Annual report for 2017 of the Executive Director of UNICEF

Summary

This is the final report to the UNICEF Executive Board on the implementation of the Strategic Plan, 2014–2017. Section I reviews the situation of children worldwide and highlights notable results achieved by UNICEF and partners in 2017 and during the period covered by the Strategic Plan. Section II spotlights achievements in the outcome areas, section III covers organizational efficiency and effectiveness, section IV reviews implementation strategies, section V covers revenue, expenses and resource mobilization and section VI presents cross-cutting lessons learned, looking ahead to the Strategic Plan, 2018–2021. A draft decision is included in section VII.

The report is accompanied by an addendum on the implementation of the quadrennial comprehensive policy review of operational activities for development of the United Nations system (QPCR) and the Integrated Results and Resources Framework of the UNICEF Strategic Plan, 2014–2017 (E/ICEF/2018/9/Add.1), a table on the implementation of the QCPR, 2017 (UNICEF/2018/EB/7) and a data companion and scorecard.
I. Overview

1. UNICEF and its partners worked throughout the period 2014–2017 to promote children’s rights and make progress more inclusive and sustainable by sharpening the focus on the children furthest behind.

2. Multiple and severe humanitarian crises marked the year 2017. Conflict, natural disasters and climate change forced children from their homes, trapped many in dangerous situations and exposed them to violence, exploitation, deprivation, malnutrition and disease.

3. More than 300,000 Rohingya children fled violence in Myanmar in less than three months, in the most rapid exodus of refugees since the Rwandan genocide. Longstanding conflicts in the Democratic Republic of the Congo, north-eastern Nigeria, South Sudan, the Syrian Arab Republic and Yemen deepened in complexity and impact and led to further grave violations of children’s rights. Conflict brought famine to South Sudan and pushed north-eastern Nigeria and Yemen to the brink. Drought exacerbated the situation of the most vulnerable women and children in Ethiopia, Kenya and Somalia.

4. Cholera struck many countries, including Iraq, Kenya, Nigeria, Somalia, South Sudan, the Democratic Republic of the Congo, Uganda and Yemen, several of them already contending with multiple emergencies. Yemen suffered the worst cholera outbreak ever recorded, with over 1 million suspected cases, nearly 60 per cent of them in children.

5. Outbreaks of diphtheria, measles, Marburg virus, Ebola and plague threatened children’s lives and strained countries’ health systems. In some cases, population movements, spurred by conflict, resource scarcity or economics, spread diseases further. Some of the strongest hurricanes in history battered the Caribbean, leaving more than 350,000 children in need of assistance.

6. The mission of UNICEF to protect children’s rights was severely tested in 2017, and its urgency has never been more apparent. At the same time, remarkable progress underscored the potential of the organization’s work, with that of its partners, to make a difference in the situation of children worldwide.

7. While humanitarian crises complicated the last stage of the global polio eradication effort, the number of wild poliovirus cases fell from 37 in 2016 to 22 in 2017, the lowest in history, with none reported in Africa, where UNICEF supported the vaccination of 141 million children. Where crises placed children’s right to education in jeopardy, investments made through Education Cannot Wait, the first global fund for education in emergencies, will reach 3.7 million children, half of them girls.

8. An accelerated decline in child marriage prevalence — down by 15 per cent worldwide since 2010 and by over a third in South Asia — chipped away at the gender inequality that denies adolescent girls the right to control their own destinies. The expanded global commitment and engagement on the critical period of early childhood, led by UNICEF, which builds upon evidence on brain development, made a powerful case for increased investment and scaled-up services, to give every child the best start in life.

A. Progress and challenges for children

9. During the period 2014–2017, millions of children around the world were born and grew up with a better chance than ever of living healthy lives and achieving their
potential. But poverty, discrimination, disaster, violence and conflict robbed millions of others of the chance to enjoy those same rights.

10. The under-5 mortality rate continued its dramatic decline, falling from 46 to 41 deaths per 1,000 live births between 2013 and 2016. Yet children born into the poorest households and those in sub-Saharan Africa and South Asia were at higher risk of dying from preventable causes. If these trends continue, preventable under-5 deaths, a thing of the past in much of the world, will persist among the world’s most disadvantaged children in 2030.

Figure I
Progress in reducing under-5 deaths, 1990–2016


11. Stunting affected 15 million fewer children in 2016 than in 2010, but still affected 155 million, just under 1 in 4 children under the age of 5 years, while wasting affected 52 million. Ten countries in Africa and Asia accounted for about three quarters of stunted and wasted children. The number of overweight children increased, reaching 41 million in 2016.
12. In 2017, 79 per cent of children from the poorest households attended primary school, up from 72 per cent in 2013. Yet over one third of primary school-aged children were failing to learn basic literacy and numeracy. The Sustainable Development Goals aim for inclusive, quality education for all, but just 1 in 10 young people in low-income countries are on track to gain the secondary-level skills necessary for success in the global economy by 2030.

13. Even as the proportion of women married as children decreased, around 650 million girls and women alive today were married as children. Last year, hundreds of millions of children experienced some form of harmful practice, violence or exploitation.

14. In spite of declines, pockets of extreme poverty persisted even in wealthy countries, and children remained disproportionately represented among the poor. Children with disabilities — at least 93 million worldwide — remained among the most invisible members of society, subject to exclusion, discrimination and the denial of their rights.

15. Humanitarian emergencies, fragility, instability and displacement threatened children’s rights. About 350 million children lived in areas affected by conflict, a 74-per-cent increase over the past 10 years, and, as of 2016, an estimated 28 million children were living in forced displacement. Children in fragile contexts are twice as likely to die before the age of 5 years, more likely to be malnourished, less likely to be in school and at greater risk of child labour and marriage.

16. If the world is to fulfil its commitments under the Sustainable Development Goals and meet its evolving challenges, the most vulnerable children cannot be left behind. Delivering results that leave no one behind by reaching the furthest behind first is at the core of the UNICEF Strategic Plan, 2018–2021.

**B. Notable results for children in the period 2014–2017**

17. UNICEF and partners achieved large-scale results for children across the Strategic Plan, 2014–2017 period, working in humanitarian and development contexts and addressing the rights and well-being of children in low- and middle-income countries.
18. During the period, 176 million children received the measles vaccine and over 250 million annually were reached with the recommended two doses of vitamin A and other interventions to prevent malnutrition. With UNICEF support, over 46 million people gained access to basic sanitation in their homes, while over 50 million received improved water supplies.

19. Learning materials were provided to 59.4 million children and 1.2 million classrooms. Around 52.4 million children were registered at birth. Support interventions reached over 25 million children aged 5 to 17 years involved in child labour, while UNICEF and the United Nations Population Fund (UNFPA) provided preventive and protection services to over 3 million girls and women at risk of or affected by female genital mutilation/cutting (FGM/C).

![Figure III](image)

**Development results, 2017**

- 78.6 million children immunized against measles
- 900,000 children (0-14 years) living with HIV receiving antiretroviral treatment*
- 12 million people accessing safe water
- Over 250 million children received vitamin A supplementation and other nutrition interventions
- 12.5 million children received learning materials
- 15.9 million children registered at birth through UNICEF support
- 3 million more children reached by government cash-transfer programmes, in part through UNICEF support

*2016 data.

20. In humanitarian situations in 2017 alone, UNICEF reached 32.7 million people with access to safe water and 18 million children with the measles vaccine, while nearly 3 million children suffering from severe acute malnutrition (SAM) received treatment. Formal or non-formal education reached 8.8 million children (4.3 million girls, 4.5 million boys), and 3.6 million children and women received services to prevent and respond to gender-based violence in emergencies.

![Figure IV](image)

**Humanitarian results, 2017**

- 18 million children vaccinated against measles
- 3 million children treated for severe acute malnutrition in humanitarian settings
- 32.7 million people provided access to safe water
- 9 million people accessed adequate sanitation
- 8.8 million children accessed formal or non-formal education
- 3.5 million children received psychosocial support
- Over 1 million people benefited from cash-based support

21. UNICEF worked to advance the rights and well-being of children across childhood, with the critical windows of opportunity of early childhood and
adolescence receiving increased attention that built upon previous country-level work.

22. UNICEF identified gaps in knowledge and broadened the evidence base regarding adolescence, and addressed adolescent-focused issues including child marriage, adolescent pregnancy, menstrual hygiene management, secondary education and the acquisition of twenty-first-century skills. It also responded to adolescents’ needs and vulnerabilities relating to nutrition, HIV and violence, including homicide and gender-based violence. In line with the greater emphasis of the Strategic Plan, 2018–2021 on the second decade, UNICEF will make a concerted initiative to empower adolescents and young people.

23. To ensure that children affected by emergencies are not left behind, UNICEF contributed to humanitarian aid reform and furthered its Grand Bargain commitments towards better aid coordination and greater coherence between humanitarian and development work, while strengthening accountability to affected populations and promoting their resilience, empowerment and participation. Since 2015, more than three quarters of countries experiencing humanitarian situations have reported that affected populations were consulted during humanitarian programming.

24. Achievements in the seven outcome areas and two cross-cutting priorities of the Strategic Plan, 2014–2017, demonstrate the impact of development programmes and front-line humanitarian assistance at scale. Underpinning these achievements is strategic engagement with change-makers in government, other United Nations agencies and the private sector, resulting in value for money in translating income into results for children. Together with the achievements presented in the annual report on UNICEF humanitarian action (E/ICEF/2018/10) and the annual report on the implementation of the UNICEF Gender Action Plan, 2014–2017 (E/ICEF/2018/12), these results provide UNICEF with a strong platform upon which to build in the future, guided by the Strategic Plan, 2018–2021.

II. Performance under outcome areas of the Strategic Plan, 2014-2017

25. As 2017 marked the last year of the implementation of the Strategic Plan, 2014-2017, the present report provides an opportunity to take stock of progress made against targets set five years ago. Significant progress was achieved towards 2017 targets on 88 per cent of outputs across all outcome areas (details are provided in a separate data companion and scorecard).
A. Health

26. Most health-related areas registered good progress, notably maternal and newborn health, with the delivery of lifesaving interventions amid conflict, fragility and emergencies.

27. Performance on the expansion of antenatal and postnatal care and skilled attendance at birth was especially strong in 2017. Fifty-two countries, up from 18 in 2014, had a coverage rate of at least 80 per cent for antenatal care, and 98 countries, compared with 51 in 2014, had such coverage for skilled attendance at birth, with progress also observed among least developed countries. Coverage for postnatal care for mothers and for newborns reached at least 60 per cent in 57 and 35 countries, respectively, up from 16 and 20 in 2014.
Figure VI
Progress in the delivery of skilled pregnancy and birth services, 2000–2017

Note: The data for skilled attendance at birth and attendance by any provider cover 38 and 20 out of 47 least developed countries, respectively, and represent approximately 88 per cent and 58 per cent of births.

Source: UNICEF global databases 2018, based on data from Demographic and Health Survey, multiple indicator cluster survey and other national sources.

28. In 2017, UNICEF supported measles vaccination for 78.6 million children and provided technical assistance on immunization supply chain systems in 40 countries. In the Solomon Islands, for example, the effective vaccine management composite score increased to 64 per cent in 2017 from 49 per cent in 2012.

29. UNICEF strengthened the delivery of integrated community-based packages of services, providing care to children who would not otherwise have had access, with an overall expense in 2017 of $1.4 billion. Between 2014 and 2017, UNICEF trained over 240,000 community health workers (over 83,000 in 2017) on integrated community case management across 49 countries in 2017.

30. The number of countries with at least 80 per cent of children (0 to 59 months) with suspected pneumonia taken to an appropriate health-care provider increased from 7 in 2014 to 21 in 2017. Among the 86 countries with sex-disaggregated data in the baseline and target years, such coverage was achieved among both girls and boys in 8 countries, up from 5 in 2014; among girls, in 12 countries, up from 8; and among boys, in 13 countries, up from 7.

31. UNICEF worked in close collaboration with H6 partners — the World Health Organization (WHO), UNFPA, the Joint United Nations Programme on HIV/AIDS (UNAIDS), the United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women) and the World Bank Group — to leverage the strengths and capacities of each entity to support countries with a high burden of child and maternal mortality. UNICEF work on child survival is anchored in Sustainable Development Goal target 3.2 and the Every Woman Every Child initiative to implement the Global Strategy for Women’s, Children’s and Adolescents’ Health (2016–2030).
32. UNICEF encountered significant challenges in its efforts to reach the unprecedented number of children in emergency and fragile settings. Public health emergencies, economic uncertainty, conflict, natural disasters, displacement and migration negatively affected national health systems and maternal, neonatal and child health and immunization service delivery, including further progress in eliminating wild polio transmission and maternal and neonatal tetanus.

### B. HIV/AIDS

33. Remarkable progress on some key outcome indicators demonstrated that political will and sustained support enable the provision of comprehensive HIV services in primary health-care settings. Results on other indicators reflect significant unmet needs and the complexity of programming for adolescents.

34. Stunning achievements in the prevention of mother-to-child transmission of HIV (PMTCT), including coverage of maternal antiretroviral treatment (ART) of nearly 80 per cent, averted 1.6 million new HIV infections among children between 2010 and 2016. The annual number of new infections among children (0–14 years) fell by almost one-half between 2010 and 2016, from 300,000 in 2010 to 160,000 in 2016. While deaths from AIDS in children (0–14 years) are declining, much work is needed to expand and sustain ART coverage among this age group.
Figure VIII
Increase in treatment coverage for children and pregnant women and decline in new HIV infections and in AIDS-related deaths among children, 2000–2016

35. Overall expense in 2017 for HIV/AIDS was $84 million. At the output level, UNICEF promoted innovations in patient-centred and gender-responsive programming, playing a critical role in enhancing the government-led national rollout of PMTCT services. In partnership with the Governments of Côte d’Ivoire, the Democratic Republic of the Congo, Malawi and Uganda, UNICEF implemented and showed the benefit of key community interventions, including peer support, male engagement and citizen accountability, to improve service quality and retention in care for mother-baby pairs. To date, 10 countries and territories have been validated by WHO for having eliminated mother-to-child transmission of HIV, with 6, including Anguilla, Antigua and Barbuda, the Cayman Islands, Montserrat and Saint Kitts and Nevis, validated in 2017.

36. ART coverage in humanitarian situations relative to the total need among pregnant women increased to 81 per cent in 2017, up from 62 per cent in 2016, while among children it rose to 55 per cent, up from 25 per cent in 2016.

Figure IX
Performance on selected indicators in HIV/AIDS, 2017

37. Critical challenges persist. While treatment coverage among pregnant women has reached unprecedented levels, fewer than half of children living with HIV access treatment. This gap can be closed only if children with HIV are identified and linked to treatment in a timely manner. Identifying HIV in infants and young children is especially complex, but UNICEF, in partnership with Governments, has piloted simple-to-use point-of-care infant diagnostic tests (first approved in 2016) in 10 sub-Saharan African countries, including 3 countries in 2017. Nurses at the primary level can perform the tests, minimizing delays in diagnosis and enabling more rapid access to ART and greater coverage. UNICEF is partnering with the Clinton Health Access Initiative and the International Drug Purchasing Facility to make the tests part of routine child services.

38. For adolescents, the ongoing work of the All-In! initiative, co-led by UNICEF and UNAIDS, brought important benefits. Across 35 countries, UNICEF mapped the landscape of adolescent HIV prevention and care, with assessment results used to improve policy, strengthen services and mobilize resources. Yet UNICEF missed several adolescent-specific targets, including levels of knowledge about HIV/AIDS, particularly regarding HIV prevention.

39. UNICEF will make protecting adolescent girls, young women and adolescent key populations from HIV a major focus. Through partnerships with UNAIDS in the
Global HIV Prevention Coalition and with the UNAIDS-President’s Emergency Plan for AIDS Relief in the Start Free, Stay Free, AIDS Free framework, UNICEF will work with Governments, with adolescent participation, to galvanize action towards reducing new HIV infections among adolescent girls and young women by 75 per cent, to fewer than 100,000 per year.

40. In 2017, a rapid and substantial decline in resources for global and national HIV programming hampered the ability of national programmes and stakeholders, including UNICEF, to deliver against targets and collect robust, reliable data. To become more effective and efficient in the changing financial climate, UNICEF and partners implemented strategic shifts, including targeted and differentiated responses, the integration of HIV and health services and the leveraging of partnerships.

C. Water, sanitation and hygiene

41. Responses to major emergencies and the expansion of development programmes to meet Sustainable Development Goal targets have made water, sanitation and hygiene (WASH) the fastest-growing outcome area. Alongside notable achievements in expanding access to water and sanitation, UNICEF contributed to the monitoring of progress on new Goal indicators.

Figure X
Progress in water and sanitation, 2014–2017

42. UNICEF and partners helped more than 70 million people (22 million in 2017) gain access to basic sanitation in their homes during the period 2014–2017, while direct support provided improved water supplies to more than 150 million people (some 45 million in 2017).

43. A key result of the period 2014–2017 has been the rapidly expanding global movement to eliminate open defecation. In 2017, direct UNICEF support led to the certification of over 50,000 communities as open defecation-free, the most ever. Over 60 per cent of engaged communities reached certification, up from about 40 percent in 2014.

44. Overall expense nearly doubled to more than $1 billion in the period 2014–2017, with UNICEF support enabling more than 50,000 schools to set up girl-friendly
WASH facilities and an increasing number of countries adopting policies and programmes for menstrual hygiene management in schools.

45. The UNICEF emergency WASH programme reached more people in 2017 than ever, including over 32 million with water, 9 million with sanitation and 28 million with handwashing. In the Syrian Arab Republic, UNICEF trucked water to 3.2 million people and rehabilitated war-damaged WASH infrastructure. In Yemen, hygiene promotion and household water treatment helped to reduce the impact of the cholera epidemic. Across 13 countries in drought-affected Eastern and Southern Africa, UNICEF provided emergency water and built or rehabilitated WASH systems.

46. UNICEF leadership of key sectoral collaborative bodies included hosting the Sanitation and Water for All partnership, co-managing the WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation, and coordinating WASH humanitarian response as lead agency through the Inter-Agency Standing Committee (IASC) WASH Cluster, globally and in many countries.

Figure XI
Performance on selected indicators in water, sanitation and hygiene, 2017

D. Nutrition

47. Significant progress has been achieved in maternal and child nutrition, particularly in stunting prevention among young children. To achieve the Sustainable Development Goal targets, UNICEF and partners are scaling up evidence-based interventions to prevent malnutrition among the children furthest behind, ensuring timely treatment for SAM and expanding adolescent nutrition programmes.

48. Stunting continued to decline, affecting 15 million fewer children in 2016 than in 2010, but it still affected some 155 million children under the age of 5 years, while 52 million children under the age of 5 years suffered from wasting.
49. In 2017, the overall expense on nutrition was $665 million. In UNICEF-supported regions in the United Republic of Tanzania, community health workers in 64 per cent of villages were equipped to provide counselling services for infant and young child feeding, up from 15 per cent in 2016. Thirty-five countries had exclusive breastfeeding rates above 50 per cent, an increase from 27 countries in 2014. Between 2014 and 2017, UNICEF supported the delivery of nearly 2 billion vitamin A supplements, to reach over 250 million children annually with the recommended two doses. The proportion of households consuming iodized salt reached 86 per cent globally, and 34 countries in sub-Saharan Africa delivered deworming prophylaxis along with vitamin A supplementation to children under the age of 5 years.

50. Over 4 million children were treated for SAM in 2017, up from 2.7 million in 2014, amounting to 14.9 million treated in humanitarian and development contexts between 2014 and 2017. In 2017, iron and folic acid supplementation for anaemia prevention reached 1.5 million adolescent girls through a school-based programme in Afghanistan and 35.5 million adolescent boys and girls through school- and community-based programmes in India.

51. In humanitarian settings, nearly 3 million children with SAM were treated with UNICEF support in 2017, including in complex emergencies in north-eastern Nigeria, Somalia, South Sudan and Yemen, where the recovery rate reached 83 per cent, exceeding international standards of care in humanitarian situations. Nearly 6 million caregivers received support on infant and young child nutrition in humanitarian situations. By 2017, 65 countries had incorporated emergency or risk management strategies in nutrition policies with UNICEF support.

52. In 2017, UNICEF played a leading role in 12 global partnerships, including Scaling Up Nutrition, which grew from 48 countries in 2014 to 60 in 2017, and the No Wasted Lives Coalition, which focuses on SAM. As the lead agency for the Nutrition Cluster, UNICEF responded to 15 emergencies and provided technical support to 38 countries with humanitarian situations in 2017.
E. Education

53. Many indicators of education access and learning outcomes registered good progress. UNICEF recognizes that meeting the educational needs of children left behind, including those in emergencies, is key to achieving inclusive and equitable quality education for all (Sustainable Development Goal 4).

54. In 2017, 79 per cent of children from the poorest households across all UNICEF-supported countries were attending primary school, up from 72 per cent in 2013. Learning outcomes improved in 68 per cent of countries, up from 63 per cent. Yet an estimated 250 million children of primary-school age have not mastered basic literacy and numeracy. More than 263 million children of primary- and secondary-school age remained out of school, including 132 million girls and 131 million boys, and just under half of children of pre-primary-school age were enrolled in early education.

55. Working with partners, UNICEF registered significant progress at the output level, with an overall expense of $1.2 billion. In 2017, 58 per cent of countries implemented early learning policies or programmes; girls’ secondary education was a targeted and budgeted priority in 35 per cent of countries; and 51 per cent of countries had innovative approaches at scale to improve access and learning outcomes among the most disadvantaged children.

56. In 2017, less than 5 per cent of primary-school aged girls were out of school in 40 per cent of countries, up from 36 per cent of countries in 2014, but only 34 per cent of countries showed such a rate among boys, a decrease from 41 per cent in 2014. Similarly, less than 5 per cent of lower secondary school-aged girls were out of school in 27 countries in 2017, up from 21 per cent of countries in 2014, while for boys, the rate fell to 21 per cent from 22 per cent in 2014.

57. Since 2014, 59.4 million children have received individual learning materials, including 3.5 million in Afghanistan, and 1.2 million classrooms, including 70,000 in Myanmar, have received classroom learning materials. Over 21,000 out-of-school girls in Madagascar were supported with catch-up classes to re-enter formal schooling in 2017.
58. In 2017, 8.8 million children in humanitarian situations (4.3 million girls, 4.5 million boys) were reached with formal or non-formal education, including 1.02 million children in the Syrian Arab Republic, over 904,000 in Nigeria and over 370,000 in Yemen. Education-sector plans included risk assessment and management in 40 per cent of countries, up from 19 per cent in 2013.

60. A key lesson learned during 2017 was the need to accelerate progress on pre-primary education. Despite organizational strengths in this area and the recognition of its importance, especially for the most vulnerable, UNICEF financial support for early learning programmes has declined in recent years, mirroring low spending by national Governments. UNICEF also recognized the need for an increased emphasis on learning outcomes and teacher training. It will continue its work to strengthen national systems and seek innovative approaches to ensure that children gain the knowledge and skills they need.

F. Child protection

61. Significant progress was achieved in child protection. UNICEF worked with partners in multiple areas, from evidence to services to systems, to protect children against violence, exploitation and harmful practices, while supporting their recovery and resilience, including in emergencies.

62. The proportion of women married as children has decreased by 15 per cent in the past decade, from one in four to approximately one in five, with the largest decline in South Asia. Meanwhile, the rate of children in residential care declined by at least 10 per cent in 24 countries, exceeding the targeted 15 countries.

63. During the period 2014–2017, UNICEF reached an estimated 25.3 million children involved in child labour with support and contributed to registering the births of approximately 52.4 million children. Since 2016, UNICEF and UNFPA, the co-leads of the two largest United Nations joint programmes, have reached nearly 2 million adolescent girls at risk of child marriage with life skills and education support.

Figure XVI
Selected results in child protection, 2014–2017

64. UNICEF achieved significant progress against its 2017 output-level targets. Overall expense was $690 million. The number of countries with programmes addressing child-rearing practices reaching at least 75 per cent of targeted parents
increased from 3 in 2014 to 36 in 2017. Legislation on child protection met international standards in 48 countries in 2017, up from 33 in 2014. Many countries, including Kenya, the Philippines, Serbia and the United Republic of Tanzania, scaled up their social service workforce, and several reduced the use of custodial sentences for young offenders. Since 2016, UNICEF has scaled up action to protect the rights of children on the move in 78 countries.

65. In humanitarian situations in 2017, approximately 3.5 million children received psychosocial support, including in Burundi, Ethiopia, Iraq, Kenya, Nigeria, Somalia, South Sudan, the Syrian Arab Republic, Uganda and Yemen. Globally, about 3.6 million children and women benefited from gender-based violence risk mitigation or support services, including in Bangladesh, the Philippines and South Sudan. The capacity to prevent and respond to sexual exploitation and abuse in humanitarian contexts was scaled up in 16 high-risk countries. Nearly 6 million children received weapons-related risk education, including nearly 2.7 million girls and nearly 2.9 million boys in countries with sex-disaggregated data.

66. During the period 2014–2017, UNICEF led the implementation of the Children and Armed Conflict programme, documenting grave violations against children, including in Nigeria, the Syrian Arab Republic and Yemen, and responding with partners to the needs of children affected by conflict. UNICEF supported the reintegration of nearly 39,000 children formerly associated with armed forces and groups, representing 75 per cent of the approximately 52,000 released. The organization was also the lead agency on the implementation of the 14 action plans signed with armed forces and groups for the release of children.

67. UNICEF, with other United Nations agencies, contributed to the work of INSPIRE: Seven strategies for ending violence against children (Sustainable Development Goal target 16.2), worked with the International Labour Organization on child labour data (target 8.7) and, with UNFPA, developed joint programme monitoring frameworks for child marriage and FGM/C (target 5.3).

Figure XVII
Performance on selected indicators in child protection, 2017

G. Social inclusion

68. Indicators of social inclusion showed significant progress, as UNICEF and partners supported countries in addressing child poverty and exclusion, including in emergencies.
69. UNICEF continued to advocate for social protection programmes for the most vulnerable children. These programmes have continued to expand, and by 2017, over 182 million children had been reached by government cash-transfer programmes, including an additional 3 million since 2016.

70. The overall social inclusion-related expense was $413 million in 2017. Progress on addressing child poverty through national policies and programmes is demonstrated by 58 countries with nationally owned child poverty measurement and reporting, up from 29 in 2013, falling slightly short of the 2017 target of 60 countries; Sustainable Development Goal 1 is expected to spur greater uptake. National development plans or legislation in 29 countries addressed child poverty (up from 19 in 2014); 4 countries adopted child poverty reduction targets; and 87 countries addressed gender in their national social protection strategies or plans, up from 40 in 2014 and surpassing the targeted 50.

Figure XVIII
Selected results in social inclusion, 2014–2017

71. Quality, affordable care for young children expanded, with 42 per cent of young children in 57 countries having access by 2017 (surpassing the targeted 30 per cent). Participatory mechanisms for children and adolescents, such as Child Advisory Bodies for municipal planning in Belize, were in place in 116 countries. Children’s rights were addressed in national climate change or environmental policies in 60 countries.

72. In 2017, UNICEF supported 3 additional countries (bringing the total to 46) to include emergency prevention, preparedness and response in their social protection systems. The number of countries integrating disaster and conflict risk in national planning and monitoring systems increased from 64 per cent in 2014 to 82 per cent (127 countries in total) in 2017, exceeding the targeted 74 per cent. In 2017, over 1 million people benefited from humanitarian cash transfers. Furthermore, in Yemen, UNICEF partnered with the World Bank to strengthen national social protections systems through the delivery of cash transfers to over 1.3 million of the most
vulnerable households, reaching nearly one-third of the population, including in humanitarian situations.

Figure XIX
Performance on selected indicators in social inclusion, 2017

H. Humanitarian action

73. In 2017, the effects of conflict, natural disasters and disease intersected to disrupt and endanger children’s lives, while posing security and operational challenges to emergency response. UNICEF and partners worked to deliver lifesaving interventions to children, protect rights and address the underlying causes of vulnerability to crises (see figure IV).

74. In 2017, UNICEF responded to 337 new and ongoing crises in 102 countries, including seven level 3 (organization-wide) responses to protracted conflicts in Iraq, north-eastern Nigeria, South Sudan, the Syrian Arab Republic and neighbouring refugee-hosting countries and Yemen; the Rohingya refugee crisis in Bangladesh; and the escalating crisis in the Democratic Republic of the Congo. There were four level 2 emergency responses, several smaller or less visible humanitarian situations and a range of health emergencies, including cholera outbreaks in several countries.

75. UNICEF reached 32.7 million people with access to safe water, including nearly 10 million in Yemen and over 2.43 million in Ethiopia. In Bangladesh, UNICEF and partners undertook the world’s second-largest oral cholera vaccination campaign, reaching almost 900,000 people. In countries experiencing crisis-level food insecurity — famine in South Sudan and near-famine in north-eastern Nigeria, Somalia and Yemen — 7.4 million children received the measles vaccine, among 18 million reached worldwide. More than 860,000 children in the four countries received treatment for SAM, among 3 million reached worldwide.

76. Worldwide, UNICEF reached 8.8 million children with formal or non-formal education. In the Syrian Arab Republic and neighbouring refugee-hosting countries, nearly 2 million children received formal education and nearly 120,000, non-formal education. In Eastern and Southern Africa, 1.4 million children accessed education. In hurricane-affected Caribbean countries, nearly 19,500 children gained access to education services, while more than 13,000 benefited from psychosocial services. Worldwide, 3.5 million children received psychosocial support, including 1.3 million conflict-affected children in Iraq, the Syrian Arab Republic and Yemen. Globally, about 3.6 million children and women benefited from gender-based violence risk mitigation or support services, including in Bangladesh, the Philippines and South Sudan.
77. In 2017, over 1 million people benefited from humanitarian cash transfers from UNICEF. Furthermore, UNICEF partnered with the World Bank to deliver cash transfers to over 1.3 million of the most vulnerable households in Yemen.

78. In 2017, 58 countries were supported through 599 emergency surge missions, with the largest share in support of countries in South Asia (30 per cent), followed by Eastern and Southern Africa (21 per cent) and the Middle East and North Africa (17 per cent). The UNICEF Emergency Response Team undertook 58 missions, totalling 2,001 days.

79. UNICEF led the global WASH, nutrition, and education clusters and the child protection area of responsibility. The global cluster rapid response teams supported 24 countries through 79 deployments and provided remote support to over 40 countries. UNICEF maintained its status as an active and valued member of IASC, contributing on topics such as strengthening the humanitarian-development nexus, financing and inclusion of persons with disabilities.

80. Humanitarian response in conflict-related crises was challenged by escalating violence in civilian areas and limited access due to insecurity or the denial of humanitarian access. Such restrictions posed significant challenges to the response in Myanmar, especially in education and WASH. In Mali, insecurity and access constraints hampered the timely implementation of programmes, so that education interventions reached only 38 per cent of conflict-affected children and access to water was provided to only 43 per cent of the target population. Increasing attacks against humanitarian staff and the spread of armed conflict challenged the response in the Democratic Republic of the Congo, which, along with underfunding, resulted in underachievement in WASH, education and child protection.

81. Further details on humanitarian situations affecting children in 2017, the UNICEF humanitarian response, key challenges and lessons learned are available in the annual report on UNICEF humanitarian action. In line with the lessons outlined there and in the Strategic Plan, 2018–2021, UNICEF is striving to enhance efficiency and effectiveness for humanitarian results and advance ongoing humanitarian and development reforms.

I. Gender equality

82. UNICEF, with partners, has made substantial progress towards ending child marriage, advancing girls’ secondary education, promoting gender-responsive adolescent health and addressing gender-based violence in emergencies. These four priorities have brought attention to the interlinked forms of gender inequality faced by adolescent girls, helping to catalyse global and local investment and action.

83. In 2017, 86 per cent of countries included results on at least one of the four targeted Gender Action Plan priorities, up from 75 in 2014. Approved national action plans to address child marriage were in place in 37 countries, while UNICEF and partners reached at-risk girls with interventions to strengthen service-delivery systems, including for education and health care. With UNICEF support, 60,947 survivors of gender-based violence, both women and girls, accessed safe spaces in Lebanon, and over 10,600 accessed services in Iraq.

84. UNICEF leadership on gender-based violence in emergencies focused on global partnerships and field implementation. The organization co-chaired, with UN-Women, the international organizations group of the Call to Action on Protection from Gender-Based Violence in Emergencies, and led the roll-out of the IASC Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action.
85. The results on gender equality and lessons learned are detailed in the annual report on the implementation of the UNICEF Gender Action Plan, 2014–2017. Under the Gender Action Plan, 2018–2021, UNICEF will aim to enhance its impact regarding the empowerment of adolescent girls and the advancement of gender equality.

### III. Strengthening organizational performance

86. In 2017, UNICEF achieved most of the Strategic Plan targets relating to organizational efficiency and effectiveness and results-based management.

#### Figure XX
**Achievement in organizational efficiency and effectiveness, 2017**

87. UNICEF made important efficiency gains in 2017, demonstrating value for money. Improved contract and compliance management, operational efficiencies and new resources to enable better decision-making yielded $1.65 million in travel savings. The transfer of business processes, including for payroll and medical data, to the UNICEF Global Shared Services Centre resulted in savings of close to $3 million, while improvements and simplifications, including in customer care and staff onboarding, yielded additional savings.

88. UNICEF has been an active participant in the inter-agency harmonization of business processes, including human resources and financial management and information and communications technology services and procurement. Participation in the United Nations Development Group’s Joint Business Operations Strategy enabled UNICEF to leverage economies of scale, generating savings of more than $600,000 annually for country offices.

89. In line with the 2016 quadrennial comprehensive policy review of operational activities for development of the United Nations system (QCPR; General Assembly resolution 71/243), and as a member of the United Nations country team, UNICEF supports country-level efforts to promote coherence and provide integrated support for the implementation of the Sustainable Development Goals, and participates in
inter-agency missions to strengthen the roll-out of the Goals at the national level and support national Governments in prioritizing targets that focus on the most vulnerable populations.

90. To ensure the global availability and local delivery of essential supplies for children, UNICEF, in 2017, procured $3.46 billion in supplies and services. This included $1.44 billion worth of supplies delivered to 110 countries through Procurement Services, a development cooperation mechanism that provides access to essential supplies at more affordable prices than on the open market. Supply chain and market influencing strategies across such key commodity groups as vaccines, bed nets, medicines, freight and insurance services has led to an estimated $380 million in cost avoidance. Cumulative savings since 2012 have reached $2 billion.

91. In accordance with QCPR mandates, 87 per cent of offices conducted at least one evaluation during the period 2015–2017, and exceeded the targeted 80 per cent for 2017. The quality of UNICEF evaluations increased: of 88 evaluations, 15 per cent were rated highly satisfactory compared with 6 per cent in 2016; 57 per cent satisfactory; and none unsatisfactory. The proportion of programme funds expended on evaluations increased from 0.5 per cent in 2015 to 0.7 per cent in 2017.

92. UNICEF issued 27 audit reports and three advisory reports in 2017, generating 240 agreed recommendations to strengthen governance, risk management and controls, and drawing thematic lessons for improvement. At the end of the year, just two offices had recommendations outstanding for more than 18 months, meeting the milestone of fewer than 10 offices. During 2017, 69 investigations were closed, 67 per cent within nine months of receipt of the allegation.

93. UNICEF updated its audit approach, focusing on key risks and deploying data analytics. Further details are provided in the Office of Internal Audit and Investigations 2017 annual report to the Executive Board (E/ICEF/2018/AB/L.2).

IV. Implementation strategies

94. UNICEF continued to implement a mix of strategies to achieve results, depending upon context. Capacity development and evidence generation were used in nearly all country contexts. South-South cooperation, further operationalized in 2017 as a strategy to reach vulnerable groups and deliver on the 2030 Agenda for Sustainable Development, expanded towards more strategic programmes and the systematic documentation of good practices. Countries in humanitarian situations continued to use service delivery as a key strategy.
UNICEF drew on its comparative advantage in service delivery, which stems from (a) its experience in supporting the provision of quality services for children; (b) the development of approaches that facilitate scaling up; and (c) the adoption of relevant policy options, in both development and humanitarian situations, with an emphasis on leaving no child behind. In 2017, UNICEF worked to strengthen the capacities of policymakers, national institutions, civil society, communities, families and individuals for planning, managing and using services and, in humanitarian settings, to bolster emergency preparedness and response.

UNICEF leads in generating evidence on the situation of children worldwide. Work on the collection, analysis and dissemination of internationally comparable data on children continued, with an emphasis on disaggregated data to illuminate the situation of the most vulnerable. Notable 2017 research outputs included a global data-driven report on violence against children; evidence on cash-plus interventions in sub-Saharan Africa through the Transfer Project; a report card on the child-related Sustainable Development Goals in high-income countries; the State of the World’s Children report on children in the digital age; demographic work on sub-Saharan Africa; and several reports on migrant and refugee children.

UNICEF remained one of the three most-trusted humanitarian organizations and the most-trusted children’s organization, reaching 1 billion people around the world while engaging over 60 million to take action for children. In 2017, the #ChildrenUprooted, #EndViolence, early child development, World Children’s Day and Humanitarian Advocacy campaigns integrated advocacy, public engagement, fundraising, branding and communications efforts. UNICEF country and regional offices and National Committees leveraged the organization’s position as an expert.
on the situation of children worldwide in their advocacy for policies and investments benefiting children.

98. UNICEF deepened public-sector partnerships for effective programme implementation and advocacy, working with civil society organizations, United Nations entities and international organizations. Highlights included strategic partnership frameworks with the World Bank and the Islamic Development Bank; the Universal Health Coverage Forum, organized with Japan, the World Bank and WHO; and an economic and technical cooperation agreement with China. Engagement with emerging development assistance offices, including the Brazilian Cooperation Agency and the Romanian International Development Cooperation Agency, mobilized new partners for technical assistance and funding.

99. UNICEF partnerships with the private sector played a key role in achieving results for children. In 2017, the longstanding partnership with H&M and the H&M Foundation on early childhood development and children’s rights in the garment industry expanded to include a new focus on young children with disabilities, while partnerships with the LEGO Group and the LEGO Foundation, Procter & Gamble and FC Barcelona continued.

100. UNICEF accelerated results for children through innovation, with a vast network of public- and private-sector partners. The Global Innovation Centre supported some 90 countries to improve programme results by adapting innovative solutions to local contexts. U-Report (with 1.5 million new users, totalling 4.6 million) and RapidPro (in 51 countries, up from 37 in 2016) expanded in 2017, with applications in natural disasters and public health campaigns.


V. Revenue, expenses and resource mobilization

102. Total revenue increased by 27 per cent in 2017, to $6,577 million. Regular resources increased by 8 per cent, to $1,424 million, while other resources increased by 33 per cent, to $5,153 million. Consequently, regular resources as a proportion of total revenue fell from 25 per cent to 22 per cent.

Table 1

<table>
<thead>
<tr>
<th>Revenue source and type, 2016 and 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Millions of United States dollars)</td>
</tr>
<tr>
<td>Source of revenue</td>
</tr>
<tr>
<td>---------------------------------------</td>
</tr>
<tr>
<td>Regular resources</td>
</tr>
<tr>
<td>Government</td>
</tr>
<tr>
<td>Private sector</td>
</tr>
<tr>
<td>Other revenue</td>
</tr>
<tr>
<td>Total — regular resources</td>
</tr>
</tbody>
</table>

3 Financial information is unaudited.
### Table 2

**Revenue source, 2016 and 2017**

(Millions of United States dollars)

<table>
<thead>
<tr>
<th>Source of revenue</th>
<th>2016 actual&lt;sup&gt;a&lt;/sup&gt;</th>
<th>2017 actual</th>
<th>2016 plan&lt;sup&gt;b&lt;/sup&gt;</th>
<th>2017 plan&lt;sup&gt;c&lt;/sup&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Other resources (regular)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Government</td>
<td>1 053</td>
<td>1 529</td>
<td>1 083</td>
<td>895</td>
</tr>
<tr>
<td>Private sector</td>
<td>614</td>
<td>816</td>
<td>826</td>
<td>268</td>
</tr>
<tr>
<td>Inter-organizational arrangements</td>
<td>192</td>
<td>681</td>
<td>304</td>
<td></td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td>1 859</td>
<td>3 026</td>
<td>2 281</td>
<td></td>
</tr>
<tr>
<td><strong>Other resources (emergency)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Government</td>
<td>1 690</td>
<td>1 761</td>
<td>1 235</td>
<td></td>
</tr>
<tr>
<td>Private sector</td>
<td>160</td>
<td>188</td>
<td>90</td>
<td></td>
</tr>
<tr>
<td>Inter-organizational arrangements</td>
<td>165</td>
<td>178</td>
<td>114</td>
<td></td>
</tr>
<tr>
<td><strong>Subtotal (rounded)</strong></td>
<td>2 015</td>
<td>2 127</td>
<td>1 439</td>
<td></td>
</tr>
<tr>
<td><strong>Total — other resources</strong></td>
<td>3 874</td>
<td>5 153</td>
<td>3 721</td>
<td></td>
</tr>
<tr>
<td><strong>Total revenue (rounded)</strong></td>
<td>5 191</td>
<td>6 577</td>
<td>5 033</td>
<td></td>
</tr>
</tbody>
</table>

*Note: Due to rounding, the totals may differ slightly from the sum of the columns.

<sup>a</sup> Restated to reflect change in accounting policy.

<sup>b</sup> According to financial estimates provided to the Executive Board in September 2016.

<sup>c</sup> According to financial estimates provided to the Executive Board in September 2017.

103. The reason for the large variance between “plan” and “actual” for 2017 is that the planned figures reflect the best estimate of UNICEF of the funding required for the planned annual expenditure, whereas the actual figures reflect the revenue recognized during the year in compliance with the organization’s accounting policy. In 2017, UNICEF revised its accounting policy to recognize revenue in the year an agreement is signed, even for multi-year agreements. Given that significant multi-year agreements were signed in 2017, the actual revenue significantly exceeded the planned revenue.

104. Revenue for humanitarian assistance or other resources (emergency), at $2.1 billion in 2017, was more than the planned amount, and 6 per cent higher than
in 2016. The humanitarian funding requirement had increased from $2.1 billion in January 2014 to $3.79 billion by December 2017, and other resources (emergency) revenue is projected to increase in 2018 as compared with 2017.

105. In 2017, 142 Governments contributed to UNICEF resources. Total public-sector revenue (from Governments, intergovernmental organizations and inter-organizational arrangements), came to $4.7 billion, an all-time record, 46 per cent more than the Strategic Plan estimate for 2017 and 29 per cent more than for 2016. The three largest public-sector partners to UNICEF in 2017 for contributions received were the United States of America ($815.3 million), the United Kingdom of Great Britain and Northern Ireland ($520.9 million) and the European Commission ($500.4 million).

106. Thematic funds allow for long-term planning, sustainability and savings in transaction costs for both UNICEF and its resource partners. The largest public-sector contributors to thematic funding pools in 2017 were Norway, Sweden, the Netherlands and Denmark, while the largest private-sector contributors were the German Committee for UNICEF and the United States Fund for UNICEF.

107. Private-sector revenue (from National Committees, individual donors, non-governmental organizations and foundations), at a record-breaking $1.70 billion net, was 2 per cent more than planned and $314 million, or 22 per cent more than in 2016.

108. The breakdown of programme expense by outcome area reflects the cost of services and consumable goods received by UNICEF as well as programme supplies delivered to programme partners during 2017.

109. Total humanitarian expenses amounted to $2.86 billion, or 52.6 per cent of total 2017 expenses; $2.06 billion of this amount was other resources (emergency). Of the 30 country offices with the largest overall expenses, 27 had humanitarian action for children appeals in 2017; these 30 offices accounted for 80 per cent of total country office expenses (humanitarian and non-humanitarian) and 88 per cent of all humanitarian expenses at the field level.

110. Details of the Integrated Results and Resources Framework are described in E/ICEF/2018/9/Add.1.
**Figure XXII**

**Direct programme assistance by outcome area and resource type, 2014–2017**

<table>
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</thead>
<tbody>
<tr>
<td></td>
<td>Regular resources</td>
<td>Other resources (regular)</td>
<td>Other resources (emergency)</td>
<td>Total</td>
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<tr>
<td>Health</td>
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<td>729</td>
<td>250</td>
<td>1 229</td>
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<tr>
<td></td>
<td>223</td>
<td>717</td>
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<td>1 278</td>
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<tr>
<td></td>
<td>221</td>
<td>886</td>
<td>281</td>
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<td></td>
<td>235</td>
<td>873</td>
<td>266</td>
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<td>HIV and AIDS</td>
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<td>34</td>
<td>46</td>
<td>5</td>
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<tr>
<td>WASH</td>
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<td>727</td>
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<tr>
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<td>110</td>
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<td></td>
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<td>136</td>
<td>341</td>
<td>542</td>
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<tr>
<td>Nutrition</td>
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<td>245</td>
<td>484</td>
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<td></td>
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<td>274</td>
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<td></td>
<td>114</td>
<td>241</td>
<td>311</td>
<td>665</td>
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<tr>
<td>Education</td>
<td>135</td>
<td>508</td>
<td>182</td>
<td>826</td>
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<td></td>
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<td></td>
<td>163</td>
<td>498</td>
<td>542</td>
<td>1 203</td>
<td></td>
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<tr>
<td>Child protection</td>
<td>145</td>
<td>218</td>
<td>150</td>
<td>514</td>
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<td>243</td>
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<td>690</td>
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<tr>
<td>Social inclusion</td>
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<td>96</td>
<td>21</td>
<td>242</td>
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<td>132</td>
<td>159</td>
<td>123</td>
<td>413</td>
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</tbody>
</table>

**Note:** Data as at 27 March 2018. Due to rounding, the totals may differ slightly from the sum of the columns.

## VI. Lessons learned

111. Several cross-cutting lessons emerged or were reconfirmed in 2017. Many are reflected in the Strategic Plan, 2018–2021. UNICEF noted the need for more-
integrated, multi-sectoral programming to advance progress for children in a range of areas, including reducing HIV infections; delivering cash assistance in emergencies; improving child survival, growth and development by addressing social determinants and factors that keep the most vulnerable children, such as adolescent girls from marginalized groups, out of school and providing them with opportunities to learn; and using integrated advocacy, communications and fundraising efforts to promote policies and investments that benefit children.

112. Recent experience, including in work on health, HIV, nutrition, education and gender, highlighted the importance of an increased focus on adolescence, with targeted, resourced and evidence-based programming to address unmet needs and build upon progress made in the first decade of life. The Strategic Plan, 2018–2021 notes adolescents’ potential to become powerful agents of change, and calls for UNICEF to support the greater prioritization of their needs in national policies and systems and programmes that enhance their civic engagement.

113. Engaging communities has been highlighted as a key strategy to effect change in such areas as health, HIV, WASH and humanitarian response, including through communication for development. Successful initiatives, such as community-led total sanitation and HIV-related community interventions, that have improved service quality and retention in care demonstrate the importance of this approach, as does the gap in the achievement of HIV-related knowledge and behaviour change among adolescents. The Strategic Plan, 2018–2021 strengthens the focus on strategies that address demand-related barriers and engage children and communities.

114. Another lesson is the need to strengthen national systems to assist the most disadvantaged children, including through strong data management and use, and to scale up equity-focused programming and advocacy. To reduce stunting and other forms of malnutrition, UNICEF has noted the need to support nutrition programming at scale. Lessons from child protection indicate that scaling up action to address violence against children will require work on systemic factors, including by prioritizing social service strengthening.

115. Stronger systems, risk-informed programming and business continuity planning have also emerged as key factors in emergency preparedness, response and recovery. Challenges relating to health, as in immunization programmes, were tied to the strain that public health emergencies place on health systems. Experience with WASH-related health crises, such as cholera, demonstrated the need to adjust programming strategies, while the growing experience of UNICEF with cash transfers in humanitarian contexts highlighted the need to strengthen social protection systems to respond to crises. These efforts contribute to the overall drive for greater coherence and complementarity between humanitarian and development work.

116. Going forward, UNICEF will strengthen public- and private-sector partnerships as a key strategy for delivering results. At the country level, UNICEF will continue to work in partnership with national Governments, affirming their primary responsibility for guiding their countries’ development and coordinating assistance in accordance with national strategies and priorities. In line with the common chapter of the Strategic Plan, 2018–2021, this includes continued efforts to enhance coordination with other United Nations agencies to leverage that collaborative advantage into greater efficiency and effectiveness, accelerating the implementation of the 2030 Agenda to realize children’s rights and shape sustainable progress that leaves no one behind.
VII. Draft decision

The Executive Board

1. Takes note of the annual report for 2017 of the Executive Director of UNICEF, including the report on the implementation of the quadrennial comprehensive policy review of operational activities for development of the United Nations system (QCPR) and achievements against the Integrated Results and Resources Framework of the UNICEF Strategic Plan, 2014–2017 (E/ICEF/2018/9 and Add.1), the table on the implementation of the QCPR, 2017 (UNICEF/2018/EB/7) and the data companion and scorecard;

2. Takes note of the UNICEF report on the recommendations of the Joint Inspection Unit (E/ICEF/2018/11);

3. Decides to transmit the above-mentioned reports to the Economic and Social Council, along with a summary of the comments and guidance of the Executive Board.