

Programme Division 2018 Annual Report

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Introduction

In 2018, Programme Division's (PD) has contributed to notable progress on a range of areas for impactful global action for children. As part of its Strategic and Technical Direction role, PD has continued to influence global development of policies and strategies, including laying the groundwork to the institutionalization and consolidation of new programmatic areas that are now part of UNICEF's 2018-2021 SP such as disabilities, adolescents, urban and climate change, among others. PD has directly engaged with Regional and Country Offices for delivering most efficient and sustainable results for children in humanitarian and development settings, including onsite and offsite technical support to more than 110 programme countries.

The Division has provided support to resource mobilization and management of thematic funds at multiple steps along the life cycle of the grants, including fund-raising and donor engagement, allocation of resources to regional and country offices, technical support to results reporting, and preparation of donor reports. In 2018, PD's engagement has contributed for UNICEF to mobilize more than USD 146 million in thematic funds that were used globally for improving the situation of children.

Among the different priorities that guided PD's actions in 2018, PD has focused on four Global Priorities that were proposed by the Executive Director as areas that needed further acceleration:

1. ***Humanitarian response and its bridge to development.*** Besides being directly involved in humanitarian response, PD has invested in developing the tools that are necessary to strengthen the quality of humanitarian programme response as well as promote preparedness and resilience to be better adapt to shocks and mitigate impact of disaster. PD has complemented the UNICEF's Guidance on Risk-Informed Programming (GRIP) with a full set of sector modules (Health, HIV, Nutrition, Education, Child Protection, WASH and Social Inclusion). In addition, PD and EMOPS have developed an Executive Board paper that details the strategies to link humanitarian and development programmes. Both documents will improve quality of the humanitarian response and help in UNICEF's focus of increase sustainable results for children. Their implementation will be facilitated through a procedure – also developed in 2018 – which makes risk-informed programming mandatory for all countries. In order to help in this process, technical support in 2019 will be prioritized for those countries with new CPDs.

2. ***Scaling up community-based health care.*** PD has invested in galvanizing partnerships and creating the necessary tools for taking the community-based health care approach to scale. PD reaffirms the concept that primary health care is a fundamental stepping stone to achieving universal health coverage and the realization of the SDGs, and community-based health care is an essential building block of these health-delivery platforms. Institutionalizing community health workers (CHWs) into the formal health system is a critical component of bridging the gaps in access to basic care. For institutionalization to occur, as a first step, policies defining roles, tasks based on local needs, financing and relationships to the health system must be in place at country level. Since 2016 PD has been spearheading this work with Regional Offices and, as a result, 30 countries have demonstrated progress in meeting this initial criterion for institutionalization. PD has been working with countries on developing advocacy, policy and technical support to achieve full institutionalization of CHWs as a key component of PHC. This includes planned work towards establishing a package of care, incentive and compensation structures, supervision and supply-chain models. Six countries are actively committed to strengthening and scaling up PHC at the community level (Burkina Faso, Liberia, Mozambique, Malawi, the Niger and Uganda) through a UNICEF co-led partnership called the Community Health Roadmap. These countries have identified national investment priorities for community health, including CHWs. These experiences will help leverage additional investments to further expand a PHC model responsive to the needs of families and communities.

Moreover, the documents and the tool create the possibility to expand the partnership with WHO to new countries and are important pieces to optimize CHW programs in priority countries. They are expected to help countries expand communities' access to health care and other basic social services with the integration of water, sanitation and hygiene, nutrition, social welfare, education, and governance into primary health care services.

3. **Second decade of life.** PD reaffirmed adolescent development as one of its OMP priorities. The Adolescent Development and Participation Section (ADAP) has created global programmatic products and standards, provided technical support to country and regional offices, improved measurement and tracking tools and strengthened knowledge sharing on adolescent participation across the organization. Some concrete examples are the adolescent programming being integrated into health, child protection, education and WASH, among other areas, and the second decade programme guidance. At the same time, PD was fundamental in the development of the concept and operationalization of the *Generation Unlimited* (GenU) Initiative.

4. **Innovations.** Different PD Sections have consolidated and expanded their investment in innovative approaches for programming. In an attempt to accelerate SP results through investing catalytic funding in the scale up of high impact, proven innovations, PD with Supply Division presented to the DED Field Results four business cases for innovations with high potential impact for children that were ready to be taken to scale. Three of these cases – *Digital Health; online Case Management (Primer)*, and *HIV point of care (PoC) diagnosis* – were selected. PD also continued to engage in the cross-divisional initiative to scale-up real time monitoring systems in 11 countries using RapidPro mobile technology to engage target groups and populations directly. This work was undertaken with the triple aim to create more opportunities for timely course correction during programme implementation, to add capacity to national monitoring systems and to provide valuable organizational learning for scaling up technological innovations for accelerating programme results. By end 2018, implementation was under way in 7 of the 11 participating countries and across digital WASH, Health, ECD, Disabilities and other Social Protection interventions. The remaining four country initiatives are expected to start implementation in quarter 1 and quarter 2 of 2019.

Working across sectors and divisions, PD continued to act as a facilitator of new programmes and approaches for UNICEF. The **Migration** group – within PD Programme Directors office (PDDO) – has coordinated UNICEF's participation in different *fora* and played a decisive role securing UNICEF's membership in the Executive Committee of the newly established UN Migration Network, hereby positioning UNICEF firmly as a relevant and reliable partner. This group also facilitated the launch of two new flagship programmes - one focused on *migrant and refugee children in the US* and a *multi-year partnership* with the Dutch Government, the World Bank, ILO, IFC and UNHCR covering 8 countries in the Horn of Africa and the Middle East. By the end of the year, 50+ countries were implementing children on the move-focused programmes aligned with UNICEF's 6-point Agenda for Action. In 2018, PD was also engaged in bringing together two other cross-Divisional SP results: **Urban** and **Climate Change**. Concrete actions for these two results were still spread across different PD Sections and HQ Divisions, and in 2018 PD has started the process of facilitating the development of a programmatic framework that could reduce overlap of initiatives and maximize common understanding of how the different Sections and Divisions will contribute to results. The expectation for 2019 is to have workplans for both results where roles and accountabilities can be clearly identified, facilitating the monitoring of tasks and improving the collaboration for concrete results.

PD played a leadership role in developing the **Collaborating for Results (C4R)** mechanism, which aims to improve organization's accountability to results through a close and coordinated collaboration between HQ, Regional Offices and Country Offices. In 2018 the Division has contributed to the development of the conceptual framework of this mechanism, and in piloting it through some of its Thematic Networks

(Education, Child Protection and Goal Area 1 - Health, Nutrition, HIV and ECD). PD also led a discussion on the October GMT on how the Thematic Networks can contribute to this mechanism. For 2019, the concept of C4R will be implemented by the Programmatic Networks led by PD to monitor the SP results, identify possible bottlenecks to programme implementation, and detect solutions to accelerate results for children. As part of this exercise, Child Protection will be presenting its C4R analysis in the February GMT.

In 2018, the Division has been in the core of the debate around the UN reform, and has partnered with other UN agencies for developing approaches that aim to enable SDG implementation at country level. PD has been an active participant on the creation and operationalization of the SDG Fund, which will be an important funding mechanism for UNCTS to design and deliver integrated policy support to the national stakeholders. PD continued its robust and systematic engagement with **Global Programme Partnerships (GPPs)**, providing UNICEF with an opportunity for stronger advocacy to mobilize multiple actors and to catalyse policy changes at global, regional and country levels in favour of children. As of 2018, UNICEF was a member in 108 GPPs (an increase of 7 if compared to 2017), played a governance role in 75 GPPs, and hosted or provided Secretariat services and coordination support to 17 GPPs. PD was also the main focal point for many joint programmes, such as the *UNFPA-UNICEF Joint Programme on Eliminating Female Genital Mutilation: Accelerating Change*, *UNFPA-UNICEF Global Programme to Accelerate Action to End Child Marriage*, and the *WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene (JMP)*.

Improving management practices and an enabling culture; as well as promoting staff wellbeing and career and professional development, including office efficiency and effectiveness were priority areas for Programme Division in 2018. The results of the last staff survey and action plan were openly discussed in different meetings including representations from staff. Leadership was in the frontline in ensuring that critical areas are addressed, and improvement mechanisms were put in place. Creating an open space for staff engagement, exchange of ideas and interaction with PD Director in an “open forum” with Sections were among the highlights of 2018.

Management development and mandatory 360 feedback assessment, as well as performance management feedback were rolled out. Staff engaged in knowledge sharing activities and celebrated their achievements during a market place forum “*PD Café*” and a staff retreat. Appreciative Inquiry session for GS staff was conducted and an action plan developed with a proposal for career development initiative will be implemented in 2019. Communication etiquette and improving meeting effectiveness, including 3-minute meditation before management team meetings were also amongst the innovative initiatives during the reporting period.

PD Strategic and Technical Direction

Goal Area 1

In 2018, Programme Division continued to support an integrated approach to implement Goal Area 1. Primary Health Care (PHC) and Food Systems were identified as platforms that could facilitate the integration of cross-sectoral actions being taken by Health, HIV/AIDS, Nutrition and Early Childhood Development (ECD) in this Goal.

Three concrete initiatives that integrated GA1 were spearheaded by PD in 2018. *First*, in a joint initiative with the Government of Kazakhstan and WHO, PD, on behalf of UNICEF, led the preparations for the *Global Conference on Primary Health Care*. The Conference took place in Astana, Kazakhstan, in October 2018 and constituted a significant milestone in a global momentum towards investing in primary health care (PHC) for achieving universal health coverage (UHC) and the SDGs. PD was pivotal in coordinating and shaping all aspects of the Conference, from the conceptualization, agenda and logistics through key background documentationⁱ to the final commitments agreed by Member States in the Astana Declaration. As a particularly important feature, PD facilitated young people's participation in a Youth Preparatory Workshop as well as in the Astana Conference itself, ensuring that their issues were captured in the discussions and in the final Declaration. Some important results that could be attributed to the process, include: (i) strengthened partnership and collaboration with WHO as well as other health partners; (ii) increased awareness of the importance of PHC for achieving UHC by gathering more than 2,000 individuals from governments, international organizations, development partners, civil society, professional organizations and academia, and representation from nearly 150 Member States; and (iii) mobilization all stakeholders around the commitments in the Declarationⁱⁱ. For 2019 onwards, UNICEF and WHO will be co-leading a global effort with a range of key partners to strength PHC at country level, operationalizing the commitments agreed in the Astana Declaration.

Second, PD organized a *Goal Area 1 Global Network Meeting* focusing on systems strengthening and integrated programming for achieving Child Survival, Growth and Development. This was the first global meeting that brought together the thematic networks for Health, Nutrition, HIV/AIDS and Early Childhood Development (ECD). As a result of this meeting, participants from Regional Offices and HQ have agreed on the implementation of a series of recommendations related to Advocacy; Programme Development and Implementation; and Partnerships, Knowledge Management and Capacity Building; focusing on how concrete results for GA1 can be facilitated in countries. The expectation is that in 2019 these recommendations will generate the conditions that will lead to more integrated approaches for children that are necessary for the consolidation of results in this goal area.

Third, in collaboration with Supply Division, PD has organized the first UNICEF's workshop on *Sustainable Supply Chains for Health System Strengthening (HSS)*ⁱⁱⁱ. The workshop created a global understanding of how to strengthen supply chain systems to deliver essential medication and commodities. Based on the experience shared by different partners, including BMGF, GAVI, Global Fund, USAID, World Bank Global Financing Facility, WHO, John Snow Inc., VillageReach, People that Deliver and others, a maturity model was developed by SD and PD-Health. Based on this model, Government representatives from the 14 countries that participated in the event developed draft work plans that were used as entry points for joint government and UNICEF work. These work plans were further monitored in 2018 and will be the object of follow up by PD and SD. In 2019, the aim is to increase the number of countries that adopt the maturity model and commit to strength supply chain systems.

In 2018, the [Health Section](#) galvanized partnerships and internal momentum on Health Systems Strengthening (HSS) for Primary Health Care (PHC). Most significantly, the Section made strong

foundational progress on community health through the launch of the *Community Health Roadmap* and the *Community Health Worker Guidelines* (CHW guidelines). The *Roadmap*, co-launched with WHO and other key global partners, generated new partnership possibilities and opportunities to expand and advance the work to more countries. The *CHW guidelines* will be an invaluable tool to support the optimization of CHW programs in priority countries. In support of PHC, UNICEF launched its *Digital Health Approach and Human Centered Design for Digital Health* at Astana, which will guide UNICEF to leverage digital technologies to support HSS for PHC programming. In relation to this, the Health Section in 2019 will initiate a multi-country approach in collaboration with the Office of Innovation to further enhance the role of digital health technologies. In addition, EQUIST provided direction to domestic and global investments in at least ten countries, where investment plans, inter alia, were produced for GFF platform and are under discussion for GFF funding.

PD-Health continued to lead and scale up the global newborn health agenda by co-chairing the global management group of *Every Newborn Action Plan* (ENAP) and leading country level implementation. 86 countries reported progress on ENAP milestones, continuing the momentum built over the previous three years (71 in 2017, 51 in 2016 and 18 in 2015). Major progress was also facilitated through HQ led multi-country programmes to improve quality of maternal and newborn care in Ghana, Bangladesh and Tanzania. In Ghana, PD Health has contributed to declines in neonatal case fatality rates by 58% (from 10.2% to 4.3%), institutional stillbirth rates by 30% and MMR by 70% in 24 health facilities in four districts. In Bangladesh, case fatality rates of sick newborn admissions declined from 11.9% to 4.8% between January and August 2018 in the Kurigram district hospital. In Tanzania, neonatal case fatality rates declined from 16% in April 2018 to 13% in September 2018 in 14 health facilities in two districts. In 2018, Nigeria did not see a WPV case, a positive development that warrants grounds for optimism and hope that the ultimate elimination of polio in the country would be achieved in the future. The *Investment Case on Maternal and Neonatal Tetanus Elimination* (MNTE) was finalized in 2018 and will guide additional investment from donors for MNTE in the world's last 14 countries that have not yet achieved the elimination goal. The *Immunization Roadmap* and the draft working paper on UNICEF programming approaches in middle income countries were also developed to steer programme engagements.

The Health Section rolled out the comprehensive *Effective Vaccine Management (EVM) approach* and supported countries to leverage HSS funding to implement the EVM improvement plans^{iv}. As a result of the Health Section's EVM related work, all countries that took an EVM assessment in 2018 (i.e., Haiti, Lesotho, Rwanda, Uganda, Mali, Comoros, Azerbaijan, Ukraine, Georgia and India) showed improvements in their vaccine management capacity. Additionally, the Health Section provided seven COs with technical assistance in improving cold chain management, resulting in their successful applications for GAVI support through the cold chain equipment optimization platform (CCEOP). UNICEF, together with Bill and Melinda Gates Foundation (BMGF), continued to chair the *Equity Reference Group for Immunization*, which highlighted the need to focus immunization programming on urban poor, remote rural and conflict affected populations. Significantly, this strategic focus has been reflected in GAVI policies as well as in reports and meetings of the Global Vaccine Action Plan (GVAP) and Regional International Technical Advisory Groups (RITAGs) on immunization.

In child health, PD-Health stepped up its advocacy work for the use of amoxicillin as the recommended first-line treatment for pneumonia in children. However, evidence shows that not all countries have policies to promote amoxicillin and major gaps in financing for procurement still exist. To address these challenges and ensure children have access to life-saving medicines, PD-Health, independently and through partnerships, continued to shape global and local delivery markets, including improving quality assurance and supply. In 2019, PD-Health will continue to advocate that countries include

amoxicillin DT into their national Essential Medicines Lists, adopt WHO treatment guidelines, and register amoxicillin DT in country programmes.

Through in-kind donation programmes [PD-Nutrition](#), in collaboration with Supply Division, continued to facilitate the donation of essential nutrition supplies for children and women to some of the countries most in need. In 2018, 500 million capsules of **vitamin A** were donated to 58 countries and 129,000,000 sachets of ready-to-use therapeutic food were donated to 18 countries, offering powerful life-saving protection and improving the nutrition status of millions of children.

Last year, in order to accelerate SP results in Goal Area 1, PD-Nutrition successfully launched and rolled-out *joint programme acceleration strategies* (HQ-ROs-COs), to reach three major Strategic Plan targets by 2021^v. In addition, 2018 was an important year to establish joint programme learning compacts (HQ-ROs-COs) with selected regions and countries on new areas of work, such as *Nutrition of School-Age Children, Nutrition of Adolescents, Maternal Nutrition, Prevention of Overweight and Obesity, and Food Systems for Children*. The roll-out of these joint programme acceleration strategies and programme learning compacts allows PD-Nutrition to work in a more coordinated way with ROs and COs to align the intended results with UNICEF 2018-2021 strategic plan and ensure that technical and operational support are provided in a timely and quality manner. Three main factors contributed to the successful roll-out of the acceleration strategies and learning compacts: (i) timely technical and strategic guidance and support; (ii) financial support to 86 countries, with emphasis on the ten countries that account for more than 70 per cent of the world's stunted and wasted children; and (iii) in-kind support to 58 countries, with emphasis on the countries most in need of life-saving nutrition supplies for children and women.

As the result of its technical and knowledge leadership in maternal and child nutrition, in development and humanitarian contexts, the Nutrition Section continued to provide global technical support and strategic guidance in key programmatic areas, including breastfeeding, complementary feeding, micronutrient supplementation, nutrition of school-age children, adolescent nutrition, maternal nutrition, food fortification, food systems, prevention of child overweight, care for children with SAM, and emergency preparedness and response; and to support policy formulation, strategy development and programme design. For example, PD-Nutrition supported WCARO office and six countries to develop tailored scale up plans for children with SAM (Chad, DR-Congo, Mali, Mauritania, Niger, Nigeria) to guide country level implementation. Similarly, PD-Nutrition supported ROSA in generating evidence and evidence on progress, trends and the way forward to a greater ambition for nutrition in South Asia (Afghanistan, Bangladesh, Bhutan, India, Nepal, Pakistan, and Sri Lanka) including a 15-article Special Issue of the International Journal Maternal and Child Nutrition.

In 2018, PD's [HIV/AIDS Section](#) has focused on global policy advocacy and country support to implement targeted adolescent and youth HIV prevention programming, aiming at segments of the adolescent and youth demographic in danger of being left behind such as key populations^{vi}, adolescent girls and young women who are pregnant and adolescent girls and young women in targeted geographies. Support was provided to disaggregate current country data to improve the identification of key populations, resulting in the generation of evidence to better identify gaps, build knowledge, guide programmatic actions, and ultimately demand policy change in the countries. New disaggregation was generated and collated on initiation of risk behaviors, HIV prevalence, and other HIV key indicators, and population size estimations for 25 countries prioritized by the UNICEF 'All in' platform.^{vii}

Prevention programming for adolescent girls and young women continues to be beleaguered by limited scale and patchy implementation, with a poor track-record of success in taking consistent and evidence-based programmes to scale. In 2018, PD-HIV launched a technical initiative to identify and avail programmatic and operational tools and guidance that can be adapted by national programmes and implementing partners. The objective was to gather global guidance to support scaled up evidence-based

combination prevention for adolescent girls and young women (AGYW) and adolescents and young key populations (AYKP). These tools targeted national authorities and their sub-national counterparts as the primary audience and aimed to avail content across the entire programming cycle to enhance planning, design, analysis, implementation, oversight, and resourcing of contextually appropriate prevention programmes, including creative leveraging of new media, digital programming, and total market approaches to reach vulnerable, underserved, and hidden youth. The toolkits reinforce new technical programming guidance on HIV prevention for at-risk adolescents and young people, comprising a suite of knowledge products that promote a transition from broad, diffuse prevention to programs that are tailored and targeted for the key risk profiles of adolescents.

In 2018, to increase access to *HIV diagnostics among children*, PD-HIV, in partnership with CHAI and the African Society for Laboratory Medicine (ASLM), supported the introduction and scale up of PoC EID in three countries in West and Central Africa (Cameroon, Democratic Republic of Congo, and Senegal). This work has built on the momentum of PoC EID rollout in ESA and has started to have an impact on the coverage of EID in the region^{viii}. In practical terms this translates to reduced loss to follow up of mother-baby pairs, timely diagnosis for HIV exposed infants and a greater likelihood that infants identified as HIV infected will initiate early ART. Key to the success of this work has been the ability to coordinate across multiple partners and leverage their respective capacities, competencies, and spheres of influence. In addition, regular monitoring of progress to determine the need for course correction has allowed the programme to grow monthly. The project has enhanced the role of UNICEF as a neutral broker and convener, as a procurement agent for commodities and as a technical partner to support implementation.

Last year, the **Early Childhood Development** team in PD has invested in enhancing a range of global partnerships to meet the needs of scaling up ECD programmes, for example: (i) the political partnership with the G20 recognized UNICEF as a key technical partner to endorse ECD as a political and financial investment priority; (ii) new funding partnerships that went beyond traditional ECD donors were established, e.g., NORAD; (iii) technical partnerships were further strengthened, e.g. with the Gates Foundation to design a cognitive development “learning to action agenda”, and with WHO to align programme strategies following the adoption of the ECD agenda by the health sector (Nurturing Care Framework which was endorsed at the World Health Assembly in May 2018 (<https://nurturing-care.org/>)); and (iv) further advocacy partnerships were strengthened, e.g., ECDAN to serve as a knowledge platform for sharing best practices to support scale up of ECD programs; and ECPC to promote the measurement of ECD and social cohesion in several countries.

The work on holistic ECD has contributed to greater support for parents and caregivers to be able to provide optimal environments for young children. PD-ECD team (in collaboration with the Nurturing Care Framework (NCF) core team, and experts from the gender team) led in designing a *Caring for the Caregiver* module, which aims to improve the emotional well-being of caregivers, with a special focus on adolescent and vulnerable mothers. The module was tested in two countries (Sierra Leone and Mali) and will serve as a valuable resource for ECD programming in humanitarian and fragile context. Seven governments in ESARO have already committed to working on the Nurturing Care Framework, and countries in 3 regions (WCAR/MENA/EAPR) have expressed interest in implementing the framework. 2018 also saw enhanced quality and capacities of front-line workers (as part of the targeted efforts to strengthen systems through support from the 7% funds).

Goal Area 2

Goal 2 of the UNICEF Strategic Plan, 2018–2021 aims that all girls and boys must have equitable access to schooling, and the opportunity to develop the skills needed for life and work. GA2 is facilitated in

PD through the Education Section that works in close collaboration with all other PD Sections to guarantee a multi-sectoral response to the educational challenges that the world faces.

To address a situation where global funds for Early Childhood Education (ECE) are decreasing, and demand for assistance from governments seeking to respond to the related SDG target^{ix} is increasing, **PD-Education Section** has generated guidance and roadmaps to advance results in pre-primary education and a Conceptual framework for strengthening the pre-primary sub-sector. The Education Section supported the field directly in 12 countries^x to raise the profile of pre-primary education in education sector plans and budgets, and in 7 of those countries, comprehensive sub-sector plans were developed to advocate for increased funding to the sub-sector, which is expected to happen in 2019. Thematic guidance on pre-primary workforce development and quality assurance were also developed in 2018 to guide country office efforts to develop long-term strategies supporting quality pre-primary education.

PD-Education continued to work towards building and strengthening partnerships and a common vision around ECE. The Global Partnership for Education (GPE) awarded UNICEF USD \$1.3 million to lead the *Better Early Learning and Development at Scale (BELDS) Initiative* that seeks to strengthen countries' capacity to effectively plan and implement quality ECE programs at scale. Under BELDS, in 2019, PD Education will develop a global toolkit of resources to support the systematic integration of ECE into Education Sector planning and implementation cycles, and pilot test the toolkit in a few GPE member countries. The participating countries' engagement in BELDS can be leveraged for new GPE grants for sector analysis and planning that include ECE.

Skill development is an expanding area of work for UNICEF and is an integral component of programming across many PD Sections. In 2018, the Education Section focused on setting a global direction and shared vision across UNICEF on skills through the development of a *Road Map*, two briefing papers to the Executive Director, and consultation across PD on a *Global Framework on Transferable Skills* (with RO peer review Q1 and launch Q2 2019). A Teams site page and yammer group on skills was launched and four global webinars hosted with over 80 attendees from PD, RO and CO. To share these efforts around a global vision for work around skills, the Education Section presented at LAC and ESA Regional Education Network meetings on the Roadmap and Global Framework on Transferable Skills. At the regional level, technical inputs were provided on a Skills Framework and Mapping to the ECA and WCARO Regional Offices, a Young People's Investment Case for ESARO, and Second Decade Strategies for LACRO and EAPRO.

PD-Education is also investing in the increased opportunities for partnership with the private sector in the area of skills for employment. In 2018, the Section, in partnership with PD's Adolescent Section (ADAP), worked with five countries (China, Kosovo, Montenegro, Philippines, Vietnam) with ING to deliver support to adolescent girls and boys to develop 21st century skills and to be civically engaged through the Power for Youth programme. The Section also supported design of a UNICEF partnership commitment alongside the Bangladesh CO for implementing the Global Initiative on Decent Jobs for Youth in the country.

Goal Area 3

Goal Area 3 of the Strategic Plan aims to ensure that every child is protected from violence and exploitation across development and humanitarian contexts. Drawing on the theory of change, Goal Area 3 seeks to balance the need to respond to rights violations at scale, while strengthening systems and furthering social change to prevent their occurrence in the first place. GA3 is facilitated in PD through the Child Protection (CP) Section.

In 2018, **PD-Child Protection Section (CP)** continued to actively engage with partners to support efforts to deliver strategic interventions to prevent and protect children from Violence Against Children (VAC). As part of its overall contribution to the 'INSPIRE' multi-sectoral programme package of evidence-

based strategies for ending violence against children, UNICEF developed the [INSPIRE indicators and results framework](#). This publication was the culmination of a two-year participatory process involving all 10 INSPIRE partner agencies and other experts. It fills a major gap in the availability of tools to monitor interventions to prevent VAC and will support the identification of effective approaches necessary to scale up to eliminate VAC by 2030.

PD-CP was instrumental in convening the ground-breaking global *Solutions Summit* in Sweden (75 countries and 450 participants) in September 2018. The first ever VAC-focused Summit at ministerial level concluded with the 'Stockholm Solutions Summit Proclamation', which renewed the call to place children at the center of the 2030 Agenda, including through a progress review at the 2019 High-Level Political Forum on Sustainable Development fora. Galvanizing a global movement, the *Solutions Summit* successfully brought principals of all lead agencies around a common agenda and the declarations of participating 'Pathfinder' countries triggered the highest political commitment by national governments. The *Summit* results are expected to continue to accelerate national government commitment to strengthen VAC prevention and response services and increase public investment across 'Pathfinder' countries in support of UNICEF Country Offices' efforts to scale up Strategic Plan Goal Area 3 implementation. As part of the Summit, UNICEF coordinated the production of 13 case studies showcasing progress in 'Pathfinder' countries to end VAC. As a lead and founding agency of the Global Partnership to End Violence against Children (GPEVAC), UNICEF continued to provide technical and coordination support to 23 Pathfinding countries and those committed to scale up evidence informed programmes.

In compliance with the 2016 VAC Evaluation Management Response, and to promote an organization-wide approach to ending VAC, CP widely disseminated the 2017 VAC Children Theory of Change (TOC). The TOC forms the core of the UNICEF 'Programme Guidance on Preventing and Responding to Violence against Children' drafted in 2018 (forthcoming in 2019). The Programme Guidance will serve as a key reference for COs in the implementation of priority interventions that align with UNICEF's comparative advantage. More detailed guidance is under preparation for specific interventions in Social Service Workforce Strengthening and Parenting and Caregiver support. Additional technical resources in 2018 include Technical Guidance on C4D approaches addressing VAC (which has served to inform 'road maps' to end VAC for COs in LACRO and MENA) and an Armed Violence TOC (which was adopted in LACRO to serve as a strategic framework for related country programmes).

A collaboration between the Communication for Development (C4D) Section, CP and key partners such as UNFPA, led to the development and roll out of technical guidance, training and tools to strengthen **UNICEF's programming to address harmful practices such as VAC and FGM**. More than 30 countries participated in 5-day face-to-face trainings held in ECARO and LACRO to roll out technical guidance on the research, monitoring and evaluation for C4D interventions to address VAC. The workshops also introduced a new C4D Roadmap planning tool and by the end of 2018 more than 20 countries have completed a C4D Roadmap for VAC. Both the LACRO and ECARO regional offices, with support from PD-CP, have put in place a mechanism for ongoing follow up and support to the countries in implementing their roadmaps. In 2019, the technical guidance will be translated into multiple languages and an e-module will be developed to provide offices with further support in developing and implementing C4D and VAC programming. Similarly, a framework for the measurement of social norms change related to FGM was also developed, and validation of this framework commenced in Guinea and Ethiopia in 2018. The framework will be rolled out more widely in 2019 following conclusion of the validation, and will help to increase impact of social norms changes interventions by providing better analytic tools to identify and track change in social normative determinants of FGM, and, eventually, for other harmful practices such as child marriage and VAC.

UNICEF intensified efforts to tackle sexual abuse and exploitation of children, including its online dimensions. In particular, CP contributed to the development of guidelines and standards for the CRC

Optional Protocol on the Sale of Children, Child Prostitution and Child Pornography (OPSC). The Guidelines are intended to foster a deeper understanding of the OPSC and related CRC provisions to enhance implementation and improve reporting quality by States Parties. This guidance is especially timely given the emerging landscape of information and communication technologies (ICT) and related evolving international and regional standards. PD-CP also supported global efforts to address child protection online, including through representation on the Interfaith Alliance Forum Steering Committee, the Interpol Specialist Conference on Crimes against Children; and the Internet Governance Forum. UNICEF collaborated with ICT private sector companies including Microsoft, Facebook and Google on industry-initiated events such as the Hackathon to develop artificial intelligence tools for detecting online grooming, and Microsoft's Council for Digital Good that seeks to address online harassment and bullying.

Proven innovative technologies like Primero – "Innovations for Scale" funding initiative in 2018 – is a demonstrable example of innovative efforts to improve case management for hard-to-reach communities and vulnerable children, such as children who are unaccompanied and separated in emergencies and link these cases to local social welfare and protection services. There has been a rapid scale up in Primero's application since its launch in 2015, which by the end of 2018 had 22 active instances in 16 countries (including 4 new countries in 2018) and supported over 700 users from more than 50 organizations to manage data on 40,000 vulnerable children safely and confidentially.

Also in 2018, PD-CP and D&A released [new data](#) on global trends and progress on child marriage. The data revealed 25 million child marriages have been prevented in the last decade due to accelerated progress, driven largely by significant reductions in South Asia; but equally, that the problem persists, with over 150 million girls likely to marry by 2030. Statistical brochures and reports ([global](#), [Africa](#), [WCARO](#), [MENARO](#), [Ethiopia](#)) were released. This material to end child marriage was underpinned by a global advocacy plan and was showcased through the press and at high-profile advocacy moments. This new data and related research will shape the programming approaches of the UN Joint Programme on Ending Child Marriage as the current rate of decline in child marriage is still not sufficient to meet the SDG target of ending child marriage by 2030.

Goal Area 4

Goal Area 4 of the UNICEF Strategic Plan, 2018–2021 articulates the organization's commitments to environmental and resiliency components of the 2030 Agenda for Sustainable Development, in particular Sustainable Development Goal (SDG) 6 on clean water and sanitation, SDG 11 on sustainable cities and communities, SDG 13 on climate action and SDG 5 on gender equality. PD works on GA4 mainly through WASH and HATIS sections, which also have the commission to facilitate PD's cross-sectoral and cross-divisional approach related to climate and resilience.

In 2018, [PD-WASH](#) has finalized and disseminated the *UNICEF Game Plan to End Open Defecation*^{xi} (OD Game Plan), ensuring that ending open defecation receives the deliberate and sustained attention needed to achieve UNICEF and SDG targets. The OD Game Plan serves as a basis for global and local advocacy, programme support to country offices, review of country programme documents and strategy notes, results planning and reporting, and fundraising support through global thematic and multi-country grants. The Game Plan monitoring indicators have been integrated into the Strategic Monitoring Questions (SMQs) so progress will be collected on an annual basis using corporate monitoring systems. Though initially planned as an internal document, the OD Game Plan has also been shared with partners including the World Bank, USAID, Bill and Melinda Gates Foundation, DFID, Netherlands, Sida, Finland and several INGO and private sector partners. Thus far, it's been a welcome initiative resulting in strategic collaborations at global and country levels for follow up in 2019.

In terms of *increasing equitable access to safe and sustainable drinking water services*, a key 2018 achievement the development and dissemination, in collaboration with SD, of the Borehole Procurement Toolkit. The toolkit was finalized in November last year, and dissemination planned in Q1 of 2019; the toolkit aims to provide needed guidance to country staff for improving the quality of water programming with regard to sustainability and water safety. Support on sustainable groundwater was provided to 10 countries through direct technical support and field visits, or through a Helpdesk facility. Country Offices were provided with guidance on the implementation of the Strategic Framework, which emphasized a risk-based approach to programming; the guidance helps to undertake systematic analysis of the technical risks and hence to develop remedial actions to mitigate these risks.

WASH PD has been investing in innovative solutions such as the key partnerships with Rural Water Supply Network (RWSN) and Water Mission International to provide capacity in more technical issues such as the use of **solar power** for water supply systems. In collaboration with SD, the WASH in Emergency Unit, Education and Health, the *Water Mission partnership* aims at establishment a Helpdesk for technical support on the design, siting, installation, procurement and operation/maintenance of solar powered systems. The use of solar systems also benefits the health and the school systems, multiplying the positive impacts in the life of children.

Technical guidance on *menstrual health and hygiene in schools* was produced in 2018, for dissemination in 2019. The guidance was a collaboration with the Gender section and in consultation with Education, Health, Adolescent Development, and Disability and external partners, and aims to improve the quality of UNICEF's WASH programming, facilitating the achievement of SP and GAP targets for MHM in schools. In the same topic, to facilitate learning and knowledge sharing, UNICEF led the *Virtual Conference on MHM in WASH in Schools*, which brought together around 1,300 people from over 100 countries. The event featured work from UNICEF country offices (Ghana, Burkina Faso, DRC, Cambodia, Palestine), ROSA and EAPRO, as well as key UNICEF partners such as USAID, WaterAid, PSI, London School of Hygiene and Tropical Medicine, Emory University, Columbia University. The conference allowed countries to profile their initiatives, promoted learning and exchanges across UNICEF and other partners, with overall aim to improve emphasis and quality of programming and alignment on MHM.

Following PD's Office Management Plan (OMP), the **Humanitarian Action and Transition Section (HATIS)** works in three interconnected areas^{xii} to strengthen and enhance the effectiveness of programmes operating in humanitarian and fragile contexts and other challenging operating environments. In 2018, further progress was made towards institutionalization of risk-informed programming which is key in strengthening preparedness, linking humanitarian and development programming, and UNICEF contribution to resilience and social cohesion. Thus, UNICEF's *Guidance on Risk-Informed Programming* (GRIP) is now complemented with a full set of sector modules (Health, HIV, Nutrition, Education, Child Protection, WASH, Social Inclusion). Eight countries were supported remotely in planning and conducting risk-informed programming, while three in-country GRIP workshops were undertaken (Pakistan, Timor-Leste and Mali) to support country programme development and the roll-out of subnational workplans. GRIP was also updated to include a stronger focus on conflict and fragility, and the negative effects of climate change.

HATIS has also invested in integrating peacebuilding and climate change lens into planning in programming. In March 2018, the Section launched its Programme Framework for Fragile Contexts, which outlines innovative programming strategies to deliver results in contexts of fragility and protracted crises. The Swiss Permanent Mission to the UN hosted a launch event with contributions from the World Bank, Save the Children and UNICEF. Moreover, the publication of the "Youth4Peace" Progress Study on youth, peace and security proved to be a milestone for young people's contributions to the UN peace and security pillar. The youth-led study makes a number of recommendations to governments and international

organizations to engage young people and counter false ‘policy panics’ surrounding youth. With the launch of the study, UNICEF took a more active role in the Youth, Peace and Security coalition, advancing the UN’s support to youth-led peacebuilding.

Goal Area 5, *Hows and Enablers*

Goal Area 5 encompasses the efforts by UNICEF to address inequity by helping to reduce poverty and deprivation and tackling discrimination and exclusion. In PD, this objective is facilitated through four programmatic Sections (*Social Inclusion and Policy, Adolescents, Disabilities and Gender*), and two *Hows/enablers (Communication for Development - C4D and Human Rights)*.

In 2018, **PD-Social Inclusion and Policy** (SIP) continued to support countries to strengthen shock responsive social protection systems. With the objective to better understand the situation, and to develop knowledge products that provide programmatic direction, PD-SIP has mapped the level of readiness of Social Policy systems to respond to shocks and to map the extent of UNICEF’s support to this effort in each country. In total 52 countries were mapped, and the results will be used to frame this area of work in 2019.

SIP has also developed, in partnership with EMOPS a *guidance on humanitarian cash transfers*. This guidance outlines UNICEF’s approach to humanitarian cash transfers and related preparedness actions, key considerations for ensuring sectoral and multi-sectoral impact and operational guidance on designing HCTs. Work was also initiated in 2018 on separate guidance on shock responsive social protection. This guidance is aligned with the upcoming updated social protection framework and focuses on building and strengthening national shock responsive social protection systems; and on delivery of cash and linking to services in humanitarian response. Together, this full suite of tools will help colleagues in crisis-prone countries to support governments to develop and make the best possible use of shock responsive social protection systems to reach families quickly with financial assistance in times of crisis.

Also, in 2018, PD-SIP responded positively to the request of the *Grand Bargain group on humanitarian cash transfers* to co-lead with DFID and IFRC the sub-group on linking humanitarian cash transfers with social protection. This role will allow UNICEF to influence humanitarian stakeholders to work closely with governments for delivering cash transfers to men, women, boys and girls affected by crisis. Additionally, on the invitation of CashCap (the cash surge capacity hosted by NRC for deployment to humanitarian agencies, including UN), the section facilitated a full day learning session for their experts on shock responsive social protection and opportunities for linking HCT with social protection.

Through active outreach and engagement in *Public Finance for Children* (PF4C) work around the world, PD-SIP have continued to refine its understanding of how PF4C tools and approaches can be used to ensure that governments spend more and better on children. In 2018, a key focus of the Social Policy Section has been to strengthen organizational capacity in PF4C to equip staff with the understanding, confidence, tools and access to technical resources and support they need to apply PF4C in their daily work. For that, (i) the PF4C Global Programme Framework was launched, advancing a clear and common approach to UNICEF’s role and engagement in PF4C, helping also to position us with external partners; (ii) the PF4C Global Learning Programme further strengthened UNICEF’s organizational and staff capacities to engage in PF4C, with 189 staff from different functional areas trained in 2018; (iii) the establishment of a Long-Term Arrangement for Services (LTAS) in PF4C has improved our ability to leverage external PFM expertise efficiently and affordably; and (iv) the Section improved and promoted the use of the PF4C Community of Practice (CoP), increasing staff access to internal and external knowledge and information sharing on PF4C.

With a prominent organizational focus on adolescents within the Strategic Plan (2018-2021) and recognizing the need to accelerate results for adolescents, [PD-Adolescents Section \(ADAP\)](#) has directed its efforts towards providing technical leadership to regional and country offices on adolescent development and participation. An important milestone in 2018 was the completion and dissemination of the *Programme Guidance for the Second Decade*, a key organizational document that outlines UNICEF's strategic vision and results on adolescents, implementation strategies, delivery platforms, partnerships and organizational arrangements. Since its finalization, the programme guidance has served as the reference document on programming with and for adolescents during strategic reflections including RMTs, network meetings and CPD processes. Additionally, support was provided to the development of at least 6 adolescent responsive policies, standards and tools to strengthen adolescent work across sectors and divisions including health, nutrition, WASH, education and evaluation^{xiii}. Further to strengthening UNICEF's organizational products on adolescents, ADAP Section contributed and influenced multi-stakeholder products and declarations to be more adolescent responsive such as the *Declaration of the Global Symposium on Social and Behavior Change Communication* and the *Global Consensus Statement on Meaningful Adolescents and Youth Engagement*.

In 2018, through the advocacy and technical support provided by the [Disability Section](#), UNICEF solidified its position as a leading agency and preferred partner within the disability inclusive development arena. Institutionally, in 2018 the Disability Section supported the ED's engagement with the Secretary-General Executive Committee meeting, which resulted in the decision to develop a policy, action plan, and accountability framework to strengthen the inclusion of persons with disability across the UN system. A major result in 2018 was the UNICEF facilitated agreement between CRC and CRPD Committees to align both Conventions on the rights of children with disabilities. Upon the Disability Section's analysis of the inconsistencies between the CRC and CRPD Committees interpretations of the rights of children with disabilities, the need for greater alignment became evident and urgent. The PD Disability, Human Rights and Child Protection Sections worked together to promote the dialogue between the two Committees, facilitate the establishment of a joint working group on children with disabilities and support a CRC-CRPD Joint Statement on Children with Disabilities.

In the area of *inclusive education*, in 2018 the Disability and the Education Sections focused joint efforts to strengthen systems for inclusive education through key strategic partnerships with the World Bank, UNESCO IIEP, DFID and USAID. This initiative has built the capacity of Ministries of Education, Civil Society and Education Officers in 17 countries from Africa, South Asia, East Asia and the Pacific. On innovations for inclusive education, the Disability team, together with Kenya CO and ESARO, supported the Ministry of Education and the Kenyan Institute for Curriculum Development to start production of the first accessible digital textbooks in Kenya. In 2018, UNICEF has also secured funding through the UN Partnership on Rights of Persons with Disabilities (UNPRPD) to expand the textbook initiative to Rwanda and Uganda (2019-21) in partnership with UNESCO.

During 2018, the [Gender Section](#) enabled UNICEF to take a leading role with the Spotlight Initiative, a joint UN-EU initiative that aims to end violence against women and girls. The initiative, with funding of \$520 million, has regional themes: trafficking in Asia, femicide in Latin America, domestic violence in the Pacific and Caribbean, and harmful practices—FGM/C and child marriage—in Africa. UNICEF signed an MoU with the Spotlight Initiative, making the organization a key implementing partner at HQ, regional and country levels. In addition, PD-Gender served as a permanent Observer in the Operational Steering Committee, the main decision-making body for the Spotlight Initiative, and served as a member of its core Technical Advisory Group. Given the prominent role of the Spotlight Initiative as a SDG Fund directly managed by the DSG Office, as an accelerator for the Common Chapter gender result, and a flagship UN reform initiative, UNICEF's close collaboration has been critical in strengthening UNICEF's gender equality

mandate in the UN system. This massive effort resulted in an investment of \$44.8 million for UNICEF's GBV programming in non-emergency contexts.

Developing innovative solutions to advance integrated results was a top priority for Gender in 2018. Under the leadership of the Gender Section and in consultation with internal and external stakeholders, 13 countries have received support to the development of a robust activity portfolio in gender. These activities are primarily digital solutions to advance programming results. Illustrative examples include a multi-country period app designed by girls in Asia for use on simple and smart phones, and an off-network app for fathers in Cuba to meaningfully engage in the early development of their children. In 2018, the Gender Section provided support to all 13 countries. For example, in Mozambique support to the UNICEF CO facilitated the increase in girls accessing the digital platform called "SMS BIZ", which connects girl mentors to their mentees who provide accurate, real-time responses to questions on sexual and reproductive health.

Strengthening Gender Expertise and Capacity Across the Institution and Field was implemented through a series of actions spearheaded by GenderPro. By the end of 2018, GenderPro provided 81 per cent of the 86 Country Office Gender Focal Points (GFPs) with a [facilitated capacity programme](#), that included online learning, webinars and digital communities of practice. This already surpasses the target to train 80 per cent by 2021. In addition, an [open-source learning platform](#) was implemented on Agora and made available to any staff or implementing partner looking to have a core gender competency. In addition, 41 GFPs have been credentialed by the internally-designed GenderPro GFP system in recognition of their gender expertise and skill set. This in-house credentialing system was developed in 2018 on Agora and the Human Resources Talent Management platforms, and allows GFPs to be tested, and if successful, added to a roster of Credentialed GFPs. The roster can be accessed by any hiring manager.

Building on a *Generation Unlimited* solution submission, the Gender Section negotiated and launched a 3-year shared value partnership on girls' empowerment with Unilever Dove that aims to reach 10 million girls and boys in Brazil, India and Indonesia with sustainable self-esteem and body confidence programmes. This partnership builds on Unilever DOVE Self Esteem Project tools and materials and UNICEF programming platforms in country. Together, Unilever and UNICEF will co-create a set of modules on body confidence and self-esteem that UNICEF and partners can use within life skills programmes for adolescents, with a particular focus on girls' empowerment.

In 2018 the [Communication for Development Section \(C4D\)](#) rolled out the first-ever UNICEF organizational standards for quality C4D implementation. Monitoring of organizational performance on organizational benchmarks for quality and at scale C4D will contribute both to increased data-driven technical support and to rigorous monitoring of quality C4D implementation at country level throughout the 2018-2021 SP. Meeting these organizational benchmarks is key to achievement of demand-related and social and behavioral results across all Goal Areas, to UNICEF's systems strengthening approach, and to increased prioritization and incorporation of C4D implementation strategies and approaches within Results Frameworks and new Country Programmes.

Community Engagement is one of the key agendas for which UNICEF C4D has the international mandate, and technical custodianship within the organization is being carried by PD-C4D. In-keeping with the planned milestone on global partnerships and standards, PD-C4D led the development of an interagency framework for community engagement standards and indicators for quality implementation and measurement at field level. The development of the framework was informed by inputs from an interagency advisory group that included key stakeholders (e.g. WHO, USAID, BMGF, Oxfam, Save the Children, CORE, Wellcome Trust), three technical working groups (WASH, Health and Nutrition, Humanitarian), and multiple global and country level consultations with government and CSO partners. In 2019, the CE standards will be validated and rolled out to generate a common understanding and improve quality

implementation in UNICEF and partners community engagement programming across all Goal Areas; and provide a common framework for UNICEF's approach to Community Systems Strengthening.

To advance the universal realization of children's rights, within the context of both the Sustainable Development Goals and the UNICEF Strategic Plan, the **Human Rights Unit (HRU)** supported UNICEF engagement with independent human rights institutions, particularly National Human Rights Institutions (NHRIs)^{xiv}. UNICEF's engagement with the Universal Periodic Review (UPR) – a State-led process that reviews the human rights records of all UN Member States – was expanded with the support of PPD that dedicated a staff member to supporting the HRU part-time. Jointly, an engagement strategy was developed, tools created, and the approach tested with two CO, ready to be taken to scale in 2019. The HRU was also part of the group that advocated for the inclusion in the Human Rights council resolution of the prohibition of child detention for migration control. As a result of this engagement, and in close cooperation with CO and relevant HQ divisions/sections, the profile of child rights was kept high at the HRC; UNICEF national and global advocacy was amplified in that global forum; and the normative framework strengthened.

PD Field Engagement (non-humanitarian)

In 2018, in partnership with the Regional Offices, PD provided strategic and technical assistance to more than 110 UNICEF programme countries. PD staff has participated on key strategic moments for the programme cycle, from its conception to the evaluation of results. Assistance happened on-site and remotely, reducing costs and maximizing the PD's interaction with country and regional offices. *Thematic networks* for all programmatic areas were consolidated as an important hub to connect PD with the Regional Offices and are an integral part of PD' strategy to maximize its field engagement and programme monitoring. Meetings for these networks happen at frequent basis and are an important forum for information sharing, exchange of experiences, and to discuss programmatic improvements.

PD **Health** Section provided direct in-country technical assistance to all seven ROs and over 30 COs through 81 missions in 19 technical areas (excluding Polio) and directly supported PHE/HiE response through 15 missions and stretch assignments. The HQ team participated in EAPR, ESAR, LAC and WCAR Regional Health Network Meetings and interacted with chiefs of health in over 80 countries. Additionally, 19 COs received direct support to further strengthen equity in immunization and eight countries obtained support in immunization financing.

Nutrition has supported 59 countries (46% on site and 54% remotely) in improving their programme. For example, as mentioned before, PD-Nutrition supported WCARO office and six countries to develop tailored scale up plans for children with SAM (Chad, DR-Congo, Mali, Mauritania, Niger, Nigeria) to guide country level implementation. Similarly, PD-Nutrition supported ROSA in generating evidence and evidence on progress, trends and the way forward to a greater ambition for nutrition in South Asia (Afghanistan, Bangladesh, Bhutan, India, Nepal, Pakistan, and Sri Lanka) including a 15-article Special Issue of the International Journal Maternal and Child Nutrition.

In 2018, the **Early Childhood Development** team has supported 16 countries to strengthen implementation of multi-sectoral ECD intervention packages towards scaling up. Additionally, the field engagement spanned to 106 countries, supported in different capacities, through on-site and distance TA, capacity development, advocacy and communication, resulting in: (i) a shift in the ECD narrative from "why" to "how"; (ii) approximately 85 countries have prioritized ECD results in their CPDs; (iii) an increase in ECD funding at national and regional levels (LACRO fundraising was based on the ECD programme guidance); (iv) the adaptation of programme tools to national context in 16 countries; (v)

354 staff completed the “Early Childhood programming in the field” course launched on Agora in June 2018; and (vi) participation of 100 COs in webinars focused on ECD programme implementation.

Child Protection has supported 69 countries in 2019. The Section has invested in monitoring and analyzing field engagement data to better plan its approach to the countries. The Section has been closely tracking their engagement through different dashboards that provide detailed information for programmatic and management decision-making. The dashboard tracks which countries were provided support and which programmatic area (Figure 1 and Figure 2 in Annex 1).

On-site technical support on ending defecation and scaling up sanitation services was provided by **WASH** PD staff to five high burden countries including India, Nigeria, Pakistan, Philippines, and Kenya. The support provided ranged from global or regional sanitation and hygiene learning events, technical meetings on market-based sanitation and market shaping and country policy review. Links between WASH and Climate Resilience has made considerable progress during 2018. WASH PD provided technical support to 30 country offices on implementing Climate Resilience Framework and elaboration of key KM Products to document the impact of Climate Change on the access to, and utilization of, WASH infrastructure in country offices.

In total, the **HATIS** team provided remote technical support to 16 country offices for PBF applications or recovery and peacebuilding assessments. In addition, HATIS took part in an inter-agency mission for a PBF proposal development for the border region of Mauritania and Mali. HATIS also supported UNICEF Cameroon with a mission to develop a conflict sensitive humanitarian response to the crisis in the Northwest and Southwest of Cameroon.

Thirteen country offices^{xv} were supported by **ADAP** through field visits and remote assistance in strengthening adolescent programming. Cross sectoral support was provided to Cote d’Ivoire, Bangladesh and Tajikistan which received 7% set aside funds, technical assistance on skills building and civic engagement was provided to the five countries under the UNICEF-ING partnership, in addition inputs were provided to country offices’ Strategy Notes, Situation Analysis and CPD reviews.

In 2018, the **HRU’s** support to child rights monitoring by global human rights mechanisms included providing general orientation to 61 countries going through CEDAW, CRPD or UPR review as well as direct guidance and assistance to 20 country offices reporting to the Committee on the Rights of the Child. As a result, recommendations made to State parties by the various mechanisms largely reflected national priorities as advised by CO and therefore formed a solid base for improving the lives of children and reinforcing States’ accountability in the countries concerned.

PD Support to Humanitarian Response

In 2018, PD’s engagement in providing technical and programmatic support to humanitarian and fragile contexts was consolidated and expanded. All PD’ Sections have played a role in direct or indirect humanitarian response. PD has engaged directly or indirectly with the 6 Level-3 emergencies 8 Level-2 emergencies in 2018^{xvi}.

The **Health Section** responded to public health emergencies and provided technical support to countries both on the ground and remotely. This included support on Ebola, cholera, yellow fever, Measles, and Meningitis for DRC, Yemen, Haiti, Myanmar, Bangladesh (Rohingya Camps in Cox Bazaar), PNG, Iraq, Syria, Nigeria and Venezuela. The Section deployed emergency response teams (ERTs) to PNG, Pakistan and Afghanistan for a total of 130 days. The Section also provided technical assistance on newborn care in humanitarian crises to Bangladesh (Rohingya Camps in Cox Bazaar), PNG, Iraq and Yemen.

In 2018, **PD-Nutrition** collaborated with Regional Nutrition Advisors (RAs) and the Global Nutrition Cluster (GNC) to provide **technical support and strategic guidance to 59 countries affected by humanitarian crisis**. Modalities employed included: field missions, document reviews, webinars and capacity building trainings, technical and strategic advice; identification of human resources; ERT support; financial and in-kind support, and regular calls. In addition, PD-Nutrition responded to a long-standing gap identified by GNC partners – the absence of leadership and a coordinated approach among the over 40 GNC partners to provide technical support to countries. To address this gap, PD-Nutrition invested funds and staff time to establish a UNICEF-led Global Technical Mechanism that will provide predictable a technical support to GNC partners and governments.

PD-Nutrition also worked with different divisions, sections and partners to develop tools and guidance to respond to emerging programmatic/technical needs. For example, PD-Nutrition worked with SD to develop **Guidance on the Procurement and Use of Breastmilk Substitutes**, which will help avoid the uncontrolled and unethical distribution of infant formula during emergencies, while providing clarity on how UNICEF can provide support for infants who cannot be breastfed. In addition, PD-Nutrition worked with EMOPs to develop **nutrition sector specific checklists for humanitarian-development nexus and cash in emergencies**. Similarly, with PD-Disability section, PD-Nutrition led the development and dissemination of the **Guidance on Disability and Nutrition in Emergencies**. Finally, PD-Nutrition led the development/update of **Nutrition in Emergencies (NiE) training packages** that will address knowledge gaps for nutrition specialists, programme staff, and senior management.

HIV diagnosis, treatment and prevention continued to be a key component of UNICEF's humanitarian action, especially in the high HIV burden countries of Eastern and Southern Africa. In 2018, the HIV section finalized the HIV module of the Guidance for Risk Informed Programming, reviewed by regions and piloted in the Malawi Country Office. The finalized version includes specific examples of and ideas for programme adaptation in order to make delivery of HIV specific and related services risk-informed. This is particularly important for people living with HIV. Without continued access to treatment such individuals are at risk of increased morbidity and mortality (including from illnesses associated with humanitarian crises such as cholera outbreaks) and of spreading the disease to their partners as HIV viral load increases.

In 2018, **ECD** has provided technical support in emergencies to several regional offices. In particular, significant support was provided to MENARO, including through in-person guidance in a regional ECD meeting (Lebanon) September 2018 and in person support (Jordan) November/December 2018 to MENARO regional office for the development of MENARO's ECD Regional Strategy and the guidance on terms of reference for a consultancy for Care for Child Development. In collaboration with HATIS and EMOPS, ongoing virtual support was provided to 11 countries (including review of HAC). UNICEF is also currently leading on the reinstatement of the Inter Agency Network for Education in Emergencies (INEE) ECD task team and will continue to lead the task team and draft a work plan for 2019.

UNICEF is a lead partner supporting education in emergencies. The **Education Section's** efforts supported the field directly, strengthened capacity around UNICEF's Education in Emergencies (EiE) programmes, supported UNICEF's leadership in key global EiE partnerships and funds raising efforts, and supported innovative initiatives to address the barriers faced by the world's hardest to reach children. In direct support to education in emergencies, the Education Section provided ERT support deployments to Bangladesh, Ethiopia, Honduras, for a total of 199 days. Additional surge was provided to Cameroon and Somalia. Technical support for RO and CO surge needs met the requests of the field, meeting the 2018 milestone, however further ERT deployment requests could have been met had the 2nd ERT post been funded. In efforts to improve learning outcomes for the most marginalized, the Section also worked to support assessments for refugee populations. In-country support (travel to Amman) was provided to the

Whole of Syria project to develop instruments for assessing foundational skills in Arabic. Support was also provided for the development of assessment instruments for students in refugee camps in Ethiopia and aligned to the country assessment system.

Focused on impactful implementation of PSEA in humanitarian contexts, where children and women are most vulnerable to SEA, the **Child Protection** in Emergencies (CPiE) team mobilized internal resources for a programme to improve child-friendly reporting mechanisms, assistance for survivors, and accountability. Efforts were focused on the most high-risk environment for SEA, where crisis-affected and displaced populations are more dependent on assistance. CPiE provided technical support, including monitoring, for 16 COs and three Regional Offices to scale up PSEA, thereby also contributing to the collective efforts of the Inter-Agency Standing Committee (IASC). The CPiE team supported the ED to take up the role of IASC Champion for PSEA and Sexual Harassment, helping her to define the priorities for her one-year tenure and roll out an IASC proposal for accelerating PSEA results in all countries with Humanitarian Response Plans and Refugee Response Plans.

Gender-Based Violence in Emergencies (GBViE) also received renewed attention in 2018. Together with the EU, UNICEF hosted a high-level event for the Call to Action for Protection from GBViE during the UNGA. PD Gender and CP also partnered with Social Development Direct to create a GBV HelpDesk, providing evidence-based programme guidance for UNICEF staff and GBV practitioners around the world. CPHQ also finalized the Operational Guide on GBViE, which will be rolled out in 2019.

In addition to work on global public goods and partnerships, the CPiE team deployed to L3 and L2 emergencies to support programme responses. The Emergency Response Team (ERT) (increased to two staff) provided frontline support to UNICEF COs in Cameroon, Nigeria, Somalia, Turkey (for Syria). In Nigeria, for example, the ERT supported the CO to work with government, military and civil society to achieve the successful release of 833 children from parties to the conflict, and to strengthen reunification and reintegration programmes. Further, in-person technical support on GBViE was provided to UNICEF COs in Bangladesh, Cameroon, Ethiopia, Lebanon, Nigeria, Somalia and South Sudan; and in Jordan, as part of the MENA capacity building initiative.

PD-WASH provided direct support in the form of deployments and targeted technical assistance for preparedness and response in eight countries (South Sudan, Syria, Jordan, Haiti, Yemen, DRC, Bangladesh, and Zimbabwe) while providing remote support on emergency WASH to all regional offices (and many COs) on tools, guidance, reviews and identification and deployment of surge/HR support with specific focus on L3 and L2 emergencies. PD/WASH also collaborated with the PD/Health on the Health Emergency Preparedness Initiative (HEPI) and provided technical input for Ebola and Zika technical sector guides and quick notes.

While continuing to chair the WASH Working group of the GTFCC, UNICEF, through PD WASH, played a critical leadership role to move “Ending Cholera A Global Roadmap to 2030” Agenda forward by developing WASH package for outbreak settings, identifying cholera and WASH research gaps, reviewing OCV requests, coordinating development of technical guidance and advocacy effort. Through funding and technical support from CDC and in collaboration with GWC, two epidemiology for WASH trainings were conducted for UNICEF staff and other sector partners. A global RRT review was also conducted for Haiti, Yemen, Nigeria and South Sudan and organized a webinar to present the results. In addition, Regional Cholera platforms in ESAR and WCAR through technical support, Information management and hot spot mapping.

In 2018, **HATIS** remained at the forefront of support for integration of intersectoral and longer-term perspectives into humanitarian response. HATIS provided coordination support to the programmatic response to humanitarian action and advocated and provided technical support in collaboration with

relevant sections to increase the attention and integration of cross-cutting issues into the core of all emergency responses. Two examples of HATIS engagement in 2018 were the technical support on site with deployments to *Venezuela* for a joint HQ-RO-CO cross-border exploratory mission to support to CO to develop a scale-up plan to address the increasing needs of the population^{xvii}; and the support to *Cameroon*, where HATIS provided helped to conduct a conflict analysis in the northwest part of the country where there is an active conflict affecting especially the education system as it is a target of one of the confronting parties. The conflict analysis provided elements to inform a conflict sensitive and risk informed multisectoral response.

By the end of 2018, 14 country offices were using the Adolescent Kit for Expression and Innovation – developed by ADAP – reaching and engaging more than 88,000 adolescents (130,000 adolescents reached since 2017). A mission to document the Kit “in action” was conducted in Maiduguri, Nigeria, which showed that adolescent boys and girls who had experienced severe violence were overcoming the trauma by developing coping mechanisms and learning new skills, as a result of utilizing the Kit. So far, over 5,000 Kits have been dispatched to 14 countries^{xviii} and partnerships have been forged with local and youth led organizations.

The **Disability Section** supported disability inclusive humanitarian action in a number of significant ways including direct technical support to countries (Jordan, Yemen, Palestine, Bangladesh, Syria, Ethiopia and Lebanon), inputting into humanitarian response plans and needs overviews, developing knowledge resources (guidance on *Including children with disabilities in humanitarian action* developed with EMOPs, and PD Sections – WASH, Education, Child Protection, Health, HIV and Nutrition), capacity building and enhancing accessibility of humanitarian supplies. In partnership with Supply Division, PD-Disability Section has distributed *inclusive emergency kits*^{xix} (school in a box and recreation kit). In addition, the Section worked with SD on the development of innovative products, such as the accessible components for UNICEF’s Emergency Latrine Slabs – the components connect with the standard emergency slabs to make latrines accessible for persons with disabilities.

In 2018, **SIP** section maintained the level of support to the implementation of the Yemen emergency cash transfers. This included support in the technical review of bids for partner selection, participating in the negotiations with the World Bank and serving as the reference group member to discuss implementation models and plans for different stages of the programme. As a part of enhancing organization level preparedness to design and implement humanitarian cash transfers, 7 webinars were organized by SIP, in collaboration with EMOPs, to share, explain and address any concerns related to the MPS9 (Minimum Preparedness Standard for cash transfers) tool. Follow up discussions were held with specific countries/regions to enable realistic reporting and ranking with regards to preparedness on humanitarian cash transfers. The exercise reiterated the need for stronger capacity in country to decide and design humanitarian cash transfers. Accordingly, 3 learning workshops were designed and facilitated for CO & RO colleagues in LACRO, ESARO and ROSA. All learning events focused on designing humanitarian cash transfers using parallel and national social protection systems. Due to the extent of work in ESARO, the learning event in the region focused primarily on preparing social protection systems to respond better to crisis.

Social Policy also continued its collaboration with HATIS, with focus on the role of local governance and both peace-building and disaster risk reduction. Two technical notes on these topics were developed and findings were disseminated to country office staff in two related webinars. At the same time, Social Policy deepened its collaboration with UNDP, UNCDF and the DeLoG network in this area, holding a joint face-to-face training on local governance and sustaining peace in early 2018.

The **Gender Section** worked to strengthen UNICEF’s response to gender-based violence in emergencies (GBViE) by co-leading with Child Protection the development of the GBViE operational guide

and GBViE programme resource pack. The operational guide presents UNICEF's programmatic approach to the prevention, mitigation and response to GBViE, and steps to measure and operationalize results at scale.

In 2018, [C4D](#)'s first-ever dedicated human resource capacity in Humanitarian programming paid off by facilitating provision of strategic, timely and efficient technical support, sustained focus on strengthening partnerships and collaborations with key sectors, and substantive field engagement and technical guidance. C4D contributed technical (remotely and on site) support to 13 L2/L3 emergencies throughout 2018. One notable example has been the Bangladesh Rohingya refugee crisis, one of the largest emergencies UNICEF has engaged in the past years and where in C4D has played a lead role at country level. C4D HQs provided regular on site and remote support in engaging with affected population, creating accountability and feedback mechanisms, building capacity and skills, and setting up community mobilization networks and partnerships with local actors. Stronger collaborations also were established with WASH for joint Humanitarian Action Review (HAR), Disability to conduct a desk review of inclusion of disability in community engagement, Child Protection for PSEA mechanisms and capacity building of frontline workers and feedback centres in GBV. For preparedness, C4D, jointly with EMOPS HQ and RO provided technical inputs for creation of separate C4D planning stream in the Emergency Preparedness Planning tool. C4D, EMOPS and Innovation collaborated to pilot digital mechanisms, namely U-report to engage with affected population in the northeast of Nigeria. Technical support was provided to review JRPs and HACs from 15 emergency countries, and to L3 emergency countries through regular participation in all EMTs.

Resource Mobilization

During 2018, PD supported UNICEF's strategic and technical engagement with donors and partners at the global level through the mobilization of significant resources for global programmes. Fundraising efforts were closely coordinated and undertaken in collaboration with the Divisions of Public Partnerships (PPD) and the Private Fundraising and Partnerships (PFP). The Division actively participated in the 2018 PFP High Level Forum in Bangkok helping to further refine the PFP strategies for the coming years. It has also provided support to fundraising and management of thematic funds at multiple steps along the life cycle of the grants, including fund-raising and donor engagement, allocation of resources to regional and country offices, technical support to results reporting, and preparation of donor reports. In 2018, PD Sections interaction with Regional and Country offices to guarantee that Thematic Funds due to expire at the end of the year were used correctly, improving the quality of use of UNICEF resources.

[PD-Nutrition](#) secured financial support for seven regions and 86 countries, through the development and management of 13 grants, with a total \$63 million utilized in 2018. Important financial contributions included \$56 million as global thematic funding from the Government of the Netherlands, \$81 million^{xx} from USAID's Food for Peace, \$13 million from the Government of Canada, \$20 million from the Bill and Melinda Gates Foundation, \$3.5 from the Government of Norway, \$2.5 million from USAID on control of iodine deficiencies, and \$2.2 million from private sector. This significant financial support was essential to catalyze the joint HQ-RO-CO programme acceleration strategies and learning compacts. For example, PD-Nutrition supported 42 countries to improve diet diversity in children and 14 countries to improve the nutrition of school-age children.

[Child Protection](#) implementation of the resource mobilization plans ([CM](#) and [FGM](#)) and [investment case on ending FGM](#) resulted in additional commitments from six new donors, including introduction of the first private sector donor. Through these donors, USD 13.8 million was raised for child marriage and USD 8.9 million for FGM (Phase III of the Joint Programme on Eliminating Female Genital Mutilation: Accelerating Change). Furthermore, CPHQ support towards the development of the European Union (EU) Spotlight Programme will contribute USD 17 million for the child marriage and FGM programmes in Africa.

One of the key strategies for the **WASH Section** in PD was engaging private sector partners towards achieving the SDGs. LIXIL is a multibillion-dollar Japanese company that has a dedicated brand that markets affordable sanitation solutions to the bottom of the pyramid. After several co-creation workshops with LIXIL, a global MOU was signed mid-2018 for a priority shared value partnership (PSVP), with activities starting with in three countries in year 1, and with an aim to expand over the 3 years of the partnership. This partnership with a first mover sits firmly within UNICEF's broader work on Market Shaping and Market Based Sanitation, led by Supply Division and Program Division respectively, both areas of technical work underwent considerable progress in terms of guidance development in 2018 and important outputs to look out for in 2019.

Engagement in Global Programme Partnerships and Joint Programmes

In 2018, PD continued its robust and systematic engagement with **Global Programme Partnerships (GPPs)**, providing UNICEF with an opportunity for stronger advocacy to mobilize multiple actors and to catalyse policy changes at global, regional and country levels in favour of children. As of 2018, UNICEF was a member in 108 GPPs (an increase of 7 if compared to 2017), played a governance role in 75 GPPs, and hosted or provided Secretariat services and coordination support to 17 GPPs. In this context, PD supports UNICEF with shaping and influencing multi-stakeholder GPPs by managing, coordinating and sitting on the board of various partnerships, and by actively participating in various global initiatives that are relevant to UNICEF's mandate.

PD-Nutrition, played the role of chair, coordination committee member, or board member in 12 global nutrition partnerships – comprising public and private sector partners^{xxi}, notably the *Global Nutrition Cluster* (GNC) and the *Scaling Up Nutrition* movement. Notably, 2018 was ED Fore's first year as Chair of the *Lead Group, Scaling Up Nutrition* movement, setting a widely welcome renewed sense of direction, purpose and urgency for the SUN movement.

Last year **PD-Education** worked to build and strengthen partnerships and a common vision around early childhood education (ECE). As a result, the *Global Partnership for Education (GPE)* awarded UNICEF USD \$1.3 million to lead the *Better Early Learning and Development at Scale (BELDS) Initiative* that seeks to strengthen countries' capacity to effectively plan and implement quality ECE programs at scale. Under BELDS, UNICEF will develop a global toolkit of resources to support the systematic integration of ECE into Education Sector planning and implementation cycles, and pilot test the toolkit in a few GPE member countries. The participating countries' engagement in BELDS can be leveraged for new GPE grants for sector analysis and planning that include ECE. Also in 2018, the Section continued to play a strategic role in the governance of *Education Cannot Wait* and key tasks forces established to shape and refine the newly established fund. UNICEF's advocacy at the global level was influential in shaping the education agenda with successful engagement and strategic leadership on education in emergencies. UNICEF continued to be largest recipient of ECW funds, with over 8.6 million in new funds allocated to underfunded EiE efforts in Bangladesh, DRC, Nigeria, Indonesia and Papua New Guinea. The section supported 4 COs on ECW proposal development.

Both the UNFPA-UNICEF *Joint Programme on Eliminating Female Genital Mutilation: Accelerating Change* and *UNFPA-UNICEF Global Programme to Accelerate Action to End Child Marriage* demonstrated UN coherence and continued donor confidence, with further enhancements in quality and increase in scale. While the *Joint Programme* maintained its stronghold with a launch into the third phase, the *Global Programme* scored the third 'A' within an 18-month period. The grading was based on the "important global role in beginning to demonstrate for the first time an approach that works at scale for adolescent girls, and on influencing and shaping the global approach and direction on reducing child marriage and for strengthening and empowering local civil society organisations working on women's rights".

In terms of **ADAP's**, the most significant strategic achievement was its contribution to the conceptualization and launch of *Generation Unlimited* (GenU) partnership. UNICEF and a diverse group of stakeholders from public, private and civic spheres – including young people – launched GenU partnership which has a vision of every young person being in school, learning, training or age appropriate employment by 2030 — with a focus on those in greatest danger of being left behind, including girls, the poorest, those with disabilities, young people on the move and those affected by conflict and natural disasters. The ADAP Section, together with Education, supported: the curation of the first round of GenU solutions that have the potential to deliver results at scale for young people (efforts are underway to mobilize funding to support these solutions); outreach and mobilization of stakeholders to participate in the partnership and co-create its components; the design of the young people's participation workstream including delivering, together with Innovation Unit, the first "Youth Challenge" in 16 countries ; and, the launch of the partnership through a high level event which took place during the 2018 General Assembly. With GenU priorities aligning with several of the results of UNICEF's Strategic plan (2018-2021), this partnership provides an important platform to leverage commitments, action and resources to accelerate results for adolescents.

2018 Lessons Learned

For Programme Division, a key learning from 2018 is that **strategic investments on knowledge generation, dissemination, and communication as the foundation of technical leadership and resource mobilization, has proven to be successful** for programme implementation and contribution to results in different settings. For example, the roll-out of PD-Nutrition knowledge management strategy has increased UNICEF efficiency in generating and sharing state-of-the art knowledge on nutrition programming, with ROs, COs and partners. It has also increased UNICEF's visibility as a technical and thought leader on maternal and child nutrition, ostensibly reinforcing UNICEF's profile as a partner of choice in global nutrition and strengthening PD-Nutrition ability to mobilize resources for UNICEF nutrition programmes. Similarly, for WASH, 2018 represented the third year of their WASH Knowledge Management Strategy and Implementation Plan 2017-21, which fostered the adoption of key KM activities by regional and country offices, helped to consolidate the internally acclaimed CATS and WinS communities of practice on Yammer, and increased the quality and the number of global publications – including the monthly WASH Bulletins circulated to all WASH staff and interested partners.

Cross sectoral and cross divisional collaborations are crucial to the achievements of the SP results, and PD has been fostering this intersectoral approach through planning and senior management commitment. For instance, for Social Policy, areas of particular success included work on sector PF4C with health, immunization financing, nutrition, WASH and ECD, collaboration with Nutrition section on social protection, local governance work with HATIS, joint work with EMOPS on advancing HCT (including surge support), work on child poverty with Data and Analytics/DRP, and the PF4C course with the Learning and Knowledge Exchange team in DRP. At Divisional level, PD has engaged with Supply Division on the organization of the first Sustainable Supply Chain Systems Strengthening for HSS Workshop, which, as mentioned, resulted in countries' developing a workplan towards strengthening their supply chain systems. PD' sections identified that cross-sectoral and cross-divisional collaborations will work if the following pre-conditions exist: clear aim, narrow focus, agreed strategy and clear division of labour.

In the same line, **investment in global partnerships proves to be yielding results that go beyond PD's OMP and UNICEF' Strategic Plan**. PD Sections have strengthened their partnership with the Global Partnership for Education (GPE), the *Global Nutrition Cluster* (GNC), the *Scaling Up Nutrition* movement, Child Poverty Coalition, FAO, Save the Children, the World Bank, IMF and the EU, among others. The latter for example, ongoing since 2017, led the EU to include UNICEF in a new multi-country social protection

funding initiative under development together with ILO Informal partnership and collaboration with DFID, HCR, GIZ and FAO on streamlining SRSP groups towards the Grand Bargain sub group on linking humanitarian cash transfers with social protection. This sub group is co-chaired by UNICEF with DFID and IFRC. In 2019, the team will invest further in the engagement with both the World Bank and IMF, building on collaboration around poverty, social protection and public finance.

In the case of Education, for example, UNICEF has seen an increase in the number of partnerships it has been engaged in over the course of the previous Strategic Plan. This has been a crucial step for implementing an increasingly complex mission within the education sector and has carried forward in the new SP and the work of the Education Section in 2018. The ‘partnered’ approach has been key to UNICEF’s increasing role in education sector planning processes supported by the Global Partnership for Education, and in the policy and advocacy work of the United Nations Girls’ Education Initiative. The Data Must Speak partnership has also helped UNICEF and Ministries of Education to strengthen their system and improve social accountability for learning.

The integration of different learning/implementation/communication platforms has proven to be a feasible and efficient method to increase the programmatic reach. For example, the “YOUTHRise” platform for knowledge sharing on adolescents and youth engagement managed to create in just one year an active community of over 700 members. Key to its success was the integration of four different channels (webinars, a Yammer group, a web page and a mailing list), collaboration across three sectors (ADAP, C4D and DOC), and organization of regular webinars on topics identified as of interest by country offices.

The use of common frameworks for results and monitoring with Regional Offices and Country Offices facilitates coherent programming across the organization. Some PD Sections (Nutrition and Child Protection, for example) accomplished this through the strategic allocation of global thematic and non-thematic funds to be used in targeted initiatives that facilitate the achievement of SP results. Nutrition and WASH also developed a second generation of compacts with Regions. At the same time, all PD Sections worked through their Thematic Networks to improve coherence on programme implementation and monitoring across the globe.

Challenges

Limited predictability of financial investments continued to be a constraint to support achievement of long-term results, and affected all PD Sections, including those that had strong resource mobilization commitments from thematic and other funds. For example, despite PD-Nutrition successful resource mobilization for Early Childhood Nutrition, Nutrition of School-Age Children, Adolescents and Women, and Nutrition and Care for Children with Severe Acute Malnutrition; Maternal and Child Nutrition in Emergencies remains significantly under-funded at HQ and RO levels. Similarly, usually well-funded at CO level, emergency nutrition work in PD-Nutrition has not gained the attention of donors, as EMOPS is usually their first port of call, leading to missed opportunities to secure funding for technical and programmatic support at global and regional levels. In the same fashion, for Health, the limited number of resource partners and earmarked funding streams, which led to unevenness in capabilities across technical streams in HQ Health remains a challenge. For HIV, the constrained funding environment is aggravated by a UNAIDS crisis of leadership.

Implementation of PD actions were also hindered by the **lack of staff/structure in the Sections**. Some examples in 2018: Health Section has been handicapped by capacity limitations in health in emergencies, health system strengthening, child health and adolescent health. HATIS was the only team with 2 staff members to provide support on risk informed programming, conflict analysis and peacebuilding in HQ. For

ADAP, lack of human resources was a big challenge last year, with two positions still opened. The HRU continued to struggle with a somehow all-encompassing scope of work (human rights) and a very limited human resources capacity (3 when fully staffed; 1,5 staff for a large part of 2018). The limited number of staff and therefore the limited capacity of the unit limits its ability to have an integrated, comprehensive approach to child rights as opposed to sectoral issues (CP, Health, Education, etc.) that are already covered by other sections.

The **combination of limited resources and lack of capacity** in the PD sections negatively impacted in the implementation of PD's workplan for 2018. To address these two challenges, and within a realistic perspective that PD might not significantly increase funds in the coming years, in 2018 PD Sections started to implement mitigation strategies. In terms of planning, in 2018 PD sections went through a mid-year review exercise where actions were prioritized, trying to reduce the workload on what was committed in the OMP. At the same time, to minimize staff shortages, PD Sections utilized stretch assignments to cover for essential vacant posts. Improvement in recruitment process of new staff, and onboarding process has also alleviated the shortage of staff for some Sections. Senior management also started implementing variations of matrix management in the Division^{xxii}, making sure that clear roles and accountabilities are identified, maximizing efficiency, and reducing staff overburden. In terms of resource mobilization, Sections have invested in dedicated partnership capacity, working close with PPD and PFP to increase their resource mobilization capabilities, including reaching non-traditional donors. Joint resource mobilization proposals are also being spearheaded by some PD Sections as a strategy to improve fundraising. An example is the development of a joint mobilization plan for 2019 and 2020 by Nutrition, HATIS and EMOPS.

While the **cross-sectoral and cross divisional collaboration** had resulted in positive outcomes in 2018, it remains a challenge, and truly multi-sectoral programming needs further organizational investment. Within PD, despite all the efforts in creating the conditions to implement Goal Area 1, similar effort needs to be done for Goal Areas 4 and 5. Programmatic cross-divisional collaboration needs further attention and definition. While migration has shown improvements in their coordination, the work on Climate Change and Urban have not fully consolidated in one coherent programmatic piece. To respond to this challenge, PD kept investing in their Senior Management regular meetings, all staff meetings, and special ad hoc meetings as space to share information, discuss problems, find solutions, and foster collaboration among Sections. In 2018, a Global Goal Area 1 meeting took place as an initiative to improve collaboration among the Sections in that Goal. In terms of Cross-Divisional collaboration, PD acts as a broker in many situations trying to create a space to foster collaborative ways to work. For example, in 2018 PD took the lead on the Collaborating for Results exercise that tried to create incentives and mechanisms that connected different HQ divisions with Regional Offices and Country Offices towards the achievement of the SP results.

PD Sections have raised **divergent approaches between divisions within UNICEF on how to partner with the private sector** as a challenge. Moreover, common to all partnerships, has been the need to understand and align the expectations from both parties, for example, PD-WASH and LIXIL. Each side has very different ways of working, constraints, strengths and resources. To address these challenge, PD has led the development of communication protocols for the coordination and management of partnerships and has highlighted questions that require clarification and decisions at senior levels within the organization. Moreover, PD has been spearheading with PFP the guidelines for programmatic engagement with business, which might be ready in the first semester of 2019, improving the common understanding on how to engage with private sector at HQ and country offices.

Annex 1: Details on PD Field engagement

Figure 1: CP Field engagement by region

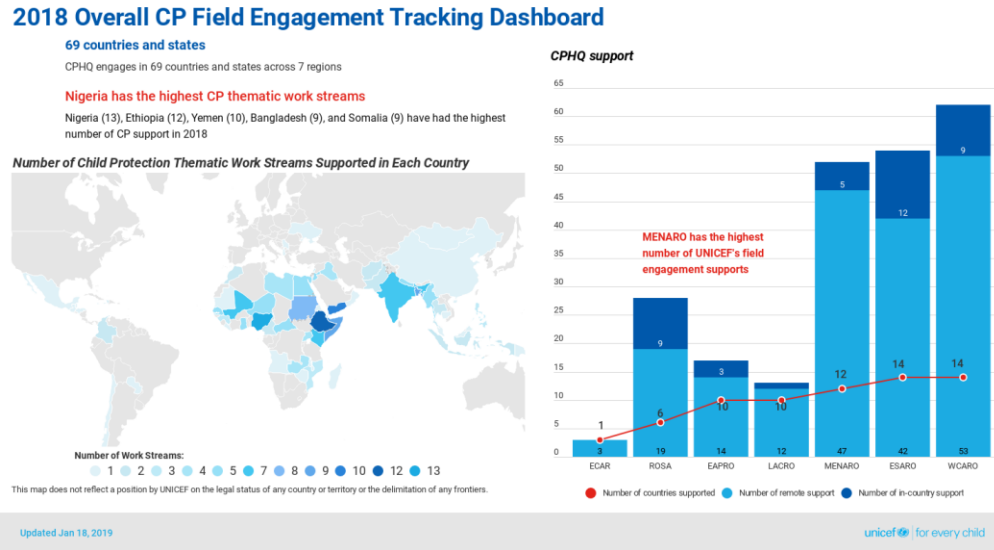
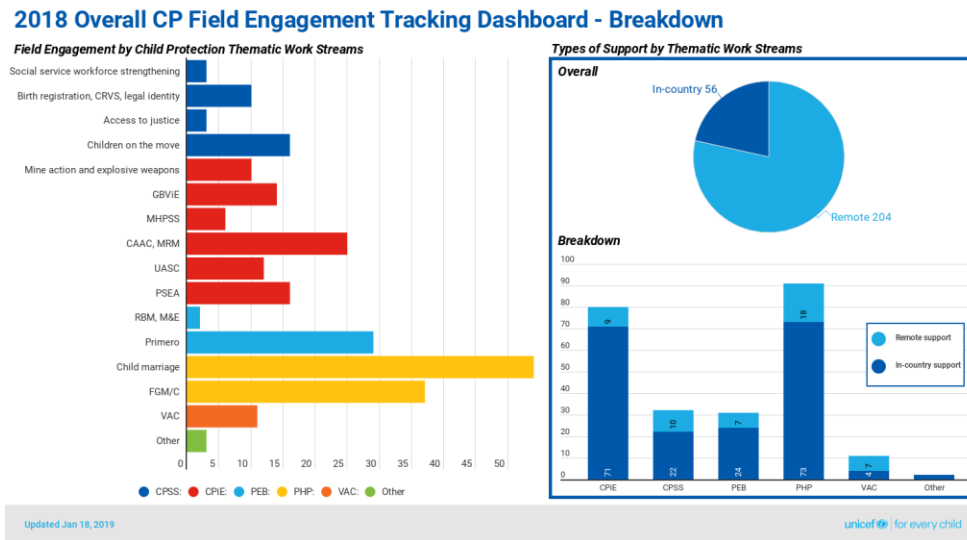


Figure 2: CP Field Engagement by Thematic Area



Annex 2: Details on PD Knowledge Products

Table 1: Summary of PD Knowledge Products, 2018

Type	Total
Strategies, guidance or guidelines	137
Webinars / recorded media	99
Concept notes or programme documents	90
Papers and journal articles	76
Meeting / training reports	67
Programme briefs	46
Major global publications	43
Training materials or e-learnings	37
Case studies and lessons learned	36
Evaluation / research reports	35
Funding proposals or commitments	35
Other products	220

ⁱ A Vision for Primary Health Care in the 21st Century; and Primary Health Care: Transforming vision into action – Operational framework.

ⁱⁱ (1) Meeting people’s needs through comprehensive and integrated health services throughout the entire life course, prioritizing primary care and essential public health functions; (2) Systematically addressing the broader determinants of health through evidence-informed policies and actions across all sectors; and (3) Empowering individuals, families and communities to optimize their health as advocates for policies that promote and protect health and well-being, as co-developers of health and social services and as self-careers and caregivers.

ⁱⁱⁱ The workshop was directly related to one SP result and had as objectives (i) to support UNICEF’s countries and national governments to formulate country-level strategies and workplans related to sustainable supply chains for HSS; (ii) to enable buy-in and foster alignment of counterparts for SC strengthening processes; and (iii) to share and learn about current efforts and progress for sustainable supply chains solutions.

^{iv} EVM measures compliance of national immunization supply chain systems with WHO standards, in specific, the system’s capacity to ensure availability and quality of vaccines as well as efficient use of resources

^v at least 250 million children reached with services to prevent stunting and other forms of malnutrition, annually; at least 100 million adolescent girls and boys reached with services to prevent anemia and other forms of malnutrition, annually; and at least 6 million children with severe acute malnutrition (SAM) receiving therapeutic feeding, treatment and care, annually

^{vi} Adolescents (15 to 19 years) and young adults (20 to 24 years) from key populations (AYKP) at higher risk of HIV, including males who have sex with males (MSM), transgender persons (TG), female sex workers (FSW), and people who inject drugs (PWID).

^{vii} Botswana, Ethiopia, Kenya, Lesotho, Malawi, Mozambique, Namibia, Rwanda, South Africa, Swaziland, Tanzania, Uganda, Zambia, Zimbabwe, Cameroon, Côte d'Ivoire, Democratic Republic of Congo (DRC), Nigeria, Brazil, Haiti, India, Indonesia, Thailand, Iran and Ukraine

^{viii} Each country is in different stage of introduction and implementation: Cameroon is in the scale up phase, with activities across 10 regions; DRC is currently piloting POC EID in select high volume facilities; and Senegal is conducting product evaluations. At the end of 2017, EID access in Cameroon, DRC, and Senegal was 51%, 34%, and 23%. We don't yet have 2018 data to assess impact on coverage, but over 455 sites in Cameroon are now using POC for infant diagnosis, and more than 8% of all EID tests in DRC are conducted on POC instruments.

^{ix} SDG target of providing at least one year of quality pre-primary education

^x Macedonia, Sri Lanka, Ghana, Nigeria, Bhutan, Turkmenistan, Malawi, Panama, Nepal, Cameroon, Mozambique, South Sudan

^{xi} Globally, in 2015, it was estimated that 892 million people still practiced open defecation. The aim is to end the practice of open defecation by 2030. For the SP 2018-2021, UNICEF has set a target that by 2021, 250 million fewer people will be practicing open defecation

^{xii} Providing policy guidance, technical support and developing tools and methodologies in particular risk informed programming, to strengthen systems and build resilience; Coordination and integration of development and humanitarian programmes in order to increase quality of the programme response in humanitarian action; and providing policy guidance and technical support for peacebuilding and social conflict prevention cohesion programming across the Organization.

^{xiii} Examples include the *Gender Responsive Adolescent Nutrition Tool* (Nutrition lead), and the *Briefing Paper on WASH in the Second Decade* (WASH lead), *Adolescent Health and Wellbeing Guidelines-WHANT* (Health lead), *Technical Note on Mental Health and Psychosocial Support* (Child Protection lead), *Adolescent Key Population Toolkit* (HIV section lead), *Concept Note on Urban Strategy* (Soc Pol lead), *Technical Note on Skills for Employability* (Edu lead), *Guidance on Menstrual Health and Hygiene* (WASH lead), *Guidance Note on Adolescent Participation in UNICEF Programme Monitoring and Evaluation* (Office of Evaluation lead).

^{xiv} These institutions are mandated with the promotion and protection of all human rights, including children's rights and play a key role in monitoring the fulfillment of States' human rights obligations including in relation to the implementation of the Convention on the Rights of the Child.

^{xv} ING: Kosovo, Montenegro, China, Vietnam, Indonesia; Set aside funds: Côte d'Ivoire, Bangladesh, Tajikistan; CO cycle: Angola, Iraq and Indonesia (Strategy Notes), Tunisia (SitAn), Mali (CPD)

^{xvi} L3 in 2018: Democratic Republic of the Congo, Yemen, Nigeria, Bangladesh, South Sudan and Syria. L2 in 2018: Iraq, Horn of Africa (Somalia, Ethiopia, Kenya), Lake Chad Basin Countries (Chad, Niger, Cameroon), Cameroon, Venezuela, South Sudan, Syrian Refugee Hosting Countries and Central African Republic.

^{xvii} HATIS also supported the planning process of the regional response to the displacement crisis affecting Venezuela's neighboring countries, ensuring a hybrid approach that reflect humanitarian and development interventions in the country and regional plans; this approach was included for the first time in the HAC which is a fundraising tool traditionally covering only humanitarian action.

^{xviii} Nigeria, Macedonia, Italy, Myanmar, Syria, Eritrea, Pakistan, Sudan, South Sudan, Indonesia, Kenya, Sri Lanka, Palestine, Turkey

^{xix} The kits provide guidance and products that support the functioning and inclusion of children with disabilities (e.g. ruler with magnifying glass; globe with braille print; ball with a bell inside).

^{xx} This includes both in-kind RUTF, local/regional procurement, and programming costs.

^{xxi} Food Fortification Initiative, Global Alliance for Vitamin A, Global Breastfeeding Collective, Global Nutrition Cluster, Home Fortification Technical Advisory Group, Infant and Young Child Feeding in Emergencies Core Group, Iodine Global Network, Micronutrient Forum, Netcode, No Wasted Lives, Scaling Up Nutrition Movement, UN Network for SUN.

^{xxii} The PD Planning Tool clearly identifies who is responsible for tasks and who are the collaborations necessary for the task to be achieved. Similarly, the implementation of Goal Area 1 is being based on shared responsibilities among the four Sections that translate into a matrix management model of administration.