

India

Part 1: Situation update in the country

India's economic growth over the last two decades has made a significant contribution to global human development. In 2018, India maintained its position as one of the fastest growing economies in the world, with strong macroeconomic development contributing to this growth. The global multidimensional poverty index released by the United Nations Development Programme UNDP in 2018 showed that India had made significant progress toward reducing multidimensional poverty – from 55 per cent to 28 per cent– over the past 10 years.

This rapid pace of growth, however, is not yet fully reflected in the improved quality of life and well-being of all members of society, especially women and children. Challenges continued in 2018, including elevated levels of malnutrition (38.4 per cent children are stunted), poor learning outcomes (only 42.5 per cent of children in grade three can read a grade one text) and child marriage (one in six adolescent girls are married before the legal age of 18 years). Underpinning these issues are harmful social norms perpetuating a lower value for girls than boys, resulting in gender discrimination and violence against girls and women that compound existing caste, class and other vulnerabilities.

Despite the persistent challenges, in 2018 India continued to make progress. In the health sector, India reduced its global share of both maternal and child deaths. Maternal mortality ratio data released this year showed a 22 per cent reduction in maternal deaths since the last report in 2013. India's share of global child deaths continues to steadily decline: from nearly 22 per cent in 2012 to 18 per cent reported in 2018. Deaths of children under-five fell below the 1 million mark for the first time ever during the year.

Despite these achievements in health, challenges remain, and India contributes to nearly one quarter of newborn deaths in the world – roughly 600,000 annually. Gender discrimination contributes to delays in seeking care for pregnant women and children, especially newborn girls. The gender gap in child survival is shrinking. Excess girl child mortality decreased from 13 to 11 percent within the course of one year; however India remains the only large country reporting such a disparity.

Important political commitment and leadership at the highest level for the immunization programme continued in 2018. This led to an increased focus on reaching children that have not been immunized, expansion of the measles/rubella (MR) campaign and introduction of new vaccines.

The Government took a big step towards achieving universal health coverage in 2018, launching a nationwide health protection scheme called the Prime Minister's Jan Arogya Yojna (PM- JAY). The scheme aims to reach 500 million people across 100 million households from socially and economically vulnerable social groups. PM-JAY is supported by simultaneous

efforts to strengthen primary health care through establishing 150,000 health and wellness centres to provide comprehensive primary health care services at the doorstep of the community. These two schemes together constitute what is being called as Ayushman Bharat (Long live India).

India accounts for nearly a third of the global burden of childhood stunting, some 46 million children. To tackle this issue, in 2018 the Government of India (GoI) launched POSHAN Abhiyaan, the prime minister's overarching scheme for holistic nourishment. It aims to reduce stunting, malnutrition and anaemia among young children, women and adolescent girls and address low birthweight. It also offers a platform to strengthen inter-ministerial convergence, between many ministries working on issues that affect maternal and child food, health and nutrition. It is expected that under the initiative the roll-out of high-nutrition-impact interventions will be strengthened, increasing coverage and quality of services for vulnerable women and children and contributing to an accelerated reduction of malnutrition and anaemia.

In line with its focus on early childhood development (ECD), UNICEF supported the launch of the home based young child care programme by the Ministry of Health and Family Welfare MoHFW. The programme is an opportunity to intensify the focus on comprehensive care of children in communities through home visits, with an emphasis on health services, promotion of complementary feeding and tracking of development, in line with the SDG 'survive and thrive' agenda. A revised mother child protection card is a component of this programme, and includes information on responsive parenting including the role of fathers.

Under GoI leadership in 2018, the country experienced some important positive shifts in the water, sanitation and hygiene (WASH) sector. A major achievement was the transition of the 'Clean India Mission' (SBM) from scaling-up to sustaining open defecation-free (ODF) status, to maintain the gains made to date.

In the water supply sub-sector in 2018 there was an increased focus on safely managed water supply. This is especially important because less than 50 per cent of the population has access to safely managed drinking water. Women and girls face a high opportunity cost for their water-fetching burden, and there is a growing threat of drought with two thirds of India's 718 districts affected by extreme water depletion. This led to revamping of the national rural water supply programme, which now prioritizes integrated water safety and security planning, behaviour change and community participation.

This strategic shift is being operationalized through the Swajal programme, aimed at empowering communities to plan, design, implement and monitor single village drinking water supply schemes. Swajal employs community ownership for operations and maintenance, with a special emphasis on the role of women; UNICEF is a lead technical partner.

In 2018 the Ministry of Human Resource Development (MHRD), which oversees education, launched 'Samagra Shiksha', an integrated school education scheme to address issues in the sector related to quality and attendance. Six million children across India are out of school and 130 million who are in school are not learning at grade-appropriate levels. This scheme envisages education as a continuum from preschool to class 12, which is a significant shift from the previous, more segmented, approach which had different structures for primary and secondary education. It also brings preschool education into the MHRD fold, along with the Ministry of Women's and Child Development (MWCD). It provides an opportunity for improved access, quality, and transition for children through comprehensive education sector plans in

states.

During 2018 some states called for revocation of the no-detention policy under the Right of Children to Free and Compulsory Education Act. The policy states that children cannot be held back in any elementary education grade (1-8). The purpose was to deter children from dropping out of school altogether due to failing a class and poor-quality education. Some states have called for ending the no detention policy, stating that children are being promoted to successive grades without achieving the requisite learning outcomes. A bill allowing states to opt to end the policy is expected to be passed in early 2019, which may lead to increased school dropout rates, as children become discouraged about completing their education due to a fear of failure.

In 2018 India experienced a moment of national re-awakening on the issue of child sexual abuse. This was the result of media reports on horrific incidents of sexual abuse and sometimes murder; in January, for example, the abduction, gang rape and murder of an eight-year-old from a nomadic community in the state of Jammu and Kashmir shocked public opinion. The Government reacted by amending the law and approving the death penalty for child rapists.

A social audit of child care institutions conducted by the Government of Bihar State revealed sexual exploitation and systematic abuse of 35 girls and the alleged murder of two more girls. Media reported on sexual abuse and neglect in child care institutions and boarding schools across the country. The tragic incidents of child sexual abuse led to calls for prevention, reintegration and reform of child care services in India. The Supreme Court of India issued several orders to protect children in residential care. The central Government launched a national 'Safe Neighbourhood' initiative to prevent violence against children.

The severity of child sexual abuse cases revealed the systemic weakness of child protection services in India, as well as the persistent culture of silence and impunity. Empirical studies conducted by UNICEF and partners in three states identified several impediments to effective implementation of the law, including the lack of special courts and support for survivors and perceived hostility or insensitivity at various stage of the proceedings.

In September 2018 the Ministry of Finance (MoF) issued a budget circular for 2019-20, making it mandatory for all ministries to report annually on allocations for child-specific schemes. This is a significant policy reform because previously national budgets did not report child-related allocations for all ministries and programmes. Over the years child-related allocations in the union budget decreased from 5.71 per cent (2008–09) to 3.32 per cent (2017–18). With this policy intervention, child budgeting has become a social policy tool for the Government to apply a child-focused lens to the annual budgeting process at the national level. It will provide evidence for the MWCD to demand enhanced allocations and expenditures for improving outcomes for children. Initial reports from the Ministry following issuance of the budget circular point to improved data collection by ministries on public investments for children. At the same time 10 states in India committed in 2018 to adopt the child budget statement from 2019-20 budget in order to analyze and prioritize child-related allocations and expenditures.

India continues to be highly exposed to a variety of natural and human-made hazards; many districts are regularly impacted both by floods and droughts. A child risk impact analysis carried out by UNICEF in the state of Bihar points to a relationship between cyclical flood and drought disasters and various child deprivations. In addition, India continues to be one of the countries

most affected by severe air pollution exposure.

In August 2018 the southern Indian state of Kerala experienced landslides and floods of an unprecedented nature, triggered by unusually high rainfall from June through August. The damage and destruction affected 11 of the state's 14 districts, impacting about 10 million people (one third of the total state population of 33 million), with 498 lives lost. Health centres were negatively affected as was water and sanitation infrastructure. Children of all age groups were exposed to shock and trauma and damaged schools and early child care institutions (*anganwadicentres*), caused disruption of educational activities.

The Kerala floods, a once-in-100-years event, and the state government response contributed to raising awareness about the need to invest in more resilient development. The Kerala state government demonstrated leadership in resilience building and embraced external support from the UN, requesting technical advice and an invitation to complete the first ever post-disaster needs assessment in India. The state has also taken up UN flood assessment findings, which highlight the need for improved ecosystem protection and integrated water management. Kerala announced the adoption of a "Green Kerala" approach and seeks to apply the "building back better" concept for recovery and rehabilitation. In addition, UNICEF's support to the 'accountability to affected populations' initiative roll-out was embraced by the state government. In late 2018 the initiative was gathering feedback from affected populations, to be used to inform Gram Panchayat development plans (GPDs)

Part 2: Major results including in humanitarian action and gender, against the results in the country programme documents

UNICEF is well-positioned to reach India's most vulnerable children, working in 17 states, with some 450 staff members, making it the UN agency with the largest field presence. The year under review was the first year of the Programme of Cooperation 2018-2022. High-priority districts in each state were chosen to demonstrate convergent programming, in line with the Government's new initiative focusing on aspirational districts.

Throughout 2018 UNICEF India remained committed to providing technical expertise gained from having served the nation's women and children for 69 years. Guided by the India Vision 2030 and the SDGs, critical progress was made in 2018 as presented below, corresponding to the five goals areas of the UNICEF global 2018-2021 strategic plan.

Goal area 1: Every child survives and thrives

In 2018 UNICEF contributed to a decrease in the number of maternal and newborn deaths through improved coverage and quality of mother and new-born care and expanded reach for the immunization programme. UNICEF aligned the geographical focus of its district programming for health in 39 of the 115 aspirational districts to accelerate roll-out of high-impact interventions:

- Nearly 12,000 fewer women now die of pregnancy-related complications each year compared to 2013
- 120,000 fewer children under five died compared to the previous year
- One million newborns were treated during the year in 840 special newborn care units (SNCUs), of whom 41 percent were female

- An additional 1.5 million children and 400,000 pregnant women were immunized under the Mission Indradhanush
- UNICEF support to the national nutrition mission contributed to increased awareness on nutrition issues and improved quality of nutrition programmes and services
- 254 million people received nutrition messages as part of the celebration in September of nutrition awareness month;
- 16.5 million adolescent girls benefitted each week from iron and folic acid supplementation
- 177,500 children were treated for severe acute malnutrition (SAM).

The year also saw continued progress towards a government focus on improving the quality of care around childbirth, with a special emphasis on the quality of care in labour rooms and care of small and sick newborns in SNCUs. The UNICEF-supported model labour room initiative was mainstreamed and helped to inform and guide the MoHFW's labour room quality of care improvement initiative.

The number of SNCUs increased from 712 in 2017 to 840 this year, with acceleration in states with a high burden of neonatal mortality. Some 82 per cent of districts now have an SNCU; 954,000 newborns were treated in 2018. However, low female admissions to SNCUs (41 per cent female newborns) continue to be a challenge. The SNCU real-time monitoring system developed by UNICEF was scaled up using government resources in 136 additional districts, now covering 754 out of 840 SNCUs across 30 states. UNICEF supported capacity building of SNCU staff on the online system, on monitoring of data quality and support for its analysis. Annual national and state fact sheets based on SNCU online data were developed and the GoI is now regularly using this data for review and action.

Support for improving WASH functionality in 517 health facilities in 50 districts resulted in an increase in fully functional WASH facilities from 21 per cent to 41 per cent. Availability of HIV testing services also improved; 41 percent of primary health centres in UNICEF programming states offered HIV testing, compared with 31 percent in 2017. UNICEF contributed toward this result by supporting training and capacity building of 14,064 providers on HIV testing and counselling services.

UNICEF's sustained support to the immunization programme focused on reaching more children with more vaccines. Support to Mission Indradhanush, an initiative to reach left-outs and drop-outs, resulted in the vaccination of 1.5 million additional children and 400,000 additional pregnant women. The MR campaign was rolled out in 17 additional states, covering 91.5 million children. UNICEF supported planning, capacity building on cold chain and communication, including effective use of social media and media engagement. UNICEF played a key role in demand-generation and supporting government efforts to handle negative messages and rumour-mongering around immunization, as well as procurement of MR vaccines under a GAVI-funded initiative. UNICEF India led the largest national effective vaccine management assessment globally, covering 23 Indian states and involving planning, capacity building of assessors, data collection and analysis and development of improvement plans.

To address the two major causes of under-five deaths in India (pneumonia and diarrhoea), the Government of India introduced the pneumococcal vaccine in the five states that contribute to more than half of under-five deaths, and the Rotavirus vaccine in two additional states, bringing the total to 11 states. UNICEF supported 'intensified diarrhoea control fortnight' for the fifth successive year with US\$9.7 million, leveraged from Government. In conjunction with partners,

UNICEF India also supported the development of operational guidelines on pneumonia.

UNICEF supported the development and pilot testing of the revised mother-child protection (MCP) card, which now includes components of responsive parenting, including the role of fathers, and development tracking by community workers. The card was jointly approved by MoHFW and MWCD and released by the prime minister. The MCP is a critical tool for supporting the roll-out of ECD and the home-based young child care programme, suggesting movement towards stronger community-focused and convergent programming across the ministries of health and women and child development.

UNICEF worked very closely with other partners like the UNDP, World Health Organization (WHO) and Bill & Melinda Gates Foundation (BMGF) to support the immunization programme. Similarly, close collaboration with Save the Children, Clinton Health Access International, the United States Agency for International Development (USAID) and the Norway-India Partnership Initiative, supported the child health programme.

In 2018 UNICEF supported the launch of POSHAN Abhiyaan – the national nutrition mission. Its theoretical framework was built upon UNICEF's programmatic guidance for the reduction of malnutrition and experience from seven UNICEF field offices supporting state nutrition missions.

Operational guidelines for the convergence action plan were supported by UNICEF to ensure cross-sectoral coordination for nutrition programming, used for planning across 115 aspirational districts in 2018. To build demand and convert behaviour-change activities into a social movement for nutrition, UNICEF developed and helped implement a Jan Andolan social movement for nutrition with operational guidelines, training and monitoring. UNICEF also developed the POSHAN Abhiyaan online portal for reporting. During national nutrition month in September 2018, more than 2.2 million behaviour-change events reached more than 254 million participants. UNICEF coordinated with the Government and development partners (Tata Trust, Piramal Foundation, BMGF, CARE and others) in behaviour change efforts. UNICEF partnered with community radio, resulting in nutrition content reaching 100 stations and broadcasting to 15 million people.

The MoHFW-led, UNICEF-supported comprehensive national nutrition survey will provide updated, gender-disaggregated data on nutrition at the national and state levels. The field work concluded in October 2018, and results are expected in quarter one of 2019.

To improve infant and young child feeding, UNICEF helped to elaborate 193 district-level comprehensive plans and supported the training of childcare workers from 485,000 Anganwadi centres. The MoHFW approved a home-based young childcare (HBYC) programme to strengthen feeding practices through counselling by community-based health workers. UNICEF supported the development of the HBYC operational guidelines, communication tools and training materials.

UNICEF supported the MWCD to combat SAM through the drafting of national guidelines for community-based management of acute malnutrition (CMAM). UNICEF assisted with large-scale programmes in Gujarat, Maharashtra and Rajasthan, pilot programmes in Uttar Pradesh and Jharkhand and the launch phase in Bihar, Madhya Pradesh and Chhattisgarh. With UNICEF support, centres of excellence for SAM treatment were planned, initiated or strengthened in Bihar, Chhattisgarh, Gujarat, Madhya Pradesh, Maharashtra, Odisha and

Rajasthan.

The nutrition mission prioritized anaemia prevention, following UNICEF's focus on the gender dimensions of adolescent and maternal nutrition. In September, the UNICEF-supported "Anaemia Mukht Bharat" (Anaemia-free India) initiative, and maternal dietary hospitals guidelines were launched. UNICEF developed dashboards that monitor programme targets, coverage and stock data. UNICEF supported national centres of excellence for anaemia and women's diets, which will be critical for the scale-up of the initiative. In the second quarter of 2018, 5.3 million pregnant women (86 per cent of target) received iron-folic acid (IFA) across 14 UNICEF-supported states. Across these states from January-June 2018, only 52 out of 475 districts (11 per cent) reported a stock-out of IFA for adolescents and no district reported stock-outs of IFA for women who were pregnant.

Goal area 2: Every child learns

In the education sector UNICEF continues to contribute to improving the data and evidence base for education planning and provides technical assistance for the development of policy and education materials. These interventions contributed to the following results:

- 4.6 million children (51 percent girls) received early education learning materials
- 2.2 million school children's (52 percent girls) learning achievement was assessed
- 165,000 out-of-school children (51 percent girls) identified and enrolled in special training programmes with an aim of reaching 3 million by 2022
- Data visualization tool developed for evidence-based education planning.

With UNICEF's support, the education management information system was strengthened to enhance data access, quality and utilization. Access to data and programme monitoring was considerably improved through the introduction of a data visualization tool. Subsequent training of national and state education functionaries on the tool led to evidence-based education sector plans, as part of the new Samagra Shiksha scheme.

UNICEF's technical support led to enhanced capacities of government functionaries to adapt early childhood education (ECE) curricula, develop and implement quality learning materials. The first-ever 'e-modules' on early childhood education were developed in consultation with the MWCD to capacitate early child care workers on child-centred, quality ECE.

Mapping of out-of-school children in selected districts of six high-burden states was spearheaded by UNICEF. Some 165,000 (51 per cent girls) were identified and enrolled in special training programmes and schools. Towards mainstreaming and empowering the hardest-to-reach children, UNICEF issued a "call for solutions" to identify innovative strategies to enrolling them in school.

Through UNICEF's technical support, a national achievement survey (NAS) was conducted, assessing over 2.2 million children (52 per cent girls) enrolled in grades three, five and eight, for competency in languages, mathematics and environmental studies. This will set India on the path to report on the SDG 4 learning indicator. Results showed that children in Rajasthan, Karnataka and Kerala are nearly two school years ahead of children from UP, Chhattisgarh and Telangana. Technical support was provided to the National Council of Educational Research and Training (NCERT) and the MHRD through a partnership with the American Institute for Research (AIR) for analysis and development of user-friendly reports and to states, through

both AIR and the Australian Council for Education Research.

Evidence-based advocacy has helped raise awareness among parliamentarians and chief ministers on the urgent need to improve learning. Subsequently, over 3,000 (750 female, 2,250 male) education staff and teacher educators from all states were oriented on the use of the NAS findings on annual planning and teacher professional development. UNICEF provided technical support to develop guidelines to strengthen continuous comprehensive evaluation to improve teaching-learning practices.

UNICEF supported capacity development of the Government and partners to generate demand for quality education through behaviour-change communication. Capacities of school management committees in select states were also strengthened using novel methods and content, including on gender equitable participation and learning. With UNICEF support, a comprehensive life-skills framework is now available to empower adolescent girls and boys in decision-making, collaboration and teamwork, and a career guidance portal was introduced in ten states to support students seeking to explore career options. There are also emerging partnerships with the private sector, particularly to strengthen results through EdTech based solutions.

Goal area 3: Every child is protected from violence and exploitation

In 2018 the effective implementation of child protection legislation achieved important milestones in the delivery of child protection services including:

- An estimated 375,000 children in 14 states benefitted from UNICEF engagement in promoting child care reform through strengthened child care services, prevention of family separation and enhancement of standards of care.
- Sixteen states expanded child-sensitive services and 12 enhanced information management and strengthened their child protection workforce, which together now have the potential to benefit about 270,000 children who come into contact with the justice system every year.
- For the first time, a state government (Odisha) moved from public outcry to strong and long-term commitment, through a two-year action plan to prevent child sexual abuse. The initial campaign reached 2.4 million people and more than 60,000 policy personnel.
- The MWCD endorsed a comprehensive plan at the national level to prevent violence against children

Collaboration with 17 state governments concentrated on strengthening the skills of the child protection workforce and district mechanisms to respond to children's care and protection needs. At state level, UNICEF engaged with the high courts, to reinforce their oversight/coordination functions, and with state governments to leverage existing financial resources from various departments for child protection.

Nationally, UNICEF India's partnership with the Supreme Court of India galvanized commitment to child protection reform through state, regional and national level policy dialogue and oversight. Annual round tables on juvenile justice, care and protection of children mobilized state-level stakeholders to improve access to justice and child protection services, involving: high courts, police departments, departments of social welfare/women and children, state

commissions for the protection of children and state legal services authorities.

Sustained efforts were made to support the justice system to be more sensitive to children in need of care and protection and those who convicted committed offences. In total, nine states established (or were establishing) 76 child-friendly district courts and seven states set up child-friendly police stations, staffed by officers with enhanced skills to handle sexual abuse of girls and boys. UNICEF is working with partners to go beyond infrastructure improvements and concentrate on the actual treatment of children and their referral to support services – particularly with regard to girl survivors of child sexual abuse, who constitute most of the cases reported to police.

Dialogue and technical assistance led to improvements in information management, monitoring and oversight mechanisms. With UNICEF support, 12 states are developing or enhancing information management systems that are increasingly capable of monitoring the performance of child protection services and, in two states, case management. Eight states have systematic social audit plans and inspection committees for child care institutions, increasing the potential to prevent and redress child abuse and neglect in residential care.

Six states are developing one-stop centres primarily for girls and women, or specialized services, including free legal aid, medical, counselling, case management and addiction recovery centres to assist children in need of care and protection. Overall 14 states are developing plans for non-institutional alternative care, with sponsorship and foster care approaches in at least two states, while two other states are piloting restorative justice.

In partnership with the MWCD, a national initiative to prevent violence against children was launched, and will include a large-scale child safety programme across 100 districts (of 712) and a multi-media campaign. Sexual abuse of girls and boys is differentiated in the communication campaign. This is the first time that preventing violence against children will be present on a large scale on the policy agenda. In states the chief minister of Odisha and the police department, with UNICEF support, launched a 15-day state-wide campaign to address child sexual abuse. This was the first time an Indian state government moved from public outrage to strong and long-term commitment to prevent child sexual abuse, mobilizing several government departments, media and civil society. The Paree Paien Katha Tiye (Little Angels), mobilized more than 60,000 police personnel, using vehicles with multimedia tools including folk media to reach out directly to close to 1.2 million people and another 1.2 million through social media. The state committed to two-year plan to prevent and respond to child sexual abuse.

Goal area 4: Every child lives in a safe and clean environment

UNICEF is the Gol's lead technical partner in the WASH sector; 2018 saw the following key results:

- 83.9 million people gained access to a toilet, and ODF status was declared in an additional 18 states, 282 districts and 237,000 villages, bringing rural sanitation coverage to 97 per cent
- 3.56 million girls and 3.4 million boys from 46,461 schools across 12 target states gained access to WASH facilities
- 3.18 million people, including 1.58 million adolescent girls, were reached by a communication campaign around menstruation
- More than 930,000 people gained access to safe drinking water.

The flagship Swachh Bharat Mission (SBM) campaign went through an accelerated implementation phase, with UNICEF as lead partner, and has now achieved ODF status in all but four states, according to MDWS data. UNICEF focused on advocacy, policy and programme development, content creation for capacity building for behaviour change, data analysis, monitoring and evaluation to inform programming at central, state and district levels. UNICEF also coordinated development partners (World Bank, Wateraid, BMGF, USAID, WHO) and fostered strategic partnerships with corporates (e.g., Unilever, Johnson&Johnson, Tatatrust) to support scaling-up and optimize the campaign's impact.

UNICEF led the development of a 10-year rural sanitation strategy for the MDWS, focusing on sustaining ODF and promoting universal access to safely managed sanitation and hygiene, to be launched in 2019. UNICEF and the World Bank established a strategic partnership (including a US\$1 million grant to UNICEF) to undertake comprehensive capacity development for the roll-out of sustainable ODF interventions.

UNICEF acted as lead technical partner for the Mahatma Gandhi International Sanitation Convention in October 2018, attended by delegations from 68 countries, including 55 ministers. UNICEF's Executive Director addressed the plenary, highlighting India's remarkable successes. under the SBM.

UNICEF established a partnership with Water.org to promote an alternative credit model for the provision of affordable WASH loans to households. This initiative was brought to scale in Maharashtra and is now being replicated in Madhya Pradesh and Odisha.

To address the scarcity of senior sanitation professionals, particularly women, UNICEF nurtured and extended its flagship partnership with the Tata Institute of Social Science, to avail trained and skilled human resources, resulting in 81 postgraduates (35 per cent female) trained in WASH and employed in the sector. A dedicated gender-in-WASH module is also under development.

In the water sub-sector, UNICEF supported the MDWS to mainstream the water safety and security planning approach in the national rural drinking water programme. The MDWS launched the Swajal initiative, on community-managed rural piped water supply for marginalized villages in aspirational districts. Swajal guidelines and training modules were developed by UNICEF to build the capacity of grassroots stakeholders and training of trainers from states and 65 aspirational districts to operationalize 'Swajal'. Technical assistance was also provided to revise the uniform drinking water quality monitoring protocol and to establish a national ranking system for laboratories. This will enable all states to improve monitoring of water quality and surveillance.

WASH-in-schools costed improvement plans were included in state and district annual budget allocations for education. Plans included funds for operations and maintenance (O&M) of WASH facilities, hygiene promotion (mainly hand-washing with soap) and menstrual hygiene management (MHM). UNICEF was successful in leveraging significant public and corporate funds: US\$7.5 million from the Revenue Department for O&M in all schools in Rajasthan; increased investment by corporates like TATA Trusts, ONGC, Viacom 18, Rotary clubs and private foundations in urban schools. A WASH package in residential schools for tribal children (Ashramshala) was supported by the National Stock Exchange Foundation.

To scale-up menstrual hygiene programming UNICEF carried out a gap assessment to inform

national inter-ministerial coordination and supported the development of state-level plans in Rajasthan (with US\$10,773,000 in funding leveraged); Gujarat and Jharkhand, for MHM counselling with a dedicated budget; and district plans in Uttar Pradesh and Maharashtra. UNICEF also supported communication campaigns to break the culture of silence on menstruation (e.g. #LetsTalkAboutPeriods and FM radio broadcasts in West Bengal).

Several states and districts, with UNICEF support, developed and rolled out dedicated plans to improve WASH services in labour rooms. This resulted in increasing the proportion of delivery venues with fully functional WASH from 3.1 per cent to 41 per cent in high-priority districts.

The WASH in preschools dedicated components of districts plans reached 80 per cent achievement rates in eight districts. UNICEF supported the development of national guidelines for WASH in AWC's to support further scaling-up in 2019.

Goal area 5: Every child has an equitable chance in life

UNICEF continued to provide technical assistance for strengthening policy and analysis and evidence-generation on social inclusion, contributing to the following key results in 2018:

- 16 million girls reached with a universal cash grant in Bihar
- Section on children incorporated in revised GPDP guidelines
- Child budgeting now mandatory for all ministries of the Union Government.

During 2018 there was a strong push for building policy analysis and generating evidence on social inclusion to support national and state policy dialogue on social protection. Generation of data and evidence focused on strengthening the national maternity benefit cash transfer programme as well as redesigning existing government cash transfers for girls in Bihar, Jharkhand and Karnataka to ensure more equitable reach by the programmes, especially from a gender-equality perspective.

Considerable progress was made in the development of social protection programmes targeting vulnerabilities faced by children in India, particularly girls. UNICEF India worked with national and state governments to develop, design and technically support implementation of cash transfer programmes for girls in states with high rates of child marriage and female school drop-out.

In Bihar State UNICEF undertook a review of coverage and financial allocations of existing social protection programmes for girls younger than 21 years of age and supported the design of an at-scale integrated cash transfer. As a result, the scheme was designed to provide universal cash grants to all girls from birth till 21 years of age, to ensure that all girl children are able to access benefits and are receive incentivizes for continuing their education. The cash transfer was launched in August 2018; the state government aims to reach 16 million girls annually.

In Jharkhand State UNICEF worked with the state government to review the progress and status of two existing girl-child-related cash transfer programmes targeted to vulnerable girls living below the poverty line. Following the review, the Jharkhand government redesigned the programme to make it more inclusive of girls with differing vulnerabilities and to ensure that cash transfers are linked to crucial transition points in their educational trajectory, thus reducing the rate of drop-out and discouraging child marriage. This new cash transfer programme was launched by the state government in November 2018, and is expected to increase annual

coverage by 0.5 million girls.

The United Nations in India has supported the Government to set up a robust SDG monitoring mechanism; UNICEF focused specifically on key child-related indicators. In October 2018 the Government approved a national indicator framework for SDG monitoring. To achieve SDG 1, senior officers from Gujarat, Chhattisgarh and Maharashtra states were trained on multidimensional poverty index analysis during 2018.

The MoF made a momentous decision in September, making child budgeting mandatory for all ministries of the Union Government for the 2019–2020 budget. This was the result of a series of consultations on the concept of child budgets held by UNICEF with line ministries, including the MoF. The child budget statement will set a baseline for public investment for children by the Union Government and will provide a more comprehensive picture of allocations for children, which is expected to inform the budget processes.

UNICEF is completing the first-ever analysis of India's public investment for children, including allocations and expenditures by both the central and state governments for all programmes for children. The analysis will present critical evidence on the trend and patterns of public investment in children over the past five years, with disaggregation by gender, age group, ethnicity and other categories. It will also shed light on the impact of the country's 14th finance commission recommendations (2014) on the social sector and public investment for children. This analysis is expected to provide a baseline for deciding allocations for child-related programmes and improving funding flows by the central and state governments.

For the first time a section on children was incorporated into the revised Gram Panchayat development plan guidelines by the Ministry of Panchayat Raj (MoPR) in October 2018, as a result of policy dialogue on child-responsive development planning with the Ministry and the National Institute of Rural Development. Enhanced partnership with the MoPR led to strengthened capacities of Panchayati Raj institutions, facilitated learning across states and supported the institutions to deliver on inclusive development, social justice and localizing the SDGs.

Cross-cutting programme priorities

Initiatives to empower adolescents and end child marriage cut across all UNICEF outcome areas. In 13 states, UNICEF contributed to translating the commitment to end child marriage into action, with the following key results:

- 5 million boys and girls active in adolescent groups were reached with information and life-skills training
- 1.9 million parents and community members benefitted from social- and behaviour-change communication to end child marriage and promote adolescent empowerment.

At the national level, after the launch of the global Generation Unlimited partnership UNICEF's Executive Director participated in the development of Yuwaah, a national partnership with and for young people, bringing together key stakeholders. UNICEF India was working with a group of committed partners in 2018 to translate some of the proposed solutions into action, including issues related to child marriage.

With UNICEF technical assistance, the MWCD strengthened two national programmes to

promote adolescent empowerment and end child marriage. These enhancements facilitated implementation in 640 districts (of 712) through a package of interventions including training, communication initiatives and monitoring systems. In six states, multi-sectoral coordination mechanisms were established under the chief secretary and district administrations in an effort to build multi-sectoral convergence for adolescent empowerment and ending child marriage.

UNICEF supported costed and resourced state action plans already developed in two states and being drafted in five more states. The chief minister of Jharkhand launched the costed state plan of action to end child marriage with a value of US\$50 million per year for five years, with technical collaboration from UNICEF; the effort will reach 1 million girls.

In Bihar, the state government, in partnership with UNICEF, launched initiatives to: (1) strengthen capacity among 9,500 volunteers and 38,000 front-line workers, aiming to reach 1 million adolescents; (2) establish a state adolescent coordination body; (3) implement state/district plans of action, (4) form 40,000 adolescent girls' and boys' groups in communities (4,800 already formed); and (5) implement communication campaigns.

In Uttar Pradesh, Mahila Samakhya (a girls' empowerment programme) and UNICEF expanded interventions to end child marriage from seven to 20 districts. This resulted in the establishment of large community platforms across 25 per cent of districts, linked to 16,000 local governance councils.

UNICEF India has further strengthened its focus on alternative education to ensure access to learning opportunities, especially for the most vulnerable, and is taking the lead in mapping and providing referrals and linkages to alternative education programmes in five states. During 2018 UNICEF India developed an inter-sectoral life-skills framework with the MHRD and CSO partners, which will be implemented in 13 states through adolescent groups.

UNICEF developed an evidence-generation plan to define what works at scale, and produced two knowledge products: an overview of prevalence trends, burden and possible drivers of change and a summary of knowledge generated from high-intensity programmes to end child marriage in four districts using regression analysis. These efforts will serve to inform UNICEF's policy advocacy and interventions.

Humanitarian action and disaster risk reduction

UNICEF supported humanitarian response to the Kerala flooding emergency, with the following key results:

- 1 million children received psychosocial care in schools and communities
- 509,000 people regained access to safe water and contributed to the provision of toilets and WASH facilities, benefitting 580,000 people
- 75,000 households were reached with messages on infant and young child feeding practices;
- 360 temporary health facilities became functional, in part through the recruitment of 400 staff nurses
- Accountability to affected populations, in partnership with the Government of Kerala, was rolled out, informing 489 Gram Panchayat Development Plans

Child-centred, risk informed programming was institutionalized with UNICEF support in administrative training programmes run by two national and six state-level Institutions, through capacity building of more than 85,000 government officials to lead on action to minimize

disaster impact and build social sector resilience for children.

UNICEF also engaged state authorities in validation of eight state child risk and impact analyses, utilizing GRIP methodology. The development of two disaster risk-reduction (DRR) roadmaps, revision of five state and 67 district disaster management plans and integration of DRR in Gram Panchayat development plans was also supported. School safety programmes were scaled up to eight states, reaching 118,000 schools. UNICEF developed two designs for hazard-resilient toilets and submitted them to water departments in Assam and Gujarat for adoption.

UNICEF prepared 16 states and one national EPP for its offices. The EPPs were used in response to the 13 disaster situations across India during 2018, culminating in the response to flooding in Kerala. UNICEF staff acted as UN coordinator for the Kerala response and contributed to the post-disaster needs assessment, the first of its kind in India.

UNICEF supported the Bihar state government to develop 40 social sector recovery and preparedness plans, which were finalized in 2018 and rolled out in districts by respective departments. Climate change adaptation was also promoted through kitchen gardens in Chhattisgarh. With the Gujarat Institute for Disaster Management, UNICEF organized a consultation on climate smart governance and conducted a five-day course, jointly with the National and the State Institute for Rural Development, on climate resilient production systems and promotion of agro-entrepreneurship.

Gender

In 2018 UNICEF India contributed to key results that supported the reduction of gendered vulnerabilities of women, especially pregnant women, mothers and adolescent girls, across the various outcome areas. For example, more gender-responsive breastfeeding guidelines now advocate increased rest and improved nutrition for 25 million lactating women. The universal MPC card, meant to record the health of every child born in a public facility, encourages fathers to parent, using gender-responsive language and images. In three states 3.4 million vulnerable pregnant and lactating women received daily hot meals at village child care centres, a 44 per cent increase from 2017. These women are among the most vulnerable and likely to be eating least and last in their homes, due to harmful gender norms. A National Centre of Excellence was established at Lady Irwin College, specifically to study and support women's collectives—an increasingly important platform for rural development.

A key priority has been to retain girls in school as a strategy to prevent child marriage and to increase their value. From costed menstrual hygiene management plans in Maharashtra, Gujarat and Assam, which will contribute to fully equipped schools for up to 6 million girls, to cash transfers for 16.5 million girls at risk of child marriage, UNICEF and partners continued to champion gender equality. In addition, UNICEF India offered strong support for the national flagship programme for girls Beti Bachao Beti Padhao, which aims to increase the perceived value of girls and thus improve the sex ratio at birth. In Haryana, the state with the worst sex ratio at birth, this support led to fully operational public lights and toilets in two districts, following young-women led safety audits. The state government also committed to gender training for all government bus drivers and conductors and to scaling up gender socialization training for 11–14-year-old adolescents attending public school in two districts from 20,000 in 2018, to 600,000 adolescents state-wide during 2019.

Communication

UNICEF India successfully put the rights and well-being of India's most disadvantaged children at the heart of social, political and economic agendas through an increase in UNICEF's voice, reach, public engagement and brand positioning, resulting in:

- Intensified policy advocacy: Engagement with parliamentarians led to policy change for children, including a landmark decision in Bihar to provide cash incentives to health workers and mothers for every new-born girl admitted to newborn care units for sick children.
- Wide-reaching public advocacy and integrated campaigns: Children's Day focused on the need for safe and supportive school environments and reached 700 million through media and social media. Goodwill Ambassador Sachin Tendulkar was a key influencer and the Rashtrapati Bhawan (presidential residence) went blue in support of child rights. Two integrated campaigns, on new-born survival and ECD were implemented. #EveryChildALIVE had a cumulative reach of 800 million through traditional media alone. Campaigns to end violence and child marriage were rolled out across key states.
- Enhanced trust and partner of choice: UNICEF India is the most trusted international agency in the country, with 86 per cent trust overall and increased willingness to donate, resulting in an increase from 55 per cent to 68 per cent. Online supporters more than doubled, from 1.4 million to 3.7 million. The circle of key influencers keeps growing; 18-year-old athlete Hima Das was appointed as UNICEF India's first Youth Ambassador in 2018.

Operations and fundraising

Operations support and fundraising efforts continued to be critical to achieving programme results in 2018. Efficient and effective management of resources was ensured by proper financial utilization of resources. A massive recruitment exercise was undertaken in 2018 to ensure that the required staffing was in place to implement the new country programme. Following the flood emergency in Kerala, human resources were effectively managed to provide surge support across all technical areas. An on-line course on prevention of sexual harassment, abuse of authority and prevention of sexual exploitation and abuse was completed by the majority of staff, and UNICEF India enforced a zero-tolerance policy. Gender parity in human resources across the office was achieved in 2018, and UNICEF hired a female driver – a first for the UN in India.

Supply and procurement extended support to capacity building of state governments by managing in-country logistics under procurement services and undertaking an assessment of supply/cold chain management and training. Supply and procurement worked closely with the Government on vaccine procurement via procurement services and vaccine forecasting. Some US\$50 million of goods and services were procured in support of country programme delivery.

In-country private sector fundraising is becoming increasingly vital. UNICEF India grew its base of individual donors to almost 40,000 and continued to grow its influence with the private sector through continued advocacy with the Ministry and the Indian Institute of Corporate Affairs to prioritize business and human rights and responsible business practices. A memorandum of understanding was signed with the Confederation of Indian industries to institutionalize a long-standing relationship, and UNICEF supported the establishment of corporate social responsibility (CSR) hubs in the Eastern, Southern and Western regions. These hubs have

been strategic in prioritizing important child rights outcomes through state-level CSR.

Part 3: Lessons learned and constraints

The year under review reconfirmed the importance of some key lessons and highlighted some new areas for reflection. One of the factors crucial to programme delivery is high-level political and bureaucratic commitment by Government, requiring sustained advocacy based on data and evidence. This was exemplified across numerous sectors during 2018.

For example, in the health sector the renewed and intense focus on the immunization programme was largely the result of political commitment coming from the highest level in the Government, with close engagement from the office of prime minister. The convening role played by the health minister at the national level, along with engagement by chief secretaries for regular review, were critical factors providing the needed impetus to both Mission Indradhanush and the MR campaign. Similarly, close engagement by the office of the prime minister was also a major factor in ensuring that many ministries and departments engaged in POSHAN Abhiyaan and supported accelerated roll-out of nutrition-sensitive and -specific interventions. Convergent action plans on nutrition at both state and district levels brought together initiatives from the different ministries and departments.

The Government's embrace of social-and behaviour-change communication as part of key flagship programmes ensured translation of interventions from the national down to the Gram Panchayat level, as required for behaviour change. This was exemplified in MR and SBM guidelines, BRIDGE training guidelines, POSHAN Abhiyaan Jan Andolan guidelines and dashboards.

Child-sensitive social protection was put on the policy table by UNICEF at both national and state levels through UNICEF-assisted evidence generation. Building strategic evidence in parallel to initiating policy dialogue with senior levels of the Government for integrated and child-sensitive social protection programmes was found to be an effective way to encourage the review and redesign of social protection programmes targeting children.

In the WASH sector consistent advocacy efforts for policy-level changes based on data and evidence helped to secure funding for WASH O&M in schools and for making raw data available publicly.

Another lesson learned was the critical nature of catalytic funding for accelerating programme results. For example, catalytic funding by Gavi was instrumental in fast-tracking roll out of newer vaccines and bridging the resource gap for the immunization programme. The momentum and political commitment generated for the immunization programme (due to Mission Indradhanush) and the MR campaign must now be utilized to strengthen the routine immunization programme, to sustain coverage gains.

Also reconfirmed during 2018 was the power of social media, influencers and media partnerships to contribute to positive (and negative) programme outcomes. For example, social media played an important role in the success of the MR campaign, but its use by the anti-vaccine lobby has emerged as a major challenge, with the spread of negative news and rumours on WhatsApp occasionally impacting the campaign. UNICEF played a key role in handling media engagement and response, including designing and implementing a social

media strategy to address negative messages and rumour-mongering. UNICEF took the lead in supporting national and state governments to create awareness and dispel myths, through a social media strategy and by engaging print and broadcast media using clear evidence, facts and figures.

This year also highlighted the importance of data analysis contextualized to India's situation and use of monitoring information and research. For example, in the nutrition sector, data analyses over the past year provided important insights into the etiology of acute malnutrition. In South Asia, unlike in sub-Saharan Africa, SAM prevalence peaks during the first month after birth and steadily declines to 5 per cent at 12 months. A proportion of SAM cases in children six months and older reveal persistent or chronic low weight for height (a global definition of SAM). The rapid decline of SAM leads to a lower mortality among children with SAM after six months compared to other countries. It is also increasingly recognized that the presence of a wide scope of community- and facility-based health and nutrition programmes in India provide an opportunity for a unique approach to SAM prevention and management. When the draft CMAM guidelines are finalized and implemented, UNICEF will continue supporting government by generating evidence permitting better understanding of SAM and ensuring that appropriate responses are provided within the local context.

Implementing the programme to end child marriage at scale yielded important lessons generated from data analysis, monitoring of programme interventions and research. The single most important learning was the need to better understand what accelerators of change work at scale, as well as what are the most effective and cost-effective interventions. UNICEF and partners have sufficient evidence on what works at a small scale to reduce child marriage through high-intensity interventions in specific contexts (e.g. community mobilization to promote dialogue and behaviour change; empowering adolescents with information and skills,). Some important areas for further evidence include the inclusion of 'plus' elements (in cash plus programmes), which may optimize the effect of cash grants on incentivizing adolescent girls' education and opportunities.

Building and strengthening partnerships, and UNICEF's key role in supporting coordination and collaboration among stakeholders at central and community levels, was again highlighted in 2018 as critical to achieving programmatic results. Partnerships with national institutions (e.g., National Institute of Rural Development, Panchayat Raj and Lal Bahadur Shastri National Academy of Administration) presented UNICEF with an opportunity not only to collaborate in building the capacity of policy-makers, but also to effectively enhance cross-cutting work within UNICEF. Based on this learning, coherent and coordinated approaches will be further enhanced through development of a common strategy across programmes and field offices to contribute to these partnerships.

The national achievement survey, which assessed 2.2 million children on a single day and produced results in the lowest possible turnaround time, was possible only because key decision-makers and agencies at national and state levels worked in smooth coordination and also involved district decision-makers.

To operationalize strategies in adolescent programming, UNICEF engaged in large scale, multi-stakeholder technical partnerships with state governments and district administrations to work with adolescent girls and boys, parents, community structures and front-line workers. This points to an evolving role for NGOs, from direct implementation to working as technical partners of the Government, and the importance of a CSO alliance. This shift drastically

reduced UNICEF's costs and increased coverage.

In the WASH sector 2018 demonstrated that sustaining sanitation gains, especially in rural areas, requires continuous engagement with communities achieving ODF status. For this, engaging and adequately incentivizing foot-soldiers or 'Swachhagrahis' is a critical requirement. Further, it is important to swiftly monitor the toilets built to check for structural issues that may require retrofitting. This is needed to ensure that the technology used and toilets constructed are safe. Involving local government bodies like Gram Panchayats, in these efforts is necessary and therefore an orientation campaign on sustainable ODF for Gram Panchayat representatives is immediately required. Moving forward, greater attention will be placed on other safe sanitation management issues, including solid and liquid waste, faecal sludge, menstrual hygiene and handwashing with soap. With the SBM-G coming to an end in 2019, sources of alternative financing for WASH will need to be explored.

Lessons learned in 2018 highlight the need for a shift in the role of the water supply department in operationalizing community-managed water supply from provider to facilitator. The private sector brings value in terms of community-centred service delivery, but needs to be accountable to communities. This requires non-conventional contract management. The communication and behaviour-change activities must move into campaign mode, focusing on key behaviours such as pay-for-use of safely managed water supply. The sustainability of India's water supply depends not only on communities' willingness to pay, but also on openness on the part of the Government to consider charging communities for their water supply.

Programming experience around child marriage and adolescent engagement in 2018 highlighted some new lessons learned that provide insights for future programming. For example, change related to child marriage is possible if it is linked to aspirations and informed choices by adolescent girls, boys and parents – not just enforcement of laws. There is a need to challenge and shift the narrative from the 'marriage market' to the market of aspirations and informed choices in life for girls and boys.

While amplifying drivers of change such as education, empowerment of adolescent girls, community mobilization and incentivizing change, a differentiated approach is needed for state and inter-state collaboration based on prevalence and norms. The prevalence of child marriage is high in border districts, and there are links between child marriage and trafficking in a few states. Also to be considered are India's many highly vulnerable population groups, such as nomadic communities in Rajasthan and Maha Dalit in Bihar, tribal communities in many states and tea garden communities in Assam.

Addressing implementation gaps and moving from strategies to operational modalities is critical. In states where political commitment exists, the next step is to translate that political capital into sustained action. Some reality checks: (1) quantity and quality of human resources should not be ad-hoc, but rather institutionalized through key existing systems and understood in innovative ways, such as the use of technology and mentoring; (2) planning, budgetary analysis, costing and resourcing should not be exclusively through public sector, but also with CSOs and the private sector; (3) inter-departmental coordination under chief secretaries and district administrations is also critical. It is also important to have a CSO alliance to support the Government to accelerate results; and (4) capacity is required to monitor progress in real time.

The child protection programme has drawn important lessons from years of investment in

promoting the effective implementation of child protection legislation, primarily in collaboration with the judiciary and state governments. Active involvement by the highest levels of the judiciary, with UNICEF technical assistance, to make child protection services more effective masks two important challenges: over-reliance on legal solutions (e.g. court orders/interventions) in the absence of integrated preventive and response services for survivors of sexual violence and exploitation, and overreliance on overburdened statutory child protection bodies that lack the staff and resources to prevent and respond to violence and exploitation.

UNICEF India has taken decisive steps toward brokering new partnerships to ensure that public services (education, health) and private initiatives contribute toward practical solutions to prevent and respond to violence against and exploitation of children.

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