



THE SITUATION OF VULNERABLE
CHILDREN AND ADOLESCENTS IN
BELARUS

**OVERVIEW OF EVIDENCE AND
INVESTMENTS IN DATA**

2020

ACKNOWLEDGEMENTS

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**Dr Rashed Mustafa Sarwar,
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In February 2017, UNICEF in Belarus became the first country office globally initiating development of a Strategic action plan on Data for Children Investments. This engagement in a deliberate, strategic process allowed to determine the CO's investments in strengthening the Child Rights Monitoring system in Belarus. The specific attention was paid to knowledge management in the CO, better packaging of evidence products (policy briefs, factsheets, dashboards, visuals) and boosting important interactions and collaboration around data with a premise that smart demand, supply and use of data in strategic partnerships drive better results for children.

M&E team at UNICEF in Belarus managed to strengthen the supply of data ensuring data leadership, availability and quality of data for children. Since 2017, the CO has invested in three major surveys that generated appropriate, reliable, and timely data to meet the demands of decision-makers and other stakeholders. First, engaging with UNECE and UNFPA the Generations and Gender Survey was implemented in 2017. In 2018, in partnership with Belstat (Belarus National Statistics Committee) with quality assurance from RO a National survey to assess the situation of people with disabilities (12,600 households) was conducted. The survey results, launched jointly with Belstat and line ministries, provided necessary evidence for advocacy on key issues such as inclusive education and informed the country's first report to the CRPD Committee. In partnerships with the World Bank the Multi-Indicator Cluster Survey (MICS 6). MICS6 was successfully completed and launched in January 2020 providing the Government and UNICEF with disaggregated data on key child rights, including baselines for 20 important SDG indicators.

The current report represents a brief overview of evidence and digital data tools in which UNICEF Belarus invested together with partners. Generated knowledge drove informed demand for data and strategic positioning of child rights in national planning systems. In 2018, as a result of the successful evidence-based advocacy the Government and the MAPS mission in a consultative process chose "Future generation orientation: Adolescence and Youth" as a priority acceleration area in the SDGs implementation. Child rights monitoring programme was strongly contributing to building consensus around the benefits of investing more in addressing adolescent vulnerabilities to maintain the success the country has obtained investing in the "first decade".

NATIONAL STUDY OF VIOLENCE AGAINST CHILDREN IN BELARUS



Summary

The report provides a nationally representative assessment of the scale and prevalence of violence against children (VAC) in the home, schools, institutions and communities. With focus on specific environments, the analysis examines prevention and response measures undertaken by different stakeholders to protect children from violence.

PARTNERS

The study was initiated at the request of the National Commission on the Rights of the Child of the Republic of Belarus and carried out in close cooperation with the Ministries of Education, Health, Interior, Labour and Social Protection.



METHODS

A mixed methods design (a combination of self-administered surveys and focus groups) was applied for data collection and analysis. The fieldwork was conducted in October - November 2016 by the Institute of Sociology under Belarus' National Academy of Sciences.

A quantitative analysis examined survey data obtained from 5,126 children, 1,406 parents (guardians) and 1,129 professionals. A qualitative analysis was carried out using data collected through 10 focus group discussions with 106 professionals across the country.

ETHICS AND QUALITY ASSURANCE

ETHICAL REVIEW

The methodology of the study was evaluated according to the ethical review procedure of UNICEF Procedure for Ethical Standards in Research, Evaluation, Data Collection and Analysis (document number: CF/PD/DRP/2015-001, effective date: 01 April 2015). The UN Convention on the Rights of the Child's (CRC) principles of the best interests of the child, non-discrimination and participation were used as the guiding rules in the framework of the present study involvement and focus on children in research, evaluation, data collection and analysis.

A special ethical review panel was established with the representatives from various research institutions under the Ministries of Education, Health, Interior, Labor and Social Protection.

Parents and professionals have provided consent.

To ensure that families of possible child participants were familiar with the study, a special informed consent form for child participation was developed to be signed by the guardians and the caregivers/parents.

External peer review of the report was done by Universalia (<https://www.universalia.com>)

Sources

This section is based primarily on the results of the National research on the assessment of the scale and prevalence of violence against children in the Republic of Belarus. Report Summary: <https://bit.ly/3bYhupT>



KEY FINDINGS

VIOLENCE IN THE HOME REMAINS COMMON, AND GENERATES NEGATIVE OUTCOMES

- One in six 5th-7th graders and one in four 8th-11th graders from secondary schools reported exposure to physical and/or psychological violence in the home;
- More than half of children in special closed type educational institutions and six in ten boys from the penitentiary institution reported experiencing violence at home before entering institutions.

INTER-GENERATIONAL CYCLE OF VIOLENCE EXISTS

- 56.8% of parents who reported that their parents applied physical violence to them all the time applied physical punishment to their own children, in comparison to 17.6% of parents who never had such experiences;
- Parents' exposure to physical punishment in childhood increases the chances of their children being subjected to physical punishment by almost three-fold.

BOYS & GIRLS EXPERIENCE VIOLENCE DIFFERENTLY

- More than one in four children from all groups were exposed to different types of violence in their communities. Boys are more exposed to physical violence, while girls faced more psychological violence in different environments. Girls reported more exposure to sexual abuse.

CYBERVIOLENCE EMERGES AS A NEW THREAT

- From one in ten (5th-7th graders) to one in five (8th-11th graders) reported exposure to violence from someone they knew from the Internet.

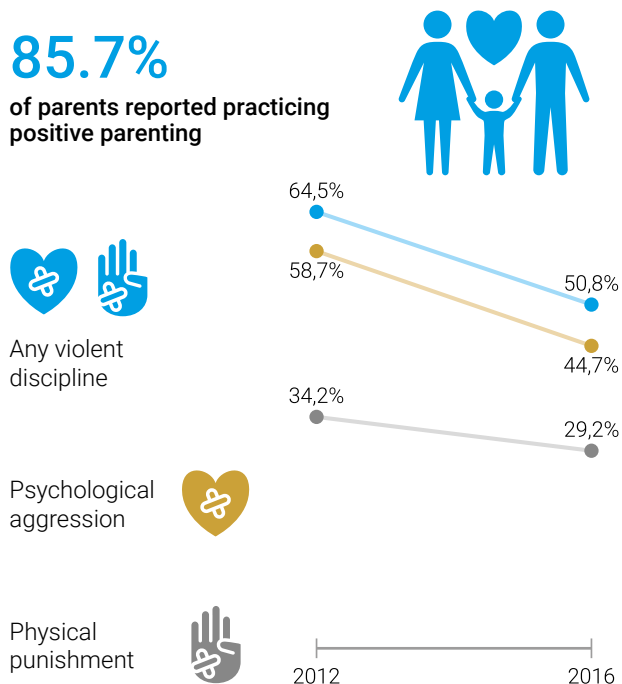
INSTITUTIONALIZED CHILDREN REMAIN VERY VULNERABLE TO VIOLENCE

- 30.4% of the children in special closed-type educational institutions indicated exposure to physical violence; more than 43.4% reported psychological violence in the past school year; and one in ten (9.8%) reported exposure to sexual violence;

- Over a quarter of the total number of boys (31.4%) in penitentiary institutions reported that they had experienced one or several forms of physical violence; 33.7% had experienced psychological violence.

PARENTS' USE OF VIOLENT DISCIPLINE IS WIDESPREAD, BUT THE SITUATION IMPROVES OVER TIME

- 85.7% of parents reported practicing positive parenting, 50.8% had still used violent disciplinary measures over the past month (SDG indicator 16.2.1). Usage of violent discipline methods decreased by 13.7 percentage points compared to MICS 2012 but the level is still high.



LOW AWARENESS AND LIMITED CAPACITIES ARE THE STUMBLING BLOCKS FOR THE FIGHT AGAINST VAC

- Low awareness of children and parents regarding existing types of violence against children;
- Limited capacity of professionals to identify, register, report and address incidents of violence.

RECOMMENDED INTERVENTIONS AND STUDY USE

Develop measures to ensure that all children receive age appropriate education on types of violence, reporting mechanisms and available support services.

Develop inter-agency action plan on prevention and responses to VAC and strengthen the national legal framework and policy on VAC prevention and response.

Enhance assistance services for children based on specific and individual needs. Promote changes in cultural and social norms that allow or justify violence against children.

On April 25, within a Round Table "Protecting children from violence. Conclusions and recommendations of the study of the prevalence of violence against children", the results of the study were presented.

Data was used during all thematic advocacy meetings (including high level), thematic Round tables and meetings with partners representing government and NGOs.

STUDY ON THE USE OF PSYCHOACTIVE SUBSTANCES BY ADOLESCENTS AND YOUTH IN BELARUS



Summary

Reducing vulnerability of adolescents to risk factors and creating enabling environment for meaningful participation of adolescents in decision-making is one of the priority areas of the UNICEF country programme document for Belarus for 2016-2020. The report provides an overview of the use of psychoactive substances among adolescents and youth according to state statistics and previous social services. The analysis examines results of 2016 study on use of psychoactive substances by adolescents and the youth. It further calculates the integrated indicator of safe behaviour among adolescents and the youth.

PARTNERS

The study was initiated by the Ministry of Health jointly with the UNICEF office in the Republic of Belarus in coordination with the Ministry of Education.



METHODS

Data collection was carried out by means of group questionnaire at the respondents' work and study places. The fieldwork was conducted in September 2016 – January 2017.

The sample size was 870 people at the age of 14-24 (361 out of them were aged 14-18) with the tolerable error of 3.3% and a confidence level of 95%. The number of survey points was determined on the basis of a given number of respondents of different age groups who need to be interviewed in each city, as well as with due account of survey methodology (group questionnaire survey in educational institutions and workplaces), suggesting availability of the sufficient number of respondents in the selected institutions for the formation of such groups.

ETHICS AND QUALITY ASSURANCE

The questionnaire was developed in accordance with the objectives of the study and was tested in the target group of the study. The questionnaire was approved by the Ministry of Education of the Republic of Belarus. Restrictions and changes were made in accordance with the recommendations of the National Institute of Education regarding the acceptability of certain issues for the target group. General ethical requirements for the design of such questionnaires, the age of the respondents and the availability of questions for understanding were taken into account.

Sources

This section is based primarily on the results of the Study on the use of psychoactive substances by adolescents and youth in the Republic of Belarus.

Full report: <https://bit.ly/2VcXvw0>

KEY FINDINGS

The study findings reveal a rather troubling situation with use of psychoactive substances by adolescents and youth in the country:



85.7%
of adolescents (14-19 years)
practice safe behaviour in all
its elements

Among them:



47.8%



51.5%

Elements of unsafe behaviour: tobacco smoking, alcohol consumption, unsafe sexual behaviour, use of non-injecting drugs, use of injecting drugs.

SMOKING AMONG YOUNG PEOPLE IS AS PREVALENT AS IN THE ADULT POPULATION

- 25.4% of young people are currently smoking. Among adolescents aged 14-17 years, the share of smokers is 20.7%. More than half (58.4%) of smoking respondents smoke daily;
- Despite the legal ban on the sale of tobacco to minors, 40.9% of under-aged smokers buy cigarettes personally. 42.4% of young people aged 14-17 are assisted by other people to buy cigarettes.

ALCOHOL CONSUMPTION AMONG YOUTH AND ADOLESCENTS HAS HIGH PREVALENCE AND IS SOCIALLY ACCEPTED AS A NORM

- 0.6% of young people have consumed alcohol (among minors aged 14-17 years, 46.6% consumed alcohol);

- Over the past 12 months alcohol was consumed by 59.9% of young people;
- Other people buy alcohol for minor adolescents (aged 14-17) much more frequently than for adults (aged 18-24) – 22.5% and 5.4% respectively;
- Alcohol consumption among young people is primarily connected with leisure.

DRUG USE IS NOT WIDESPREAD, BUT STILL NOT NEGLIGIBLE

- Non-injecting drugs were used by 4.4% of respondents aged 14-19 and 8.6% of respondents aged 20-24;
- Injected drugs were used by 1.7% of young people aged 14-19 and 1.3% aged 20-24;
- 18% of respondents noted that they were offered to try non-injecting drugs (smoking blends, weed, tablets, solutions, powder).

ADOLESCENTS LACK NECESSARY KNOWLEDGE ON THE DANGERS OF DRUGS, BUT DO NOT FEEL THE NEED FOR MORE INFORMATION

- incidental smoking of marijuana ("weed") is considered to be a manifestation of drug abuse by less than half of the respondents (49.3%). Among those who have tried non-injected drugs, only 24.1% consider episodic smoking of marijuana ("weed") a manifestation of drug abuse;
- Only 21.6% of study participants noted that they knew where to go in their city for consultation on the issue of alcohol and drug addiction;
- More than 90% of young people feel they do not need any information on the use of psychoactive substances ("rather no" and "no").

RECOMMENDED INTERVENTIONS AND STUDY USE

Based on the survey results, the following is recommended:

- Develop a set of measures aimed at prevention of PAS use and improvement of adolescents' safe behaviour at three levels – individual, community and environmental;
- Along with the main target group (young people), it is advisable to carry out PAS use prevention activities among minors and adult (full-age) population in order to form a responsible attitude towards prevention of PAS use by adolescents;
- When developing and implementing awareness raising programmes for the youth on the prevention of PAS use, it is necessary to take into account the low interest of this target group in obtaining such information.
- The results of the study were provided to the Ministry of Health and members of the Council on the Rights of the Child.
- The data was used by UN agencies (UNODC, WHO) in developing strategies and policies for the prevention of substance use by adolescents and youth.

FINDINGS FROM GENERATIONS AND GENDER SURVEY



Summary

Results of the study provide factors that influence family formation, having children, and relations between younger and older generations.

PARTNERS

The Programme is coordinated by the Population Activities Unit (PAU) of the United Nations Economic Commission for Europe (UNECE) in Geneva. The study is financed by the Government of Russian Federation, UNFPA in Belarus and UNICEF in Belarus.

METHODS

A panel survey with at least three waves at an interval of three years. It uses a probability sample representing a country's non-institutionalized population of 18–79 year-old men and women. Face-to-face interviews were conducted with one person in a household in each wave. The method of Computer-Assisted Personal Interviewing was used.

The fieldwork of the first wave was conducted in May – November 2017.

ETHICS AND QUALITY ASSURANCE

The Generations and Gender Survey is part of the international GGP programme, where the major decisions upon steering the programme are taken by the Consortium Board comprised of representatives from the leading world research institutes, ensuring the ethics and quality.

Sources

This section is based primarily on the preliminary results of the study "Family formation, stability of family relations and fertility in the changing socioeconomic conditions of the life of Belarusians".

Preliminary results of the study: <https://bit.ly/2Xg6MXy>

KEY FINDINGS

CHILDCARE REMAINS PRIMARILY A TASK OF WOMEN

- Public childcare services for children under 3 are underdeveloped, and preschool facilities not always available; hence, the major burden of childcare falls on parents and close relatives;
- 35,6 % of families regularly rely on the support of people outside their household in childcare. None of the families offer pay for these services;
- Housework and childcare are considered to be tasks for women, while men prioritize outside their jobs and careers.

FAMILIES WITH CHILDREN WITH DISABILITIES FACE MULTIPLE RISKS AND DEPRIVATIONS

- 40% of families with children with disabilities face subjective poverty;
- 60% of mothers and 15% of fathers of children with disabilities have to limit their job activity;
- 38.6% of women and 26% of men in families with children with disabilities felt depressed in the recent week;
- The majority of parents report excellent relationship with a child with disabilities.

SINGLE-PARENT FAMILIES ALSO REQUIRE MORE SUPPORT

- Parents of 13% of children in the survey have separated. The analysis shows that growing up in a single-parent family is associated with lower chances of getting higher education or creating a family in the future;
- For families with children with disabilities the share of single-parent families is higher – 23%;
- The risks of absolute poverty for single-parent families are as high as 50%. 20.7% of these families face different kinds of material deprivations.

THE INTERGENERATIONAL EDUCATION MOBILITY IS LOW FOR THE YOUNG GENERATIONS

- The most mobile cohort in terms of intergenerational income mobility is the cohort born in 1948–1957: 80,9% of men and 83% of women changed their educational level as compared to their parents. The educational mobility for those born in the youngest cohort educated in independent Belarus is low (in part this low mobility is explained by high educational attainment overall).

RECOMMENDED INTERVENTIONS AND STUDY USE

- Increase the supply of services, including but not limited to childcare services, to families with children, especially to the most vulnerable families: families with children with disabilities; and single-parent families
- Promote men's involvement in childcare and fatherhood
- Design and introduce policies aimed at targeted financial support of families with children in poverty
- Ensure availability and quality of childhood development and education to promote intergenerational education mobility

THEMATIC EVALUATION OF ADOLESCENT INTERVENTIONS



Summary

Results of the study provide factors that influence family formation, having children, and relations between younger and older generations.

PARTNERS

This study evaluated Government interventions and UNICEF contribution to reducing vulnerabilities, strengthening resilience and promoting the rights of adolescents in Belarus examines the national policies and programs advancing rights of adolescents over 2011-2017 period. This review identifies core bottlenecks as they are related to adolescents' rights realization and offers potential strategic and sectoral solutions towards achieving SDGs for adolescents. The review identifies vulnerable groups of adolescents or the ones who are more exposed to risks than their peers and provides recommendations on how remove the barriers these groups face.



METHODS

Including the team leader, the evaluation team (ET) included three experts in adolescent participation and empowerment, child protection; health, healthy lifestyles, injuries and HIV prevention; and education and social/child protection. The review was conducted from February to September 2018, with 12-day mission to Belarus. The ET conducted more than 30 semi-structured interviews and focus groups with a diverse range of beneficiaries and partners, including Government officials, local authorities, NGOs, and adolescents.

A large set of different and complementary evidence was collected and analyzed by utilizing both qualitative and quantitative data collection methods that included: a desk review, semi-structured interviews with Government partners, UN partners (UNAIDS and UNFPA), NGOs, international organizations, etc.; collection of information from line ministries to capture their definitions of vulnerabilities and vulnerable groups of adolescents and relevant national policies, strategies and plans. Focus Group Discussions with adolescent clients of Youth Friendly Health Center (YFHC) in Minsk and members of the Youth Parliament in Mogilev were conducted as well.

ETHICS AND QUALITY ASSURANCE

The review follows the United Nations Evaluation Group's Norms and Standards as well as the Ethical Guidelines for Evaluation. Special measures were put in place to ensure that the process is ethical and that the interviewees can openly express their opinions. Confidentiality was maintained. The content of the interviewees and focus groups was used to inform the analysis, and no direct reference were made to particular statements.

Ethical review of the inception report and all instruments was done by Health Media Lab IRB (<http://www.healthmedialabirb.com/>)



External peer review of the inception and final reports was done by Universalia Management Group (<https://www.universalia.com>)



Sources

This section is based primarily on the Thematic evaluation of Government interventions and UNICEF contribution to reducing vulnerabilities, strengthening resilience and promoting the rights of adolescents in Belarus, 2011-2017.

KEY FINDINGS

THE STUDY IDENTIFIED SPECIFIC VULNERABLE GROUPS OF ADOLESCENTS THAT REQUIRE MORE FOCUSED ATTENTION ARE:

- Adolescents with disabilities and special needs;
- Adolescents with mental health challenges and behaviour disorders;
- Adolescents, victims of violence, including bullying and cyberbullying;
- Adolescents who live in families with social risks;
- Adolescent groups who are at higher risk for HIV;
- Adolescents who are engaged in risky behavior, including drinking alcohol;

In 2017, 19% or 138 000 of 10-17 year olds were considered vulnerable.

SOCIAL NORMS ARE NOT SUPPORTING INCLUSION OF VULNERABLE ADOLESCENTS.

- Dominant views based on a medical model of disability, for example, prevent inclusion of children with disabilities, especially students with more complex needs, into mainstream education. The public holds negative views towards adolescents with HIV or mental health issues.

THERE IS A NUMBER OF LEGISLATIVE AND POLICY SHORTCOMINGS THAT CREATE BARRIERS TO VULNERABLE ADOLESCENTS.

- Insufficient regulations to make schools and healthcare facilities fully accessible create barriers for adolescents with disabilities to access education and healthcare
- Some challenges such as bullying and cyberbullying and mental health issues require system-wide legislative and policy solutions that do not exist.

INCONSISTENCIES IN AVAILABILITY AND QUALITY OF ADOLESCENTS-FOCUSED PROGRAMMES AND SERVICES ACROSS THE COUNTRY.

- Identified capacity gaps include limited educators' knowledge and skills in supporting adolescent experiencing mental health challenges and adolescents with complex special needs; insufficient healthcare professionals' knowledge and skills in providing services to adolescents at higher risk for HIV exposure.

UNDER-UTILIZED POTENTIAL OF IMPROVED CROSS-SECTORAL COLLABORATION, ESPECIALLY IN RESPONSE TO EMERGING ISSUES.

- Relevant ministries issue their instructions and guidance on addressing certain problems, but practical referral and follow up mechanisms for local implementation remain insufficient.
 - o There is insufficient collaboration of schools and healthcare providers in increasing awareness of adolescents on safe sex; smoking and alcohol use and substance use and addiction.

LIMITED VENUES AND PRACTICES OF ENGAGING NGOS INTO SUPPORTING VULNERABLE ADOLESCENTS.

- o NGOs and especially small NGOs face a number of challenges such as lack of funds to provide security deposits to participate in state tenders.
- o NGOs are well positioned to identify and work with vulnerable and hard to support adolescents as they may identify them and gain their trust easier than formal state funded partners

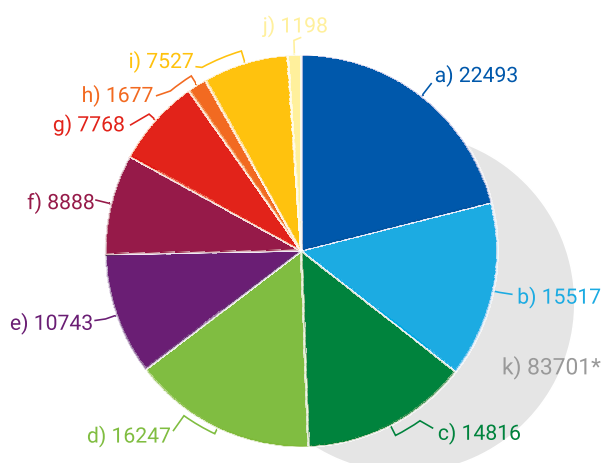
RECOMMENDED INTERVENTIONS AND STUDY USE

Advance enabling conditions for adolescents to realize their rights through improved cross-sectoral results-focused collaboration.

Focus on prevention and resilience building of adolescents; increase resilience of teenagers towards use of psychoactive substances, and improve psychosocial rehabilitation system for young drug users

Focus on promoting consistency in quality and availability of programs and services across the country.

Enhance inter-sectoral cooperation mechanisms and increase professionalism of specialists working with children with disabilities.



a) with special needs (age 9-17)	22 493
b) with registered disabilities (I-V degree of health loss)	15 517
c) under the surveillance as consuming psycho-active substances	14 816
d) orphans and children left without parental care	16 247
e) living in families at social risk *	10 743
f) under the individual preventive work performed by the Ministry of Interior	8 888
g) reported cases of obesity	7 768
h) reported cases of diabetes	1 677
i) newly registered cases of mental and behavioral disorders	7 527
j) convicted during the year (age 14-17)	1 198
k) living in poverty (age 10-17) *	83 701



KNOWLEDGE, ATTITUDES AND PRACTICES: ASSESSMENT OF EARLY CHILDHOOD DEVELOPMENT AND PARENTING IN BELARUS

Summary

The study identifies knowledge gaps, cultural beliefs and common practices among parents related to child development and well-being. The KAP explores three components of nurturing care: health and nutrition; responsive caregiving and opportunities for early learning; and safety and security.

PARTNERS

The technical, expert and financial support was provided by the United Nations Children's Fund (UNICEF) in the Republic of Belarus. The study was carried out in close cooperation with the Ministry of Education.



METHODS

A questionnaire survey was conducted with a representative sample of 805 parents of children aged 6 years and under, across seven regions of Belarus. The qualitative component was not intended to be generalizable; however, it provides insight, understanding and explanation of parenting experiences. It consisted of 12 focus group discussions with parents and 36 key informant interviews with professionals working with families of young children (e.g., nurses, pediatricians, kindergarten teachers). Groups were divided by gender and urban-rural residence. The interview topic guide generally followed a similar structure to the survey questionnaire in order to facilitate comparison and triangulation across both data sources.

ETHICS AND QUALITY ASSURANCE

The review follows the United Nations Evaluation Group's Norms and Standards as well as the Ethical Guidelines for Evaluation. Special measures were put in place to ensure that the process is ethical and that the interviewees can openly express their opinions. Confidentiality was maintained. The content of the interviewees and focus groups was used to inform the analysis, and no direct reference were made to particular statements.

Ethical review of the inception report and all instruments was done by Health Media Lab IRB (<http://www.healthmedialabirb.com/>)



External peer review of the inception and final reports was done by Universalialia Management Group (<https://www.universalialia.com/>)



Sources

This section is based primarily on the results of the study "Knowledge, attitudes and practices: Assessment of early childhood development and parenting in Belarus".

KEY FINDINGS

NUTRITION AND HEALTH

- There was a decline in exclusive breastfeeding in the first months after birth, with only 31% of parents reporting that their child was exclusively breastfed at age 5 months;
- Higher rates of exclusive breastfeeding for the first six months of life were associated with higher levels of parental education and residing in an urban area;
- 80% of parents reported that their child was never breastfed in public;
- 59% of parents considered it 'important' for children to be exclusively breastfed for the first six months of life;
- The 'knowledge' results showed a general lack of awareness among parents regarding the benefits of breastfeeding for children and mothers, and limited knowledge of global breastfeeding recommendations;
- 31% of parents reported that they have at least one regular smoker who smokes inside the everyday, and the rate was even higher in households with a lower level of parental education;
- Results indicate a good level of knowledge among parents (on average they answered 3 of 4 questions) about the harmful effects of second-hand smoke on children's health, although there was some misunderstanding that smoke cannot harm a child if they are in another room;
- 94% of mothers reported that they stopped drinking during pregnancy or did not drink at all.

RESPONSIVE CAREGIVING AND EARLY LEARNING AT HOME

- The most common activities that parents engaged in with their child during the past week were: playing outside or going to the playground (74% of parents on a daily basis), and playing with toys or indoor games (71% of parents on a daily basis). In contrast, 36% of parents

read or looked at picture books with their children on a daily basis, and 22% sang, danced or engaged in other musical activities on a daily basis;

- Mothers are typically more engaged than fathers with activities to support children's early learning at home. For example, 45% of mothers compared to 14% of fathers reported reading or looking at books with their child on a daily basis. The two activities that fathers were most likely to engage in with their child on a daily basis were: playing outside or going to the playground and playing with toys or indoor games, as reported by 50% and 49% of fathers, respectively;
- Some parents with a child with a disability reported feeling ashamed to go to the playground and other places with their child and they also reported challenges because places were often not barrier-free.

SAFETY AND SECURITY

- 74% of parents used violent disciplinary practices towards their child during the past year. In total, 68% of parents indicated that they shouted, yelled or screamed at their child, considered a form of psychological aggression –and the most common type of violent discipline. 51% of parents used physical (or corporal) punishment, such as spanking, hitting or slapping the child on the bottom. To a lesser degree, parents practice shaming their child in front of others (24%) and shaking their child (13%). Only 17% of parents relied exclusively on non-violent discipline to the exclusion of all forms of discipline;
- 31% of parents showed a lack of awareness of the negative effects of physical punishment on a child's psychological and emotional well-being;
- An important finding is the extent of violence witnessed by children in the home: 52% of parents reported that their child has seen an adult in the house raise his or her voice in anger at some other adult in the house.

RECOMMENDED INTERVENTIONS AND STUDY USE

- Develop parenting support for pregnant women and new mothers (and fathers) to provide information, education and skills to promote breastfeeding and support to overcome breastfeeding challenges;
- Health-care system support to ensure health-care workers are skilled to provide guidance and support to increase the duration and exclusivity of breastfeeding. Hospitals should strengthen the Ten Steps of the Baby-Friendly Hospital Initiative (BFHI), including baby-friendly hospital policies and capacity building of staff;
- Develop communications and advocacy materials to give families the information they need to make their home and car smoke-free;
- Develop parenting support to increase the involvement of fathers and to promote the concept of shared parenting and gender equality;
- Government support and leadership to pass and enforce national laws and policies protect and support breastfeeding, such as enacting legislation to restrict the marketing of breastmilk substitutes and monitoring its compliance;
- Develop culturally appropriate and gender sensitive parenting support to promote positive, non-violent disciplinary practices. Parents can learn skills such as positive reinforcement, effective limit setting and conflict resolution in the family;
- Promote awareness raising and public educational campaigns in order to raise awareness of children's rights, understanding of what is appropriate discipline of a child and to help shift social norms and reduce the invisibility surrounding violence against children;
- Support legal prohibition of all forms of violence against children in all settings, including within the home, and provide support for effective enforcement measures.



GENERATION 2030. ACHIEVING THE SUSTAINABLE DEVELOPMENT GOALS FOR CHILDREN AND ADOLESCENTS: BASELINE REPORT

Summary

The report analyses the key SDG indicators that characterise the situation of children and adolescents in the Republic of Belarus. It is comprised of two sections: the first section analyses socioeconomic situation of children and adolescents in Belarus, focusing on the achievement of SDGs with assessed progress towards achieving SDGs. The second section formulates the goals, targets and priority policies related to sustainable development of children and adolescents until 2035.

PARTNERS

This baseline report was prepared in the framework of cooperation plan between the UN Children’s Fund (UNICEF) and the Ministry of Economy of the Republic of Belarus within the *Analysis of Public Investments in Children and Adolescents to Achieve the Sustainable Development Goals* developed by the Economy Research Institute of the Ministry of Economy of the Republic of Belarus.



ECONOMY RESEARCH
INSTITUTE OF THE MINISTRY
OF ECONOMY OF THE
REPUBLIC OF BELARUS

METHODS

The report is based on the data from the National Statistical Committee of the Republic of Belarus, the Ministry of Health of the Republic of Belarus, the Ministry of Education of the Republic of Belarus, the Ministry of Labour and Social Protection of the Republic of Belarus, the Ministry of Interior of the Republic of Belarus; it also incorporates results of the Intersectoral Comprehensive Review of governmental measures, services and social guarantees for adolescents, including thematic evaluation of the UNICEF input on reducing vulnerabilities, increasing sustainability and promoting the rights of adolescents in the Republic of Belarus.

ETHICS AND QUALITY ASSURANCE

Ethical review is not applicable, as the study uses secondary data sources, and does not include experiments or primary data collection.

External peer review of the inception and final reports was done by Universalia Management Group (<https://www.universalia.com>)



Sources

This section is based primarily on the results of the Analysis of Public Investments in Children and Adolescents to Achieve the Sustainable Development Goals.

Baseline Report: <https://bit.ly/2zZ4rY0>

KEY FINDINGS

- In 2017 the proportion of population living below the poverty line in Belarus was estimated at 5.9% (compared to 7.3% in 2011). The highest level of low income population was within the 0-17 years of age group, resulting in 11.3% of the total number for this population group ([indicator 1.2.1](#)), thus demonstrating the need to revise the system of social support for families with children;
- Significant socioeconomic measures for supporting families with children were taken in 2013 and 2015, as a result the scope of state benefits for children under 18 years of age increased from 23.9% in 2011 to 29.1% in 2017 ([indicator 1.3.1.2](#)). The scope of state child care benefits paid to families with children until children become three years of age reached almost 98.0% ([indicator 1.3.1.3](#));
- The proportion of the country's population living in well maintained housing increased: from 82.0% in 2011 to 88.7% in 2017 ([indicator 1.4.1.2](#));
- Substantial public expenditures, allocated for developing conditions for birth of healthy children and reduction of infant and maternal mortality, allowed to significantly reduce the maternal mortality ratio ([indicator 3.1.1](#)) from 21 cases per 100,000 newly born children in 2000 to 1 in 2019 and infant mortality indicators at a national level;
- The under 5 years of age mortality rate ([indicator 3.2.1](#)) decreased by almost 1.5 times, from 5.1 in 2011 to 3.9 in 2017;
- In 2017, the neonatal mortality rate per 1,000 newly born children aged 0-27 days in Belarus was 1.6 ([indicator 3.2.2](#));
- As of January 1 2017, the HIV prevalence in the country was 0.18% ([indicator 3.3.1](#)). In 2016, Belarus received the certificate of the World Health Organization, confirming the elimination of mother-to-child transmission of HIV and syphilis;
- The number of suicides among people aged 0-17 in 2017 included 18 cases (33 suicides in 2011) ([indicator 3.4.2](#)); the proportion of suicides in the structure of death from external causes among children aged 15-17 years of age increased from 25.0% in 2011 to 29.5% in 2017;
- As regards to the child death rate from road traffic accidents, Belarus ranks 17th among 47 countries of the European region. Every year on average thirty (30) children die due to road traffic injuries in Belarus ([indicator 3.6.1](#));
- The birth rate among adolescent girls aged 10-14 years ([indicator 3.7.2](#)) remains sustainably low, not exceeding 0.1 per 1,000 women of this age group (0.05 in 2017);
- The proportion of children aged 3-5 years who are developmentally on track in health, learning and psychosocial well-being ([indicator 4.2.1](#)) was 93.9% in 2012;
- According to the Human Development Report of the UN Development Programme, the adult literacy rate in Belarus is the best among CIS countries, and the young people literacy rate is one of the highest in the world (99.8%) ([indicator 4.6.1.1](#)). According to the data of the National Statistical Committee, the country has almost 100% school Internet access for educational purposes ([indicator 4.a.1.1.b](#)), as well as access to basic sources of drinking water, basic means for washing hands and separate minimally equipped toilets ([indicator 4.a.1.1](#));
- 0.12% of all women aged 15-17 years in the country were subjected to sexual violence in the previous 12 months of 2017 ([indicator 5.2.2.1](#));
- Early marriages of women in rural areas are two times more frequent ([indicator 5.3.1](#)). This can be explained by the low level of contraception and lack of access to efficient contraception;
- 100% of people use safely managed drinking water services ([indicator 6.1.1](#)). Almost 96.0% of the population used sanitation services organized in compliance with safety requirements ([indicator 6.2.1.1](#));
- In 2017, the proportion of youth (aged 15-24 years of age) not in employment, education or training in Belarus ([indicator 8.6.1](#)) was 7.3%, which is below similar proportion in many industrialized countries, such as Italy, Lithuania, Latvia, France, Great Britain, etc.;
- 90.2% of children aged 0-17 years have convenient access to public transport ([indicator 11.2.1](#));
- 100% of births are registered in the country ([indicator 17.19.2.1](#)).

RECOMMENDED INTERVENTIONS AND STUDY USE

- To develop a system for a state support of families with children and for prevention of social orphans;
- To improve the system for protection of children and adolescents, to ensure their safe living and assist in leading a healthy lifestyle;
- To set up a good-quality and inclusive system of education and ensure access to information and information security of children and adolescents;
- To improve the mechanism for implementation of children's rights for social protection, inclusion, justice and protection against all forms of violence;
- To create conditions for participation of children and adolescents in decision-making process on issues that will affect their lives.

COMMITMENT TO EQUITY FOR CHILDREN: REDISTRIBUTIVE EFFECTS AND EFFICIENCY OF SOCIAL ASSISTANCE TO HOUSEHOLDS WITH CHILDREN IN BELARUS



Summary

The analysis – Commitment to Equity for Children, or CEQ4C – integrates three analytical frameworks, namely, public finance, fiscal incidence analysis, and multidimensional child poverty analysis. The main purpose of the paper is to understand the distributional impact of taxes and public spending on children in Belarus.

PARTNERS

The study was initiated by UNICEF office in the Republic of Belarus and carried out by Kateryna Bornukova, Jose Cuesta and Gleb Shymanovich, financial support was provided by UNICEF and the World Bank.



WORLD BANK GROUP

METHODS

The CEQ Assessment relies on state-of-the art fiscal incidence analysis to address the following questions:

- How much income redistribution and poverty reduction is being accomplished through fiscal policy measures related to children? How equalizing and pro-poor are children-related government spending?
- How the incidence of fiscal programs compares across different types of households with children? How are the child-relevant programs targeted towards those facing multidimensional poverty or certain deprivations?
- How effective are tax and transfer policies in fighting multidimensional poverty among children, given the fiscal resources used?

CEQ4C combines the child-relevant budget analysis with household microdata to give important insights about the role of fiscal policy in alleviating child poverty, including multidimensional poverty.

Estimation of multidimensional children poverty (MDCP) is based on information on deprivations of the households with children. Deprivation is defined as lack of access to necessities or basic rights. Since the deprivations which might be identified from the HBS data are mainly of the material nature, the resulting MDCP measure relates mostly to participating dimension of children's rights, while the access to services such as health and education, as well as their quality, are not documented.

ETHICS AND QUALITY ASSURANCE

Ethical review is not applicable, as the study uses secondary data sources, and does not include experiments or primary data collection.

External peer review of the inception and final reports was done by Universal Management Group (<https://www.universalia.com>)



Sources

This section is based primarily on the results of the study “Commitment to Equity for Children: Redistributive Effects and Efficiency of Social Assistance to Households with Children in Belarus”

KEY FINDINGS

RISK OF POVERTY

- Children in Belarus face higher risks of poverty than the overall population: for children the poverty rate was 12.6% versus 7.1% for the population in 2016;
- The risk of multidimensional poverty for children is even higher – 16.7%. Households with a single parent or households with three or more children, children aged 6-9 and 10-13 or children living in small cities and rural areas are more likely to be poor and face multiple deprivations.

REDISTRIBUTIVE EFFECT OF FISCAL INTERVENTIONS

- The fiscal system in Belarus significantly reduces monetary poverty among children through the system of child benefits. Without the direct transfers, child poverty would be two times higher (25.8%);
- Child benefits for children aged 0-2 years play the biggest role in poverty reduction, reducing child poverty by 5.7 p.p.;
- Child benefits for children aged 3-18 and privileges are also substantial, reducing child poverty by 1.2 p.p. and 1.3 p.p correspondingly;
- Interventions that do not have a child focus in the design also play significant role: pensions decrease child poverty by 5.1 p.p, indirect utility subsidies – by 6.5 p.p.;
- However, there are substantial omissions in coverage or depth of the social assistance of the most vulnerable groups. For example, 26.5% of single-parent households receive some kind of child-related benefit, and the level of poverty among these households is still high - 15.9%,

while 23.8% of these households are in multidimensional poverty. Due to the lack of means-tested and accessible programs, 6.8% of children face either monetary or multidimensional poverty, and are not covered by social assistance;

- While the major types of child benefits (benefit for children aged 0-2 and benefit for children aged 3-18) are relatively cost-efficient, one-off payments at birth are highly inefficient in terms of reducing poverty, and also increase inequality. The majority of privileges, excluding food privileges and preschool privileges, are also highly inefficient in regards to cost.

POLICY SIMULATIONS

- Increasing access to the means-tested TSA benefit to all poor households with children and removing the current 6 months duration restriction would allow to eliminate child poverty completely at a very low cost. Our simulations do not take into account the possible high costs of administering such an intervention;
- Categorical benefits to the vulnerable groups – households with three or more children, households with a single parent, households with children in rural areas and small cities – will not require high administrative costs and are cost-efficient;
- The planned decrease in the housing utilities subsidies would bring the savings high enough to cover many of the proposed alternative mechanisms of child poverty reduction;
- Decreasing the length of maternity leave and the longevity of the associated childcare benefit would not lead to a child poverty increase.

RECOMMENDED INTERVENTIONS AND STUDY USE

Development of the targeted social assistance, including improvement of the coverage and increase of the size of the benefits provided and the period of their provision.

Development of the social policy instruments targeted at the support of households with three or more children, households with a single parent, households with children in rural areas and small cities, including categorical benefits for the period of recession and macroeconomic turmoil. Combined with the enhancement of the targeted social assistance, these instruments would allow achieving the SDG target of reducing the national child poverty rate by half by 2030.

Decrease of the housing utilities subsidies will allow to accumulate funds significant enough to compensate costs increase for vulnerable groups of population and finance additional social support to the households with children.

If the kindergarten capacities are sufficient, child poverty will not increase in case of the maternity leave decrease.

The research results became the basis for the development of a national methodology for measuring multidimensional poverty.

DEMOGRAPHIC DIVIDEND FOR BELARUS



Summary

Demographic Dividend modelling allowed to see how additional investments in children and youth could affect the economic and human development outcomes in the next 40 years.

PARTNERS

The study was initiated by UNICEF office in Belarus and carried out by Kateryna Bornukova, financial support was provided by UNICEF.

METHODS

The demographic dividend can be modeled with the tool developed by USAID and Health Policy Project. The tool allows interacting the policy changes in education, economic policy and family planning (health) in the model with the demography and economic growth components.

The DemDiv tool was applied to Belarus to generate four development scenarios for the next 40 years (2018-2058):

- a Base Scenario with no changes in current economic policies, education or health;
- an Economy-only Scenario, with improvements in public institutions, ICT use and labor market efficiency;
- an Economy + Education Scenario adds improvements in education variables;
- an Economy+Education+Health Scenario also adds health improvements which are modeled through better education, lower sterility, higher labor market efficiency and better public institutions in the DemDiv tool.

All policy variables are set to match reference country levels.

ETHICS AND QUALITY ASSURANCE

Ethical review is not applicable, as the study uses secondary data sources, and does not include experiments or primary data collection.

Sources

This section is based primarily on the findings of DemDiv modelling for Belarus.

KEY FINDINGS

- Harnessing the demographic dividend through economic, education and health policy interventions would result in significant improvement in Human Development index for Belarus (from current 0.77 to 0.90). It would bring effects equivalent to 2.5 years increase in schooling; increase of 3 years in female life expectancy; and 164 thousand lives saved due to lower mortality over the next 40 years.
- Overall, simulations show that by 2030 all demographic dividend-related policy interventions could contribute to over two-fifths of the projected GDP per capita growth envisioned in the 2030 target of 4% aggregate growth (SDG 8.1.1).

RECOMMENDED INTERVENTIONS AND STUDY USE

- Introducing performance-based budgeting and participatory budgeting; building trust between the government and the population, especially in the areas of public finance; promoting efficiency along with the accountability; improve efficiency of public institutions by improving property rights and intellectual property protection.
- Improve efficiency of labor market, not only through the purely economic measures, but also through the support of continued, life-long learning; development of programs targeted at NEET youth and their reintegration into training or labor market.
- Introduce family-friendly policies in the workplace through the relevant policy changes and development of public-private partnerships.
- Reduce child poverty and multidimensional poverty and thus improve future outcomes in education through more efficient use of available public funding; the CEQ4C analysis and simulations can provide the necessary evidence to channel the funding to the most vulnerable.
- Promote ICT use by expanding infrastructure and providing trainings where necessary.
- Increase the quality of education, not only by increasing the average education years, but through the particular focus on school education and elimination of socio-economic inequalities.
- Reform the educational system to support life-long learning and constant skill acquisition through the public-private partnerships.
- Develop programs targeted to address NEET youth, to reintegrate them into education and training which will further lead to successful labor market participation and acquiring XXI century skills for the labor market.
- Promote inclusive education and education opportunities and accessibility for children with disabilities.
- Reduce mortality of children, adolescents and working-age population with the focus on narrowing the gender mortality gap (and life expectancy gap) driven by NCDs. NCDs prevalence could be lowered through the promotion of healthy lifestyle and prevention in healthcare.
- Reduce alcohol consumption by implementing measures known to work in similar settings: increasing the alcohol excises; limiting access to alcohol by imposing strict restrictions in retail; increasing the drinking age.
- Promote positive parenting, breastfeeding and other nurturing care and early development practices.
- Prevent disabilities by developing comprehensive and intersectoral early childhood development services aimed at early detection and treatment of developmental delays.

STUDY ON MENTAL HEALTH AND SUICIDAL BEHAVIOUR OF ADOLESCENTS IN BELARUS



Summary

The study presents data and evidence on the prevalence and burden of mental health disorders among adolescents, as well as on exposure to risk factors and access to interventions, which is an essential step towards planning more effective and supportive programming and identifying vulnerable populations at higher risk.

PARTNERS

The study was carried out in the framework of UNICEF and Belarus Country Program priorities for 2016-2020, the State Program "Health of the Nations and Demographic Security 2016-2020" (item 19 of the subprogram "Prevention and Control of Noncommunicable Diseases), the AWP of UNICEF and the Ministry of Health for 2018 (paragraph 3.1.1) and the decision of the National Commission on the Rights of the Child (protocol No. 2 of November 23, 2017, clause 3.4). The technical, expert and financial support was provided by the United Nations Children's Fund (UNICEF) in the Republic of Belarus. The study was approved by the Ministry of Education Republic of Belarus.

METHODS

The study subjects were adolescents at different educational institutions including high schools, special education institutions, universities, and vocational education programmes. All subjects were aged between 14 and 19 and living in different regions of the country. Adolescents were selected through multistage stratified random sampling technique.

The sample size was 3600 people at the age of 14-19.

In addition, parents of adolescents aged 14-19 were invited to take part in focus group discussions to speak about their knowledge about adolescent mental health, awareness of available resources, services and difficulties related to mental health issues.

Finally, expert interviews were conducted with 10 mental health experts from Ministry of Education, Ministry of Health and the Belarus Parliament.

ETHICS AND QUALITY ASSURANCE

The review follows the United Nations Evaluation Group's Norms and Standards as well as the Ethical Guidelines for Evaluation. Special measures were put in place to ensure that the process is ethical and that the interviewees can openly express their opinions. Confidentiality was maintained. The content of the interviewees and focus groups was used to inform the analysis, and no direct reference were made to particular statements.

Ethical review of the inception report and all instruments was done by Health Media Lab IRB (<http://www.healthmedialabirb.com/>)



External peer review of the inception and final reports was done by Universal Management Group (<https://www.universalia.com>)



Sources

This section is based primarily on the results of the study "Study on Mental Health and Suicidal Behaviour of Adolescents in Belarus"

KEY FINDINGS

SUICIDAL IDEATION

- 26.1% of adolescents who participated in the study reported that they had suicidal thoughts during their life span;
- 18.0% had suicidal thoughts once and 8.1% - several times;
- 19.0% of those who had suicidal thoughts during their life span attempted suicide in the past (4.8% of the sample);
- Such factors as “tense” relations with fathers, physical and psychological violence, alcohol consumption are significantly related to suicidal thoughts;
- The odds of adolescents with depression to have suicidal thoughts were 3.6 times greater than the odds of those who did not have depression;
- The odds of adolescents who have been physically abused to experience suicidal ideation were 1.8 times greater than the odds of the adolescents who did not;
- The odds of adolescents who experienced ‘verbal and emotional abuse’ to have suicidal thoughts were 1.6 times greater than the odds of those who did not experience ‘verbal and emotional abuse’;
- The odds of female adolescents having suicidal thoughts were 2.4 times greater than the odds of male adolescents;
- The odds of adolescents who ‘used alcohol regularly’ experiencing suicidal thoughts were 1.9 times greater than the odds of adolescents who ‘did not use alcohol’;
- The odds of the male adolescents who had a ‘strained’ relationship with the father to have suicidal thoughts were 3.8 times greater;

DEPRESSION

- 18.2% of adolescents show symptoms of depression;
- As for the significant factors in the development of symptoms of depression, the disposition to anxiety, lack of life goals, drug use, relationships with parents, especially with the father, have a particularly strong influence. Girls faced with psychological and physical violence have significantly higher chances of depression;
- The odds that adolescents with a ‘strained’ relationship with their father will be depressed were 2.7 times higher

than the odds of those who had a ‘warm’ relationship with their fathers. The relationship with the mother does not have the predictive power for the adolescent depression;

- Female adolescents are 1.6 times more likely to be depressed than male adolescents;
- The female adolescents who were exposed to physical violence are 1.9 times more likely to be depressed than those not exposed;
- Female adolescents were 3.6 times more likely to be depressed in case their parents were not satisfied with them;
- The adolescents who did not have goals in life were 2 times more likely to be depressed than those who had set goals in life;
- The adolescents with ‘high’ level of situational anxiety are 8.4 times more likely to be depressed than the adolescents with ‘low’ levels of situational anxiety;
- The odds that adolescents who used drugs will be depressed were 2.9 times higher than the odds that those who did not use drugs will be depressed;
- The odds that adolescents who experienced physical abuse will be depressed were 2.3 times higher, and the odds that adolescents who had been abused verbally and emotionally will be depressed were 2.4 times higher than the odds that the adolescents who did not experience any forms of abuse will be depressed.

KNOWLEDGE AND SKILLS OF ADOLESCENTS AND PARENTS ON MENTAL HEALTH ISSUES SECURITY

- The level of awareness and knowledge of adolescents on mental health issues is insufficient. Adolescents and young people do not have enough information about proper behavior with people with mental health problems, about signs, forms and methods of crisis prevention, as well as the types of assistance provided and where you can go in case of a crisis condition or the development of depressive symptoms;
- 44.0% of respondents said that they lacked or rather did not have enough knowledge about the signs of crisis conditions, 46.0% - about forms and methods of increasing resistance to risk factors and crisis conditions, 41.1% - about existing and affordable services, 40.2% - about the forms and methods of obtaining support from specialists.

RECOMMENDED INTERVENTIONS AND STUDY USE

Raising public awareness, including education of parents (especially fathers), adolescents, and teachers on mental health issues.

Develop strategies and a roadmap on crisis prevention and mental health for adolescents and youth.

Create a training center for mental health service providers (for school psychologists and other mental healthcare professionals).

Capacity building and increase in the number of employed specialists in the field of prevention and protection of mental health of adolescents and youth.

Strengthening interagency collaboration and cooperation with international organizations.

The results of the study were provided to all ministries, the main results were presented at a press conference.

The study served as the evidence base for the development of the relevant Fundraising proposal to the Government of the Russian Federation, as well as a Roadmap on improving the mental health of young people of the Republic of Belarus.



HOUSEHOLD SURVEY FOR A COMPREHENSIVE ASSESSMENT OF THE SITUATION OF PERSONS WITH DIS ABILITIES IN BELARUS

Summary

Household survey for a comprehensive assessment of the situation of persons with disabilities in Belarus covers the following topics: prevalence of disability among adults and children; situation of households with people with disabilities; barrier-free environment; accessibility of public services; attitudes towards people with disabilities and discrimination.

PARTNERS

Household survey for a comprehensive assessment of the situation of persons with disabilities in Belarus is a joint project of the National Statistic Committee and UNICEF Belarus.



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METHODS

Survey tools (questionnaires) were elaborated based on Washington Group on Disability Statistics methodology. Sample design was completed during technical sampling mission of UNICEF regional sampling expert. Sample consists of 12,600 households, including households with adults and children with disabilities, total number of interviews achieved over 28000 respondents. Data collection was conducted with support of modern CAPI technology, which ensures high quality of collected data.

ETHICS AND QUALITY ASSURANCE

The review follows the United Nations Evaluation Group's Norms and Standards as well as the Ethical Guidelines for Evaluation. Special measures were put in place to ensure that the process is ethical and that the interviewees can openly express their opinions. Confidentiality was maintained. The content of the interviewees was used to inform the analysis, and no direct reference were made to particular statements.

Ethical review of the inception report and all instruments was done by Health Media Lab IRB (<http://www.healthmedialabirb.com/>)



Sources

This section is based primarily on the findings of Household survey for a comprehensive assessment of the situation of persons with disabilities in Belarus. The latest findings can be found here <https://bit.ly/2zp7dpe>.

KEY FINDINGS

EQUAL CHANCES

- 2.1% of children aged 2-17 years has functional difficulties in the domain of seeing;
- 0.4% of children aged 2-17 years has functional difficulties in the domain of hearing;
- 0.8% of children aged 2-17 years has functional difficulties in the domain of walking;
- 1.4% of children aged 2-17 years has functional difficulties in the domain of remembering and concentrating;
- 1.5% of children aged 2-17 years has functional difficulties in the domain of communication;
- 1% of children aged 2-17 years has functional difficulties in the domain of self-care;
- 31% of children with identified degree of health impairment have motor functions disabilities;
- 20% of children with identified degree of health impairment have intellectual disabilities.

LIVING CONDITIONS

- For 33% of children sport services are not accessible;
- For 17% of children visits to the theatre, museum and cinema are not accessible;
- For 25% of children traveling and excursions are not accessible;
- For 5% of children public transport is not accessible.

DISCRIMINATION

- 97.6% of children with disabilities aged 10-17 years are fully or rather satisfied relations with household members;
- 88.7% of children with disabilities aged 10-17 years receives the necessary emotional support from their parents, 7.4% - from friends and classmates;

- 7.0% of children with disabilities aged 10-17 years meets and communicates with friends and relatives less than they want;
- 32.6% of children with disabilities aged 10-17 years experiences loneliness.

EDUCATION

- 11.6% of children aged 3-17 years do not attend any educational establishment;
- 26.8% of children aged 3-7 years do not attend any educational establishment;
- 4.4% of children aged 8-17 years do not attend any educational establishment;
- 44.2% of children aged 3-17 years do not attend educational institutions due to medical counterindications to having studies;
- 34.5% of children aged 3-17 years do not attend educational institutions due to lack of opportunity to leave a child at home under adult supervision.

EMPLOYMENT AND WELFARE

- 7.2% of families with children with disabilities believe that their income is barely enough to feed the family;
- In 11.6% of families with a child with a disability, parents do not work.

ACCESS TO INFORMATION AND COMMUNICATION TECHNOLOGIES

- 21.8% of children aged 10-17 years do not use mobile phone;
- 21.2% of children aged 10-17 years do not use Internet;
- Most children aged 10-17 years do not use a mobile phone and Internet due to their health status (79.8% and 74.6% respectively).

RECOMMENDED INTERVENTIONS AND STUDY USE

Conduct secondary data analysis, which is expected to inform development and reform of laws (specifically the Code on Education, Law on social assistance to persons with disability and their social integration, upcoming governmental programmes for 2021-2025), policies and programmes as well as monitor the country's progress toward national goals, sustainable development goals (SDG) and international commitments toward the rights of children, especially those with disabilities as guided by the CRC, CRPD and other international documents, such as the UN Guidelines on Alternative Care.

Identify and analyse the barriers and bottlenecks that prevent children with disabilities and families from benefiting from required interventions and services.

On December 3, 2018, within a Round Table the results of the study were presented.

The results of the study serve as an evidence base for the development of national programs and plans of action.

MULTIPLE INDICATOR CLUSTER SURVEY OF THE SITUATION OF CHILDREN AND WOMEN IN THE REPUBLIC OF BELARUS



Summary

MICS is an international household survey programme developed by UNICEF. MICS round 6 is designed to monitor the situation of children and women, and to obtain reliable information to help monitor the progress of achieving the Sustainable Development Goals (SDGs). Since 2005 it has been the third MICS conducted by Belstat. Belarus MICS produced over 120 indicators, including 21 SDG indicators. The data covers such topics as the health, nutrition, early childhood development, women's reproductive behavior, attitudes to domestic violence, young people's sexual behavior, discrimination, feeling of safety in communities and overall life satisfaction. It included the module on Child Functioning, which ensures comprehensive assessment of the level of health limitations and disability among children and adolescents.

PARTNERS

Belarus MICS round 6 was carried out in 2019 by the National Statistical Committee of the Republic of Belarus as part of the global MICS programme. Financial support was provided by the European Union, the World Bank, the United Nations Office on Drugs and Crime (UNODC), the Russian Federation and the United Nations Children's Fund (UNICEF).



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METHODS

The sample for the Belarus MICS6 was designed to provide estimates for the indicators describing the situation of children and women that are statistically reliable at the national level, for urban and rural areas, and for Belarus' seven subnational administrative units (Brest, Vitebsk, Gomel, Grodno, Minsk and Mogilev Regions and Minsk City).

The sampling frame was based on the data and cartographic materials from the 2009 Belarus Population Census with the updated address layer.

The number of households living at the selected addresses was 8888; of them, 8668 households were interviewed successfully (the response rate was 98%).

The response rate for children aged 5-17 years and children under 5 years was 98%.

The response rate among men was lower (87%) than among women (96 %).

ETHICS AND QUALITY ASSURANCE

MICS questionnaires were based on standard MICS6 questionnaires that were adapted to reflect the conditions and objectives of the survey specific to the Republic of Belarus.

The review follows the United Nations Evaluation Group's Norms and Standards as well as the Ethical Guidelines for Evaluation. Special measures were put in place to ensure that the process is ethical and that the interviewees can openly express their opinions. Confidentiality was maintained. The content of the interviewees was used to inform the analysis, and no direct reference were made to particular statements.

Ethical review of all instruments was done by Health Media Lab IRB (<http://www.healthmedialabirb.com/>)



HML IRB
RESEARCH & ETHICS

Sources

This section is based primarily on the findings of MICS6 in Belarus. The latest findings can be found here <https://bit.ly/2YIW2G1>.

KEY FINDINGS

SAMPLE COVERAGE AND SURVEY CHARACTERISTICS

- 8,668 households were interviewed successfully;
- Overall, 5,521 women age 15-49 years and 2,765 men age 15-59 years participated in the survey. Questionnaires for children under five were completed for 3,489 children;
- About one-third of the households (29%) had, at least, one child aged 0-17 years, and 11% of the households had, at least, one child under 5 years of age;
- 70% of women and 62% of men aged 15-49 years were married or lived in cohabitation;
- Among the respondents, 40% of women aged 15-49 years and 32% of men aged 15-49 years had higher education;
- Three out of four children (77%) lived with both parents. 2% of children aged 0-17 years lived with neither biological parent.

INFANT AND YOUNG CHILD FEEDING

- 22% of infants aged 0-5 months were exclusively breastfed and 40% predominantly breastfed;
- 93% of children aged 6-23 months received minimum recommended number of solid, semi-solid or soft foods, or milk feeds as per the age of child and breastfeeding status;
- 70 of children aged 6-23 months were given diverse diet (received food from 5 of the 8 recommended food groups). This indicator was notable higher among children aged 18-23 months (76%) than among children aged 6-8 months (48%).

EARLY CHILDHOOD DEVELOPMENT

- Adult household members are engaged in four or more activities that promote learning and school readiness with 97% of children aged 2-4 years;
- Mothers were three times more often involved in four or more activities with children that promote learning and school readiness;
- 91% of children age 3-4 years attend early childhood education programmes; the value of this indicator increases with the increase of mother's education and with the increase of household wealth;
- 2% of children under 5 years of age were left with inadequate supervision in the past week (alone or under the supervision of another child younger than 10 years of age);
- 87 out of 100 children aged 3-4 years were developmentally on track at least in three out of four domains: physical, learning, socio-emotional development and literacy-numeracy.

LEARNING AND PARENTAL INVOLVEMENT

- 82% of children aged 7-14 years achieved at least the minimum proficiency level in reading (SDG 4.1.1.a);

- 73% of children aged 7-14 years demonstrated foundational numeracy skills (SDG 4.1.1.a).

CHILD DISCIPLINE

- 40% of children aged 1-14 years were disciplined using only non-violent methods;
- In total, 57% of children age 1-14 years experienced some type of physical punishment or psychological aggression used by the adult household members (SDG 16.2.1);
- Children with functional difficulties experienced punishment more frequently;
- The proportion of mothers (caregivers) who think that physical punishment is necessary to raise or educate children, was 9%.

CHILD FUNCTIONING

- Overall, less than 4% of children (4.8% of boys and 2.5% of girls) aged 2-17 years have functional difficulties in at least one domain;
- 1.6% of children aged 2-4 years has functional difficulties. Moreover, most of all at this age, children have difficulties in communication (1.1%) and learning (0.8%);
- Almost 5% of children aged 5-17 years have functional difficulties, including difficulties in learning - 1.4%, making friends - 1.4%, behavior control - 1.1%.

ADOLESCENTS

- Literacy among adolescents aged 15-19 is universal;
- In total, 5% of adolescents aged 15-19 experience discrimination or harassment on any grounds. Most often, this is discrimination and harassment related to age (noted by 3% of girls and 4% of boys);
- 5% of women aged 20-24 years first got married or were in union under the 18 years;
- In Belarus, adolescents aged 12-17 are not involved in child labour according to international criteria: the duration of their economic activities and household chores does not exceed the time limits established for children of this age group.

GENDER EQUALITY

- Half of the boys and girls aged 15-19 years (47% each) had proper knowledge about HIV transmission;
- 46% of the girls and 58% of the boys aged 15-19 years had ever used alcohol;
- 13% of the girls and 18% of the boys aged 15-19 years consumed at least one drink of alcohol in the last month;
- 65% of women and 95% of men aged 15-49 years in urban areas feel safe walking alone in their neighbourhood after dark;
- 4% of men and 4% of women aged 15-49 years thought that the husband/partner had the right to hit the women/partner in some situations;
- Two-thirds (65%) of men and 73% of women aged 15-49 years thought that their life would become better during next year.

RECOMMENDED INTERVENTIONS AND STUDY USE

Currently available data from MICS statistical snapshots only show descriptive statistics, limiting the ability of policymakers, line ministries and academia to further understand the drivers of identified issues. Therefore, secondary analysis of MICS6 data should be undertaken to provide a better understanding of the condition of children and women in Belarus in certain areas. The findings will be used to advise government and partners on policy and programme interventions in social sector.

On January 30, 2020, within a Round Table the results of the study were presented.

The results of the study serve as an evidence base for the development of national programs and plans of action.



NATIONAL
STATISTICAL
COMMITTEE
OF THE REPUBLIC
OF BELARUS

unicef 
for every child



UNIVERSAL DATA-PORTAL ON CHILD-RELATED STATISTICS



DEMOGRAPHY



HEALTH CARE



SOCIAL PROTECTION



EDUCATION



CULTURE, SPORT
AND RECREATION



CHILD PROTECTION



JUSTICE FOR
CHILDREN



CHILD WELFARE

220 DISAGGREGATED INDICATORS

METADATA

8 TOPICS, INCLUDING SDG INDICATORS

8 DATA PROVIDERS

DYNAMICS SINCE 2000

DATA SOURCES: state statistical reporting forms,
administrative data, sampling surveys

GOALS OF THE PORTAL:

Provide a disaggregated electronic database containing statistical indicators describing the situation of children in Belarus in the main areas of society.

Monitoring data on the progress of Belarus in achieving the Sustainable Development Goals for children and adolescents.

Promote better access to up-to-date official statistical information, administrative data and survey data.

Increase public awareness and interest on the situation of children in Belarus, based on open and high-quality data.

Go to the site

www.childrenportal.belstat.gov.by





unicef 
for every child



NATIONAL PLATFORM FOR REPORTING INDICATORS OF SUSTAINABLE DEVELOPMENT GOALS



A single center for collecting and summarizing relevant information about the current situation on achieving the SDGs in the country.

Informational tool for monitoring the implementation of international obligations.

A source of relevant information for planning and monitoring progress in sustainable development, as well as preparing national reports on the achieving the SDGs in Belarus.

A tool for raising awareness among a wide range of users and involving civil society in sustainable development issues.

Go to the site



www.sdgplatform.belstat.gov.by



PLANNING AND IMPLEMENTING INVESTMENTS IN CHILD RIGHTS MONITORING AND EVALUATION (CRM&E) IN BELARUS

Manager: Dr Uladzimir Valetka (uvaletka@unicef.org), UNICEF in Belarus

DRIVING INFORMED DEMAND: RESEARCH AND EVALUATION EVIDENCE FOR STRATEGIC POSITIONING OF CHILD RIGHTS IN NATIONAL PLANNING SYSTEMS



- National Plan of Action for the improvement of the situation of children and protection of their rights for 2017-2021 (approved by the Council of Ministers in September 2017)
- MAPS roadmap: SDG acceleration platform Future generation orientation: Adolescence and youth (2018)
- Annual Work Plans (Belstat, MoEcon, MoF)
- Advocacy through Public Council on SDGs (from 2018)
- Generation 2030: Achieving the SDGs for children and adolescents in Belarus. Baseline report (2019)
- National Strategy of Sustainable Development 2035 (to be approved in 2020)

ENABLING THE USE OF DATA AND EVALUATIONS: INCREASE CAPACITY TO ANALYZE AND PROVIDE POLICY ADVICE FOR EVIDENCE-BASED DECISION-MAKING



RESEARCH AND EVALUATION CAPACITY BUILDING

- Training in Randomized Control Trial evaluation design (2017)
- Evaluating public spending: Commitment to Equity for Children approach, workshop (2018)
- Multidimensional child poverty (MDCP) Training in Innocenti (2019)
- Training on Panel data analysis for improving social protection based on the COVID-19 survey (2020)

GENERATING EVIDENCE AND MANAGING EVALUATIONS

- Launching Child Rights Monitoring Dashboard (2017)
- Individual Donations Survey (2018)
- Thematic evaluation of Government and UNICEF interventions for reducing vulnerabilities of adolescents (2018)
- Mental health study (2019)
- ECD KAP study (2019)
- Child Budget published - Ministry of Finance (2019)
- Commitment to Equity for Children (CEQ4C) research, 2019 – submitted to the BoUR (2020)
- Mapping of private sector's corporate social responsibility and opportunities for partnerships (2020)
- Evaluation of Early Childhood Interventions for CWD (2020)
- COVID-19 socio-economic impact assessment: social protection (with the WB, 2020)
- Developing evidence-based visuals for Private Sector COVID-19 flash appeal, <https://www.unicef.by/en/2020/>
- Baseline study for an Inclusive Education project (2020)

PLANNING, ASSURING QUALITY OF EVIDENCE AND KNOWLEDGE MANAGEMENT

- Identification of knowledge gaps/research needs
- Developing and managing a prioritized Integrated Monitoring, Evaluation and Research Plan (IMEP)
- Chairing RSE Steering Committee
- Oversight of evidence quality assurance, reviewing research reports, annual reports
- Knowledge management, quality packaging of evidence products and visuals, supporting data dissemination
- Building e-depositories for evaluations, including for ECAR Multi-Country Evaluation on Inclusion of CWD (2020)

STRENGTHENING THE SUPPLY OF DATA: DATA LEADERSHIP, AVAILABILITY AND QUALITY OF DATA FOR CHILDREN



SURVEY DATA GENERATION

- Generation and Gender Survey (2017)
- Disability survey (2018)
- MICS6 (2019)
- Six-wave COVID-19 Rapid Online Survey (2020)

ADMIN DATA VALIDATION

- Developing MoH e-Health Admin database on CWD (2019-2020)
- Child Protection Data Systems Mission - TransMonEE (2019)
- ECD admin data validation based on MICS6 findings (2020)

DATA DISSEMINATION AND REPORTING

- SDG monitoring panel with a pre-launch of UNICEF's global report 'Progress for Every Child in the SDG Era' within SDG Coordination Leaders Forum with the DSG participation (2018)
- National SDG reporting platform developed (2018; SDMX standard upgrade in 2020) www.sdgplatform.belstat.gov.by
- Universal Data Portal on Child Statistics launched (2019) www.childrenportal.belstat.gov.by
- Gender Data Portal development (UN Women, 2020)

CRM&E PARTNERSHIPS: COORDINATING CHILD RIGHTS INITIATIVES AND PARTNERSHIPS



- World Bank partnership (co-financing MICS6, \$300,000; CEQ4C; COVID-19 socio-economic impact assessment)
- UNICEF Office of Research (pre-school / ECD services study, CEQ4C, MDCP)
- UNECE and UNFPA partnership on implementing Generation and Gender Survey
- Co-managing of UNDAF evaluation (2019)
- Chairing UNDAF M&E Group
- Facilitating UN SDCF outcome development: Future Generations: Adolescents and Youth
- Managing partnerships with Statistical Office, Ministry of Economy, Ministry of Finance
- Leading preparation of joint UN proposals (National SDGs architecture; Financing SDGs)
- Technical lead of UNICEF co-chairing the UN Task Force on COVID-19 socio-economic response
- Presenting to private sector companies (Priorbank, MTS mobile operator) and Advisory Board

SHAPING AND IMPLEMENTING SOCIAL POLICY (SP) PROGRAMME IN BELARUS

Manager: Dr Uladzimir Valetka (uvaletka@unicef.org), UNICEF in Belarus

EVIDENCE: ENABLING CAPACITY TO PROVIDE QUALITY POLICY ADVICE FOR CHILD-SENSITIVE SOCIAL PROTECTION



GENERATING EVIDENCE FOR POLICY ADVICE, INCLUDING MULTI-COUNTRY STUDIES

- Child poverty in ECA region: definitions, measurement, trends and recommendations, UNICEF, Geneva, 2017
- Analysis of adolescent vulnerabilities, 2017
- **Social Safety Net mapping for Emergency Preparedness Platform, 2018**
- **Generation 2030: Achieving the SDGs for children and adolescents in Belarus. Baseline report, 2019**
- **Child Budget published in partnership with Ministry of Finance, 2019**
- **Estimate of Demographic Dividend contribution to GDP in Belarus, 2019**
- **Assessing performance of child-related cash transfers using CEQ4C approach – BOURE 2020 finalist with distinction**

- **Building a monitoring system for integrated social services delivery (MoLSP, 2020)**
- **Secondary analysis of MICS Social Transfers module (with the World Bank, 2020)**
- **COVID-19 socio-economic impact assessment (with the World Bank, 2020)**

QUALITY ASSURANCE OF GENERATED EVIDENCE

- **Identification of social policy knowledge gaps/research needs**
- Chairing RSE Steering Committee, developing prioritized plan of research, studies and evaluations (RSE)
- **Managing evaluations of programme interventions**
- Coordination of data collection, developing or contributing to survey designs
- **Oversight of evidence quality assurance, reviewing research reports, annual reports**

PROGRAMMES: IMPROVING CAPACITY TO DESIGN CHILD-SENSITIVE SOCIAL PROTECTION SYSTEMS



STRENGTHENING AVAILABILITY OF SURVEY DATA FOR EQUITY FOCUSED SOCIAL POLICY ANALYSIS

- UNECE Generation and Gender Survey (2017, five analytical papers, including on child poverty)
- Disability survey (2018, well-being and poverty profiles of CWD)
- **MICS6 (2019, with Social Transfers module)**
- **Six-wave COVID-19 Rapid Online Survey of Families with Children including refugees and displaced people**

IMPROVING QUALITY AND DISSEMINATION OF SP ADMIN DATA

- Launching the Universal Data Portal on Child Statistics (2019; data on city level child budgets in 2020)
- **ECARO Child Protection Data Systems Mission – Social Service Workforce (2019)**
- **Supporting the MoLSP admin database on Families with**

DEVELOPING CAPACITIES IN SOCIAL POLICY ANALYSIS AND PROGRAMME DESIGN

- Financing Social Sector: Education panel (KEF 2017, with Innocenti)
- **Training on Randomized Control Trials (RCT) to design Conditional Cash Transfers (2017, with HQ DRP)**
- Decentralized PF4C: Training for Child and Adolescent Friendly Cities (2018)
- **Mitigating social vulnerabilities through public finance (2018, with Innocenti and World Bank)**
- **Pre-launch of UNICEF global report 'Progress for Every Child in the SDG Era' within SDG Coordination Leaders Forum with Amina Mohamed, DSG (2018, with HQ DRP)**
- **Introducing CEQ4C to the Ministry of Economy (2018, with Innocenti)**
- **Multidimensional child poverty (MDCP) Training for Statistical Offices at Innocenti (2019)**

POLICIES: DRIVING INFORMED DEMAND BY IDENTIFYING EMERGING SOCIAL POLICY PRIORITIES AND STRATEGIC POSITIONING OF CHILD-SENSITIVE SOCIAL PROTECTION IN NATIONAL PLANNING SYSTEMS



- **National Plan of Action for the improvement of the situation of children and protection of their rights for 2017-2021** (approved by the Council of Ministers in September 2017)
- Facilitating UN SDCF outcome development: Future Generations
- Led development and now is a result owner of a CPD outcome: Investments in Child

Rights, PF4C focus

- **Inputs to the National Strategy of Sustainable Development 2035 (to be approved in 2020)**
- **Influencing the State program on Social Protection and Employment for 2021-2025**
- **Ensured developing of child budgets for child-sensitive social services and cash transfers at the local level**

ESTABLISHING AND COORDINATING STRATEGIC DIALOGUE AND PARTNERSHIPS FOR PF4C AND SOCIAL PROTECTION



PARTNERSHIPS

- **Lead partnerships with the Ministries of Social Protection, Finance, Economy and Statistical Committee with biannual work plans**
- **World Bank partnership (co-financing \$300,000 to MICS6; CEQ4C; COVID-19 socio-economic impact assessment)**
- **UNICEF Office of Research – Innocenti (pre-school services study, CEQ4C, measuring MDCP)**
- UNECE and UNFPA partnership on implementing Generation and Gender Survey
- UN Women and Belstat partnership on developing Gender Data Portal
- **Engaged partners from the MoF, which resulted in raising \$1 mln from the Joint SDG Fund for strengthening SDG performance-based budgeting of child-sensitive social services and cash transfers**

- **Preparing joint COVID MPTF proposals to enhance child-sensitive social protection**
- **Co-leading and providing technical inputs to the Task Force on COVID-19 socio-economic response (UNICEF co-chairs)**

KNOWLEDGE MANAGEMENT TO SUPPORT DIALOGUE AND PARTNERSHIPS

- **Quality packaging of evidence products and visuals, supporting data dissemination** (socio-economic briefs, poverty factsheets, infographics on SDGs)
- Innovative MailChimp dissemination of social policy newsletters (COVID-19, Social Protection)
- Conducting mappings (social protection benefits and services for CWD in ECAR), contributing to Innocenti roster of CWD consultants (2019)
- **Facilitating information-sharing and delivering presentations on social policy programme at the Regional Office meetings** (Montenegro, 2018; Austria, TransMonEE, 2019)

PARTICIPATING IN THEMATIC WORKING GROUPS

- **Chairing UNDAF M&E Group**
- UN MAPS mission (2018), contributing to the SDG Roadmap
- **Participating in Public Council on SDGs**
- UN Pro working group: Co-managing and reviewing Common Country Analysis for UNSDCF

- **Documenting and sharing lessons learned** (ECAR Social Policy Newsletter Q4-2018, Q3-2020; ECAR Compendium on Social Policy; two social policy investment cases; inputs to [COVID-19 living paper on social protection response](#))

LEGEND: key SP programme results in blue

THE SITUATION OF VULNERABLE CHILDREN AND ADOLESCENTS IN BELARUS: **OVERVIEW OF EVIDENCE AND INVESTMENTS IN DATA**

May 2020

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OVERVIEW OF EVIDENCE AND INVESTMENTS IN DATA

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