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Executive Summary

In 2016, UNICEF’s Programme Division (PD) made significant headway on a range of priority areas for impactful global action for children: In the first year of the implementation of the Sustainable Development Goals (SDGs) PD focused on SDG adoption and implementation by national governments and other development partners, in close collaboration with UNICEF divisions, regional and country offices; significant analysis and substance was contributed to the formulation of UNICEF’s new Strategic Plan 2018-2021; global policy and programme frameworks were developed for children on the move, adolescence, HIV/AIDS, water, sanitation and hygiene (WASH), health, education in emergencies, and ending violence; while specific programmatic focus areas included repositioning child health to accelerate reduction of preventable maternal and neonatal child deaths, and polio transition. Mechanisms were shaped that helped convene partnerships and raise funds at global, regional and country levels; leadership continued in data and research for children on both priority and emerging topics; and focus further increased on risk-informed programming and strengthening the nexus between UNICEF’s humanitarian and development programming. Sustained high quality technical assistance was provided to country offices. Finally, PD took concerted action to become “fit for purpose” to respond to new and growing demands with appropriate expertise and resources.

Specific highlights in 2016 from these priority action areas, included:

In the first year of implementation of SDGs, PD focused on working with UNICEF divisions, regional and country offices to begin SDG adoption and implementation, both by national governments and development partners, and ensuring that children’s rights remain front and center in the global development agenda. For PD, the SDGs formed the backdrop for both continuing and new initiatives involving advocacy, partnerships, evidence generation, guidance and tools, resource mobilization, learning and knowledge exchange. PD shaped UNICEF’s efforts to support the elaboration and approval of important resolutions related to children in the UN General Assembly, e.g. on the impact of migration on children, and played a critical role in ensuring that children’s issues were in focus at the World Humanitarian Summit in Turkey in May. In collaboration with UNICEF’s Public Partnerships Division (PPD), PD also provided countries with information, tools and good practices to enable support to national governments to localize SDGs within their national development plans as well as sectoral national plans, prepare them for reporting to the High Level Political Forum, and operationalize the Mainstreaming, Acceleration and Policy Support (MAPS) tool that enables United Nations Country Teams to provide coherent support to national governments and stakeholders.

PD contributed substantially to the formulation of the UNICEF’s new Strategic Plan (SP) 2018-2021, by distilling global analysis of all SDG goals and targets related to children. Furthermore, PD helped in the shaping of a conceptual frame and a results framework that enables the organization to focus on the unfinished agenda of MDGs, accelerate areas with potential for scale up, and begin to address the emerging issues.

To sharpen UNICEF’s, as well as partners’, programming approaches, PD developed and disseminated new programming guidelines. The new guidance was shared with UNICEF’s regional and country offices, and also incorporated into new and comprehensive sectoral strategies such as in the health and WASH sectors as well as a strategic repositioning in the HIV/AIDS sector. The health strategy elevates three approaches – addressing inequities in health outcomes, strengthening health systems including emergency preparedness, response and resilience, and promoting integrated, multi-sectoral policies and
programmes – that should underpin all of UNICEF’s health programming and engagement. The WASH strategy maintains focus on WASH, including in healthcare centres and schools, and in emergencies, and recommends applying a mix of approaches, such as strengthening enabling environments, leveraging finance, building sustainable markets, empowering communities and delivering services and supplies. The HIV/AIDS strategic repositioning focuses on adolescent HIV prevention and the “treatment gap” preventing adolescents from accessing appropriate counselling and treatment, fast-tracks HIV response for pregnant women, mothers, adolescents and children, and builds resilient government and community systems to decrease equities in HIV services.

In the context of the magnitude and continuing high profile of the global refugee and migrant crises, PD actively led the organization towards improved overall coordination through the appointment of the PD Director as the overall migration coordinator. In addition, PD worked with other divisions to provide sound technical input to the development of six core policy asks for children that were successfully included in the New York Declaration for Refugees and Migrants adopted at UN Summit in September. Moreover, PD supported the development of a Global Programme Framework that provides guidance to country, regional offices and national committees in programme design and implementation. PD also contributed staff deployments, including one of the PD Deputy Directors serving as Country Coordinator a.i. in Germany.

PD effectively contributed to shaping partnerships and financial mechanisms to help fund the SDGs and in support of child rights globally such as the launching of the new Global Partnership to End Violence Against Children and the Education Cannot Wait (ECW) fund. UNICEF also continued its strong partnership with the GAVI Alliance under the Partnership Engagement Framework to deliver vaccines for children, and partnered with UNFPA to launch the Global Programme to Accelerate Action to End Child Marriage. Furthermore, an Early Childhood Development Action Network (ECDAN) was launched with the World Bank Group, engaging over 80 diverse partners to accelerate achievement of the young child targets of the SDGs. An IDA 17 grant from the World Bank was leveraged for Yemen through a ground breaking partnership to provide health, nutrition and cash programmes for the most vulnerable children and families in famine affected areas. Finally, a total of approximately USD $105,078,100 was disbursed through the thematic funding pools, and 8 high quality thematic Annual Results Reports, summarizing global results for 2015 and highlighting the importance of thematic funding, were well received by donors.

To establish an evidence-based foundation to the child-related SDG agenda, PD together with the Division for Data, Research and Policy (DRP) and others contributed to the release of a number of significant reports, including: “New Estimates of Extreme Poverty for Children”, the first global measurement of children living on less than USD $ 1.90 per day as a baseline for SDG 1, in close cooperation with the World Bank; “For Every Child End AIDS - Seventh Stocktaking Report 2016” with global data on the rising HIV infection rates among adolescents; and “Uprooted: The Growing Crisis for Refugee and Migrant Children”. PD also generated and disseminated cutting edge research on the “brain science” underlying adolescent neuro-psychological development. This evidence supports leveraging interventions that focus on social, emotional and motivational learning particularly during early adolescence (ages 10-14) which have been shown to positively influence developmental processes. The latest data and evidence on children in urban settings and the needs of children in fragile contexts were shared at the global consultation on children in urban settings and a global consultation on more effective approaches to the needs of children in fragile contexts, respectively.
PD supported the UN Committee on the Rights of the Child, helping to launch the **General Comment on investment in children**, and prepare the **General Comment on adolescents**. PD also helped to strengthen the **evidence-base provided by the UN Security Council-mandated monitoring and reporting mechanism (MRM) on grave violations of children’s rights in situations of armed conflict**. This evidence was highlighted and promoted at the highest level during 2016, and proved critical to informing advocacy and programmatic interventions as well as normative change to end and prevent grave violations.

Use of **data tools in country offices** was expanded with PD technical support. For example, use of the “**Primero**” (Protection-related Information Management) **system**, an open source software application that aims to help partners securely and safely collect, store, manage and share data for child protection-related incident monitoring and case management, was scaled up; and **EQUIST**, a tool to assist countries prioritize and allocate resources for equity-focused programming in child health, was launched to strengthen health sector planning, country programme preparation and the development of investment cases.

With the numbers of countries experiencing **fragility and emergencies growing**, PD responded by increasing its focus on **risk-informed programming** and by strengthening the nexus between UNICEF’s **humanitarian and development programming** through a process of collaboration with the Office of Emergency Programmes (EMOPS). UNICEF’s long experience in responding to crises affecting children was instrumental to its successful advocacy to include **children as a major focus of the “Grand Bargain”** negotiated at the World Humanitarian Summit. PD also led organizational thinking on **sustainable development as a preventive measure** related to fragility and strengthened resilience. PD contributed to the development of **new risk informed programming guidelines**, and provided new guidance and related trainings. In addition, PD and EMOPS, with OCHA, IFC and CDAC Network, co-convened some 60 UN, civil society and media and communication organizations to establish a **communication and community engagement initiative**. The focus is on engaging with affected communities using two-way dialogue to plan well-coordinated humanitarian responses based on needs, and to ensure an active feedback and complaints mechanism. Finally, through participation in several mechanisms and platforms that were set up or strengthened after the **Ebola crisis**, substantial work was done to **increase UNICEF’s capability and preparedness** to prevent and respond to large scale **public health emergencies**, including through the Health Emergency Preparedness Initiative (HEPI), and contribution to WHO – IASC standard operating procedures, increasing capacity in risk communication.

**Technical support by PD staff**, including through **meetings, missions, emergency support, oversight, advocacy and trainings**, directly and indirectly facilitated UNICEF programming in countries across the globe and across the programmatic spectrum. At the regional level, PD continued to strengthen the **compacts** developed between the division and the regional offices to streamline and strategize technical support and collaboration. PD also coordinated closely with other divisions and regional offices to provide **extensive remote and in-country support for important country programming milestones** and products such as **strategic moments of reflection (SMRs)**, **programme strategy notes (PSNs)** and **country programme documents (CPDs)**. This enhanced joint support for the field included PD review and detailed comments on 80+ PSNs for 30+ countries during the year. A review of this process led to the decision that, going forward, a smaller subset of countries will be prioritized, jointly with regional offices, to enable more focused/tailored support, including **joint country visits at strategic moments**.
Throughout the year, PD Sections worked to support country offices, including through missions, in close collaboration with the regional offices and advisers. A few salient examples\(^1\) include: the Education team supported Pakistan Country Office to assess engagement with Madrassas; sent an emergency mission to South Sudan; assisted the Philippines Country Office and the Government to design and set up a special allowance for teachers teaching in the most difficult context, as part of the Data Must Speak initiative; supported Ethiopia Country Office to strengthen education results for adolescent girls’ as one of the twelve countries implementing the Gender Action Plan (GAP) targeted priority on secondary education; and sent a technical support mission in Costa Rica to train interviewers and observe the pilot of the new MICS learning and parental participation modules. The Child Protection team undertook a joint mission with the West and Central Africa Regional Office (WCARO) in the Central African Republic (CAR) and the Democratic Republic of the Congo (DRC) with a focus on UNICEF’s programmatic and management response to Sexual Exploitation and Abuse; supported the release and reintegration of children deprived of their liberty due to association with armed forces and armed groups using extreme violence in Nigeria (Boko Haram) and Yemen (first release of children associated with the Houthi armed groups); led a nine country Middle East and North Africa (MENA) regional justice meeting on implementation of practical measures to protect children below the age of legal responsibility coming into contact with the law; participated in the Chile SMR with a focus on countering the movement in Latin America to roll back the age of criminal responsibility; and provided support to the Government of China to develop a strategy for data collection and follow up action which would inform a national plan on the prevention and response to violence against children. PD staff were also engaged in providing technical support to the response to the migrant and refugee crisis in Europe by giving inputs for programme design and implementation as well as through staff deployments, including - as mentioned above - one of the PD Deputy Directors serving as Country Coordinator a.i. in Germany. Highlighting the continued requirements for PDs technical expertise on the ground in emergency situations, PD supplemented the capacity of country offices e.g. in conflicts in Syria, Sudan, South Sudan and Yemen; on child migrants and refugees in Central America (in addition to Europe); in health-related crises such as Zika and Yellow Fever; and in natural disasters such as Hurricane Mathew in Haiti.

Other forms of support provided by PD to regional and country offices included: providing support to implement technical guidance (for example regional adaptation of the Care for Child Development (CCD) package in WCA and Latin America and Caribbean (LACR) regions); developing and participating in key workshops and innovative training events, and providing extensive remote support (for example, regional training on Communication for Development (C4D) in preparedness and emergency response in Eastern and Southern Africa (ESA) region); convening the global network meetings to disseminate guidance and enhance cross-fertilization among countries, regions and divisions; and helping to secure funding, for example 7% set-aside funding for work on child poverty and public finance in Morocco, Armenia, Argentina, Tanzania, Senegal and Cambodia.

Finally, PD continued to make itself even more “fit for purpose” to effectively support UNICEF’s global mission, including by undertaking an update of the PD Office Management Plan (OMP) Results Framework 2014-2017. Across the board, the division made a consistent big push to improve planning and coordination, and build internal capacity for Results-Based Management. As a result of these efforts, PD’s work increasingly emphasizes collaboration across sectors (a “One PD” approach), with other

\(^1\) More examples from PD Sections are provided throughout the report.
divisions, and with regional offices, for **strengthened, effective and consistent support to country programmes** in delivering results for children.

**Main results achieved**

**Global and Regional Programmes**

In 2016, PD continued to contribute to the results outlined in the SP, including by influencing global development policy, strategy and dialogues. The SDGs approved by the UN General Assembly in late 2015 formed the backdrop for both continuing and new initiatives involving advocacy, partnerships, evidence generation, guidance and tools, resource mobilisation, learning and knowledge exchange. This required global leadership in technical areas, and effective support to country-level action, both by UNICEF and development partners.

**Influencing the global development agenda and SDG implementation**

In the first year of implementation of the SDGs, and following UNICEF’s successful advocacy in 2014 and 2015 to include child issues and indicators, PD focused on working hand in hand with other UNICEF divisions and offices and external partners to begin their adoption and implementation, both by national governments and other development partners. For example, UNICEF and the World Bank produced and disseminated the first-ever joint measurement of children living under USD $1.90 a day (providing a solid baseline for monitoring child poverty), launched a new website2 and created and shared An Agenda for Action on Child Poverty (SDG1). UNICEF also co-chaired the global Every Newborn Action Plan (ENAP) – adopted by 51 countries in 2016 up from 18 in 2015 – to map technical assistance needs and to identify implementation barriers in line with the ENAP milestones and recommendations to reduce neonatal deaths and stillbirths, and provided leadership to the ENAP working group. As the chair of UN’s H63 group, UNICEF led the practical reorientation to coordinate and provide technical assistance to H6 work in 40 of the 75 high burden countries. In addition, UNICEF supported the UN Secretary-General’s Every Woman Every Child initiative (EWEC) (SDG3).

UNICEF contributed to the development and adoption by Member States of the global indicator framework for the SDG targets on water and sanitation together with UN-Water, and supported the Safe Water for All (SWA) initiative – including hosting the Secretariat – to help ensure the success of the 2016 Sector Ministers’ Meeting in Addis Ababa and other high-profile events. PD continued to assume a leadership role in forging global partnerships related to the SDGs, including the launch of the Global Partnership to End Violence against Children and the technical package, “INSPIRE: Seven Strategies for ending violence against children”, in collaboration with WHO and other international partners. In terms of UN-wide support to implementation of the SDGs, PD led the inter-agency Acceleration Task Group of MAPS, through which the UN Development Group (UNDG) provided a toolkit and support to UN Country Teams in assisting governments and national stakeholders to identify synergies, trade-offs and conflicts in implementing the SDGs.

PD was also engaged in shaping the financial mechanisms to help fund the SDGs. PD supported the Office of the Executive Director in providing global leadership to the Scaling up Nutrition (SUN) Movement and

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2 [www.endchildhoodpoverty.org](http://www.endchildhoodpoverty.org)
3 H6 unites UNAIDS, UNFPA, UNICEF, WHO, UN Women and the World Bank to help countries strengthen their health systems and improve health services for women, children and newborns.
contributed to the signing and launch of the SUN 2.0 strategy (SDG2). PD provided leadership on developing the ECW fund for education in emergencies, including establishing and supporting the secretariat. The fund will initially be hosted by UNICEF, with a High Level Steering Group comprising UN agencies, civil society, representatives from countries affected by crisis, private sector and foundations, donor agencies. It is championed by UNICEF’s Executive Director, Julia Gillard and chaired by Gordon Brown, and its high-profile launch at the World Humanitarian Summit mobilised pledges of over USD $113 million.

PD continued to provide global leadership to both continuing and emerging issues in international development discussions. The magnitude and continuing high profile of the refugee and migrant crises was at the center of UNICEF’s global agenda, and PD actively led the organization towards improved overall coordination through the appointment of the PD Director as the overall migration coordinator. In addition, PD provided technical input, in collaboration with Divisions of Communication (DOC) and DRP, to the development of six core policy asks for children successfully included in the New York Declaration for Refugees and Migrants adopted at UN Summit in September, and the development of a Global Programme Framework that provides guidance to country, regional offices and national committees regarding programme design and implementation. PD staff also engaged in the response to the migrant and refugee crisis in Europe by providing technical inputs for programme design and implementation as well as through staff deployments, such as the PD Deputy Director serving as Country Coordinator a.i. in Germany. In addition, PD led the development of an action plan to address the needs of children migrating from Latin and Central America to the USA which outlined interventions to support children and their families.

PD also played a critical role in preparing the joint statement of social protection actors to the World Humanitarian Summit, producing evidence on the role of cash transfers in emergencies, and continued to engage in global discussions of public finance for children (PF4C), notably in supporting the Committee on the Rights of the Child in launching its General Comment on investment in children (Article 4), and in supporting UNICEF’s lead and coordination role in establishing a communication and community engagement mechanism within the humanitarian architecture.

**Advancing results for children through Global Programme Partnerships (GPPs)**

PD continued its work to shape and influence global multi-stakeholder programme partnerships relevant to UNICEF’s mandate. In 2016, some of the highest impact partnerships included: the UN Girls’ Education Initiative (UNGEI), whose secretariat is hosted by UNICEF and which is focused on gender equality in education, particularly towards efforts to end school-related gender-based violence (SRGBV) and to advance gender-responsive sector planning; the H6 group of health-related UN agencies (see above) as they planned their global strategy in the SDG era; and close work with global partners such as GAVI to achieve global polio eradication and end maternal and neonatal tetanus; the SUN Movement and UNITLIFE to leverage action and new funding for nutrition, and early negotiations with the Power of Nutrition (PoN) partnership of public and private sector investors committed to helping children grow to their full potential and ending the cycle of undernutrition. The UNICEF-UNHCR Coalition on Every Child’s Right to a Nationality bolstered efforts to ensure safeguards to prevent statelessness amongst children, and a new inter-agency Alliance for Child Protection in Humanitarian Action will enhance future coordination and standard setting in humanitarian contexts (including refugee settings).
The All In! initiative with UNAIDS and UN partners, the Global Fund, the World Bank, civil society and private sector partners helped fast-track global and country efforts to end the AIDS epidemic among adolescents as well as mobilise action to reduce treatment gaps among children. The focus of the HIV/AIDS Global Plan Partnership to eliminate new HIV infections in children was modified to accelerating responses to end the AIDS epidemic by establishing the Start Free, Stay Free, AIDS Free ("Three Frees") framework to embrace both prevention and treatment of HIV for children and adolescents. PD also collaborated with WHO to update and disseminate guidance on HIV and infant feeding. UNICEF partnered with UNFPA to launch the Global Programme to Accelerate Action to End Child Marriage in 12 selected countries, and collaboration continued within the framework of the Joint Programme on Female Genital Mutilation/Cutting (FGM/C) to improve online monitoring of results. UNICEF also continued to lead the global programme to build capacity to tackle online sexual exploitation. ECDAN was launched with World Bank Group to serve as a global coordination platform to accelerate achievement of the young child targets of the SDGs, engaging over 80 diverse partners.

Other noteworthy partners and partnerships to coordinate strategies, programme implementation and monitoring, to reach new audiences and help shape sector-wide public advocacy and engagement efforts, included: Sanitation and Water for All (SWA); UN Water; UN Trust Fund to End Violence Against Women; the Inter-Agency Standing Committee (IASC), including the IASC Gender in Humanitarian Action Reference Group and the IASG Working Group on Women and Girls with Disabilities; GAVI Alliance on HPV; bilateral donors; the Gates Foundation; private sector enterprises such as Unilever; and non-governmental groups such as Global Citizen.

**Strengthening global evidence and data generation**

PD made significant efforts to bolster UNICEF’s global intellectual and substantive leadership for advancing children’s rights by generating quality evidence through data collection and analysis, operational research and evaluation.

To help establish an evidence-based foundation to the child-related SDG agenda, PD together with DRP and others contributed to the release of a number of significant reports, including: “New Estimates of Extreme Poverty for Children”, the first global measurement of children living on less than USD $1.90 per day as a baseline for SDG 1, in close cooperation with the World Bank; “For Every Child End AIDS - Seventh Stocktaking Report 2016” with global data on the rising HIV infection rates among adolescents; and “Uprooted: The Growing Crisis for Refugee and Migrant Children”. PD also generated and disseminated cutting edge research, on the “brain science” underlying adolescent neuro-psychological development. This evidence supports leveraging interventions that focus on social, emotional and motivational learning particularly during early adolescence (ages 10-14) which have been shown to positively influence developmental processes. The latest data and evidence on children in urban settings and the needs of children in fragile contexts were shared at the global consultation on children in urban settings and a global consultation on more effective approaches to the needs of children in fragile contexts, respectively.

As mentioned above, PD supported the UN Committee on the Rights of the Child, helping to launch the General Comment on investment in children, and preparation towards the General Comment on adolescents. PD also helped to strengthen the evidence-base provided by the UN Security Council-

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4 Bangladesh, Burkina Faso, Ethiopia, Ghana, India, Mozambique, Nepal, Niger, Sierra Leone, Uganda, Yemen and Zambia.
mandated MRM on grave violations of children’s rights in situations of armed conflict. This evidence was highlighted and promoted at the highest level during 2016, and proved critical to informing advocacy and programmatic interventions as well as normative change to end and prevent grave violations.

Other examples included PDs significant contributions to the 2016 “State of the World’s Children” report on equity. In health, a series of peer reviewed papers on integrated community case management (ICCM) advocated that high impact child health interventions implemented within a decentralised health system with an established community-based delivery platform, can lead to significant reductions in child mortality. PD contributed to timely global guidelines on nutrition-related aspects of Zika; participated in the WHO/UNICEF/IBFAN report on code implementation; and published the report “From the First Hour of Life” on breastfeeding and complimentary feeding practices. PD also supported research initiatives on infant sanitation and nutrition interventions in Kenya, and on local government-led sanitation subsidies in the Philippines, through a Bill & Melinda Gates Foundation partnership; and finalized the inception phase of action research on private sector service delivery models to increase the sustainability of rural water supply. PD provided technical expertise and engaged UNICEF’s senior leadership in the “Learning Generation Report” by the International Commission on Financing Global Education Opportunity, acknowledged as one of the most substantive pieces of work on education in recent years. PD also contributed to articles in the Early Childhood Development (ECD) Lancet series which propose pathways for implementation of ECD at scale and emphasizes nurturing care and multi-sectoral interventions, which can have wide reach to families and young children through health and nutrition. The UNICEF report “Harnessing the Power of Data for Girls, Taking Stock and Looking Ahead to 2030”, was launched with PD’s support and featured an assessment of data gaps in measuring progress for girls under the SDGs, and showcasing new UNICEF data on girls’ unequal burden of household chores. Finally, PD supported review and sharing of lessons on handwashing promotion from the Ebola response in West Africa, in partnership with the Public-Private Partnership for Handwashing (PPPHW). PD also co-edited a special issue of the Journal of Health Communication on the role of communication and community engagement in the Ebola outbreak, and co-authored a paper in the journal Global Health: Science and Practice on UNICEF’s lessons learned in the Ebola response.

As examples of field research, PD carried out analysis of the efficacy of UNICEF interventions, including a review of its approach to health system strengthening (HSS) and supporting evidence-based, equity-focused analysis for health sector planning at country level as a basis for Global Financing Facility (GFF)/World Bank support to country investment cases. As part of the HSS approach, PD strengthened its leadership on the community health worker platform for delivery of integrated packages of services by consolidating evidence and learning, including through innovative geospatial mapping of community health workers in three countries. A global technical meeting: “Better Data for Women and Children: Strengthening Civil Registration and Vital Statistics across the Continuum of Care” strengthened links between health and protection, examining inter-operability between birth registration and health systems. Further, several research papers and briefs were produced as part of an ongoing evidence generation initiative, including the “Multi-Country Study on the Drivers of Violence Affecting Children” which seeks to understand and design interventions to address the greatest threats of violence to children. In 2016, PD signed an agreement with Southern and Eastern Africa Consortium for Monitoring Educational Quality (SACMEQ) to use learning assessment data for policy purposes in five ESAR countries. PD also reviewed UNICEF experiences with implementing solar-powered water systems in Mauritania, Nigeria, Uganda and Myanmar and shared findings on system sustainability, design improvements and
cost reduction during the World Water Week. Finally, PD led major data reporting efforts, including through its Nutrition Dashboard (Nutri dash) system.

The “Early Learning Development Standards Evaluation” and content review was finalized, and the PD Child Protection and Gender Sections finished a multi-country evaluation on gender-based violence in emergencies. An external evaluation of a 3-year project on pneumonia and diarrhoea treatment scale-up in four sub-Saharan countries showed increases in awareness of childhood diarrhoea and pneumonia, as well as in demand for appropriate treatments.

**Developing guidance and tools for improved programme planning and monitoring**

PD contributed to the analysis and preparations for the emerging UNICEF SP 2018-2021, including by preparing new sector strategies for UNICEF in health and WASH aligned with the SDGs, and a revised strategic direction for HIV/AIDS.

The Health Strategy, aligned with the Secretary General’s Global Strategy for Women’s, Children’s and Adolescents’ Health, emphasizes the “unfinished agenda” of the MDGs, especially the need to focus on the first 1,000 days following conception, ending preventable maternal, newborn and child deaths, and promoting the health and development of all children, as well as emerging challenges such as adolescent health. The strategy identifies three approaches – addressing inequities in health outcomes, strengthening health systems including emergency preparedness, response and resilience, and promoting integrated, multi-sectoral policies and programmes – underpinning all of UNICEF’s health programming and engagement. The WASH Strategy maintains focus on: water, sanitation, hygiene, WASH in healthcare centres and schools, WASH in emergencies, applying a mix of approaches including strengthening enabling environments, leveraging finance, building sustainable markets, empowering communities and delivering services and supplies. The HIV/AIDS strategic repositioning focuses on adolescent HIV prevention and the “treatment gap” which prevents adolescents from accessing appropriate counselling and treatment, fast-tracks HIV response for pregnant women, mothers, adolescents and children, and builds resilient government and community systems to decrease equities in HIV services. This new strategic direction proposes a programming framework with differentiated country responses, and takes into account three main criteria: the evolving epidemiology of HIV, the strength of systems, and available investments. These new strategies will eventually be grounded in all global and regional programmes as well as in individual country programmes.

Global technical guidance notes to improve programming were developed, piloted and/or disseminated in 2016, including close collaboration with the Field Results Group (FRG) on new results based management (RBM) training materials jointly, and preparation of standard results assessment module (RAM) indicators (step one) and guidance (step 2), to assist country offices in tracking progress. The work on standardized indicators was undertaken to reduce the indicator development burden, improve quality of reporting by standardizing the measurement of UNICEF’s contribution in key areas of work, and allow for easier global aggregation of results.

Additional important examples of the work of PD Sections in this area included:

**Health:** Tools and guidance for costing and financing of community health systems were developed; guidelines were prepared for the switch from tOPV to bOPV vaccine to combat polio and to improve outbreak preparedness and response standard operating procedures; a new Immunization Roadmap 2017-2030 was prepared outlining UNICEF’s role in immunization; and guidance and a training course on
HSS were prepared. In addition, a progress tracking tool for the global ENAP was adopted by 51 countries in 2016 (up from 18 in 2015).

HIV/AIDS: PD helped finalize tools for bottleneck analysis to improve effectiveness and impact of national investments for adolescent response; developed a toolkit to orient practitioners on key considerations in trying to address barriers to access for adolescents including age of consent laws.

WASH: UNICEF and WHO developed a new platform for harmonizing approaches to climate resilient WASH; a new online version of the WASH bottleneck analysis tool (WASH BAT) was developed and rolled out in WCA and South Asia (ROSA) regions; an enabling environment (EE) resource package for WASH was rolled out to all countries (guidance note, e-learning and face-to-face training materials); a simplified sustainability check methodology was developed and is currently being rolled out for nine countries in WCA; an accountability mapping tool was tested in regional EE training workshops; an advanced course on application of social norms theory to a community approach to total sanitation (CATS) was conducted with the University of Pennsylvania. Further, PD continued to develop, test and review the WASH in health facility improvement tool (FIT) and integrating it within the Every Mother Every Newborn quality improvement toolkit.

Nutrition: PD contributed to updating joint guidance on the baby friendly hospital initiative with WHO; developed country-specific roadmaps for vitamin A supplementation; updated the joint guidance on infant feeding in emergencies for Europe/the Middle East with WHO; produced guidance on nutrition and disabilities; contributed to new guidance on nutrition and WASH; and contributed to guidance and tools for multi-sectoral action within HSS.

Education: PD worked to strengthen measurement of learning through new foundational learning skills module for MICS; increased guidance through a draft chapter on inclusive education in the education sector analysis guidelines; supported the multi-partner measuring early learning and quality outcomes (MELQO) initiatives that finalized school readiness and preschool quality tools and protocols; provided ongoing support to the revision of the ECD Index, part of the ECD MICS Module; and worked on preparing guidance for country offices on guidance on evidence based strategies to support the equitable expansion of lower secondary education and post basic education.

Child Protection: PD collaborated on “INSPIRE” a multi-sectoral programme package of evidence-based strategies and related theory of change for ending violence against children, in collaboration with the Global Partnership to End Violence against Children; developed and implemented the UNICEF integrated mine action training course; developed and rolled out with partners the inter-agency terminology guidelines for the protection of children from sexual exploitation and sexual abuse; revised inter-agency steering committee guidelines on GBV were rolled out across regions; and an inter-agency “Field Handbook on Unaccompanied and Separated Children”, operational guidance on community based mental health and psychosocial support (MHPSS); and inter-agency gender-based violence case management guidelines, providing care and case management service to survivors of GBV in humanitarian settings, were produced. Finally, UNICEF provided support to the inter-agency reference group on MHPSS for the development of a common monitoring and evaluation framework for MHPSS programmes in emergency settings.
Social Inclusion: PD developed an organization-wide framework on public finance for children; developed a methodology to support measurement of child-focused public expenditure with the Global Coalition to End Child Poverty, developed an SDG guide on child poverty for practitioners including UNICEF staff; produced a draft social protection package; and draft guidance on social protection systems.

Cross-cutting areas: PD developed guidance on the second decade to orient country offices on principles and approaches, including a regional adolescent dashboard and an Adolescent Country Tracker (ACT); and guidance to support social accountability mechanisms for children’s rights, guidance to support the engagement of country offices and national committees with the CRC Committee, and guidance to strengthen the implementation of the human rights-based approach (HRBA) to development. The recently established ECDAN developed recommendations for a core set of technical global goods and standards to guide programming for ECD. In the area of public health emergencies, C4D contributed to develop, in coordination with WHO and IFRC, the first-ever joint interagency guidance on risk communication and community engagement to support Zika prevention/control and Yellow Fever outbreaks.

Mobilizing funds in support of country programmes

In support of UNICEF’s strategic and technical engagement with donors and partners at the global level PD helped to mobilize significant resources for global programmes. In 2016, this benefitted both regional and country offices. Fundraising efforts by PD were closely coordinated and undertaken in collaboration with the Divisions of Public Partnerships Division (PPD) and Private Fundraising and Partnerships (PFP).

Important examples of fundraising efforts included the ECW fund for education in emergencies which led to pledges from donors of USD $113.4 million, plus a further USD $100 million of in-kind support by the Global Business Coalition for Education; UNICEF’s also partnered with Educate a Child, representing financial support totalling over USD $191 million. Under the leadership of PPD, PD actively contributed to the development of an engagement strategy with IFIs, and a framework partnership agreement was developed with the World Bank.

Other significant examples of fundraising efforts across PD, included:

Health: USD $486 million was raised in 2016 for Global Polio Eradication Initiative, including pledges for the UNICEF polio eradication programme; UNICEF’s efforts in guiding the equity and demand-side agenda for immunization resulted in an opportunity to partner with Gates Foundation for an additional grant of USD $4.2 million over four years to build capacity to lead. The strong partnership with the GAVI Alliance under the partnership engagement framework (PEF) continued and mobilized USD $36 million that were shared across headquarters, regional and country offices. Technical support was provided to develop the new GAVI strategy for measles which will guide GAVI investments of over USD $1 billion over the next five years, providing an opportunity to make substantial gains towards measles elimination. In support of eliminating maternal and neonatal tetanus, partnership agreements were renewed with key private sector donors, including P&G Pampers (USD $5 million per year) and Kiwanis international (to raise USD $42 million by end 2020). PD also supported the GFF that aims to accelerate progress in maternal and child health to improve mechanisms for states to access funds for civil registration.

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5 For dissemination in 2017.
6 To be finalized in 2017.
HIV/AIDS: The Executive Board of UNITAID approved USD $95 million in additional funding for four years to UNICEF and the Clinton Health Access Initiative to expand access to point-of-care diagnostics for early infant HIV diagnosis and HIV treatment monitoring (viral load). UNITAID also approved USD $38 million for UNICEF to provide pre-exposure anti-retroviral prophylaxis (PrEP) to sexually active older adolescents at highest risk of infection in Brazil, South Africa and Thailand. The MAC AIDS Fund provided more than USD $2.4 million to support innovations and enhance service delivery for adolescents in seven focus countries: Brazil, China, India, Indonesia, South Africa, Thailand and Ukraine.

Nutrition: PD managed the programmatic aspects of the global vitamin A capsule in-kind donation programme, valued at USD $9 million per year and providing approximately 350 million free vitamin A capsules to programmes in 60 countries.

Child Protection: PD helped launch the Global Partnership to End Violence against Children, facilitating collaboration among governments, UN agencies, civil society groups, philanthropic foundations, academia and girls and boys themselves to pool resources and expertise to accelerate progress towards critical violence-related goals.

Gender: PD secured USD $3.3 million from the Bill & Melinda Gates Foundation for an applied gender capacity building and credentialing programme (2016-2019).

Cross Sectoral areas: C4D led efforts to secure a USD $4 million grant for Zika response, and a USD $500,000 grant for C4D and child marriage activities. Nearly USD $2 million was raised through the UN Partnership to Promote the Rights of Persons with Disabilities (UNPRPD) multi donor trust fund, US Fund and Alana Foundation to support development of accessible textbooks for children with different disabilities; capacity building of youth with disabilities, and to strengthen humanitarian response.

Thematic funding: A total of approximately USD $108,601,400 was approved and USD $105,078,100 disbursed in 2016. Significant effort was put into producing eight high quality thematic Annual Results Reports, summarizing global results for 2015 and highlighting the importance of thematic funding.

Development Effectiveness
In order to make UNICEF programme cooperation more innovative, effective and efficient, PD provided UNICEF global, regional and country offices with the technical expertise, resources and leadership for the SP 2014-2017 outcomes and its cross-cutting areas and, as noted above, played a critical role in helping to define the proposed results for the draft SP 2018-2021. PD also collaborated with other headquarter divisions and with regional offices to directly support excellence in programming by providing technical assistance directly to country offices, in close coordination with regional offices, based on the global expertise, partnerships, resource mobilisation, research and knowledge management noted above.

Defining compacts with regional offices
The compacts with regional offices, first established in 2015, continued to play an important role in planning and executing PD engagement with the field by creating a clear overview of the support PD is requested to provide, and by spelling out areas where regional activities will contribute to the advancement of UNICEF global advocacy and programming results. Based on lessons learned during the first two years of using the modality, it was agreed that the compacts needed a longer-term view to be more strategic and, therefore, have more impact on the quality of programming. As a result, the regional offices and PD agreed to two-year rolling or “live” operational agreements, outlining specific areas of
collaboration. At the end of 2016, in preparation for the SP 2018-2021, a review process for the 2017 compacts began in consultation with the regional offices with the aim to facilitate further alignment of long-term priorities, and to strengthen focus on the key tactics required to move the agenda in selected country offices. In response to an Office of Internal Audit (OIAI) observation, PD systematized the format of the compacts, and is developing methodologies for better tracking of implementation and results from 2017 forward.

Providing technical support to regional and country offices
PD provided extensive technical support to regional and country offices, including as planned through the Regional Office - PD compacts. This support included assistance to strengthen programme design, results monitoring, pilot innovative models and support the acceleration in the delivery of essential services, where needed.

Highlights from 2016 included:

Country programme development: PD supported countries in formulating new CPDs through technical reviews, field missions and, as part of the new practice of developing PSNs, reviewed 80+ strategy notes from 30+ countries in the course of the year. PD also participated directly in SMRs, mid-term reviews, and - in addition to examples mentioned elsewhere - undertook missions to participate in country programme planning in for example Afghanistan, Burkina Faso, Burundi, Lebanon, Madagascar and Mali (on social inclusion), in Egypt, Kyrgyzstan, and Papua New Guinea (on gender), and in Pakistan (on C4D).

Technical support: As mentioned above, salient examples of technical support provided, including through missions, are: the Education team supported Pakistan Country Office to assess engagement with Madrassas; sent an emergency mission to South Sudan; assisted the Philippines Country Office and the Government to design and set up a special allowance for teachers teaching in the most difficult context, as part of the Data Must Speak initiative; supported Ethiopia Country Office to strengthen education results for adolescent girls’ as one of the twelve countries implementing the Gender Action Plan (GAP) targeted priority on secondary education; and sent a technical support mission in Costa Rica to train interviewers and observe the pilot of the new MICS learning and parental participation modules. The Child Protection team undertook a joint mission with the WCARO in CAR and DRC with a focus on UNICEF’s programmatic and management response to Sexual Exploitation and Abuse; supported the release and reintegration of children deprived of their liberty due to their association with armed forces and armed groups using extreme violence in Nigeria (Boko Haram) and Yemen (first release of children associated with the Houthi armed groups); led a nine country Middle East and North Africa (MENA) regional justice meeting on implementation of practical measures to protect children below the age of legal responsibility coming into contact with the law; participated in the Chile SMR with a focus on countering the wave in Latin America to roll back the age of criminal responsibility; and provided support to the Government of China to develop a strategy for data collection and follow up action which would inform a national plan on the prevention and response to violence against children. PD staff were also engaged in providing technical support to the response to the migrant and refugee crisis in Europe by giving inputs for programme design and implementation as well as through staff deployments. Highlighting the continued requirements for PDs technical expertise on the ground in emergency situations, PD supplemented the capacity of country offices e.g. in conflicts in Syria, Sudan, South Sudan and Yemen, on child migrants and

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7 See also examples provided in the Executive Summary and throughout the report.
refugees in Central America (in addition to Europe); in health-related crises such as Zika and Yellow Fever; and in natural disasters such as Hurricane Mathew in Haiti.

Often related to roll out and implementation of new or updated technical guidance, other examples of results of PD technical support to countries included: strong progress around inclusive education in Central and Eastern Europe (CEE/CIS); and support to education systems strengthening and accountability between education service providers and communities through implementing the “Data Must Speak” project in Madagascar, Nepal, the Philippines, Togo and Zambia. In health, results included collaboration with the Pan American Health Organization (PAHO) to develop non-medical inter-sectoral care and support models to respond to Zika virus, allowing expansion of care and support to all children with disabilities, and ramping up surveillance in countries at high risk. Furthermore, PD provided support for regional adaptation of the “Care for Child Development” (CCD) package in WCA and LAC regions.

Finally, PD developed and participated in key workshops and innovative training events, and provided extensive remote support to country offices (for example, a regional training on C4D in preparedness and emergency response in ESA region); convened the global network meetings to disseminate guidance and enhance cross-fertilization among countries, regions and divisions (global network meetings were held re. human rights; child protection; social inclusion and policy; HIV; WASH; health; nutrition; gender; adolescent development and participation (ADAP); ECD, and education); and helped secure critical funding, for example 7% set-aside funding for work on child poverty and public finance. Additional capacities were also provided to the regions through global budgets (for example in health and C4D), and PD staff were outposted to support emergency preparedness and response (for example in CEE/CIS and in Haiti).

Providing technical support for programme innovations
PD continued to provide financial and technical assistance to foster innovations in 2016, including:

- UNICEF’s approach to innovation in education focuses on assessing the effectiveness, operational model and scalability of innovative interventions to achieve results around learning, equity and access. PD successfully launched the “Journeys to Scale” report, positioning UNICEF as an important contributor to innovation in the field of education, and describing the results achieved by UNICEF’s innovative education programming in Brazil, Ethiopia, Ghana, Peru and Sudan.

- In child protection, PD provided technical support for programme innovations as investments continued in scaling up the use of the “Primero” system, an open source software application that aims to help partners securely and safely collect, store, manage and share data for child protection-related incident monitoring and case management. The expanded child protection information management system (CPIMS+) was rolled out in Jordan, and a specialized system (MRMIMS+) was finalized for country offices managing sensitive data and information for reporting to the Office of the Special Representative of the Secretary General for Children Affected by Armed Conflict (OSRSG-CAAC), together with Department of Peacekeeping Operations (DPKO). The MRMIMS+ application is designed to meet the specific security and operational needs of the Monitoring and Reporting Mechanism on grave violations of children’s rights in situations of armed conflict established under the UN Security Council mandate, and to ensure the highest standards of accuracy, security and confidentiality of information.

- ECD and other PD sections collaborated to develop the mapping of essential ECD services as the basis for cross-sectoral innovative programming through the matrix approach.
As mentioned elsewhere, UNICEF’s partnership with the MAC AIDS Fund provided more than USD $2.4 million to support innovations and enhance service delivery for adolescents in seven focus countries: Brazil, China, India, Indonesia, South Africa, Thailand and Ukraine. The funding enabled the development of innovative technologies and approaches in support of children and adolescents. Similarly, PD initiated engagement with three country offices (Brazil, South Africa and Thailand) to develop country operational plans to introduce PrEP for adolescents, to be funded through UNITAID-funded five-year demonstration project beginning in 2017.

EQUIST, a tool to assist countries to prioritize and allocate resources for equity-focused programming in child health, was launched to strengthen health sector planning, country programme preparation and the development of investment cases.

PD supported WASH in WCA regional office to conduct an analysis of current financial gaps, market constraints, enabling environment, and existing financing mechanisms in the sector. The analysis includes assessment of the scope and potential options for innovative financing strategies and mechanisms for the sector, with specific recommendations on the role of UNICEF as well as other development partners.

Providing technical support for humanitarian action
PD consolidated its work in three distinct but interconnected areas to strengthen and enhance the effectiveness of programmes operating in humanitarian and fragile contexts and other challenging operating environments. This included: promotion and support for increased attention to, and investment in, programmes on risk reduction and conflict prevention strategies and results; new guidance and training for UNICEF staff and partners to improve coherent and integrated programme planning and related policy development in humanitarian responses; and direct support to country offices in responding to serious emergencies.

On global advocacy and policy dialogue related to emergency preparedness, PD played a key role in supporting overall UNICEF engagement around the World Humanitarian Summit. To mobilise a more concerted effort on adolescents’ development and participation in humanitarian action, UNICEF actively participated in the planning and implementation of the Young People’s Session. As a result, 60 organizations endorsed a compact which highlights priorities for working with young people in emergencies. As noted elsewhere, the launch of the ECW Fund for Education in Emergencies generated significant financial and in-kind support, initial investments are in process for Chad, Ethiopia, Yemen, the whole of Syria, and an injection of funds was secured to support global cooperation. Finally, PD contributed to strategic positioning of UNICEF in the area of social protection in fragile and humanitarian contexts through a joint statement and advocacy with partners. This advocacy aimed to highlight the importance of social protection responses to address emergencies and the need to link with and strengthen wherever possible national systems – both issues which emerged strongly in the Grand Bargain.

In other high level advocacy PD, together with WHO and the Emergency Nutrition Network, organized a technical consultation in Geneva, with the participation of the UN, governments, non-governmental organizations working in nutrition and HIV, and other stakeholders, to clarify programmatic issues and implementation strategies and to develop a framework and key principles around infant feeding and HIV in emergencies in the context of the WHO and UNICEF 2016 publication “Guideline: Updates on HIV and Infant Feeding”. As mentioned elsewhere, PD and EMOPS co-convened, with OCHA, IFRC and CDAC
Network, some 60 UN, civil society and media and communication organizations to establish a communication and community engagement initiative. The initiative will focus on engaging with affected communities using two-way dialogue to plan well-coordinated humanitarian response based on needs, and to ensure an active feedback and complaints mechanism.

In addition, PD supported the countries affected by the El Niño phenomenon to implement the recommendations of a 2014 UNICEF study on HIV and El Niño, which found that infection rates in HIV-endemic rural areas increased by 11% for every recent drought. Countries supported included Lesotho, Malawi, Mozambique, Swaziland, Zambia and Zimbabwe.

In terms of guidance for programming for resilient development, PD, in collaboration with EMOPS and DRP, invested significant effort to develop the guidance for risk informed programming (GRIP). Risk informed programming seeks to reduce risks (climate change, geophysical, economic and political/conflict) that create shocks and stresses to children’s well-being, and which negatively affect their communities and social service systems. Ideally, it reduces the risk of natural disasters and conflicts, and contributes to resilient development. The GRIP provides a methodology for country offices and partners to analyse risks and adjust programming or develop new programming to respond to the analysis. It is designed on a modular basis and can be adapted for making adjustments at various stages of the country programme cycle. GRIP also helps UNICEF and government partners apply a child-sensitive lens to larger planning and policy processes, including broader risk assessments and analyses (including conflict analysis) with governmental, non-governmental partners, UN agencies and other multilateral partners. The GRIP and the “Preparedness for Emergency Response Procedure and Guidance Note” were developed to use the same language and concepts to make them mutually supportive.

In C4D, UNICEF implemented the second edition of the disease outbreak communication course jointly with New York University, equipping 45 UNICEF staff with key competencies to support outbreak response.

Other emergency-related guidance produced in 2016 included a revised version of the WASH in Emergencies training package. Trainings were facilitated in Jordan, Nepal, Thailand, Lebanon, Kenya and UNESCO-IHE Netherlands (for stand-by partners and academia). Within PD the WASH and health sectors collaborated on developing guidance on health emergencies, and participated in the technical working group on cash and markets under the global WASH cluster to promote the cash for programming approach in humanitarian context. In 2016, PD published a newborn health in humanitarian settings field guide, in collaboration with Save the Children and other partners to extend and enhance the commitment to newborn survival in crisis settings. The field guide was piloted in South Sudan and Somalia. Emergency preparedness was added as a core area in the ENAP progress tracking tool.

In 2016 PD also focused on training UNICEF staff in effective application of new guidance. The Health Emergencies Preparedness Initiative (HEPI) technical working group was launched in 2016 and will build the capacity of UNICEF staff across the organization to prevent, prepare and respond to outbreaks, to support international health regulations, and to contribute to global health security with an HSS approach.

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8 Based on the child’s specific vulnerabilities and needs, a child-sensitive approach seeks to influence wider policies and programmes (e.g., the inclusion of disaggregated data by age, sex and disability in national risk assessments). A child-centred approach is different only in that it promotes explicit policies and programmes for children (e.g., child-led hazard mapping in schools).
An agreement with Columbia University to develop online training modules on emergency health will enhance the future capacity of UNICEF staff across the organization to respond in crises, in conjunction with the UNICEF Humanitarian Learning Programme in EMOPS. In further support to education in emergencies, PD supported the Humanitarian Education Accelerator (HEA), in partnership with DFID and UNHCR, to enable the selection of the first cohort of organizations working in protracted emergency contexts in Jordan, Kenya, Rwanda and Sudan. The HEA will generate evidence of enabling and hindering factors for scale in protracted emergency contexts. PD also directly engaged in capacity building of Stand-By Partner roster members, resulting in specialists who are ready for deployment, with the latest guidance and best practice. PD staff participated in the Immediate Response Team (IRT) Emergency Response Simulation to strengthen staff capacity for surge deployment, and also contributed new content for the course, including on issues such as social protection.

Finally, the large number of crises and disasters in 2016 required effective internal coordination of support, as well as with other divisions and with regional and affected country offices. PD contributed to both L-2/3 emergencies, and to atypical emergencies such as the Zika and the European migrant crises. Child protection crises required that PD deployed staff with specific technical expertise, including in the areas of CAAC, landmines and MRM. Major health emergencies in 2016 included the Yellow Fever outbreaks in Angola, DRC and the Republic of Congo, for which PD seconded a senior staff member to WHO headquarters in Geneva for two months to assist with coordination. PD also shaped UNICEF’s response to the global Zika outbreak in all affected regions, with particular emphasis on the most-affected countries in Latin America and the Caribbean and on C4D, and co-launched a social science and anthropological research platform, providing support to country offices on rapid evidence synthesis to inform humanitarian action and emergency response. PD supported country offices working with national and local governments to achieve the goals of the strategic response framework set out by WHO and partners. In addition, more than 168 million people were reached with preventive Zika messages through mass, social and digital media communications campaigns supported by PD.

Significant technical support was provided in the field, including an 8-week mission to Haiti following Hurricane Mathew, testing of the communication and community engagement platform, and field support missions for peacebuilding to Sri Lanka, Myanmar, Ukraine and Tajikistan. Because there were no regional peacebuilding specialists, direct support was provided to numerous country offices, especially those dealing with the UN Peacebuilding Fund and Peacebuilding Support Office (PBSO). Finally, PD provided direct support on disaster risk reduction (DRR) to country offices (including field missions to South Sudan, India and Nepal). An IDA 17 grant from the World Bank was leveraged through a ground breaking partnership with the World Bank to provide health, nutrition and cash programmes for the most vulnerable in famine affected areas in Yemen.

**Guiding global talent management**

PD continued to actively support talent management to help identify and recruit the right people and institutions with the needed skills. In partnership with the Division of Human Resources (DHR), PD worked to strengthen talent pools, including:

- **Education**: The Global Talent Group selection progressed, with the P5, P4 and P3 talent groups near finalization for a total of 98 candidates. This required support to test, interview and evaluate the candidates. Regional and country office recruitments were also supported.
C4D: The recruitments of regional advisors in Middle East and North Africa (MENA) and CEE/CIS were supported. The enhanced capacity resulted in development of regional C4D frameworks and the provision of more efficient technical support to country office priorities. In addition, sixteen junior C4D professionals were recruited through the New and Emerging Talent Initiative (NETI) to be placed in the P3 Talent Group.

WASH: All 7 regional - and select country - offices were assisted to complete the Generic Vacancy Announcement (GVA) process for P3 and P4 level placement, and recommended candidates were identified and placed in a three-year talent pool for placement.

Emerging Issues
In addition to the “unfinished agenda” of the MDGs, there are many newer challenges posed by the SDGs and the evolving international context. Urbanization, migration, climate change, adolescent issues, and Non-Communicable Diseases (NCDs) are all becoming more pronounced, and UNICEF is in the process of defining its role in light of a new universal development agenda. The new sector strategies developed during 2016, mentioned in more detail above, all take into account UNICEF’s commitment to reaching the goals of the MDGs, as well as additional challenges posed by the SDGs. In addition, the next SP will build on both UNICEF’s long track record and new science and experience to effectively address child rights issues in this new context.

On urbanization, Health Section conducted a systematic review of literature on urbanization, slums and immunization. The review shows that Africa and Asia are urbanizing faster than any other regions and will be 56% and 64% urban, respectively, by 2050. The implications for UNICEF of the findings from the review include leveraging the equity agenda to address the issue of urban poor; realign current interventions to meet needs of urban poor; adapt a wider integrated health, non-health and multi-organizational strategy to address multi-dimensional deprivations affecting urban poor; and conduct more operational research on urban poor or recent migrants. In addition, Child Protection Section took a leadership role in the emerging programmatic area of child road injury prevention, contributing to the inclusion of a global commitment to “A Safe journey to School for Every Child” as a priority in the Quito Declaration, Habitat III New Urban Agenda (NUA), and establishing multi-country initiatives in the East Asia and Pacific (EAP) and the LAC regions. PD also started work to develop a global framework for urban WASH, in collaboration with DRP, with the aim to define a strategic approach to support the provision of services in urban and peri-urban settings in both development and humanitarian contexts.

In 2016, global attention on migration continued to focus on the European migration/refugee crisis, but also focused on the plight of illegal migrants from Central America. The High-Level Meeting on Migration in New York, and the Habitat III conference on urbanization noted above, emphasized that migration issues go beyond the current crises to encompass challenges to virtually every country as they address the SDGs. As described elsewhere in the report, PD played a significant role for this work, including through the appointment of the PD Director as the overall migration coordinator; provision of technical inputs; development of six core policy asks for children (with DOC and DRP) which were successfully included in the New York Declaration for Refugees and Migrants; development of a Global Programme Framework; as well as staff deployments, e.g. deployment of PD Deputy Director as country coordinator a.i. in Germany. In addition, PD led the development of an action plan to address the needs of children migrating from Latin and Central America to the USA which outlined interventions to support children and their families.
UNICEF is paying increasing attention to effects of climate change linked to resilience and disaster risk reduction (DRR), and is also examining other aspects of how the environment affects children. PD’s work on risk informed programming (see section on technical support for humanitarian action) is one example of how country programming processes are being made increasingly sensitive to the effects of climate change. In addition, PD acknowledges the latest neuroscience indicating that the development of young children’s brains is particularly susceptible to the effects of air pollution, which harms the normal development. Finally, on children's rights and the environment, PD provided technical inputs to the preparation of the CRC Committee’s Child Day of general discussion on the topic, with the Committee’s recommendations to be issued in 2017.

Following years of focus on scientific evidence regarding neurological development during early childhood, UNICEF convened its first major symposium to present the current understanding of the state of neuroscience related to children in the second decade of life. Bringing together experts from around the world, scientists focused on the ways in which environment and experience sculpt the adolescent brain. PD continues to strengthen its work on issues such as suicide prevention and mental health of adolescents, which have emerged as a major risk worldwide. In 2016, it was identified as part of the learning agenda for the next SP. PD’s adolescent priorities and programming aligns well with the continued focus on gender and adolescents – especially disadvantaged adolescent girls – in the Gender Action Plan (GAP). The increasing focus on child marriage and on FGM/C is becoming more central in UNICEF’s work and, importantly, the subject of expanding coalitions among development partners, including a focus on social norms measurement, led by the child protection and C4D teams. PD strengthened adolescent health as a priority, and country profiles for flagship countries and two case studies were developed to facilitate knowledge dissemination and experience sharing. Other emerging initiatives regarding adolescents include support to planning of HPV interventions, and managing the transition from paediatric HIV to a stronger focus on adolescence, particularly the risk faced by girls.

Finally, PD participated in global fora on efforts to improve country action and policy on the issue of NCD risk reduction and response. UNICEF is a member of the UN Interagency Task Force on NCDs and its working groups, which are focusing on reducing child overweight and obesity, led by the Nutrition Section with support from the Health Section. Efforts to elevate awareness of this important issue across programme sections were undertaken, including the preparation of a working paper on multi-sectoral approaches to reducing the development of NCD risks through a life-cycle approach, and funding proposals were developed in collaboration with the US Fund and PFP.

Management Highlights

Enhancing PD programme management

In further follow-up to the internal divisional reviews in 2014 and 2015, PD continued to improve management of its responsibilities to oversee UNICEF programme/technical work.

- Mid-year and year-end reviews were used to assess the progress of PD Sections against the planned results in the OMP and annual work plans, and to review progress, constraints and emerging issues.
- Matrix management on gender targeted priorities, especially with collaborative mechanisms across gender, child protection and education, consolidated more effective cross-sectoral programming guidance and technical support to regions and countries. The ECD and Adolescent matrices continued to be a good practice.
• The Regional Office - PD compacts remained an important mechanism for coordination between PD sectors and the regional offices. While some sections have implemented a formal review of their progress in implementing commitments agreed in the compacts, PD and the regional offices have not yet established a formal overall tracking system for this, and will consider doing so in 2017.

• PD continued to advance in its use of the VISION Dashboard to monitor transfers of funds to regional and country offices, and to ensure timely submission to donors of required reports.

• A successful 3-day PD retreat was undertaken with the overall objective to organize PD around the next SP, focusing on the ‘WHAT’ of the SP, and three important ‘HOWS’, including innovation. In addition to PD staff, colleagues from sister divisions and offices (DRP, FRG, EMOPS, DOC, PPD, PFP, SD and Office of Innovation (OI) participated in all or select sessions of the retreat.

• PD built further upon the close collaboration and excellent working relationships with other divisions, notably with DRP on the SP development process, and with FRG on enhanced field engagement, RAM standard indicator development etc.

Enhancing PD internal management
PD continued to make good use of existing internal mechanisms to enhance management and coordination, and also accelerated implementation of new or improved mechanisms, including those recommended by Internal Audit:

• Weekly meetings of PD management with Section Chiefs helped to ensure regular coordination and planning, as well as permitting the early identification of schedule conflicts, emerging issues, etc. The PD Director’s Office also maintained weekly meetings to ensure effective overall management, monitoring of deadlines, and medium-term planning of PD priorities. The PD Director convened three “No Travel Weeks”, including all-staff meetings during the year, to ensure that all staff were informed of key developments and issues, and also to hear direct feedback from staff (including on issues of concern identified in the 2015 Global Staff Survey).

• PD continued with implementation of its responses to audit observations, although some new systems are still in progress, such as mechanisms to track implementation of compacts, to follow-up on how PD guidance is implemented in the field, and to establish clear processes regarding pre-publication review of pending articles, and effective knowledge management regarding programme guidance and instructions.

• In terms of human resources management, high staff turnover stabilized somewhat in the second half of the year but remained a challenge. Delays in funding or filling vacancies in key sections, and overload on existing staff caused by urgent tasks or emergencies, required that some planned results had to be shifted to 2017. The post of Deputy Director Technical Coherence, remained unfilled during the first half of 2016. The division then restructured and, in the process, eliminated one Associate Director post. The planned recruitment of a Senior Planning Officer for the Director’s Office was not completed in 2016, presenting slower than desired progress in overall divisional planning.

Strengthening PD’s work culture, communication and staff well-being
PD continued to involve staff representatives in reviewing processes in order to simplify and decentralize transactions within the division. In 2016, the organization implemented a centralized processing hub (GSSC) in Budapest to provide accounting and human resources services to UNICEF globally. This required PD to work closely with staff to review divisional processes, introducing simplified ways to work with less paper circulation within the office and align them with the new global processes and mechanisms.
Learning sessions were created to ensure staff adhere to the simplified processes and ensure controls are kept.

Staff Representatives in PD worked hard, and in close collaboration with the PD director, to further improve staff well-being by promoting flexible work arrangements, and also facilitated frequent discussions with PD management to maintain an open and transparent dialogue and allow staff to express their views and concerns. In quarterly meetings the Staff Representatives met with the Director’s Office to review the action plan to improve synergy around the office.

**HEALTH**

**Title:** DFATD: Improving Treatment of Childhood Diarrhoea and Pneumonia: A proposal to scale up coverage of ORS, Zinc and Amoxicillin  
**Type:** Evaluation  
**Themes:** Treatment, Childhood Diarrhoea, Childhood Pneumonia

**Title:** Job aid and user-friendly product presentation of Amoxicillin dispersible tablets for the treatment of childhood pneumonia, Synthesis of qualitative studies: Niger, Zimbabwe, Solomon Islands and Bolivia  
**Type:** Study  
**Themes:** Treatment, Amoxicillin, Childhood Pneumonia

**Title:** End Line Evaluation of the H4+ Joint Programme, Canada and Sweden (SIDA) 2011-2016, Country Case Study: Liberia  
**Type:** Evaluation  
**Themes:** Health

**Title:** End Line Evaluation of the H4+ Joint Programme, Canada and Sweden (SIDA) 2011-2016, Country Case Study: Zambia  
**Type:** Evaluation  
**Themes:** Health

**Title:** End Line Evaluation of the H4+ Joint Programme, Canada and Sweden (SIDA) 2011-2016, Country Case Study: Zimbabwe  
**Type:** Evaluation  
**Themes:** Health

**Title:** Strategy for Health 2016-2030  
**Type:** Global Strategy Document / Programme guidance  
**Themes:** Health

**Title:** The UNICEF Health Systems Strengthening Approach  
**Type:** Global Strategy Document / Programme guidance  
**Themes:** Health; systems strengthening

**Title:** Health Annual Results Report 2015  
**Type:** Annual thematic report/ progress report

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\(^9\) For the purpose of this annex, PD Sections have provided a list of significant evaluations, research, studies, surveys, and publications completed in 2016 – many in collaboration with partners. In addition to what is reflected here, PD Sections every year produce a high number of working papers, briefs, articles for journals etc. as well as technical guidance.
HIV/AIDS

Title: For Every Child End AIDS – Seventh Stocktaking Report 2016
Type: Report
Themes: HIV; public health; innovation
Audience: Primary – innovators from private and public spheres; public health professionals, child advocates and HIV decision-makers/programmers, media and young people with some interest in public health/HIV. Secondary – adolescent and adult ‘trendsetters’ on social media.
Quantity: Electronic only
Cost: $80K

Title: HIV and AIDS Annual Results Report 2015
Type: Annual thematic report/ progress report

WASH

Title: UNICEF/World Bank Study on Humanitarian and Development Silos in South Sudan and DRC
Type: Country Case studies, Synthesis Report.

Title: UNICEF’s Strategy for Water, Sanitation and Hygiene (2016-2030)
Type: Global Strategy Document / Programme guidance
Themes: Long-term Strategy

Title: Strengthening Enabling Environment for Water, Sanitation and Hygiene (WASH), Guidance Note
Type: Guidance to Country Offices/ practitioners
Themes: Strengthening enabling environment for WASH services delivery

Title: Scaling up solar powered water systems: review of experiences
Type: Review
Themes: Climate change adaptation

Title: Professional Water Well Drilling A UNICEF Guidance Note
Type: Guidance to Country Offices/ practitioners
Themes: Professionalization of the drilling sector

Title: WASH Accountability Mapping Tools
Type: Facilitators guide
Themes: WASH enabling environments

Title: WASH Annual Results Report 2015
Type: Annual thematic report/ progress report

NUTRITION

Title: From the first hour of life: Making the case for improved infant and young child feeding everywhere
Type: Global advocacy report
Themes: Infant and young child nutrition, breastfeeding, complementary feeding
Title: **Compendium for Nutrition Actions**  
Type: Compendium  
Themes: Nutrition  
Audience: National authorities engaged in nutrition and multi-sectoral coordination  
Quantities: Electronic version

Title: **Vitamin A Supplementation - A Statistical Snapshot**  
Type: Global report  
Themes: Nutrition, Vitamin A, child survival

Title: **Updates on HIV and infant feeding**  
Type: WHO and UNICEF guidelines  
Themes: HIV, infant feeding

Title: **WHO, UNICEF, IBFAN. Marketing of Breast-milk Substitutes: National implementation of the International Code**  
Type: Status report  
Themes: Code implementation, monitoring and enforcement mechanisms

Title: **Nutrition Annual Results Report 2015**  
Type: Annual thematic report/ progress report

**EDUCATION**

Title: **Peacebuilding, Education and Advocacy Programme in Ethiopia: Developmental Evaluation**  
Type: Evaluation  
Themes: Education for peacebuilding, Myanmar, developmental evaluation, post-conflict

Title: **Peacebuilding, Education and Advocacy Programme in Myanmar: Developmental Evaluation**  
Type: Evaluation Report  
Themes: Education for peacebuilding, Myanmar, developmental evaluation, post-conflict

Title: **Journeys to Scale**  
Type: Report  
Themes: Innovation in education  
Audience: Policy makers, Funders, Practitioners, and UN/UNICEF staff  
Authors: UNICEF, R4D  
Quantities: 100  
Estimated Cost: N/A

Title: **PBEA Final Report**  
Type: Report  
Themes: Education; peacebuilding  
Audience: Donor; practitioners and policymakers working in education and/or peacebuilding  
Estimated Cost: $50,000

Title: **Youth Agency, Peacebuilding, and Education**  
Type: Thematic report  
Themes: Education; youth; peacebuilding  
Audience: Practitioners and policymakers working in education and/or peacebuilding
Title: The Integration of Education and Peacebuilding
Type: Thematic report
Themes: Education; peacebuilding
Audience: Practitioners and academics working in education and/or peacebuilding
Authors: UNICEF, University of Amsterdam
Estimated Cost: $50,000

Title: The Role of Teachers in Peacebuilding and Social Cohesion
Type: Thematic report
Themes: Education; peacebuilding
Audience: Practitioners and policymakers working in education and/or peacebuilding
Authors: UNICEF, University of Ulster
Estimated Cost: $50,000

Title: Education and Transitional Justice: Learning Peace
Type: Book
Themes: Education; transitional justice
Audience: Practitioners and policymakers working in education and/or peacebuilding
Authors: UNICEF, ICTJ
Estimated Cost: $50,000

Title: The Impact of Violent Conflict on Education Inequality
Type: Literature Review
Themes: Education; conflict
Audience: Practitioners and policymakers working in education and/or peacebuilding
Authors: UNICEF, FHI 360
Estimated Cost: $10,000

Title: School-Based Measures to Protect Education
Type: Guidance
Themes: Education; protection
Audience: Practitioners working in education and/or child protection
Authors: UNICEF, GCPEA
Estimated Cost: $25,000

Title: Rigorous Review of Global Research Evidence on Policy and Practice on School-Related Gender-Based Violence
Type: Review
Themes: Gender based violence
Audience: Governments, including Ministry of Education, development partners and practitioners.
Authors: UNICEF, UCL-IoE
Quantities: 50

Title: Education Annual Results Report 2015
Type: Annual thematic report/ progress report

CHILD PROTECTION

Title: Birth Registration – Phase Two - A Comparative Report Prepared for UNICEF
Type: Study
Themes: Birth registration, civil registration, legislation

Title: Field Handbook on Unaccompanied and Separated Children
Type: Handbook
Themes: Unaccompanied and separated children
Audience: Government, implementing partners
Authors: Inter-Agency Working Group on Unaccompanied and Separated Children
Quantities: 200
Estimated cost: US$110,000

Type: Research/ Study
Themes: ICT, child protection, case management, emergencies

Title: Terminology Guidelines for the Protection of Children from Sexual Exploitation and Sexual Abuse
Audience: Government, implementing partners
Authors: Inter-Agency Working Group on Sexual Exploitation of Children

Title: Child Protection Annual Results Report 2015
Type: Annual thematic report/ progress report

SOCIAL INCLUSION AND POLICY

Title: New estimates of extreme poverty for children
Audience: Technical poverty experts
Type: World Bank Group - policy research working paper (co-authored by Martin C Evans, UNICEF)
Themes: Child poverty

Title: Ending extreme child poverty a focus on children
Audience: General public, development professionals, media
Type: UNICEF and World Bank Group briefing note
Themes: Child poverty

Title: A World Free from Child Poverty – a guide to tasks to achieve the vision
Audience: UNICEF staff and partners working on child poverty
Type: Guidance
Themes: Child poverty and social protection
Title: **A child poverty agenda (coalition)**  
Audience: Practitioners/public  
Type: Paper  
Themes: Child poverty

Title: **From evidence to action: the story of cash transfers and impact evaluation in Sub-Saharan Africa**  
Audience: Global practitioner and expert  
Type: Book / impact evaluation  
Themes: Social protection

Title: **Social Inclusion Annual Results Report 2015**  
Type: Annual thematic report/ progress report

**HATIS**

Title: **Child-centered DRR – Contributing to Resilient Development**  
Type: Publication  
Themes: DRR, CCA, Resilience

Title: **A view from 2016 - Child-Centered Disaster Risk Reduction and Climate Change Adaptation in the 2030 Agenda for Sustainable Development**  
Type: Qualitative study  
Themes: 2030 Agenda for Sustainable Development, Resilience, DRR, CCA

**GENDER**

Title: **Communities Care: Transforming Lives and Preventing Violence**  
Type: Study  
Themes: Gender Based Violence

Title: **Harnessing the Power of Data for Girls: Taking stock and looking ahead to 2030**  
Type: Stocktaking  
Themes: Data  
Quantity: 500  
Estimated cost: $1625 (cost sharing by Gender and D&A)

Title: **Gender Equality Annual Results Report 2015**  
Type: Annual thematic report/ progress report

**ECD**

Title: **Strengthening Families, a Two Generation Solution**  
Type: Desk review  
Themes: Early childhood development and women empowerment

Title: **Kenya Research Report**  
Type: Case study  
Themes: Early childhood development and women empowerment
C4D

Title: Corporate Evaluation of C4D
Type: Evaluation
Themes: C4D