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Update on the context and situation of children

2019 in Sudan was marked by glimmers of hope in the midst of multiple crises. Political protests in the capital and other states led to the fall of the thirty-year regime in April. In August, an agreement for a transition government was signed, providing hopes and opportunities for the Sudanese people. At the same time, the situation of children and families deteriorated amid a severe and acute economic crisis. Currency depreciation and high inflation rates drove the cost of living up and household purchasing power down. Shortages of fuel, cash, and bread hit vulnerable children and families hard, slowed all humanitarian and development operations including those of the government, and disproportionately affected densely populated urban areas.

The country continued to face protracted, complex and overlapping humanitarian challenges, including conflict, displacements, socio-economic stress, recurring climatic conditions and associated natural disasters, disease outbreaks, food insecurity, and malnutrition. The challenging and rapidly changing context also affected the operating environment such as the shutdown of the internet for a period of five weeks, hindering the work of all partners and businesses. The fuel crisis and cash shortages introduced unanticipated risks for programme delivery, which needed to be managed while responding to increased humanitarian and development needs. The high turn-over of senior officials during the course of the year often impacted programme delivery. Security concerns led many embassies, businesses, United Nations (UN) agencies, and aid groups to temporarily evacuate non-essential staff and families. UNICEF decided to consider all staff essential due to the impact of the crisis on children.

Out of 41 million Sudanese, 21 million are under 18 and 6.7 million under five years of age. There were more than 1.8 million internally displaced persons (IDPs) and 1.1 million refugees and asylum seekers in need of assistance and protection, both in camps and host communities, and for whom no durable solutions have been found. Sudan continues to host among the largest populations of South Sudanese refugees in the region, some 810,000 people^[1]. Refugees from Central Africa Republic (CAR) also started arriving in South and Central Darfur, states already overstretched with huge IDP populations. By the end of 2019, 9.3 million people – of which 4.6 million children – were in need of humanitarian assistance. This reflects a sharp increase from the 5.5 million people/2.5 million children in need of humanitarian assistance in the early months of 2019.

The economic and fiscal crises, the main drivers of humanitarian need, hit children and their families hard. Currency depreciation and high inflation rates reached 57.7 percent. The economic deterioration impelled socio-political instability eventually led to the fall of former President Omar al-Bashir. A three-year transitional period came into force on 17 August 2019 with the signature of a constitutional document and the installation of a new federal government. The decentralised nature of governance in Sudan was kept intact in the constitutional document, with the current structure of federal, state and local levels remaining in force. At year end there was still flux at the state level as nominations for governors were yet to be finalised.

The transitional government defined its ten-point agenda and identified policy priorities that are more reflective of the country's needs with health and education sectors being prioritized from among the social sectors. Given the particular context which brought the transitional government to power, peace and economic stability are foremost priorities of the new government. As peace talks progressed, the situation in the conflict-affected areas of Blue Nile, South Kordofan and Jebel Marra (Darfur) rapidly evolved. The opening up of parts controlled by armed groups signaled hope for nearly three million people who have been deprived of humanitarian assistance and development for the past ten years.

Rains and flash floods in August and September affected 426,300^[2] people in sixteen states, partially damaging or destroying houses, toilets, and public facilities, reversing gains. Crops and animals were lost during floods. Existing health system capacities were stretched by seasonal flooding, which reduced mobile health services and community-based interventions. Trauma services, referral systems, mental health and psychosocial support services for those in need, mostly children, were interrupted. Water services were disrupted, leading to inadequate chlorination levels and consumption of unsafe water.

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The inadequate health coverage combined with poor water, sanitation and hygiene (WASH) infrastructure contributed to the rise of diseases. Ensuing outbreaks of cholera in Blue Nile, Gezira, Khartoum and Sennar states, which recorded 346 cases, was contained within seven weeks and claimed eleven lives. Thirteen of the eighteen states in the eastern part and West Darfur experienced one or more chikungunya, dengue fever, rift valley fever and diphtheria outbreaks. Medical facilities across the country faced shortages of essential drugs, further weakening the national response. While the Humanitarian Appeal for Children (HAC) sounded the alarm in July, only 53 per cent of the needed funding was mobilised.

The national poverty level which was 36 per cent in 2014-2015, rose drastically. Incomes, wages, jobs, and purchasing power fell, driving six million people to food insecurity[3]. While the vast majority of the population felt the effects of the crisis, the most vulnerable, particularly children, bore its brunt. An estimated 58 per cent of households was not able to meet basic daily food requirements[4]. Vulnerable communities resorted to reducing meals, switching to cheaper and less nutritious foods, borrowing, and selling livelihood and household assets, to the detriment of future generations and at the risk of creating poverty traps. Others spent less on health and education and withdrew their children from schools[5].

The challenges in 2019 exacerbated an already grim situation of children and women. Stunting – at 37 per cent among under-fives, showing no improvement in the past five years – remained a critical issue in Sudan[6]. Global acute malnutrition (GAM) rates were at fourteen per cent[1], just below the World Health Organization's (WHO) public health emergency threshold. Over 2.4 million children suffered from acute malnutrition more than half a million of whom suffered from severe acute malnutrition, some with medical complication requiring inpatient stabilisation care. Access to basic drinking water and basic sanitation saw some progress at 74 per cent and 32 per cent respectively, but this pace was insufficient to meet related Sustainable Development Goal (SDG) targets, particularly for sanitation. Over twelve million people still practiced open defecation.

Accelerating child mortality reduction to meet the SDG global target of 25 or less under-five deaths per 1,000 live births by 2030 requires urgent scale-up and predictable financing. Neonatal mortality rates (28 per 1,000 live births) accounted for nearly 70 per cent of infant mortality rates (42 per 1,000 live births) and 50 per cent of under-five deaths (60 per 1,000 live births) [7].

The maternal mortality estimates of 295 per 100,000 live births was symptomatic of the lack of attention to maternal health and nutrition; these concerns must be addressed across the continuum of care[8]. Only 26 per cent of women accessed birth care in facilities and only a third of them sought post-natal care for themselves and their newborns[9]. Global acute malnutrition (GAM) rates among pregnant and lactating women rose and were reported at nine per cent[10]. The inter-generational cycle of malnutrition was largely attributed to child marriage[11] and early childbearing[12].

Around 2.9 million children (aged 6-13) remained out-of-school. Other estimates placed out-of-school children at the secondary level at 1.6 million. These alarming estimates indicated that the next generation of Sudan were denied rights to education and development.

Child protection issues, including those relating to unaccompanied and separated children, violence against children particularly sexual and gender-based violence, and child labour, were further exacerbated. The need for psychosocial support gained prominence in the wake of the tragic events in June as children witnessed violence and death firsthand.

[1] UNHCR Sudan Population dashboard (January 2020).

[2] Humanitarian Needs Overview, 2019

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[3] Integrated Food Security Phase Classification estimates from World Food Programme (2019). West Darfur State was not analysed by the state-level technical working group; counting West Darfur, figures were estimated around 6.2 million.

[4] World Food Programme

[5] Impact of economic crisis: household economic situation and coping mechanisms: Khartoum state

[6] Simple Spatial Survey Method, 2018 (S3M-II)

[7] Child mortality estimates from the Inter-agency Group for child mortality (<https://childmortality.org/data/Sudan>).

[8] World Health Organization, UNICEF, United Nations Population Fund and World Bank, Trends in Maternal Mortality: 1990 to 2015 and 2000 to 2017, Geneva (2015-2019).

[9] Sudan Multiple Indicator Cluster Survey (2014)

[10] S3M-II (2018)

[11] Estimated at 62 per cent of girls marries on or before their eighteenth birthday

[12] Estimated at 72 per cent among 15 to 19-year-olds

Major contributions and drivers of results

The Sudan Country Office (SCO) in its annual management plan set out four programme priorities and two management priorities: contribute to stunting reduction in Sudan, efficient programme management and implementation; advocacy for the Convention on the Rights of the Child (CRC) on its 30th anniversary; Prevention of Sexual Exploitation and Abuse (PSEA); efficient operations to support programme implementation and staff's well-being, safety and security. The annual management plan recognised that even within the largely humanitarian context, opportunities existed for a development orientation and risk-informed programming and that the office needed to step up efforts to operationalise the humanitarian-development-peace nexus.

In recognition of the multi-dimensional and inter-related causes of malnutrition, UNICEF Sudan prioritised the reduction of stunting and adopted an integrated approach to tackle this issue. As a step towards operationalising the 'whole child' approach, health and nutrition interventions were delivered as one package with other key sectors such as WASH and using communication for development (C4D) to address demand-side barriers.

UNICEF's continued support contributed to strengthening systems and institutional capacity building. UNICEF also actively advocated for the government to increase domestic fund allocations to health and paid USD 1.8 million, representing 35 per cent of costs related to traditional vaccines and injection devices, which is seven per cent more compared to 2018. The country's vaccine supply pipeline was ensured, though the procurement of vaccines. This enabled the vaccination of 1,292,697 (79 per cent) children under-one year with measles and 1,321,911 (81 per cent) children with three doses of pentavalent vaccine through the routine programme. Investments in improving the supply chain and logistics support enabled the Ministry of Health to deliver Ready to Use Therapeutic Food (RUTF) to states and lower levels. The establishment of fixed and mobile health and nutrition out-patient treatment programme (OTP) centres contributed to improved capacity of the Ministry of Health to treat cases of SAM and deal with emergencies (e.g. children suffering from severe acute malnutrition with medical complications).

Strategic partnerships with UN agencies, such as the United Nations Population Fund (UNFPA), United Nations Refugee Agency (UNHCR), the World Food Programme (WFP), the World Health Organisation (WHO) helped to support government

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in institutional building and capitalise on complementary mandates and comparative advantages of the UN, which was instrumental in achieving results for children. UNICEF's memorandum of understanding (MOU) with WFP defined the roles responsibilities for addressing child nutrition more holistically in Sudan, with WFP focusing on reducing moderate acute malnutrition and school feeding and UNICEF addressing severe acute malnutrition. An updated letter of understanding (LOU) with UNHCR also furthered collaboration for addressing refugees' needs.

These achievements were particularly noteworthy in an enormously challenging operational environment, characterised by political instability, an economic crisis, sanctions, conflicts and multiple disease outbreaks. In addition, the capacity of a fragile health system was overstretched and exacerbated by a high turn-over of leadership-level officials at the federal and state ministries of health.

During the year, through key health and nutrition interventions along the continuum of care, the programme reached nearly 7.6 million, girls and boys under five years of age, tackling the main causes of under-five mortality and morbidity and high levels of acute and chronic malnutrition. Over 17 million people [\[1\]](#) benefitted from 8.6 million long-lasting insecticide treated bed nets (LLITNs) distributed by UNICEF in twelve states. Over thirteen million boys and girls (aged nine-months to ten years) were vaccinated against measles and 7.6 million boys and girls under-five with oral polio vaccine through campaigns. Nearly 225,646 children of which 50 per cent were girls, suffering from severe acute malnutrition (SAM) were admitted into the UNICEF-supported community management of acute malnutrition programme (CMAM), of which more than 90 per cent i.e. 204,000 children were successfully cured. This achievement represents 75 per cent of the annual target by the end of November 2019.

As one of its major contribution and a demonstration of multi-sectoral support, UNICEF and implementing partners contributed to the dramatic reduction of the major cholera epidemic that affected mainly Blue Nile and Sennar states with 346 cases reported. A similar outbreak in 2016 in Blue Nile, reported more than 2,358 cases. With UNICEF support, around 1.4 million cholera-affected/at-risk persons in the most endemic areas were provided with chlorinated water. A further 5.2 million persons were reached with focused hygiene promotion interventions. UNICEF supported two rounds of oral cholera vaccination (OCV) campaigns in Blue Nile and Sennar states. A total of 1,540,074 people representing 97 per cent of the population at-risk of cholera were vaccinated in the first round. UNICEF's strategic partnerships and technical cooperation with a wide range of stakeholders including WHO, contributed to this success.

To address the demand side, social and behavioural change issues, communication for development (C4D) and community engagement approaches were prioritised in the annual management plan. The Sudan Country Office developed its first C4D strategy through which existing community platforms will be integrated to address the eight family practices, leading to sustainable and long-term change. This approach represented a commitment to addressing demand-side barriers more comprehensively and moving away from ad hoc activities and campaigns to a more strategic, evidence-based approach in order to support the change process and sustain achieved results. A mapping of behavioral barriers to best practices around nutrition was conducted; the report will be available in early 2020.

High poverty rates, the economic crisis and the resulting negative coping strategies (including reduced food consumption) were key issues for the government's social protection programmes and the main focus of the economic reform agenda. The Government of Sudan continued to demonstrate increased commitment towards strengthening its social protection systems and improving coverage in a bid to address these issues. The reform was centered around the government's flagship cash-transfer programme to mitigate the impact of economic and subsidy reforms. UNICEF Sudan - jointly with other UN agencies - developed a draft multi-sector action plan for a child-focused and nutrition-sensitive action plan to mitigate the impact of the economic deterioration. High-level policy engagement with donors and strategic partnerships with key government and non-governmental actors in social protection resulted in the approval of a framework of a pilot programme to be designed and implemented in 2020. UNICEF technical and capacity-building support to national partners enabled them to scale-up social protection mechanisms in a manner that is evidence-based, equity-focused, and in support of the most vulnerable children and families. UNICEF was increasingly recognised as a leading agency within and outside the UN system, adding value by using the systems-based approach to strengthen linkages between social protection programmes and social services including education, health, and child protection.

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UNICEF Sudan continues to be a key player in advancing the water and sanitation agenda in Sudan including through policy influence, development of plans and strategies and evidence generation for the WASH sector. This included the national Sustainable Development Goal (SDG) Six plan - the first for any sector in Sudan and the national and state level 'Road Maps to Make Sudan Open-Defecation Free' which helped prioritise and cost interventions in favour of children. For the first time in Sudan, the Ministry of Education (MoE) with UNICEF's support conducted a national baseline assessment for WASH in schools to guide scaling-up of the interventions. UNICEF supported the multi-dimensional study on hafirs (water harvesting bodies) and helped devise a national strategy to effectively manage hafirs to meet the multiple demands viz. domestic; food security and livelihood, of communities.

Strengthening systems remained a key strategy which included the WASH information management system which contributed to guide investments in eight states and build capacities of sectoral staff. The institutional assessments of the WASH authorities in three eastern states will also inform the reform agenda.

Lack of water and sanitation services is highly correlated to high levels of stunting. As open defecation is still widespread, the Open Defecation Free (ODF) initiative was prioritised and the community-led total sanitation (CLTS) approach creatively employed in conflict-affected communities, returnee areas and development settings. The achievement of 454 ODF communities exceeded planned targets set at 150. Around 509,000 people (256,000 men, 253,000 women) now live in 454 ODF certified communities. Of these, 242,000 people have basic sanitation facilities, representing 48 per cent of planned target and 98 per cent of WASH sector basic sanitation results. While these results are encouraging, communities require continued monitoring to ensure the sustainability of these results. There is also a need to move toward more durable solutions as the loss of latrines – something that took place this year in localities affected by flooding – and affordability issues could reverse gains. Public-Private Partnerships (PPPs) between sanitation business owners and the local government in the management of WASH facilities in public places gained traction in 2019. An additional 510,000 people now access basic water service exceeding the planned target by 27 per cent and representing 22 per cent of the WASH sector achievement. UNICEF adopted appropriate cost-effective technologies for improving availability of water including use of hybrid solar systems

UNICEF support focused on access and quality of education to respond to sector priorities set out in the 2018-2022 education sector strategic plan (ESSP), and directly contributed to Sustainable Development Goal (SDG) Four. Technical assistance and upstream policy work were also prioritized in line with the direction of the country programme. As the education sector continued to be challenged by low funding, the successful application for the Global Partnership for Education (GPE) implementation grant and accelerated funding grant coordinated by UNICEF with education partners' support will serve to address the funding situation to a great extent. In addition, with a generous contribution from the European Union, Sudan had access to an additional USD 3.6 million that will be allocated as GPE multiplier funds. The Ministry of Education (MoE) continued to face technical, operational and capacity problems which includes lack of up-to-date, credible statistics. Through the GPE application process, the Ministry of Education gained invaluable experience and enhanced capacities but struggled to produce on-time annual statistics through the education management information system, despite UNICEF's technical and financial support.

An additional 177,082 out-of-school children of which nearly 50 percent were girls, were able to access educational opportunities in schools or alternative learning programmes (ALPs). This achievement represented 90 per cent of UNICEF's annual target and included refugees, migrants, nomads in rural and emergency-affected areas. Enrollment rates in basic education improved marginally and were marked by disparities between states, with states affected by conflict or forced displacement or hosting a high number of nomads having the lowest gross enrollment rates. The results were considered modest given that the increase in the school-age population exceeded the capacity of the educational system to provide adequate facilities for every child in Sudan to avail of educational opportunities. In response to the emergency across the country, 52,717 children (51 per cent girls) living in emergency-affected areas had access to safe learning spaces in newly-constructed or rehabilitated classrooms, while 265,440 children (48 per cent girls) received education-in-emergency supplies. E-learning opportunities introduced through 80 centers in Blue Nile, Kassala, and White Nile states, enabled 5,136 children (47 per cent girls) to gain proficiency in mathematics and Arabic as part of the global 'Can't Wait to Learn' (CWTL) programme, to help hard-to-reach - particularly nomadic children - access learning opportunities.

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The construction and rehabilitation of 366 classrooms provided additional spaces, addressing a main bottleneck of access to schooling. Integrated interventions in schools, through the availability of water and the construction of 100 sex-segregated latrines served to upgrade the learning environments and contributed positively to enrollment and retention of pupils, particularly for adolescent girls. However, the challenge in Sudan was not only to get children into school, but also to ensure that they stay in school and learn. All schools across Sudan were closed for more than 50 school days (out of 210), due to insecure access and continuous demonstration and due to floods in some states. As a result, children in Sudan missed at least one fourth of schooling time. The closure of schools, combined with the increased level of violence in the country, caused serious protection concerns and had a negative impact on children's learning, which could in turn have implications on a child's well-being in the short and medium term.

Manifold child protection concerns demanded urgent action from UNICEF and partners during and after the crisis. Children witnessed traumatic events such as killing, maiming, abduction, loss of family members and friends, detention and torture firsthand. Following a system strengthening approach, UNICEF supported more than 5,500 service providers from the Ministry of Social Welfare and civil society partners at the state and local levels to respond and provide quality integrated services to address psychosocial and mental health issues. Nearly 192,000 victims of violence against children (107,762 boys and 83,908 girls) benefited from age-appropriate, gender-sensitive child protection services such as psychosocial first aid (PFA) and psychosocial support (PSS) and were supported by an appropriate legal and/or medical referral system, particularly the tragic event of the shooting of school children protesting in El Obeid (North Kordofan). UNICEF Sudan mobilised partners and trained teachers to identify children and provide first-level psychosocial support to children rejoining school following these events.

Despite the turmoil and political upheaval, legal and policy reform for child protection gained traction as two laws and three action plans were adopted, creating an enabling environment for government institutions at the national and state levels. Child protection issues focused on prevention and response were addressed in a holistic and integrated manner as child protection concerns were integrated in health, water, sanitation and hygiene (WASH) and education services addressing violence, abuse and exploitation, and harmful practices. Sustained advocacy, technical and financial support to the Ministries of Social Welfare and Justice resulted in the increase in the overall number of social service workforce from 8/100,000 child population to 12/100,000. Increased coverage and access to justice and social services for children in contact with the law through the 88 Family and Child Protection Units (FCPUs) established at the locality and state levels. Collective efforts at national and state levels strengthened alternative family-based systems and deinstitutionalization for children without parental care. In 2019, more than 5,780 abandoned children enjoyed protection and care in family environments through foster care and kafala (Islamic adoption).

Community engagement and social movement to abandon FGM/C were scaled up as more communities declared abandonment of the practice from 995 in 2017 to 1,163 in 2019. UNICEF through its joint program with UNFPA and WHO and in partnership with the government, civil society organizations (CSOs) and adolescent girls and boys at different levels contributed to accelerate efforts towards the abandonment of FGM/C in one generation, fulfilling the rights of girls and women by realizing social and gender norm transformation.

The Sudanese armed forces (SAF) and rapid support forces (RSF) are more aware of the consequences of the recruitment of children through UNICEF engagement and advocacy efforts. Over 1,600 officers renewed their commitment to end the recruitment of the children in their ranks and to protect children.

SCO launched the prevention of sexual exploitation and abuse (PSEA) mainstreaming action plan to incorporate measures to prevent and respond to sexual exploitation and abuse in programme design. The office established an internal reporting mechanism to ensure that more avenues were available for reporting sexual exploitation and abuse. In addition, the office introduced PSEA orientation sessions for all personnel. Training for partners will be held in early 2020 in partnership with Save the Children. The PSEA network-led joint framework for action was finalised by the humanitarian country team and was a major initiative for an UN-wide response. The network also developed minimum standard PSEA messaging to ensure a harmonised approach. Community awareness and information education and communication materials were being designed and a mapping of the community-based complaints mechanisms ongoing at year end. Child-sensitive reporting systems were being rolled out in five high-risk locations throughout Sudan through the 'safe school' initiative. These reporting channels would allow children to report all forms of violence including sexual exploitation and abuse through child-friendly mechanisms that were established through child participation and consultation. Community awareness raising sessions on violence against children including sexual exploitation and abuse, as well as capacity building for key school staff and community members are also included as part of the safe school initiative.

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On the management front, 2019 marked the second year of country programme implementation, and the year's end was the halfway point through the programme cycle. In April, UNICEF Sudan in consultation with the Government of Sudan, rolled-out the process to conduct a midterm review (MTR). The MTR would serve a two-fold purpose of i) addressing the office priority for efficient programme management and implementation through a systematic review and evidence-based approach to accelerate implementation, scale-up and improve the quality of programming, and ii) having the opportunity to refine and sharpen the focus on the country programme and adjust as required. However, in light of the changes in the programme and operational context through the course of the year, it was agreed with the government to postpone the strategic moment of reflection and continue the MTR process in the first half of 2020 to better align and respond to the new government's interim plan. This would help strategically position UNICEF and enable it to stay attuned to children's urgent needs, sharpen programming and maintain its child rights advocacy focus. The visioning exercise on how to reshape the UN's priorities in line with the government's plans for the next 39 months prompted discussions on the mid-term review of the United Nations Development Assistance Framework (UNDAF) and new UN reform processes, including the possibility of extending the UNDAF for another year. The 30th anniversary of the Convention on the Rights of the Child (CRC) gave impetus to the global reach of UNICEF Sudan through offline, digital, and traditional media by using statements, videos, interviews and advocacy events and influencing creative content. Social media platforms were verified, and the Sudan website launched. As part of the CRC (CRC@30) commemorations, the office advocated for Sudan's prime minister to recommit to the convention. Advocacy events marking CRC@30 were also held in the field offices. Many CRC-related activities were held through workshops and events organised throughout Sudan with other UN and international non-governmental organisation partners. These events contributed to increased knowledge among UNICEF staff, partners, key decision-makers, and children about the Convention on the Rights of the Child (CRC) and child rights.

Programme implementation remained on track, largely attributed to the leadership and oversight by functional governance mechanisms ensuring the implementation of newly-issued guidelines and standard operating procedures (SOPs). Improved evidence-based planning and monitoring helped ensure better accountability to children and partners. Management indicators were updated and regularly reviewed by the country management team, which led to timely decisions. UNICEF programmes remained operational during the liquidity crisis that affected the economy, the banking sector, and caused a nationwide cash shortage. Other economic difficulties also impacted the timely implementation of some programmes, which included limited operational mobility and increased implementation costs for most stakeholders (i.e. dramatic increase in prices of construction materials, fuel shortages and regular road blocks).

Attention to staff well-being and improvements to the working environment were addressed throughout the course of the year. UNICEF Sudan staff came together and supported each other during a period when security concerns were highest. National staff were affected by the political situation and faced the trauma of having family members, extended family and friends jailed, injured, and in some cases die. Following tragic events in June, international staff were also affected with the declaration of Khartoum as a non-family duty station followed by the evacuation of non-essential staff and dependents. During this period, UNICEF Sudan decided to only evacuate family members, but keep all staff - regardless contract type in-country and with a few exceptions to continue delivering programmes and making an impact for children. The care and support for all staff was demonstrated through various initiatives such as flexible working arrangements, and stress counselling. The staff association initiated a series of events which brought together staff around issues close to their hearts. The visit of the UNICEF Executive Director and the Regional Director also raised staff morale as their visits served to demonstrate solidarity with UNICEF Sudan staff.

[1] This includes five million children and 700,000 pregnant women

Lessons Learned and Innovations

Looking back at 2019, SCO recognized that while Sudan faced many challenges, this year presented opportunities that needed to be embraced and acted upon quickly. The annual review and on-going MTR processes allowed the country office to collectively gain an appreciation of lessons learned and take advantage of the more favorable operating environment to identify what adjustments are needed in the overall strategic approach and take these into account in the planning for next year and for the remainder of the country programme. There was consensus that the priorities originally set out for the country program remain valid.

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There was also agreement that to gain the trust of and demonstrate support to the new government, UNICEF should work on a two-track approach and consider areas where demonstrable results could be achieved in the short term and costed, and scalable models can be developed. In parallel, there needs to be a renewed focus on strengthening capacities and systems in a sustainable manner and on building back institutions. With the on-going reforms, there is an evident need to explore new areas and modalities of engagement, through knowledge sharing, training, secondment of experts within the new government structures, and South-South collaboration. UNICEF has already initiated advocacy with the new government, taking the opportunity of the restructuring of the Ministry of Interior to establish child rights and human rights structures within relevant ministries.

In view of the recurring nature of the climate-related disasters and ensuing disease outbreaks, the focus on risk-informed programming was found to be more relevant than ever. Attention to preparedness and prevention not only promotes resilience but is also more cost-effective and sustainable in the longer term, e.g. blanket disinfection of all water sources not only during emergencies but also during routine daily water supply operations. Expanding the urban sanitation program and making use of best practices from the El Fasher and Zalingei urban WASH project would mainstream IDPs into long-term planning and limit outbreaks in future. Consideration of climate change and integrated water resource management principles in planning water supply interventions is key to ensuring water security and fostering peace among competing users. In partnership with the UN Environment Programme (UNEP), UNICEF contributed to climate-resilient development and integrated water resources management (IWRM) approach in Darfur and the eastern states of Sudan. Detailed hydro-geological assessments including the development of locality level catchment maps is furthering IWRM approach and sustainability of community water sources. Innovative approaches such as the use of hybrid solar powered hand pumps at an additional cost of just USD 5,000 enhanced the water security of up to 1000 people.

The need for further enhancing the SCO convergent approach to reach the desired impact of the programme on the lives of children needs to be addressed through better geographic and programme convergence. The office has already engaged in an evidence-based vulnerability analysis and re-targeting exercise to ensure better geographic focus. Multi-sectoral partnerships and more convergent programme delivery were promoted with NGO partners, which have resulted in the selection of fewer partners and increased focus. This would also help in monitoring of programmes and ensure better accountability.

Common delivery platforms both at the government and community levels are effective in promoting convergence such as using front-line workers (FLWs) for integrated delivery of services rather than separate FLWs for each sector. The C4D strategy proposed this as a successful means of integrating all existing community platforms (i.e. mothers' and fathers' groups, CLTC, parent-teacher associations, and the child protection network) and increasing the uptake of health, nutrition, WASH, and other services.

The Can't Wait to Learn and ongoing integrated education projects, have demonstrated that more considered programme design and innovative approaches have potential to achieve results beyond education and could serve as a model for integrated programming, in meeting the needs of children more holistically and through the lifecycle. Education interventions could be coupled with child protection, WASH, health, nutrition and C4D using digital game-based learning material on tablets.

The strategic prioritization workshop held in November also highlighted areas of improvement where staff felt that the human rights principles including gender equality and children's participation are not fully integrated in programming. Among reasons identified for this were the tendency towards short-term programming as a result of the humanitarian nature of a big part of the programme and also funding constraints and limited duration of many of the SCO grants; as well as challenges in evidence generation and vulnerability analysis which led to weak application of equity/leave no one behind principle.

Community engagement was also considered to be suboptimal. By developing effective leadership at community and locality levels, results are more likely to be sustained. Encouragement and engagement of community champions on developing local solutions for the construction and maintenances of household latrines in return areas helped in sustaining ODF status in their communities. Similarly, school enrollment campaigns and community sensitization were found to be effective in identifying OOSC, addressing social issues, and developing positive attitude towards education. The engagement of local leaders in rebel-controlled areas in East Jebel Marra in South Darfur successfully helped to introduce nutrition and vaccination services and to establish outpatient therapeutic programmes (OTPs) for the treatment of SAM cases in these areas.

Focus on quality also emerged as a cause for concern as feedback from staff and donors alike identified the need for looking beyond numbers and ensuring that programmes delivered intended results. This was particularly true for construction-related interventions where the SCO needs to strengthen planning and monitoring to ensure deadlines, specifications, and quality standards are met. Where necessary, the office should use experts to monitor the quality of construction work. The engagement of third parties (well-qualified roving construction site engineers) to assist the SCO was

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considered as a feasible option for monitoring and quality assurance oversight and strengthening the internal capacity to manage the end-to-end of construction activities. Additionally, the quality of supplies or inputs could be improved through community feedback mechanisms such as end-user monitoring and third-party monitoring.

The education programme found that to impact quality dimensions within schools and learning centers there needs to be emphasis on not just inputs to build more effective learning environments, but also on processes between these e.g. not only are learning materials arriving into classrooms, but teachers receive training and ongoing support on how to directly use those materials with students and check for learning. The high number of volunteer teachers and limited learning spaces imply a need for a second shift and designing encouraging and enabling methods to support learning and teaching.

There were positive gains in spite of the unstable socioeconomic and political climate in 2019. Government upheld the commitment to provide its share of budget requirements for non-GAVI vaccines - testimony to the success of UNICEF's high-level engagement. UNICEF will build on this progress and use the momentum of new reforms to push for higher government investment in health, nutrition and also education in 2020 and beyond, with the ultimate goal of total government ownership of routine immunization.

A pilot project for life skills and UPSHIFT programme, which targeted adolescents (including refugees) is a customized model of the global Generation Unlimited initiative. Interesting and promising results were achieved in the areas of empowerment, skills building and social innovation. There is a need to expand this project geographically and thematically including the financial literacy module developed by Aflatoun as a social entrepreneurship training.^[1] Engagement with youth also showed promising opportunities for using creative, artistic and digital tools to advocate for child rights. The successful engagement of community level youth groups in the cholera and flood responses to raise awareness and increase chlorination activities contributed to controlling the outbreak with low-cost interventions. Engagement with youth also showed promising opportunities for using creative, artistic and digital tools to advocate for child rights. The successful engagement of community level youth groups in the cholera and flood responses to raise awareness and increase chlorination activities contributed to controlling the outbreak with low-cost interventions.

UNICEF in collaboration with the FMOH and Gavi launched a solarization project in rural areas which leveraged power supplied primarily for cold chain for the benefit of entire health facilities, yielding multiple benefits. The eco-friendly initiative is expected to help mitigate the effects of climate change.

UNICEF is thankful to a multitude of donor partners that accompany us in the piloting of innovative ways to reach more children more effectively in Sudan.

¹Generation Unlimited is a global partnership working to prepare young people to become productive and engaged citizens. It connects secondary-age education and training to employment and entrepreneurship, empowering every young person to thrive in the world of work