Zambia is considered a stable country in southern Africa with democratic elections held every five years. The next elections will be in 2021. Zambia’s estimated population in 2019 was 17.4 million, of which 56.9 percent is rural and 43.1 percent urban[1]. The population is youthful, with children (under 18) representing 54.4 percent – a total of 9.4 million. 80 percent of the population are below the age of 35. This represents an opportunity for economic development, but also presents challenges due to the demand for social services and employment. The Human Capital Index (HCI) – a measure of the proportion of full potential children born today can expect to attain by age 18 years - for Zambia is 0.4[2]. Zambia’s HCI is slightly lower than the average for the sub-Saharan African region and lower than the average for lower-middle income countries.

As of 2015, 58 percent of Zambians earned less than the international poverty line of $1.90 per day (compared to 41 percent across sub-Saharan Africa). Inequality remains high, with three quarters of those living in poverty being in rural areas. Income inequality, estimated by the Gini coefficient, remains high with a national average of 0.69 for rural areas and 0.61 for urban areas[3]. In 2019, the country continued to face economic challenges that have affected outcomes for children. Debt servicing impacted expenditures especially in the social sectors, with only 38 percent of the national budget disbursed to social sectors in 2019. As of March 2018, Zambia was among 18 sub-Saharan countries with a high risk of debt distress[4].

In 2019, Zambia experienced prolonged drought. The significant rainfall deficit, especially in Southern and Western provinces, resulted in decreased agricultural production. Households depleted food stocks and were increasingly dependent on market purchases, driving up the prices of staple foods with associated food and nutrition insecurity. More than 2.3 million people were estimated to be severely food insecure during the lean season (October - March), with at least 430,000 of them in Emergency levels (IPC 4), according to the Zambia Vulnerability Assessment Committee/IPC report.

In 2019 Zambia responded to a number of disease outbreaks. Two confirmations of circulating vaccine derived polio virus in Chiengi District of Luapula Province and in Chavuma District of North-Western Province were made. Zambia reported several measles outbreaks with cumulative numbers reaching 752 suspected and 35 confirmed cases across the provinces of Lusaka, North-Western, Luapula, Copperbelt and Central. Zambia also reported four limited cholera outbreaks – one in Lusaka District, and three in Northern Province, resulting in 448 cases and 10 deaths.

Following the 2018 presidential election in the Democratic Republic of Congo, the number of refugees in Mantapala refugee settlement has remained stable in 2019. As of 31 October 2019, a total of 15,069 refugees were registered, with 50 percent being children. Zambia has increasingly adopted the Comprehensive Refugee Response Framework with advocacy for line ministries to include the development needs of refugee in their sector plans and budgets.

The 2018 Zambia Demographic and Health Survey (ZDHS) preliminary results showed a sustained reduction in the child mortality rates in Zambia compared to the ZDHS 2013/2014. Infant and under-five mortality rates dropped from 45 to 42 and 75 to 61 per 1,000 live births respectively; maternal mortality rates reduced from 398 to 278 deaths per 100,000 live births. Neonatal mortality increased from 24 to 27 per 1,000 live births. Stunting rates reduced from 40 to 35 percent of the under-fives, wasting from 6 to 4 percent, and underweight declining from 15 to 12 percent.

According to the 2019 UNAIDS Spectrum estimates, 87 percent of people living with HIV (all ages) are aware of their status, 89 percent of those diagnosed are on Antiretroviral Therapy (ART), and 75 percent of those on ART have attained viral suppression. The Mother-to-Child Transmission rate at 24 months remains high at 11 percent – more than double the elimination target (<5 percent). Treatment coverage among children (0-14 years) has increased from 71 percent in 2018 to 79 percent in 2019 but remains sub-optimal given the policy of universal eligibility to treatment. The rate of reduction in new HIV infections among adolescents aged 10-19 is consistently lower than among adults.

In education, the net enrolment rate for primary level has continued to fall from 94.3 percent in 2014 to 83.6 percent in 2018 and that of secondary level remains persistently low at 20.2 percent[5]. Forty-four percent of Grade 1 pupils are over-age, and only 29.4 percent of Grade 1 pupils have Early Childhood Education (ECE) experience. The results of the Programme for International Student Assessment for Development (2018) revealed that only 5 percent of 15-year-old children reached minimum level of competency in literacy and 2 percent in mathematics, and the National Assessment results continue to show low performance.

Zambia has a sound child protection framework that regulates response services, but services to address violence are unevenly developed across the country with varying levels of quality provision. Data from the Violence against Children Study demonstrated that access to services for victims of violence is extremely low. Fewer than one in ten male victims of childhood sexual abuse received services and the number for female victims was negligible. The ZDHS 2013/2014 indicates
that 31.4 percent of women aged 20-24 were married before age 18, and 58.9 percent of girls aged 15-19 were pregnant or had already delivered a baby.


Major contributions and drivers of results

In this fourth year of the 2016-2021 Country Programme, UNICEF Zambia built on the progress made in the previous three years to accelerate efforts towards the realization of the rights of every child in Zambia, especially the most disadvantaged.

Every child has the right to grow up healthy and strong. Zambia’s Seventh National Development Plan (7NDP) prioritises health as a key investment that will drive the socio-economic development agenda.

As part of national efforts to reduce maternal, neonatal and child mortality, the Ministry of Health (MoH) in collaboration with the United Nations - UN (UNICEF and UNFPA), with support from the European Union (EU), for the last six years (2013 -2019), implemented the MDGi programme. The programme was implemented in 11 districts in Copperbelt and Lusaka provinces, impacting approximately 30 percent of Zambia’s population. The programme met its objectives, by reducing the direct obstetric case fatality rate from 15 percent to zero. Intrapartum and neonatal deaths within 24 hours were reduced from 8 percent to 1 percent.


UNICEF supported forecasting and procurement of vaccines, including vaccine stock monitoring. To mitigate the impact of the constrained fiscal space on vaccine security and potential interruption of immunization services provision to children, UNICEF procured 2.3 million doses of the polio vaccine (bOPV) and 980,000 doses of the Measles Rubella vaccine. Furthermore, UNICEF effectively supported social mobilisation and communication before and during the HPV vaccination campaign, including support for high level advocacy. The actions resulted in the successful launch of the nationwide HPV vaccination campaign, which reached 239,206 fourteen-year-old adolescent girls. In response to the polio (cVDPV-2) outbreak, UNICEF supported MoH and the provincial and district health departments to implement a geographically targeted polio Supplementary Immunization Activities (SIA) campaign that vaccinated 313,417 children (95 percent coverage) below five years of age in 11 high-risk districts. The annualized nationwide administrative immunization coverage was reported at 86 percent for DPT 3 and 92 percent for Measles, with 33 percent of districts reporting DPT 3 coverage of less than 80 percent nationwide.

Zambia joined the Scaling Up Nutrition Movement in 2010 and is currently implementing the 1000 Most Critical Days programme 2018-2022 (MCDP II) to guide multi-sectoral programmes by partners to reduce stunting. UNICEF is a co-convenor of Cooperating Partners Group in Zambia with USAID, and in 2019 finalized a four-year partnership with UK Aid/DFID and Sweden, with ongoing negotiations with KfW/Germany and the EU to support GRZ implement the 1000 MCDP II in 34 districts. UNICEF supported the formation of 12 District Nutrition Coordination Committees, procurement of 6,362,000 vitamin A capsules for supplementation reaching 3,298,292 children aged 6 to 59 months.

In support to the Government’s policy to deliver services that are responsive to the health needs of adolescents, a total of 31 additional Adolescent Friendly Spaces were established, effectively contributing to improved access to health services. A total of 717,933 HIV tests were conducted for adolescents between January and September 2019.

Partners included the MoH, the National Food and Nutrition Commission of Zambia, National AIDS Council, Zambia National Public Health Institute, WHO, UNFPA, UNAIDS, UNHCR. Donor partners included the EU, UK Aid/DFID, Gavi, the Global Fund (Programme on HIV and Malaria), Sweden, KfW/Germany, USAID and CERF.
Every child has the right to an education and quality learning opportunities from early childhood to adolescence. The 7NDP has identified improved education and skills development as being instrumental in creating societies that are better able to respond to the social and economic development challenges they face.

In 2019, sector partners focused on improving sector coordination on the partnership with Global Programme for Education. UNICEF supported the Ministry of General Education (MoGE) and partners on efforts towards improved sector coordination and, as part of the monitoring of the implementation of the Education Strategic Sector Plan (ESSP), to initiate discussions on how to have a sector-wide approach to enhance financial and programme management in the sector. This will continue to require attention in 2020.

In 2019, UNICEF continued with support to multi-sectoral early childhood development (ECD) programmes in Zambia reaching 6,500 children. In partnership with UNICEF, the Government of the Republic of Zambia (MoH, MoGE and the Ministry of Community Development and Social Services - MCDSS) piloted a community-level ECD platform in Katete District. At national level, sustained advocacy to anchor the Nurturing Care Framework in Government programmes continued in 2019 with engagement with the Office of the First Lady, the Ministers of Health, General Education and Community Development and Social Services. This culminated in a high-level launch of the ECD programme in Katete District by the First Lady and Minister of Health as part of the 30th Anniversary of the Convention on the Rights of the Child (CRC).

UNICEF Zambia’s support towards the undertaking of a comprehensive ECE sector analysis coupled with Zambia’s contribution at the continental level to advocate for increased access to quality ECE, through co-chairing of an AU working group, provided a supportive environment for ECE systems strengthening.

UNICEF continued to work with the MoGE to address inequity in quality learning. UNICEF supported MoGE’s scale up of the Catch-Up Programme, which provides differentiated teaching at the level of learner’s ability, to an additional 634 schools in Southern and Eastern provinces reaching 160,968 learners. Findings from the end-line assessment conducted in 2019 were encouraging: in literacy the percentage of learners at beginner level dropped from 33 percent before intervention to 9 percent. The percentage of learners who do basic subtraction increased from 27 percent to 51 percent.

Partners included the MoGE, MoH, MCDSS, the World Bank (WB) and UNHCR. Donor partners included USAID, UNICEF National Committees and CERF.

Children have the right to grow up in a safe and supportive environment, free from violence, abuse, neglect and exploitation. In recognition of the importance of child protection, the Zambian Government has a legislative framework and protection system that encompasses a range of prevention and response mechanisms.

UNICEF continued to support the MCDSS to pilot a community-based preventative social welfare system for vulnerable children and adolescents (SEEVCA) in 15 districts. Key achievements thus far include piloting a community-based, Government-led social welfare system – designed around implementing ward-level case management and linking the most vulnerable and excluded children to services, as well as ensuring they have key information about protection, HIV and education. The pilot has reached over 38,000 children with 1,800 case management volunteers.

In 2019, UNICEF supported the Ministry of Gender to host the Steering Committee of the Global Programme to Accelerate Efforts Towards Ending Child Marriage (ECM). The implementation of the district action plans in two ECM pilot districts (Senanga and Katete) was accelerated. A total of 38,000 children in selected pilot wards are being reached with preventive interventions to increase school retention, improve sexual reproductive health and support children from the most vulnerable households to access health, education and social welfare services.

During the period under review, UNICEF sustained its partnership with the Department of National Registration, Passports and Citizenship on making birth registration more accessible to families across Zambia. A total of 8 of 10 provincial capitals now have birth registration printing centres (out of which 4 were set up in 2019) and 806 health centres have birth registration help desks (out of which 200 were set up in 2019). A total of 116,914 births have been notified in the supported birth notification desks. The Fifth African Conference of Ministers Responsible for Civil Registration was organized in Lusaka with the participation of nearly 600 delegates from across Africa, which placed Civil Registration and Vital Statistics System as a foundation for Legal Identity Management.

Partners included MCDSS, MoHA, MYSCD, MoG, Ministry of Justice, UNHCR, UNFPA, UNDP and ChildLine. Donor partners included; USAID, the EU and the GHR Foundation.

Every child has a right to live in an environment that is conducive to his or her growth and safety, including being protected from pollutants and other hazards.
In 2019, UNICEF supported the Ministry of Water Development, Sanitation and Environmental Protection (MWDSEP) to provide access to safe drinking water to 66,227 people (33,776 female and 32,451 male); and to provide access to basic sanitation facilities to 226,441 people (115,485 female and 110,956 male). Over 15,327 school children in 55 schools benefitted from basic WASH services. In addition, 14 health care facilities were provided with access to a basic water supply, while medical waste incinerators were installed in 12 health care facilities.

As part of continued efforts to strengthen the WASH sector enabling environment, UNICEF supported the development of the National WASH Communication Strategy. The Zambia Multi-Sectoral Cholera Elimination Plan 2019-2025 supported by WHO and UNICEF was showcased at the World Health Assembly.

UNICEF together with WHO supported the MoH to host the global meeting on “WASH in health care facilities: From Resolution to Revolution” in Zambia, with over 100 participants from 34 countries. UNICEF, together with Sanitation and Water for All (SWA) Secretariat, also supported the organization of the Africa Regional Consultation Meeting on the SWA Strategy in Lusaka, which was attended by 58 delegates from 25 countries.

Partners included MWDSEP, the Ministry of Local Government, the Commissioner of Refugee, MoH, ZNPHI, MoGE, WHO, UNHCR, World Vision International, Norwegian Church Aid and the Zambia Red Cross. Donor partners included KfW/Germany, EU, UK Aid/DFID and CERF.

Every child has the right to fulfil his or her potential. The Government has recognized that extreme poverty, vulnerability and development inequalities contribute to limiting the potential of human development and has prioritized actions to address these in the 7NDP, with the theme of accelerating development efforts towards Vision 2030 without leaving anyone behind.

In 2019, UNICEF, together with WFP, ILO and FAO, continued with technical support for the National Social Cash Transfer (SCT) programme to strengthen the administrative and financial management capacities required for a programme at the scale envisaged. The SCT programme, which targets female-headed households and households with disabilities as a priority, has enrolled 632,233 households as of 2019 against a planned enrolment of 750,000. Due to the economic decline and fiscal challenges that have constrained government resources, the programme performance has been constrained, with only two out of the six scheduled disbursements made by end of the year.

In addition, UNICEF supported studies and research that generated evidence for adoption of an integrated approach towards social protection programming by GRZ. The MCDSS adopted the principle of providing a bundle of social assistance to SCT beneficiaries, referred to as Cash+. Cash+ initiatives trigger a double transformation in the lives of vulnerable households. As an example of Cash+, UNICEF provided technical and financial support to MCDSS for the provision of education bursaries to 14,274 children (47.3 percent female) in vulnerable households, in 15 districts of the country.

UNICEF supported the 2018 budget performance review and 2019 budget performance tracking, comparing budget allocations with actual disbursements across the social sector ministries. UNICEF finalised 2019 budget briefs on nutrition, education, social protection and health, aiding advocacy efforts for increased investments in social sectors. UNICEF developed a Public Finance for Children (PF4C) Action Plan emanating from an office-wide PF4C training workshop that took place in May 2019 with support from the Regional Office.

Partners included MCDSS, Ministry of National Development Planning (MoNDP), Ministry of Finance, DMMU, WFP, FAO, ILO, UNDP, UNFPA, the WB and ZIPAR. Donor partners included UK Aid/DFID, Sweden, Ireland and Finland.

During 2019, UNICEF supported national humanitarian responses in three main areas: (a) a multi-sectoral response to the 2.3 million Zambians affected by drought; (b) a response to disease outbreaks, including polio outbreak in two districts, measles outbreaks in five provinces, and localized cholera outbreaks in four districts; and, (c) a multi-sectoral response to 15,069 refugees from the DRC in Mantapala. UNICEF supported the strengthening of Prevention of Sexual Exploitation and Abuse (PSEA) programming in the Mantapala Refugee Settlement and in response to the drought. UNICEF partnered with other UN agencies to undertake training on PSEA for front line workers and contractors distributing emergency cash. UNICEF further supported training of MCDSS social workers on managing complex GBV cases in humanitarian settings including partnering with Care International to support protection monitoring of delivery of human aid in six drought affected districts. 141,309 children were vaccinated against polio and 5,557 vaccinated against measles, 5,584 children from refugee settlement and host communities accessed primary education and 5,134 refugee children received psycho-social support.

For the humanitarian response, UNICEF Zambia adopted the approach of building systems that can expand to respond to humanitarian shocks. As part of the emergency nutrition response, UNICEF Zambia is strengthening the IMAM programme in 58 drought affected districts, training and equipping the district level managers and the health facility workers to deliver
a holistic programme for children with acute malnutrition. As of end of 2019, the intervention had achieved a cure rate of 76 percent, screening of 31,492 children aged 6-59 months, treatment of 773 children for Severe Acute Malnutrition and capacity development of 40 clinicians.

During the period under review, UNICEF implemented an Emergency Cash Transfer (ECT) targeting 97,115 households (42 percent female-headed) in 22 drought-affected districts, a first for UNICEF Zambia on this scale. The supplementary cash transfer addresses equity concerns and supports families to avoid negative coping mechanisms.


As part of advocacy and partnership in support of children’s rights, UNICEF sustained relationships at the highest political levels, the diplomatic and international community, and civil society. High-level discussions on violence against children, domestic financing for children and child participation were also convened. To mark the 30th Anniversary of the CRC, Zambia convened the first ever National Children’s Summit, bringing together child delegates from all 10 provinces to deliberate and make resolutions on priority actions. Social media networks continued their strong growth and nearly 1.3 million people were reached across Facebook, Instagram and Twitter – a 55 percent increase from 2018. More than 230,000 users visited the Country Office (CO) website and/or the Internet of Good Things website.

UNICEF Zambia continued to establish and maintain partnerships with the public and private sectors, mobilizing a total of $62.6 million in 2019. The CO had active funding partnerships in 2019 with DFID (Health, Nutrition and Social Protection), KfW (WASH), USAID (Child and Social Protection), the EU (Birth Registration and MDGii) and Sweden (Nutrition and Social Protection), either through bilateral agreements, or United Nations Joint Programmes. Negotiations were finalized with Sweden and Ireland for a UN Joint Programme to combat sexual and gender-based violence. A partnership with KfW (Euro 8 million) to improve access to WASH services in rural areas during 2020 to 2023 was finalized.

UNICEF convened United Nations agencies, the World Bank, donor partners and government ministries under the leadership of the MCDSS to continue support for accelerated systems strengthening for social protection and successfully mobilized funding ($20 million) for the new UN Joint Programme on Social Protection with generous support from the UK and Sweden. UNICEF collaboratively worked with Government line ministries, UN partners (WHO, FAO and WFP) and stakeholders to jointly conceptualise a multi-sectorial SUN Phase II funding proposal. The joint efforts successfully resulted in a $26.7 million partnership with UK Aid/DFID and Sweden. Additional partnerships are being developed with KfW and the EU to contribute to SUN Phase II, as well as with Soccer Aid, KOICA and UNICEF USA.

Zambia CO continued to be supported by several National Committees, including in Denmark and the Lego Foundation, Finland, Korea, the UK and the US. Zambia has also benefited from partnership with the EU on birth registration, GAVI, the Bill and Melinda Gates Foundation. The CO received $302,777 in Thematic Funding.

Following the polio outbreak in two districts in Zambia, UNICEF trained, equipped and funded community-based volunteers responsible for the social mobilization for the polio campaign. UNICEF also supported social mobilization activities in the response following measles outbreaks in six provinces and cholera outbreaks in four districts in Zambia.

UNICEF strengthened its research management function through the updating of the standard operating procedures, as well as ToR and research brief templates. In particular, UNICEF supported some ground-breaking studies, such as, the Knowledge, Attitude and Practices (KAP) study on adolescent decision-making, Community Perceptions on Violence Against Children and other research on case management related to the Service Efficiency and Effectiveness for Vulnerable Children and Adolescents programme.

UNICEF has supported MNDP to finalise the Sub National Analysis of the 2010 Population and Housing Census, earmarked for dissemination in 2020. The analysis provides a baseline to track progress at sub-national level with regards to policies aimed at poverty eradication. With the 2020 Census preparations underway, the analysis is an invaluable resource for tracking the effectiveness of policies.

The CO management functioned well throughout the year, with clear governance structures. Management provided oversight, and monitoring systems were effectively used.

Enhancing office culture continued to be a major priority in 2019. In May, the office adopted a Staff Charter that fully embraces core Organizational values of care, respect, integrity, trust and accountability with practical “Do's and Don'ts” workshopped by all staff. The CO developed a leadership and management excellence roadmap with a number of concrete actions, such as a 360 degree feedback exercise for all managers, career management support, coaching and mentoring, and improvements to the office physical environment.
A review of progress against the Annual Management Plan priorities was conducted each quarter, with the Mid-Year and Annual Reviews assessing progress on programme and management results and governance mechanisms in depth.

The ZCO has a PSEA action plan and has a task force overseeing its implementation monitored through Monthly CMT. All UNICEF staff, vendors, contractors and partners are trained in PSEA.

Lessons Learned and Innovations

During the implementation of the Country Programme in 2019, several lessons were learned, some challenges were experienced, and innovative options were applied to mitigate the risks and maximize the attainment of the planned results.

#1: A lesson learned from implementing the 2019 programme, particularly, systems strengthening, was that that results are sustainable when the Government leads and sets aside resources in a timely manner to sub-national level implementing departments. Slow disbursements of national budget funds to social sectors continued into 2019, affecting the pace and scale of programme implementation. In addition to disbursement challenges, the constrained fiscal space due to a slow-down in economic growth and increased debt repayments this year has led to lower investments in the social services sector generally. Delays in releasing funds from the Ministry of Finance led to delayed implementation of activities. The country office will continue with advocacy for the timely release of allocated funds in the national budget, use appropriate funding modalities, including direct payments, and increase assurance activities, notably through the Harmonized Approach to Cash Transfer modality.

#2: With the challenges faced in budget disbursement, there is greater need to review the implementation strategy and sharpen support at district level. Already UNICEF has programmes that support district-wide implementation in several sectors. A lesson learned is that currently UNICEF programme is dispersed and, as agreed in the 2018 MTR, there is need for urgent action for district level convergence for efficiency and programme effectiveness. In the 2020 planning process, a mapping process will be undertaken to further increase programme convergence. In addition, recognizing the current programme management capacities by national institutions at provincial and district level, UNICEF Zambia will increase its presence in select geographical locations for enhanced programme and financial monitoring. In addition, investment will be made on supporting district level functionaries address programme management capacity gaps, including reliable and regular data for programme decisions.

#3: 2019 was the first year of the implementation of the three integrated programming platforms (multi-sectoral nutrition programme to reduce stunting; ECD, and adolescent programming using ECM as an entry point). Several lessons were learned during this first year of implementation. First, internally, while there was agreement in principle of the direction of travel, it quickly was apparent that the what and how to programme needed further discussion. Progress was made in 2019 and programme approach papers for each of the three platforms have been drafted with accountability frameworks proposed for each section. Secondly, externally, while the 7th National Development Plan is grounded in a multi-sectoral approach, it became clear that the current coordination structures were more effective in the reporting phase as compared to the implementation phase of multi-sectoral programmes. UNICEF engaged in high level advocacy for clarity within national partners over roles and accountability to deliver the integrated platforms. This is still work in progress and will be prioritized in 2020.

#4: The Country Programme was designed under the assumption that Zambia was of medium risk for humanitarian situations and that most emergency situations will be short-lived and localized. 2019 has shown that this assumption needs to be revisited with several outbreaks of polio, measles and cholera; a severe drought response that, in all likelihood, will be prolonged; and the increasing demand for UNICEF to support the refugee response (in line with the Global Refugee Compact/CRRF approach). UNICEF was agile and innovative in 2019 and took measures to increase capacities (human resource and financial) to respond to the increased need for responding to humanitarian situations affecting children in Zambia, including through effective use of Regular Resources. The UNICEF approach has been to build on the development-humanitarian nexus and develop capacity of national sector systems to be able to manage and respond to emergencies and withstand shocks. An example is the ongoing drought response where UNICEF Zambia is building the capacity of the district level health system to be able to case-find, refer, treat, and post-treatment follow-up of children with moderate and severe acute malnutrition. Similarly, UNICEF Zambia developed an emergency cash transfer that is using the national SCT database and systems – this facilitated a quick start-up of the ECT in the 22 drought affected districts.

#5: In 2019, UNICEF Zambia supported the UN Common System in Zambia to have a PSEA Advisor whose primary assignment was to, under the direct supervision of the United Nations Resident Coordinator in Zambia, and working in close collaboration with UNHCR, advise and assist the United Nations Country Team (UNCT) to implement the Secretary General
"Bulletin on special measures for protection from sexual exploitation and sexual abuse" (ST/SGB/2003/13) with focus on ensuring that protection from SEA is integrated into all services and programmes, including in humanitarian responses as well as the broader long-term development context. The innovative support by UNICEF Zambia facilitated the UNCT to put in place a PSEA response mechanism with accountability towards affected populations, with an emphasis on access to 1) safe and inclusive reporting mechanisms; 2) victim-centred assistance; and 3) legal redress and victim-centred investigation in accordance with the IASC PSEA priority outcomes.

#6: In CO leadership and management, significant progress was made in 2019 in staff development and office culture. The focus was and continues to be on a team who are valued, motivated and fully recognised for their skills and contributions in delivering results for children, and who feel empowered and can “speak up” within a conducive and respectful environment. A UNICEF Zambia Staff Code of Conduct was developed by staff and built around the five UNICEF values of care, respect, integrity, trust and accountability with practical “Do’s and Don’ts”. As one of the 2019 Annual Management priorities, a Leadership and Management Excellence road map and proposed actions were adopted by the UNICEF Country Management Team. UNICEF Zambia was one of the countries cited to have made significant progress in people management excellence and was included in a case study commissioned by UNICEF HQ.