights treaty bodies	Technical support provided to the finalisation and enactment of key child-related legislation	MGECW, MICT, MoJ, LAC	-
Education and Skills	Outcome 5: Namibia is implementing policies and programmes that improve learning outcomes at all levels.	5.1 By 2018, MoE has enhanced capacity at all levels to better plan, monitor and evaluate education programmes and policies	Improved systems to manage the demand and supply, recruitment and deployment of teachers are implemented	MoEAC - PAD, PQA, HR, NIED; UIS	8,500.00
Education and Skills	Outcome 5: Namibia is implementing policies and programmes that improve learning outcomes at all levels.	5.2 By 2018, key education policies (ECD, educators, learner pregnancy & inclusive education) are reviewed/ harmonized and their implementation strategies approved by MoE	Advocacy Campaign on Importance of Mother Tongue Education	NIED	2,000.00
Education and Skills	Outcome 5: Namibia is implementing policies and programmes that improve learning outcomes at all levels.	5.2 By 2018, key education policies (ECD, educators, learner pregnancy & inclusive education) are reviewed/ harmonized and their implementation strategies approved by MoE	A revised and updated ICT in Education Policy and Implementation Plan facilitates, guides and strengthens ICT integration in Education in Namibia	MoEAC	23,000.00

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Education and Skills	Outcome 5: Namibia is implementing policies and programmes that improve learning outcomes at all levels.	5.3 By 2018, all schools in Namibia are implementing and monitoring standards and regulations for effective and conducive teaching and learning	Implementation of school health programme strengthened and scaled up to selected regions.	UNICEF, UNFPA, WHO, UNESCO, MoHSS, MoE	5,000.00
Education and Skills	Outcome 5: Namibia is implementing policies and programmes that improve learning outcomes at all levels.	5.4 By 2016, young people demonstrate improved knowledge and skills for informed decisions on HIV prevention and SRH	MoE and CSOs capacity developed to deliver comprehensive sexuality and life skills education programmes	UNFPA; MoE, NAPPA, Star for Life, Lifeline ChildLine	60,000.00
Education and Skills	Outcome 5: Namibia is implementing policies and programmes that improve learning outcomes at all levels.	5.5 By 2017, 60% of existing ECD centres meet the minimum standards and are managed by qualified educators	Survey of Teachers in Pre-Primary Education (STEPP) Project: Phase 1 (A & B)	MoEAC, MoGECW	18,000.00
Education and Skills	Outcome 5: Namibia is implementing policies and programmes that improve learning outcomes at all levels.	5.5 By 2017, 60% of existing ECD centres meet the minimum standards and are managed by qualified educators	Implementation of the Junior teacher education curriculum is research-driven and innovative	UNAM - FoE	26,000.00
Education and Skills	Outcome 5: Namibia is implementing policies and programmes that improve learning outcomes at all levels.	5.6 By 2018, teachers have improved skills for literacy, maths and science teaching	The "Kopano" Education Forum (virtual) is upgraded in order to advance an effective community of practice of education professional	UNAM (CPDTLI); NUST(TLU); NIED; Education Community	50,070.00
Education and Skills	Outcome 5: Namibia is implementing policies and programmes that improve learning outcomes at all levels.	5.8 By 2018, national institutions of higher education have expanded capacity in programmes and research outputs to meet national needs.	Strengthened capacity for integrating ICT in teaching and learning elevates the Namibian classroom practice	UNAM -FoE; NEMAS; NUST	36,000.00
Education and Skills	Outcome 5: Namibia is implementing policies and programmes that improve learning outcomes at all levels.	5.8 By 2018, national institutions of higher education have expanded capacity in programmes and research outputs to meet national needs.	Support to MHETI in strengthening its leadership and governance of VET, higher education and STI	MHETI, NTA, VET centres	50,000.00

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.1 By 2018, young people (10-24yrs) are equipped to access sexual and reproductive health including HIV information and services	Strengthen networks and partnerships among governments, youth led organizations, civil society organizations and private sector for support of young peoples' SRH	MoE, MoHSS, MYNSSC, NYC, NAPPA,	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.1 By 2018, young people (10-24yrs) are equipped to access sexual and reproductive health including HIV information and services	Support generation and dissemination of evidence on young people, SRH, HIV	MoE, MoHSS, MYNSSC, NAPPA,	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.1 By 2018, young people (10-24yrs) are equipped to access sexual and reproductive health including HIV information and services	Support social mobilization for young people on sexual and reproductive health including HIV through SBCC and mass media	MoE, MoHSS, MYNSSC, NAPPA,	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.1 By 2018, young people (10-24yrs) are equipped to access sexual and reproductive health including HIV information and services	Support the development of IEC materials on HIV, SRH for young people	MoE, MoHSS, MYNSSC, NAPPA,	-

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.1 By 2018, young people (10-24yrs) are equipped to access sexual and reproductive health including HIV information and services	Advocate and support enhanced youth empowerment and meaningful participation (especially of young girls) in HIV interventions including the Protect the Goal National Campaign	NFA, SCORE, NAPCOA, GALZ AND GOALS	90,000.00
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.1 By 2018, young people (10-24yrs) are equipped to access sexual and reproductive health including HIV information and services	Provide support on youth participation in SRH/HIV through youth networks	MoE, MoHSS, MYNSSC, NYC, NAPPA, CSO	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.1 By 2018, young people (10-24yrs) are equipped to access sexual and reproductive health including HIV information and services	Strengthen networks and partnerships among governments, youth led organizations, civil society organizations and private sector for support of young peoples SRH	MoE, MoHSS, MYNSSC, NYC, NAPPA,	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.1 By 2018, young people (10-24yrs) are equipped to access sexual and reproductive health including HIV information and services	Support generation and dissemination of evidence on young people, SRH, HIV	MoE, MoHSS, MYNSSC, NAPPA,	45,000.00

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.1 By 2018, young people (10-24yrs) are equipped to access sexual and reproductive health including HIV information and services	Support social mobilization for young people on sexual and reproductive health including HIV through SBCC and mass media	MoE, MoHSS, MYNS-SC, NAPPA,	40,000.00
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.2 By 2018, AFHS facilities and health facilities provide improved comprehensive and integrated SRH and HIV services for young people and key populations	Strengthen capacity of Health Workers to deliver integrated sexual and reproductive health & HIV services including for adolescents and sex workers	MoHSS, MYNSSC, NAPPA	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.2 By 2018, AFHS facilities and health facilities provide improved comprehensive and integrated SRH and HIV services for young people and key populations	Support development of strategies / guidelines for integrated HIV and sexual and reproductive health services	MoHSS, MYNSSC, NAPPA	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.2 By 2018, AFHS facilities and health facilities provide improved comprehensive and integrated SRH and HIV services for young people and key populations	Support implementation of comprehensive services for ALHIV	MoHSS, Positive vibes, NAPPA	-

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.2 By 2018, AFHS facilities and health facilities provide improved comprehensive and integrated SRH and HIV services for young people and key populations	Strengthen capacity of Health Workers to deliver integrated sexual and reproductive health & HIV services including for adolescent and sex workers	MoHSS, MYNSSC, NAPPA	40,000.00
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.2 By 2018, AFHS facilities and health facilities provide improved comprehensive and integrated SRH and HIV services for young people and key populations	Support implementation of comprehensive services for ALHIV	MoHSS, Positive vibes, NAPPA	50,000.00
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.3 By 2018, Public and Higher learning institutions, CSOs, and youth centres provide improved comprehensive sexuality education and HIV prevention for out-of-school young people and key populations.	Support revision of IEC materials for comprehensive sexuality education for out of school young people	MoE, MoHSS, MYNSSC, NAPPA	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.3 By 2018, Public and Higher learning institutions, CSOs, and youth centres provide improved comprehensive sexuality education and HIV prevention for out-of-school young people and key populations.	Support capacity building of CSOs and HEW to provide comprehensive sexuality education for young people	MoE, MoHSS, MYNSSC, NAPPA	10,000.00

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.3 By 2018, Public and Higher learning institutions, CSOs, and youth centres provide improved comprehensive sexuality education and HIV prevention for out-of-school young people and key populations.	Support revision of IEC materials for comprehensive sexuality education for out of school young people	MoE, MoHSS, MYNSSC, NAPPA	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.3 By 2018, Public and Higher learning institutions, CSOs, and youth centres provide improved comprehensive sexuality education and HIV prevention for out-of-school young people and key populations.	Advocate for pre-service training institutions to intergrate CSE on their teacher programs	MoE, MoHSS, MYNSSC, UN	1,000.00
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.3 By 2018, Public and Higher learning institutions, CSOs, and youth centres provide improved comprehensive sexuality education and HIV prevention for out-of-school young people and key populations.	Support capacity building of CSOs and HEW to provide comprehensive sexuality education for young people	MoE, MoHSS, MYNSSC, NAPPA	10,000.00
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.3 By 2018, Public and Higher learning institutions, CSOs, and youth centres provide improved comprehensive sexuality education and HIV prevention for out-of-school young people and key populations.	Support revision of IEC materials for comprehensive sexuality education for out of school young people	MoE, MoHSS, MYNSSC, NAPPA	2,000.00

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.4 By 2015, HIV-NSF coordination structures function effectively and sustained	Support health coordination mechanisms through health development partners, MNCH Committee, annual ministerial management committee meetings and others.	MoHSS, USAID, GIZ, Spanish Cooperation, PEPFAR, CDC, other bilateral and multi-lateral organizations and NGOs.	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.4 By 2015, HIV-NSF coordination structures function effectively and sustained	Support health coordination mechanisms through health development partners, MNCH Committee, annual ministerial management committee meetings and others.	MoHSS, USAID, GIZ, Spanish Cooperation, PEPFAR, CDC, other bilateral and multi-lateral organizations and NGOs.	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.4 By 2015, HIV-NSF coordination structures function effectively and sustained	Support the operationalization of the approved NSF coordination structures	OPM, MoHSS	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.5 By 2015, districts effectively implement eMTCT plans	Support for operationalization of Option B+ and other new WHO recommendations	MoHSS	-

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.5 By 2015, districts effectively implement eMTCT plans	Support national guidance for scaling up optimal infant feeding practices in the context of HIV	MoHSS	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.5 By 2015, districts effectively implement eMTCT plans	Support post test counseling for HIV negative pregnant women, provision of condoms during pregnancy and re-testing at 36 weeks to prevent HIV transmission	MoHSS, MYNSSC, NAPPA	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.5 By 2015, districts effectively implement eMTCT plans	Support provision of Family Planning services to HIV+ women to prevent unintended pregnancies	MoHSS, MYNSSC, NAPPA	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.5 By 2015, districts effectively implement eMTCT plans	Support the quality implementation and sustenance of Paeds ART services	MoHSS	-

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.5 By 2015, districts effectively implement eMTCT plans	Promote innovative approaches for improved community mobilization and increased male partner involvement	MoHSS	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.5 By 2015, districts effectively implement eMTCT plans	Support for operationalization of Option B+ and other new WHO recommendations	MoHSS	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.5 By 2015, districts effectively implement eMTCT plans	Support government leadership in national PMTCT TWG	MoHSS	13,500.00
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.5 By 2015, districts effectively implement eMTCT plans	Support national guidance for scaling up optimal infant feeding practices in the context of HIV	MoHSS	-

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.5 By 2015, districts effectively implement eMTCT plans	Support post test counseling for HIV negative pregnant women , provision of condoms during pregnancy and re-testing at 36 weeks to prevent HIV transmission	MoHSS, MYNSSC, NAPPA	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.5 By 2015, districts effectively implement eMTCT plans	Support the bottleneck analysis to identify and address the challenges in virtual elimination of MTCT	MoHSS	45,000.00
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.5 By 2015, districts effectively implement eMTCT plans	Support the quality implementation and sustenance of Paeds ART services	MoHSS	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.6 By 2018, MoHSS able to coordinate, plan, implement and monitor non-communicable diseases prevention and control	Develop appropriate IEC materials targeting NCDs	MoHSS	-

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Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.6 By 2018, MoHSS able to coordinate, plan, implement and monitor non-communicable diseases prevention and control	Support the development of policy, plans and guidelines	MoHSS, MoTI, OPM	5,000.00
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.6 By 2018, MoHSS able to coordinate, plan, implement and monitor non-communicable diseases prevention and control	Support the implementation of NCDs activities	MoHSS, MoTI, OPM	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.6 By 2018, MoHSS able to coordinate, plan, implement and monitor non-communicable diseases prevention and control	Support cervical, prostate and breast cancer prevention and control	MoHSS, Office of the First Lady, OPM, CAN,	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.6 By 2018, MoHSS able to coordinate, plan, implement and monitor non-communicable diseases prevention and control	Support the strengthening of NCDs multisectoral coordination body	MoHSS, MoTI, OPM	-

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Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.6 By 2018, MoHSS able to coordinate, plan, implement and monitor non-communicable diseases prevention and control	Support cervical, prostate and breast cancer prevention and control	MoHSS, Office of the First Lady, OPM, CAN,	10,000.00
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Advocate for improved inter-ministerial coordination for WASH in schools	MoHSS, MoE, MAWF, MLGRHD	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Capacity building in ICCM, IYCF counseling, maternal nutrition and essential nutrition actions built amongst health care workers, HEWs, CSO volunteers	NAFIN, MoHSS, NGOs	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Provide nutrition assessment equipment and supplies for NACS programme	MoHSS	-

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Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Strengthen the nutrition and food security surveillance system	NAFIN, MoHSS, NGOs, DDRM	10,000.00
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Support in-service and preservice training in nutrition, LSS, IMNCI	UNAM, MoHSS	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Support the development of IYCF and Nutrition Care guidelines for ECD centers	MGECEW, MoE	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Support the implementation of communication for development activities for nutrition	MoHSS	-

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Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Support the monitoring of scale-up nutrition country implementation plan	NAFIN, NGOs	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Support the operationalization of school health policy	MoHSS, MoE	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Support WASH in Schools; hygiene promotion, WASH campaigns	MAWF, MoHSS, MoE	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Advocate for improved inter-ministerial coordination for WASH in schools	MoHSS, MoE, MAWF, MLGRHD	-

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Capacity building in ICCM, IYCF counseling, maternal nutrition and essential nutrition actions built amongst health care workers, HEWs, CSO volunteers	NAFIN, MoHSS, NGOs	178,000.00
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Provide nutrition assessment equipment and supplies for NACS programme	MoHSS	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Strengthen the nutrition and food security surveillance system	NAFIN, MoHSS, NGOs, DDRM	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Support in-service and preservice training in nutrition, LSS, IMNCI	UNAM, MoHSS	-

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Support the development of IYCF and Nutrition Care guidelines for ECD centers	MGECW, MoE	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Support the implementation of communication for development activities for nutrition	MoHSS	40,000.00
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Support the implementation of community based IYCF minimum package of essential nutrition interventions	NAFIN, MoHSS, NGOs	75,000.00
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Support the monitoring of scale-up nutrition country implementation plan	NAFIN, NGOs	5,000.00

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Support the Nationwide Infant, young child feeding and care practices study	UNAM, MoHSS, MoE, MGECW	2,526.00
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Support the operationalization of school health policy	MoHSS, MoE	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Support WASH in Schools; hygiene promotion, WASH campaigns	MAWF, MoHSS, MoE	30,000.00
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.8 By 2018, Open Defecation Free (ODF) status achieved by all communities where CLTS is being implemented	Support the development and implementation of communication strategy for elimination of open defecation	MAWF, NGOs	-

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.8 By 2018, Open Defecation Free (ODF) status achieved by all communities where CLTS is being implemented	Support the implementation of Community Led Total Sanitation (CLTS) in Zambezi, Kavango, Oshana, Oshana-Namaland and Kunene	MAWF, NGOs	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.8 By 2018, Open Defecation Free (ODF) status achieved by all communities where CLTS is being implemented	Support the roll out of the National Sanitation Strategy	MAWF, MoHSS, MoE, NGOs	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.8 By 2018, Open Defecation Free (ODF) status achieved by all communities where CLTS is being implemented	Support the development and implementation of communication strategy for elimination of open defecation	MAWF, NGOs	-
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.8 By 2018, Open Defecation Free (ODF) status achieved by all communities where CLTS is being implemented	Support the implementation of Community Led Total Sanitation (CLTS) in Zambezi, Kavango, Oshana and Kunene	MAWF, NGOs	124,236.00

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Health	Outcome 6: Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.8 By 2018, Open Defecation Free (ODF) status achieved by all communities where CLTS is being implemented	Support the roll out of the National Sanitation Strategy	MAWF, MoHSS, MoE, NGOs	145,000.00
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.1 By 2018, skills of Health Workers in the provision of MNCH, HIV/ SRH, and nutrition services improved	Advocate for leveraging national resources for MNCH programme	MoHSS	-
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.1 By 2018, skills of Health Workers in the provision of MNCH, HIV/ SRH, and nutrition services improved	Support implementation of Minimum Initial Service Package (MISP) during emergencies	DDRM, MoHSS, NRCS	-
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.1 By 2018, skills of Health Workers in the provision of MNCH, HIV/ SRH, and nutrition services improved	Support on site training and supervision of Health Workers	MoHSS	-
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.1 By 2018, skills of Health Workers in the provision of MNCH, HIV/ SRH, and nutrition services improved	Support Pre-Service Training Institutions to incorporate RH, Maternal, Newborn, child health and nutrition into their curriculum	MoHSS, NHTC, UNAM	-
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.1 By 2018, skills of Health Workers in the provision of MNCH, HIV/ SRH, and nutrition services improved	Support the roll out of Health Extension Programme	MoHSS	10,000.00

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.1 By 2018, skills of Health Workers in the provision of MNCH, HIV/ SRH, and nutrition services improved	Support the training of health workers on comprehensive RH, Maternal, Newborn, child health and nutrition (EmONC, FP, IMNCI, AFHS)	MoHS	20,000.00
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.1 By 2018, skills of Health Workers in the provision of MNCH, HIV/ SRH, and nutrition services improved	Support training and capacity building for community IMNCI and ICCM	MoHSS, NRCS	-
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.1 By 2018, skills of Health Workers in the provision of MNCH, HIV/ SRH, and nutrition services improved	Support UHC, NHA and HRH policy, strategy and implementation	MoHSS, UNAM	-
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.1 By 2018, skills of Health Workers in the provision of MNCH, HIV/ SRH, and nutrition services improved	Advocate for leveraging national resources for MNCH programme	MoHSS	-
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.1 By 2018, skills of Health Workers in the provision of MNCH, HIV/ SRH, and nutrition services improved	Support implementation of Minimum Initial Service Package (MISP) during emergencies	DDRM, MoHSS, NRCS	5,000.00
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.1 By 2018, skills of Health Workers in the provision of MNCH, HIV/SRH, and nutrition services improved	Support on site training and supervision of Health Workers	MoHSS	10,000.00

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.1 By 2018, skills of Health Workers in the provision of MNCH, HIV/ SRH, and nutrition services improved	Support Pre-Service Training Institutions to incorporate RH, Maternal, Newborn, child health and nutrition into their curriculum	MoHSS, NHTC, UNAM	-
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.1 By 2018, skills of Health Workers in the provision of MNCH, HIV/ SRH, and nutrition services improved	Support the roll out of Health Extension Programme	MoHSS	10,000.00
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.1 By 2018, skills of Health Workers in the provision of MNCH, HIV/ SRH, and nutrition services improved	Support the training of health workers on comprehensive RH, Maternal, Newborn, child health and nutrition (EmONC, FP, IMNCI, AFHS)	MoHSS	178,000.00
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.1 By 2018, skills of Health Workers in the provision of MNCH, HIV/ SRH, and nutrition services improved	Support training and capacity building for community IMNCI and ICCM	MoHSS, NRCS	-
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.2 By 2018, communities and Health Facilities equipped to provide quality MNCH, HIV/ SRH, and nutrition services	Provide support for proper functioning of Maternity Waiting Homes	MoHSS	250,000.00
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.2 By 2018, communities and Health Facilities equipped to provide quality MNCH, HIV/ SRH, and nutrition services	Support community sensitization to address sociocultural barriers for improved uptake of MNCAH services	MoHSS, NAPPA	-

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.2 By 2018, communities and Health Facilities equipped to provide quality MNCH, HIV/SRH, and nutrition services	Support development and dissemination of MNCH IEC materials including Family Planning	MoHSS	-
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.2 By 2018, communities and Health Facilities equipped to provide quality MNCH, HIV/SRH, and nutrition services	Support institutionalization of maternal and newborn death reviews	MoHSS	-
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.2 By 2018, communities and Health Facilities equipped to provide quality MNCH, HIV/SRH, and nutrition services	Procure Emergency Obstetric and Newborn Care equipment, medicines, Reproductive Health commodities and supplies	MoHSS	-
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.2 By 2018, communities and Health Facilities equipped to provide quality MNCH, HIV/SRH, and nutrition services	Provide support for proper functioning of Maternity Waiting Homes	MoHSS	-
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.2 By 2018, communities and Health Facilities equipped to provide quality MNCH, HIV/SRH, and nutrition services	Strengthen cold chain and other infrastructure for delivery of routine immunization, MCHDS, AVW and other high impact interventions	MoHSS	65,000.00
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.2 By 2018, communities and Health Facilities equipped to provide quality MNCH, HIV/SRH, and nutrition services	Support institutionalization of maternal and newborn death reviews	MoHSS	

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.3 By 2018, access to services for the prevention and control of priority communicable diseases improved	Support development of guidelines, strategies and plans on HIV/AIDS, TB, malaria and NCD	MoHSS	100,000.00
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.3 By 2018, access to services for the prevention and control of priority communicable diseases improved	Support information management, risk assessment during outbreaks and apply ERF performance standards	MoHSS, CSOs, DDRM	
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.3 By 2018, access to services for the prevention and control of priority communicable diseases improved	Support programme implementation, monitoring and evaluation of HIV/AIDS and other priority programmes	MoHSS	
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.3 By 2018, access to services for the prevention and control of priority communicable diseases improved	Support strengthening of surveillance system and research capacity for priority diseases	MoHSS	20,000.00
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.3 By 2018, access to services for the prevention and control of priority communicable diseases improved	Support the implementation of immunization programme activities (routine immunization, vitamin A and deworming during immunization campaigns and maternal, child health campaigns)	MoHSS, CSOs	30,000.00
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.3 By 2018, access to services for the prevention and control of priority communicable diseases improved	Support the implementation of immunization programme activities (routine immunization, vitamin A and deworming during immunization campaigns and maternal, child health campaigns)	MoHSS, CSOs	-

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.4 By 2018, women and men, key populations and young people have access to comprehensive HIV counseling and testing and prevention services	Support a National Study on HIV modes of Transmission	MOHSS	-
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.4 By 2018, women and men, key populations and young people have access to comprehensive HIV counseling and testing and prevention services	Support adaptation and implementation of the global HTC guidelines for adolescents	MoHSS	-
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.4 By 2018, women and men, key populations and young people have access to comprehensive HIV counseling and testing and prevention services	Support identification of adolescents living with HIV through HCT and linkage to care	MoHSS, NAPPA	-
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.4 By 2018, women and men, key populations and young people have access to comprehensive HIV counseling and testing and prevention services	Advocate and support for implementation of combination prevention strategy with focus on promotion for HTC expansion services for young people, most-at-risk-adolescents, ALHIV and key population	MoHSS, MoY, MICT, CSOs	-
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.4 By 2018, women and men, key populations and young people have access to comprehensive HIV counseling and testing and prevention services	Support adaptation and implementation of the global HTC guidelines for adolescents	MoHSS	-
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.4 By 2018, women and men, key populations and young people have access to comprehensive HIV counseling and testing and prevention services	Support identification of adolescents living with HIV through HCT and linkage to care	MoHSS, NAPPA	-

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.4 By 2018, women and men, key populations and young people have access to comprehensive HIV counseling and testing and prevention services	Support regular generation and utilization of coverage data and strategic information on HIV testing and ART amongst adolescents disaggregated by age and sex	MoHSS, CSO	-
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.5 By 2015, capacity of GRN for the development of normative guidance in MNCH and nutrition enhanced	Advocate for dedicated national nutrition budget	MoHSS	-
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.5 By 2015, capacity of GRN for the development of normative guidance in MNCH and nutrition enhanced	Support review, development and dissemination of guidelines on MNCAH and nutrition	MoHSS, NAFIN	-
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.5 By 2015, capacity of GRN for the development of normative guidance in MNCH and nutrition enhanced	Support the development and implementation of policy and guidelines for nutrition in emergencies	MoHSS	-
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.5 By 2015, capacity of GRN for the development of normative guidance in MNCH and nutrition enhanced	Support UHC, NHA and HRH polciy, strategy and implementation	MoHSS, UNAM	10,000.00
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.5 By 2015, capacity of GRN for the development of normative guidance in MNCH and nutrition enhanced	Advocate for dedicated national nutrition budget	MoHSS	-

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.5 By 2015, capacity of GRN for the development of normative guidance in MNCH and nutrition enhanced	Support review, development and dissemination of guidelines on MNCAH and nutrition	MoHSS, NAFIN	11,000.00
Health	Outcome 7: Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated and equitable health care.	7.5 By 2015, capacity of GRN for the development of normative guidance in MNCH and nutrition enhanced	Support the development and implementation of policy and guidelines for nutrition in emergencies	MoHSS	-
Poverty Reduction	Outcome 8: Namibia is implementing effectively and in a coordinated manner, policies and strategies to reduce poverty and vulnerability, which are informed by evidence on the causes of poverty and vulnerability.	8.1 By 2016, key Government institutions, private sectors, CSOs and academia are better able to generate, analyse and disseminate evidence on the root causes of poverty and vulnerability in Namibia	Technical support provided on in-depth research for vulnerability and social exclusion experienced by children	MGECW, NPC	-
Poverty Reduction	Outcome 8: Namibia is implementing effectively and in a coordinated manner, policies and strategies to reduce poverty and vulnerability, which are informed by evidence on the causes of poverty and vulnerability.	8.1 By 2016, key Government institutions, private sectors, CSOs and academia are better able to generate, analyse and disseminate evidence on the root causes of poverty and vulnerability in Namibia	Evidence-based advocacy based on new data and in-depth research to raise awareness and strengthen policy responses	NPC, CSO, NANASO, MOHSS,	20,000.00
Poverty Reduction	Outcome 8: Namibia is implementing effectively and in a coordinated manner, policies and strategies to reduce poverty and vulnerability, which are informed by evidence on the causes of poverty and vulnerability.	8.2 By 2018, Government Institutions, Private Sector Civil Society Organizations and academia utilise research to effectively advocate for poverty and vulnerability reduction	Technical support provided towards the carrying out of 4 baseline research papers on the root causes of poverty	NPC	-

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Poverty Reduction	Outcome 9: National Gender Plan of Action and Gender-Based Violence Plans of Action are being implemented effectively.	9.2 By 2018 the Technical Capacities of MGECW Staff and other OMAs is improved to effectively implement the NGPA and GBVPA	Conduct series of training workshops for key stakeholders in the application of Gender Responsive Programming including Budgeting	MGECW	5,000.00
Poverty Reduction	Outcome 9: National Gender Plan of Action and Gender-Based Violence Plans of Action are being implemented effectively.	9.2 By 2018 the Technical Capacities of MGECW Staff and other OMAs is improved to effectively implement the NGPA and GBVPA	Conduct series of training workshops for key stakeholders in the application of Gender Responsive Programming including Budgeting		-
Poverty Reduction	Outcome 9: National Gender Plan of Action and Gender-Based Violence Plans of Action are being implemented effectively.	9.5 By the end of 2018, guidelines for providing comprehensive multi-sectoral response services (SRH,HIV, psycho-social, justice and economic) to GBV survivors are developed and implemented	Develop guidelines, protocols and standards on integrated GBV services	MGECW, MoSS, MoHSS, MoJ,	10,000.00
Poverty Reduction	Outcome 9: National Gender Plan of Action and Gender-Based Violence Plans of Action are being implemented effectively.	9.5 By the end of 2018, guidelines for providing comprehensive multi-sectoral response services (SRH,HIV, psycho-social, justice and economic) to GBV survivors are developed and implemented	Support advocacy for the inclusion of GBV screening as part of SRH, HIV and AIDS services (integration)	MoSS and MGECW, other key OMAs	-
Poverty Reduction	Outcome 9: National Gender Plan of Action and Gender-Based Violence Plans of Action are being implemented effectively.	9.5 By the end of 2018, guidelines for providing comprehensive multi-sectoral response services (SRH,HIV, psycho-social, justice and economic) to GBV survivors are developed and implemented	Support evidence based advocacy on the linkages between GBV, SRH and HIV for decision makers	NSA, (OTHER Moss, MoSS, MGECW,	-

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Poverty Reduction	Outcome 9: National Gender Plan of Action and Gender-Based Violence Plans of Action are being implemented effectively.	9.5 By the end of 2018, guidelines for providing comprehensive multi-sectoral response services (SRH,HIV, psycho-social, justice and economic) to GBV survivors are developed and implemented	Support male engagement interventions for the promotion of SRH and prevention of GBV and HIV and AIDS	MGECW, MoHSS, MoJ, CSOs, SCORE, NFA,UNDP	1,000.00
Poverty Reduction	Outcome 9: National Gender Plan of Action and Gender-Based Violence Plans of Action are being implemented effectively.	9.5 By the end of 2018, guidelines for providing comprehensive multi-sectoral response services (SRH,HIV, psycho-social, justice and economic) to GBV survivors are developed and implemented	Support mass mobilization interventions on socio-cultural attitudes and practices that perpetuates GBV for targeted groups including youth.	FLO, MGECW, MICT, MoE, MOHSS, MoJ, MYNSSC, NANGOF Trust	23,000.00
Poverty Reduction	Outcome 9: National Gender Plan of Action and Gender-Based Violence Plans of Action are being implemented effectively.	9.5 By the end of 2018, guidelines for providing comprehensive multi-sectoral response services (SRH,HIV, psycho-social, justice and economic) to GBV survivors are developed and implemented	Develop guidelines, protocols and standards on integrated GBV services	MGECW, MoSS, MoHSS, MoJ, OPG	-
Poverty Reduction	Outcome 9: National Gender Plan of Action and Gender-Based Violence Plans of Action are being implemented effectively.	9.5 By the end of 2018, guidelines for providing comprehensive multi-sectoral response services (SRH,HIV, psycho-social, justice and economic) to GBV survivors are developed and implemented	Support evidence based advocacy on the linkages between GBV, SRH and HIV for decision makers	NSA, (OTHER Moss, MoSS, MGECW,	-
Poverty Reduction	Outcome 9: National Gender Plan of Action and Gender-Based Violence Plans of Action are being implemented effectively.	9.5 By the end of 2018, guidelines for providing comprehensive multi-sectoral response services (SRH,HIV, psycho-social, justice and economic) to GBV survivors are developed and implemented	Support male engagement interventions for the promotion of SRH and prevention of GBV and HIV and AIDS	MGECW, MoHSS, MoJ, CSOs, SCORE, NFA,UNDP	-

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Poverty Reduction	Outcome 9: National Gender Plan of Action and Gender-Based Violence Plans of Action are being implemented effectively.	9.6 By 2018 State Agencies systems for the timely collection, analysis, utilisation and dissemination of up to date data on GBV strengthened	Conduct Research on GBV (prevalence and causes study on GBV)	MGECW	26,200.00
Poverty Reduction	Outcome 9: National Gender Plan of Action and Gender-Based Violence Plans of Action are being implemented effectively.	9.6 By 2018 State Agencies systems for the timely collection, analysis, utilisation and dissemination of up to date data on GBV strengthened	Conduct Research on GBV (prevalence and causes study on GBV)	MGECW, Regain Trust	-
Poverty Reduction	Outcome 10: The national social protection system is strengthened and expanded to poor and vulnerable households and individuals.	10.1 By 2016, MGECW has the institutional capacity to expand the child welfare grant system	Technical support provided to development of integrated delivery of social protection services coupled with other basic social services	MGECW, MHAI, MoHSS	35,000.00
Poverty Reduction	Outcome 10: The national social protection system is strengthened and expanded to poor and vulnerable households and individuals.	10.1 By 2016, MGECW has the institutional capacity to expand the child welfare grant system	Technical support on evidence building on social protection systems	MPESW, Core Team on SP, NSA	50,000.00
Poverty Reduction	Outcome 10: The national social protection system is strengthened and expanded to poor and vulnerable households and individuals.	10.3 By 2018, more vulnerable persons, including key populations, PLHIV, urban poor, and other marginalised groups are benefiting from social protection measures	Technical support on multi-sectoral and inter-agency coordination mechanism	MPESW, Core Team on SP	5,000.00
Poverty Reduction	Outcome 10: The national social protection system is strengthened and expanded to poor and vulnerable households and individuals.	10.3 By 2018, more vulnerable persons, including key populations, PLHIV, urban poor, and other marginalised groups are benefiting from social protection measures	Technical support for the development of a social protection policy framework and implementation plan	MPESW, Core Team on SP	25,000.00

Summary of progress of UNPAF Results Groups towards UNPAF outcomes in support of national development priorities

PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Poverty Reduction	Outcome 11: Namibia has reviewed, and is implementing, policies and strategies, which ensure that severely poor and vulnerable households have access to and are utilizing productive resources and services for food and nutrition security and sustainable income generation.	11.1 National authorities adopt improved fisheries and agricultural development policies and strategies incorporating emerging food and nutrition issues.	Comprehensive conservation agriculture interventions integrated into Namibian farming systems	MAWF, NNFU	574,731.00
Poverty Reduction	Outcome 11: Namibia has reviewed, and is implementing, policies and strategies, which ensure that severely poor and vulnerable households have access to and are utilizing productive resources and services for food and nutrition security and sustainable income generation.	11.2 By 2018, the capacity of government ministries (MTI, MLRGHRD) and other development partners to provide support aimed at promoting sustainable income generation activities among the vulnerable is enhanced.	Strengthened capacity in livestock production and health	MAWF	3,000.00
Poverty Reduction	Outcome 11: Namibia has reviewed, and is implementing, policies and strategies, which ensure that severely poor and vulnerable households have access to and are utilizing productive resources and services for food and nutrition security and sustainable income generation.	11.2 By 2018, the capacity of government ministries (MoTI, MLRGHRD) and other development partners to provide support aimed at promoting sustainable income generation activities among the vulnerable is enhanced.	Improved water access to drought affected communities	MAWF	200,000.00
Poverty Reduction	Outcome 11: Namibia has reviewed, and is implementing, policies and strategies, which ensure that severely poor and vulnerable households have access to and are utilizing productive resources and services for food and nutrition security and sustainable income generation.	11.2 By 2018, the capacity of government ministries (MTI, MLRGHRD) and other development partners to provide support aimed at promoting sustainable income generation activities among the vulnerable is enhanced.	Strengthened capacity of key stakeholders to apply prevention and mitigation measures to reduce vulnerability, and strengthen resilience of communities at risk of threats and crises	MAWF, IRDNC	8,000.00

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Poverty Reduction	Outcome 11: Namibia has reviewed, and is implementing, policies and strategies, which ensure that severely poor and vulnerable households have access to and are utilizing productive resources and services for food and nutrition security and sustainable income generation.	11.2 By 2018, capacity of government officials developed to manage, implement and monitor food-based safety net and nutrition programmes	Provide capacity strengthening to the government entities responsible for national shock-responsive safety net programmes	MPESW	1,194,294.00
Poverty Reduction	Outcome 11: Namibia has reviewed, and is implementing, policies and strategies, which ensure that severely poor and vulnerable households have access to and are utilizing productive resources and services for food and nutrition security and sustainable income generation.	11.2 By 2018, capacity of government officials developed to manage, implement and monitor food-based safety net and nutrition programmes	Provide capacity strengthening and technical assistance to the government entities responsible for school feeding	MoEAC	2,437,198.00
Poverty Reduction	Outcome 11: Namibia has reviewed, and is implementing, policies and strategies, which ensure that severely poor and vulnerable households have access to and are utilizing productive resources and services for food and nutrition security and sustainable income generation.	11.2 By 2018, capacity of government officials developed to manage, implement and monitor food-based safety net and nutrition programmes	Provide capacity strengthening to government entities involved in hunger-related policy and programming	OPM	1,615,002.00

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PILLAR	OUTCOME STATEMENT	OUTPUT STATEMENT*	ACTIVITY DESCRIPTION	IMPLEMENTING PARTNER	ANNUAL BUDGET 2017*
Poverty Reduction	Outcome 11: Namibia has reviewed, and is implementing, policies and strategies, which ensure that severely poor and vulnerable households have access to and are utilizing productive resources and services for food and nutrition security and sustainable income generation.	11.2 By 2018, capacity of government officials developed to manage, implement and monitor food-based safety net and nutrition programmes	Provide technical assistance to the Ministry of Poverty Eradication and Social Welfare and partners involved in the implementation of the Zero Hunger Road Map	MPESW	754,136.00
Poverty Reduction	Outcome 11: Namibia has reviewed, and is implementing, policies and strategies, which ensure that severely poor and vulnerable households have access to and are utilizing productive resources and services for food and nutrition security and sustainable income generation.	11.2 By 2018, the capacity of government ministries (MTI, MLRGHRD) and other development partners to provide support aimed at promoting sustainable income generation activities among the vulnerable is enhanced.	Support the establishment of an entrepreneurial development programme	MITSMED, MPESW, MHETI, MGECW, MLIREC, MYNS	150,000.00
Poverty Reduction	Outcome 12: Institutional frameworks and policies needed to implement the Environmental Management Act (2007), National Climate Change Policy (2011) and international conventions are in place and are being implemented effectively.	12.3 Sector-specific operational plans are prepared to implement the Climate Change Strategy and Action Plan, Tourism Bill and Strategy; and the Parks and Protected Areas and Wildlife Management Bills by 2016 and beyond.	Support the Promotion of Environmental Sustainability to scale up community resilience	MET (Dept of Environmental Affairs), MAWF, IECN, Gobabeb Training and Research Centre, UNAM, City of Windhoek, NamPower, DRFN, PON, Agra, NAU, NNFU, Meatco	100,000.00
					9,340,393.00

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Annex II: Summary of UNPAF Results at Output level

Pillar	Outcome	Output	Output indicator	Summary of Results
Pillar 1: Institutional Environment	OUTCOME 1: Namibia has policies and legislative frameworks to ensure transparency, accountability and effective oversight of public affairs in place and being implemented	1.1 National anti-corruption and access to information frameworks developed and implemented	AC strategy, Action plan and Access to Information Law in place	The National Anti-Corruption Strategy and Action Plan have been developed.
Pillar 1: Institutional Environment	OUTCOME 1: Namibia has policies and legislative frameworks to ensure transparency, accountability and effective oversight of public affairs in place and being implemented	1.2 Parliament and public institutions have an increased capacity to promote accountability and strengthen oversight functions.	Private members bill add activity i) Reports submitted to standing committees of NA and NC and ii) Number of NA and NC recommendations implemented by Ministries	Community radios were trained on election reporting.
Pillar 1: Institutional Environment	OUTCOME 1: Namibia has policies and legislative frameworks to ensure transparency, accountability and effective oversight of public affairs in place and being implemented	1.3 Social Sector ministries have demonstrated capacity (systems, processes, tools, skills, knowledge) for effective and efficient budget planning and monitoring.	Number of line ministries applying zero based budgeting	Namibia HIV Investment Case for ending AIDS by 2030 as a public threat has been developed.
Pillar 1: Institutional Environment	OUTCOME 1: Namibia has policies and legislative frameworks to ensure transparency, accountability and effective oversight of public affairs in place and being implemented	1.4 Domestic funding of the HIV response has increased to 80% in line with the 2013 Abuja declaration target.	% of domestic funding of HIV/AIDS response	The spending on HIV/AIDS response is 64% (2014).
Pillar 1: Institutional Environment	OUTCOME 2: By 2018, the government and partners are promoting and protecting human rights effectively	2.1 By 2018, the Human Rights Action Plan is efficiently implemented, including monitoring of child rights violations	Per cent of alleged child rights violations investigated and resolved	No data on the % of cases. However, UNICEF supported the work of the Children's Advocate in the National Ombudsman's Office, engaging frequently with her regarding grave child rights violations.
Pillar 1: Institutional Environment	OUTCOME 2: By 2018, the government and partners are promoting and protecting human rights effectively	2.2 By 2018, government, CSO and the public have enhanced knowledge and communication tools to be better able to protect human rights	Number of human rights education and information programmes implemented in learning institutions	<ul style="list-style-type: none"> Research products on child online safety launched. Report on African Charter on the Rights and Welfare of the Child developed. Community radios trained in development journalism. Legal Briefs and advocacy tools for parliamentarian developed.
Pillar 1: Institutional Environment	OUTCOME 2: By 2018, the government and partners are promoting and protecting human rights effectively	2.2 By 2018, government, CSO and the public have enhanced knowledge and communication tools to be better able to protect human rights	Number of public human rights dialogues held with different mediums	<ul style="list-style-type: none"> No data on the number of dialogues.
Pillar 1: Institutional Environment	OUTCOME 3: By 2018, functional monitoring and evaluation and statistical analyses systems are in place to monitor and report on progress	3.1 By 2018, national statistical system consistently produces, disseminates and utilizes high quality disaggregated statistical data.	Number of monographs / operation research studies produced and disseminated	<ul style="list-style-type: none"> Five monographs and a report produced on Status of Children's and Adolescents' Rights. Data quality framework and national statistical policies developed. e-birth registration and e-health developed.

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Pillar	Outcome	Output	Output indicator	Summary of Results
Pillar 1: Institutional Environment	OUTCOME 3: By 2018, functional monitoring and evaluation and statistical analyses systems are in place to monitor and report on progress	3.1 By 2018, national statistical system consistently produces, disseminates and utilizes high quality disaggregated statistical data.	Functional and periodically updated integrated statistical database/portal for timely data dissemination exist (plus regular publications)	<ul style="list-style-type: none"> No data on the indicator.
Pillar 1: Institutional Environment	OUTCOME 3: By 2018, functional monitoring and evaluation and statistical analyses systems are in place to monitor and report on progress	3.1 By 2018, national statistical system consistently produces, disseminates and utilizes high quality disaggregated statistical data.	Number of competent staff in key institutions (NSA, line ministries- OMAs, Academic institutions...) able to collect, analyze high quality data	<ul style="list-style-type: none"> 34 NSA strategic working group members trained. 104 managers and technical staff from the MoHSS trained in the use of Health District population projections. 572 Regional decision makers trained in area of statistics and its utilization. 60 (parliamentarians, diplomats, GRN managers) trained on Demographic Dividend and SRH/HIV Two GRN staff trained in IPCD issues (NPC & MOHSS IPCD conference New York) Two NSA staff trained in Principals of Census manual
Pillar 1: Institutional Environment	OUTCOME 3: By 2018, functional monitoring and evaluation and statistical analyses systems are in place to monitor and report on progress	3.1 By 2018, national statistical system consistently produces, disseminates and utilizes high quality disaggregated statistical data.	Number of additional regional and international treaties ratified by GRN	<ul style="list-style-type: none"> The Hague Convention on Inter-Country Adoption acceded.
Pillar 1: Institutional Environment	OUTCOME 4: By 2018, Namibia complies with most of her international treaties' accession/ratification, monitoring and reporting obligations.	4.1 By 2018, the government has acceded to additional regional and international human rights treaties	Number of additional regional and international treaties ratified by GRN	<ul style="list-style-type: none"> The Hague Convention on Inter-Country Adoption acceded.
Pillar 1: Institutional Environment	OUTCOME 4: By 2018, Namibia complies with most of her international treaties' accession/ratification, monitoring and reporting obligations.	4.2 By 2018, the government with participation of civil society complies with treaty monitoring and reporting obligations on time	Number of additional regional and international treaties ratified by GRN	<ul style="list-style-type: none"> No data. However, OHCHR training workshop on international Human Rights conducted, including participation of CSOs as part of the Inter-Ministerial Coordination Committee.
Pillar 1: Institutional Environment	OUTCOME 4: By 2018, Namibia complies with most of her international treaties' accession/ratification, monitoring and reporting obligations.	4.2 By 2018, the government with participation of civil society complies with treaty monitoring and reporting obligations on time	Per cent of actions planned in HRAP implemented by 2016	<ul style="list-style-type: none"> No data. However, 2015 marked the first year of the implementation of the National Human Rights Action Plan.
Pillar 1: Institutional Environment	OUTCOME 4: By 2018, Namibia complies with most of her international treaties' accession/ratification, monitoring and reporting obligations.	4.3 By 2018, the government is effectively implementing recommendations from regional and international human rights treaty bodies	Per cent of recommendations implemented from a) UPR, b) CRC, c) ACRWC d) UNCAC	<ul style="list-style-type: none"> No data. However, the CCPA effectively domesticates the provisions of the CRC into Namibian legislation. Engaged the draft Child Justice Bill in compliance with the Beijing rules on the administration of juvenile justice, as recommended by the Committee of Experts on the ACERWC and as per CRC.

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Pillar	Outcome	Output	Output indicator	Summary of Results
Pillar 2: Education and Skills	OUTCOME 5: By 2018, Namibia is implementing policies and programmes that improve learning outcomes at all levels	5.1 By 2018, MoE has enhanced capacity at all levels to better plan, monitor and evaluate education programmes and policies	i) EMIS feeds findings back to schools (Y/N)	<ul style="list-style-type: none"> Yes. School based profiles are in place and requires updating with newly available EMIS data
Pillar 2: Education and Skills	OUTCOME 5: By 2018, Namibia is implementing policies and programmes that improve learning outcomes at all levels	5.1 By 2018, MoE has enhanced capacity at all levels to better plan, monitor and evaluate education programmes and policies	ii) MoE strategy for improving transition to secondary education (Y/N)	<ul style="list-style-type: none"> Yes. Universal Secondary Education implemented
Pillar 2: Education and Skills	OUTCOME 5: By 2018, Namibia is implementing policies and programmes that improve learning outcomes at all levels	5.2 By 2018, key education policies (ECD, educators, learner pregnancy & inclusive education) are reviewed/ harmonized and their implementation strategies approved by MoE	i) Harmonized ECD and educator policies completed (Y/N) ii) implementation strategies for learner pregnancy and inclusive education policies (Y/N)	<ul style="list-style-type: none"> Yes. ECD Strategic Framework in place. Yes. Learner pregnancy and Inclusive Education Policy in place. Yes. Learner pregnancy policy analysis completed.
Pillar 2: Education and Skills	OUTCOME 5: By 2018, Namibia is implementing policies and programmes that improve learning outcomes at all levels	5.3 By 2018, all schools in Namibia are implementing and monitoring standards and regulations for effective and conducive teaching and learning	i) % of school without toilet facilities (Baseline: 20%; Target: < 10%)	<ul style="list-style-type: none"> Kavango East and Kavango West remain the most poorly serviced regions, with respectively 59.5% and 58% of schools having toilets There has been a remarkable improvement in the provision of the sanitary services to schools countrywide, and these are the only regions where such services have reached less than 70% of the schools.
Pillar 2: Education and Skills	OUTCOME 5: By 2018, Namibia is implementing policies and programmes that improve learning outcomes at all levels	5.3 By 2018, all schools in Namibia are implementing and monitoring standards and regulations for effective and conducive teaching and learning	ii) Education sector plans stipulate procedures for reporting and acting against violence in schools (Y/N)	<ul style="list-style-type: none"> Yes. National Safe Schools Framework in draft.
Pillar 2: Education and Skills	OUTCOME 5: By 2018, Namibia is implementing policies and programmes that improve learning outcomes at all levels	5.4 By 2016, young people demonstrate improved knowledge and skills for informed decisions on HIV prevention and SRH	i) % of Grade 6 learners who reach the minimum level on SACMEQ HIV-AIDS knowledge test	<ul style="list-style-type: none"> No data. Awaiting new SACMEQ data
Pillar 2: Education and Skills	OUTCOME 5: By 2018, Namibia is implementing policies and programmes that improve learning outcomes at all levels	5.4 By 2016, young people demonstrate improved knowledge and skills for informed decisions on HIV prevention and SRH	ii) HIV/AIDS indicators integrated into EMIS	<ul style="list-style-type: none"> Yes. 5 CSE indicators integrated in the EMIS.
Pillar 2: Education and Skills	OUTCOME 5: By 2018, Namibia is implementing policies and programmes that improve learning outcomes at all levels	5.5 By 2017, 60% of existing ECD centers meet the minimum standards and are managed by qualified educators	i) % of ECD centers meeting the standards	<ul style="list-style-type: none"> No data.
Pillar 2: Education and Skills	OUTCOME 5: By 2018, Namibia is implementing policies and programmes that improve learning outcomes at all levels	5.5 By 2017, 60% of existing ECD centers meet the minimum standards and are managed by qualified educators	ii) % of educators qualified	<ul style="list-style-type: none"> No data.
Pillar 2: Education and Skills	OUTCOME 5: By 2018, Namibia is implementing policies and programmes that improve learning outcomes at all levels	5.9 By 2018, national and regional education plans and school curriculum are responsive to emergencies and emerging sustainable development issues and values	i) Updated contingency plans (Y/N)	<ul style="list-style-type: none"> Yes. Regional training and capacity development completed in 2015. Inputs provided to drought action plan in 2016
Pillar 2: Education and Skills	OUTCOME 5: By 2018, Namibia is implementing policies and programmes that improve learning outcomes at all levels	5.10 By 2018, out-of-school children and most at risk adolescents and adults have improved access to second chance education and skills	i) Strategy developed and implemented for reaching out of school children (Y/N)	<ul style="list-style-type: none"> Yes. Action plan developed and steering committee established

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Pillar	Outcome	Output	Output indicator	Summary of Results
Pillar 3: Health	OUTCOME 6: By 2018, Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.3 By 2018, Public and Higher learning institutions, CSOs, and youth centers provide improved comprehensive sexuality education and HIV prevention for out-of-school young people and key populations.	Number of CSOs and youth centers providing comprehensive sexuality education and HIV prevention,	<ul style="list-style-type: none"> 50 schools trained in CSE, through CSE online training
Pillar 3: Health	OUTCOME 6: By 2018, Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.3 By 2018, Public and Higher learning institutions, CSOs, and youth centers provide improved comprehensive sexuality education and HIV prevention for out-of-school young people and key populations.	Number of young people reached with comprehensive sexuality education and HIV prevention at community level and youth centers	<ul style="list-style-type: none"> 5,000 adolescents provided with comprehensive sexual education through adolescents living with HIV teen clubs.
Pillar 3: Health	OUTCOME 6: By 2018, Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.6 By 2018, MoHSS able to coordinate, plan, implement and monitor non-communicable diseases prevention and control	Multi-sectoral coordination mechanism for NCDs in place,(Y/N)	<ul style="list-style-type: none"> No. Strategy development process underway
Pillar 3: Health	OUTCOME 6: By 2018, Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Number of NAFIN progress reports produced	<ul style="list-style-type: none"> 4 NAFIN meetings were held with meeting minutes produced.
Pillar 3: Health	OUTCOME 6: By 2018, Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.7 By 2018, NAFIN able to report on the implementation of Scaling up multi-sectoral nutrition country plan.	Number of regions implementing the Scaling-up Multi-Sectoral Nutrition Country Plan	<ul style="list-style-type: none"> 14. All the regions are implementing nutrition activities that are guided by the SUN-CIP
Pillar 3: Health	OUTCOME 6: By 2018, Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.8 By 2018, Open Defecation Free (ODF) status achieved by all communities where CLTS is being implemented	No. of constituencies implementing Community Led Total Sanitation-CLTS (Baseline - 0; Target - 6)	<ul style="list-style-type: none"> None. However, In 2017 UNICEF, will be targeting 160 communities. 4 constituencies will be targeted to implement CLTS.
Pillar 3: Health	OUTCOME 6: By 2018, Namibia has accountable and well-coordinated multi-sectoral mechanisms to reduce the burden of priority diseases and conditions, address social, economic and environmental determinants of health and improve health outcomes.	6.8 By 2018, Open Defecation Free (ODF) status achieved by all communities where CLTS is being implemented	Proportion of urban and rural households with access to improved sanitation facilities	<ul style="list-style-type: none"> 17 (Rural) 53 54 (Urban)

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Pillar	Outcome	Output	Output indicator	Summary of Results
Pillar 3: Health	OUTCOME 7: By 2018, Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated, and equitable health care.	7.4 By 2018, women and men, key populations and young people have access to comprehensive HIV counseling and testing and prevention services	Number of young men circumcised	<ul style="list-style-type: none"> 66,488 cumulative number VMMC done by the end of 2016
Pillar 3: Health	OUTCOME 7: By 2018, Namibia has a strengthened health system that delivers quality, accessible, affordable, integrated, and equitable health care.	7.4 By 2018, women and men, key populations and young people have access to comprehensive HIV counseling and testing and prevention services	Percentage of young people receiving HCT services	<ul style="list-style-type: none"> None. No new survey has been conducted give us a clear idea of the exact progress.
Pillar 4: Poverty Reduction	OUTCOME 8: By 2018, Namibia has adopted and is implementing effectively and in a coordinated manner policies and strategies to reduce poverty and vulnerability which are informed by evidence on the causes of poverty and vulnerability.	8.1 By 2016, key Government institutions, private sectors, CSOs and academia are better able to generate, analyze and disseminate evidence on the root causes of poverty and vulnerability in Namibia	Advocacy and policy responses in relation to poverty and vulnerability include consideration of HIV as a potential causal factor of poverty and vulnerability (Y/N)	<ul style="list-style-type: none"> Yes. NIMD and Poverty Mapping completed and disseminated to all 14 regions
Pillar 4: Poverty Reduction	OUTCOME 8: By 2018, Namibia has adopted and is implementing effectively and in a coordinated manner policies and strategies to reduce poverty and vulnerability which are informed by evidence on the causes of poverty and vulnerability.	8.1 By 2016, key Government institutions, private sectors, CSOs and academia are better able to generate, analyze and disseminate evidence on the root causes of poverty and vulnerability in Namibia	Number of national dialogues on poverty and vulnerability held and recommendations adopted.	<ul style="list-style-type: none"> 14. All regions were covered with Poverty Dialogues through the MPESW, and one National Conference on Poverty Eradication held in 2015.
Pillar 4: Poverty Reduction	OUTCOME 8: By 2018, Namibia has adopted and is implementing effectively and in a coordinated manner policies and strategies to reduce poverty and vulnerability which are informed by evidence on the causes of poverty and vulnerability.	8.1 By 2016, key Government institutions, private sectors, CSOs and academia are better able to generate, analyze and disseminate evidence on the root causes of poverty and vulnerability in Namibia	Number of studies on poverty and vulnerability approved by the Research Council and conducted.	<ul style="list-style-type: none"> No data.
Pillar 4: Poverty Reduction	OUTCOME 9: By 2018, the National Gender Plan of Action and Gender Based Violence Plan of Action are being implemented effectively	9.2 By 2018 the Technical Capacities of MGECW Staff and other OMAs is improved to effectively implement the NGPA and GBVPA	% MGECW staff and other OMAs with specialized skills in Gender	<ul style="list-style-type: none"> No data. However, Gender Responsive Budgeting training conducted for the Parliament, and Cabinet has adopted a Resolution to roll out the GRB to all sectors (OMAs)
Pillar 4: Poverty Reduction	OUTCOME 9: By 2018, the National Gender Plan of Action and Gender Based Violence Plan of Action are being implemented effectively	9.2 By 2018 the Technical Capacities of MGECW Staff and other OMAs is improved to effectively implement the NGPA and GBVPA	Number of Graduates who completed the Gender studies at UNAM and Polytechnic of Namibia	<ul style="list-style-type: none"> No data.
Pillar 4: Poverty Reduction	OUTCOME 9: By 2018, the National Gender Plan of Action and Gender Based Violence Plan of Action are being implemented effectively	9.5 By the end of 2018, guidelines for providing comprehensive multi-sectoral response services (SRH, HIV, psycho-social, justice and economic) to GBV survivors are developed and implemented	Number of meetings held between the UN and GRN where advocacy is made on the linkages between GBV, SRH and HIV	<ul style="list-style-type: none"> 4 meetings with government ministries (gender, health, safety, Justice)
Pillar 4: Poverty Reduction	OUTCOME 9: By 2018, the National Gender Plan of Action and Gender Based Violence Plan of Action are being implemented effectively	9.5 By the end of 2018, guidelines for providing comprehensive multi-sectoral response services (SRH, HIV, psycho-social, justice and economic) to GBV survivors are developed and implemented	Protocols developed and finalized (Y/N)	<ul style="list-style-type: none"> Yes. Draft available.

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Pillar	Outcome	Output	Output indicator	Summary of Results
Pillar 4: Poverty Reduction	OUTCOME 9: By 2018, the National Gender Plan of Action and Gender Based Violence Plan of Action are being implemented effectively	9.6 By 2018 State Agencies systems for the timely collection, analysis, utilization and dissemination of up to date data on GBV strengthened	Research on GBV prevalence and causes conducted and report produced (Y/N)	<ul style="list-style-type: none"> Yes. Study in progress. Data collection completed
Pillar 4: Poverty Reduction	OUTCOME 10: By 2018, the national social protection system is strengthened and expanded to poor and vulnerable households and individuals	10.1 By 2016, MGECW has the institutional capacity to expand the child welfare grant system	Proportion of poor and vulnerable children receiving social grants	<ul style="list-style-type: none"> No data. However, the target was reached as more vulnerable families were covered on the grant system
Pillar 4: Poverty Reduction	OUTCOME 11: By 2018, Namibia has reviewed, and is implementing, policies and strategies which ensure that severely poor and vulnerable households have access to and are utilizing productive resources and services for food and nutrition security and sustainable income generation.	11.1 National authorities adopt improved fisheries and agricultural development policies and strategies incorporating emerging food and nutrition issues.	<p>Number of policies and strategies reflecting emerging food security issues and international commitments adopted.</p> <p>Baseline: none. Target: two policies and strategies</p>	<ul style="list-style-type: none"> Yes. National Food and Nutrition Security Policy formulated; Inland Fisheries Resources Policy developed
Pillar 4: Poverty Reduction	OUTCOME 11: By 2018, Namibia has reviewed, and is implementing, policies and strategies which ensure that severely poor and vulnerable households have access to and are utilizing productive resources and services for food and nutrition security and sustainable income generation.	11.2 By 2018, the capacity of government ministries (MTI, MLRGHRD) and other development partners to provide support aimed at promoting sustainable income generation activities among the vulnerable is enhanced.	<p>Existence of SME database for enhanced coordination, monitoring and tracking income generation activities developed and implemented.</p> <p>Number of SMEs accessing information on business support services.</p>	<ul style="list-style-type: none"> No data.
Pillar 4: Poverty Reduction	OUTCOME 11: By 2018, Namibia has reviewed, and is implementing, policies and strategies which ensure that severely poor and vulnerable households have access to and are utilizing productive resources and services for food and nutrition security and sustainable income generation.	11.2 By 2018, the capacity of government ministries (MTI, MLRGHRD) and other development partners to provide support aimed at promoting sustainable income generation activities among the vulnerable is enhanced.	Number of food security reports/updates produced by NamVAC per annum.	<ul style="list-style-type: none"> 2. Both the March and October 2016 reports are completed and available. The annual vulnerability assessment has been completed and the report is yet to be released officially by OPM.
Pillar 4: Poverty Reduction	OUTCOME 11: By 2018, Namibia has reviewed, and is implementing, policies and strategies which ensure that severely poor and vulnerable households have access to and are utilizing productive resources and services for food and nutrition security and sustainable income generation.	11.2 By 2018, the capacity of government ministries (MTI, MLRGHRD) and other development partners to provide support aimed at promoting sustainable income generation activities among the vulnerable is enhanced.	Number of food management and monitoring systems in place and utilized by partners.	<ul style="list-style-type: none"> 2. Food and Nutrition Security Monitoring and Namibia School Feeding Information System are all in place and functioning.

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Pillar	Outcome	Output	Output indicator	Summary of Results
Pillar 4: Poverty Reduction	OUTCOME 12: Institutional frameworks and policies needed to implement the Environmental Management Act (2007); National Climate Change Policy (2011); Tourism Bill and Strategy; and Parks and Protected Areas Management Bill; and International Conventions, are in place and are being implemented effectively.	12.1 Strengthened environmental institutions, which are fully equipped with relevant operational standards, guidelines, procedures and specialized skills, for implementing the Environmental Management Act (7 of 2007) by 2018.	Number of environmental institutions fully equipped with relevant standards, guidelines and specialized skills.	<ul style="list-style-type: none"> 4. NIRP for Energy developed Guidelines for integrated fire management completed. SOPs for protected areas (MET- Depart of Parks and Wildlife Mgt) developed Draft Pollution and Waste Management Bill (MET Department of Environmental Affairs) developed
Pillar 4: Poverty Reduction	OUTCOME 12: Institutional frameworks and policies needed to implement the Environmental Management Act (2007); National Climate Change Policy (2011); Tourism Bill and Strategy; and Parks and Protected Areas Management Bill; and International Conventions, are in place and are being implemented effectively.	12.2 Adoption and utilization of renewable energy and energy efficient technologies in public, commercial and residential buildings by 2015.	Indicator: Number of public and commercial buildings using renewable energy and energy efficient technologies.	<ul style="list-style-type: none"> No data. However, MET building, Woerman Brock and others are using energy efficient technologies
Pillar 4: Poverty Reduction	OUTCOME 12: Institutional frameworks and policies needed to implement the Environmental Management Act (2007); National Climate Change Policy (2011); Tourism Bill and Strategy; and Parks and Protected Areas Management Bill; and International Conventions, are in place and are being implemented effectively.	12.3 Sector-specific operational plans are prepared to implement the Climate Change Strategy and Action Plan, Tourism Bill and Strategy; and the Parks and Protected Areas and Wildlife Management Bills by 2016 and beyond.	Indicator: Number of line ministries, RCs, communities and partners implementing the national policy and strategy on climate change; and Existence of the Tourism & Protected Areas and Wildlife Management Bills.	<ul style="list-style-type: none"> 4 Ministries. MAWF, Ministry Mines and Energy, OPM, MET 7 RCs. Kavango East and West, Oshikoto, Oshana, Ohangwena, Omusati, Kunene Yes. Draft Parks and Wildlife Management Bill approved by MET internally and ready for comprehensive public participation prior to submission to Cabinet for approval.

ANNEX III: Acronyms used in report

AIDS	Acquired Immunodeficiency Syndrome
ACC	Anti-Corruption Commission
ACRWC	African Charter on the Rights and Welfare of the Child
AEFI	Adverse Events Following Immunization
AFHS	Adolescent Friendly Health Services
ALHIV	Adolescents Living with HIV
ART	Antiretroviral Therapy
ASC	Annual School Census
ASRH	Adolescent Sexual and Reproductive Health
ATIB	Access to Information Bill
AU	African Union
AVW	African Vaccination Week
BBB	Better Business Bureau
BSC	Balance Score Card
CEDAW	Convention on the Elimination of Discrimination Against Women
CCPA	Child Care and Protection Act
CFIT	China Funds-in-Trust
CLTS	Community Led Total Sanitation
CO	Country Office
CRC	Convention on the Rights of the Child
CRS	Congenital Rubella Syndrome
CRVS	Civil Registration and Vital Statistics
CSE	Comprehensive Sexuality Education
CSO	Civil Society Organization
DRR/M	Disaster Risk Reduction/Management
ECD	Early Childhood Development
EMIS	Education Management Information System
EmONC	Emergency Obstetric and Neonatal Care
eMTCT	Elimination of Mother-to-Child Transmission
ENAP	Every Newborn Action Plan
EPI	Expanded Programme on Immunization
ERF	Emergency Response Framework
ETCB	Electronic Transactions and Cybercrime Bill
FAO	Food and Agriculture Organization of the United Nations
FLON	First Lady of Namibia
FNSM	Food and Nutrition Security Monitoring
FP	Family Planning
GBV	Gender-based Violence
GBVPA	Gender-based Violence Plan of Action
GDP	Gross Domestic Product
GRN	Government of the Republic of Namibia
HEW	Health Extension Workers
HIV	Human Immunodeficiency Virus
HPP	Harambee Prosperity Plan
HRAP	Human Rights Action Plan
HRH	Human Resources for Health
HTS	HIV Testing Services
HTC	HIV Testing and Counseling
ICT	Information and Communication Technology
ICCM	Integrated Community Case Management
IEC	Information, Education and Communication
IMNCI	Integrated Management of Neonatal and Childhood Illness
IOM	United Nations Migration Agency / International Organization of Migration
IPV	Inactivated Polio Vaccine
IPV	Intimate Partner Violence
IRDNC	Integrated Rural Development and Nature Conservation
ISOFS	International Society of Obstetric Fistula Surgeons

Summary of progress of UNPAF Results Groups towards UNPAF outcomes in support of national development priorities

IYCF	Infant and Young Child Feeding
JEE	Joint External Evaluation
LAC	Legal Assistance Centre
LSS	Life Saving Skills
M&E	Monitoring and Evaluation
MAWF	Ministry of Agriculture, Water and Forestry
MCHDs	Maternal and Child Health Days
MoEAC	Ministry of Education, Arts and Culture
MoE	Ministry of Education (as referred to in UNPAF)
MET	Ministry of Environment and Tourism
MoF	Ministry of Finance
MGECW	Ministry of Gender Equality and Child Welfare
MHAI	Ministry of Home Affairs and Immigration
MoHSS	Ministry of Health and Social Services
MICT	Ministry of Information and Communication Technology
MISP	Minimum Initial Service Package
MIRCO	Ministry of International Relations and Cooperation
MoJ	Ministry of Justice
MoTI	Ministry of Trade and Industry
MLR	Ministry of Land Reform
MNCAH	Maternal, Newborn, Child and Adolescent Health
MNCH	Maternal, Newborn and Child Health
MPESW	Ministry of Poverty Eradication and Social Welfare
MPNDR	Maternal Peri/Neonatal Death Review
MSM	Men who have sex with men
MSYNS	Ministry of Sport, Youth and National Service
MTCT	Mother-to-Child Transmission
NACS	Nutrition Assessment, Counseling and Support
NACSO	Namibian Association of Community Based Natural Resource Support Organisation
NAFIN	Namibia Alliance for Improved Nutrition
NAMOD	Namibia Tax Benefit Micro Simulation Model
NamVAC	Namibian Vulnerability Assessment
NANTU	National Teacher's Union
NANASO	Namibia Networks of AIDS Service Organisations
NAPWU	Namibia Public Worker's Union
NaSIS	Namibia School Feeding Information System
NCD	Non-communicable Disease
NCS	Namibian Correctional Services
NDP4	Fourth National Development Plan
NRCS	Namibia Red Cross Society
NDP5	Fifth National Development Plan
NGPA	National Gender Plan of Action
NGO	Non-governmental Organization
NHA	National Health Account
NHTC	Namibia Health Training Centre
NIP	National Immunization Program
NMPNDR	National Maternal Peri/Neonatal Death Review
NPC	National Planning Commission
NPRS	National Population Registration System
NSA	National Statistics Agency
NSF	National Strategic Framework
NUST	Namibia University of Science and Technology
NWHN	Namibia Women's Health Network
ODF	Open Defecation Free
OMA	Offices, Ministries and Agencies
OPG	Office of the Prosecutor General
OPM	Office of the Prime Minister
PARMaCM	Programme for Accelerating the Reduction of Maternal and Child Mortality
PCV	Pneumococcal Conjugate Vaccine
PLHIV	People Living with HIV

PMTCT	Prevention of Mother to Child Transmission
RCO	Resident Coordinator's Office
RH	Reproductive Health
SACMEQ	Southern and Eastern Africa Consortium for Monitoring Education Quality
SADC	Southern African Development Community
SADC-PF	Southern African Development Community Parliamentary Forum
SASG	Social Accountability and School Governance
SDGs	Sustainable Development Goals
SBCC	Social and Behaviour Change Communication
SRH	Sexual and Reproductive Health
SRHR	Sexual and Reproductive Health and Rights
SSC	South-South Cooperation
SV	Sexual Violence
SW	Sex Worker
T4D	Technology for Development
TiP	Trafficking in Persons
TB	Tuberculosis
TWG	Technical Working Group
UHC	Universal Health Coverage
UN	United Nations
UNAIDS	The Joint United Nations Programme on HIV and AIDS
UNAM	University of Namibia
UNCAC	United Nations Convention Against Corruption
UNCT	United Nations Country Team
UNDAF	United Nations Development Assistance Framework (2006-2010)
UNDP	United Nations Development Programme
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UNODC	United Nations Office on Drug and Crime
UNPAF	United Nations Partnership Framework (2014-2018)
UPR	Universal Periodic Review
VAC	Violence Against Children
VoT	Victims of Trafficking
VPD	Vaccine Preventable Diseases
WASH	Water, Sanitation and Hygiene
WFP	World Food Programme
WHO	World Health Organization
WLHIV	Women Living with HIV

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