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Draft multi-country programme document**

Pacific Island countries

Summary

The draft multi-country programme document (MCPD) for the Pacific Island countries is presented to the Executive Board for discussion and comment. The draft MCPD includes a proposed aggregate indicative budget of $58,450,000 from regular resources, subject to the availability of funds, and $144,747,000 in other resources, subject to the availability of specific-purpose contributions, for the period March 2023 to December 2027.

* E/ICEF/2023/1.
** In accordance with Executive Board decision 2014/1, country programme documents are considered and approved in one session, on a no-objection basis. This draft multi-country programme document (MCPD), and a costed evaluation plan, will be presented to the Executive Board for review from 15 November to 5 December 2022. The final MCPD will be posted to the Executive Board web page in English six weeks in advance of the 2023 first regular session and in the other designated languages four weeks in advance.
Programme rationale

1. Spread over 30 million square kilometres, the 14 Pacific Island Countries and Territories (PICTs)\(^1\) have culturally diverse populations, high levels of environmental vulnerability and limited income sources, which challenge their ability to ensure sustainable and equitable human development. They face unique challenges and opportunities, including the region’s growing strategic geopolitical importance. Fiji, Samoa, Solomon Islands and Vanuatu account for over 80 per cent of the total population, which is estimated at 2.55 million, contrasting with Niue and Tokelau, each having less than 2,000 people.\(^2\) An estimated 14 per cent of the total population are aged between 0–5 years and 40 per cent aged under 18 years.\(^3\)

2. Five PICTs (Kiribati, the Marshall Islands, the Federated States of Micronesia, Solomon Islands and Tuvalu) were classified as having high institutional and social fragility in 2022,\(^4\) and most PICTs are constrained in their capacities to deliver equitable social services, particularly to isolated communities and the growing number of informal settlements.

3. These structural challenges are compounded by the extreme vulnerability of the Pacific to recurrent natural disasters and climate-related shocks, including floods, droughts, tropical cyclones and underwater volcanic eruptions. Climate-related disasters and a rising sea level have direct economic and social consequences and have an impact on access to safe water, sanitation, health care and education, and threaten agriculture, thereby exacerbating food insecurity and potential population movements.

4. The countries and territories in the Pacific were not spared from the impact of the coronavirus disease 2019 (COVID-19) pandemic, with most borders closed until 2022 to prevent transmission, which decimated income from tourism, reduced remittances and constrained activities dependent on imported skills. The Pacific region’s gross domestic product is estimated to have contracted by 1.5 per cent in 2021 primarily due to the impact of the pandemic, but is expected to bounce back, with 4.7 per cent growth in 2022.\(^5\)

5. While individual countries/territories have demonstrated progress and individual targets have been met, overall, the Pacific region is not on track to reach any of the Sustainable Development Goals,\(^6\) with major gaps relating to poverty eradication and social protection systems (Goal 1), decent work and economic growth (Goal 8), reduced inequalities (Goal 10), sustainable cities and communities (Goal 11), responsible consumption and production (Goal 12) and climate action (Goal 13). While in most PICTs the analysis of progress is constrained by a lack of updated data, available information across all key development indicators shows that children living in rural or remote island locations lag significantly behind those living in urban areas.

\(^1\) The Pacific Island multi-country programme comprises 14 states: the Cook Islands, Fiji, Kiribati, the Marshall Islands, the Federated States of Micronesia, Nauru, Niue, Palau, Samoa, Solomon Islands, Tokelau, Tonga, Tuvalu and Vanuatu.


\(^3\) Secretariat of the Pacific Community (SPC) estimates, 2021.


6. Recent information on poverty rates is limited to Fiji (24.1 per cent), the Marshall Islands (7.9 per cent) and Vanuatu (15.9 per cent), with 2019–2020 findings indicating that rates had increased marginally in Vanuatu. However, across PICTs, poverty is expected to have increased due to the economic impact of the pandemic. Children, young people and women are particularly vulnerable to poverty, with rates higher than the national averages.

7. While several PICTs have made progress since 2017, the absence of comprehensive and shock-responsive social protection systems that target those most in need is a significant gap. However, the increasing use of social protection, particularly cash transfers, in the government-led COVID-19 response and recovery packages, indicates stronger political will.

8. In health, considerable progress has been made over the past 20 years, however Sustainable Development Goal 3 – to ensure healthy lives and well-being for all – is not likely to be achieved by Kiribati, the Marshall Islands, the Federated States of Micronesia, Nauru, Tuvalu and Vanuatu. Only the Marshall Islands, the Federated States of Micronesia, Solomon Islands, Tonga and Vanuatu are yet to surpass the Sustainable Development Goal target for maternal mortality. All 14 PICTs have achieved or are on track to achieving the neonatal mortality target. Eight PICTs have achieved the Sustainable Development Goal target for child mortality, and of those that have not, only Kiribati is not on track. National immunization rates are relatively high, with the Federated States of Micronesia, Samoa and Vanuatu having the lowest levels. However, the coverage varies considerably between rural areas, remote outer islands and urban areas.

9. Despite this health-related progress, significant challenges remain. Up to one third of children in the Marshall Islands, Solomon Islands and Vanuatu are stunted, and more than 50 per cent of children aged 5 to 18 in the Cook Islands, Kiribati, the Marshall Islands, the Federated States of Micronesia, Nauru, Niue, Palau, Samoa, Tonga and Tuvalu are overweight.

10. While most PICTS have a relatively high health workforce density, the workforce data do not factor in distribution – particularly among isolated island communities – nor the expertise required to meet the growing challenges of an increase in non-communicable diseases.

11. The Cook Islands, Nauru and Tuvalu have reached universal access to basic water services, and Fiji, Tokelau and Vanuatu are close to achieving universal access. However, this progress is at risk of reversal due to the impact of climate change and recurrent disasters. Rural/urban disparities remain significant, with an estimated 377,000 people lacking at least basic drinking water services, mostly in rural areas. Recent surveys in Fiji, Kiribati, Samoa, Tonga and Tuvalu found levels of the population drinking contaminated water ranging from 45 per cent to 91 per cent. Nearly 30 per cent of the population in PICTs is estimated to lack at least basic sanitation services, the majority in rural areas, and an estimated 387,000 people practice open defecation. While significant information gaps exist on water, sanitation and hygiene (WASH) in schools and health-care facilities, the available data indicate low coverage.

12. Access to early childhood education has increased in most PICTs, particularly for children in the year before entering primary school. Participation rates exceed 90

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8 Available at https://mics.unicef.org/surveys.
per cent in Fiji, the Cook Islands, Kiribati, Nauru, Tonga, and Tokelau, but are 60 per cent or less in the Marshall Islands\textsuperscript{10} and Samoa.\textsuperscript{11}

13. Universal or near-universal primary school enrolment has been achieved in many countries, with gross enrolment ratios exceeding 100 per cent in 11 PICTs and net enrolment rates at or above 100 per cent in five.\textsuperscript{12} However, the Marshall Islands and the Federated States of Micronesia have seen recent decreases in enrolment rates, with the net enrolment rate decreasing from 82 per cent to 70 per cent between 2017 and 2020 in the Marshall Islands\textsuperscript{13} and from 82 per cent to 76 per cent between 2019 to 2020 in the Federated States of Micronesia.\textsuperscript{14} The high national enrolment rates, however, mask subnational variations in some countries. Enrolment in most countries drops significantly at secondary level and does not account for those children who drop out partway through secondary school. The unavailability of nearby schools in remote areas is a key barrier, particularly at secondary level.

14. While there has been a general improvement in learning outcomes in the Pacific region, a significant proportion of children in both Grades 4 and 6 are failing to meet the minimum proficiency in literacy and numeracy, with data from 2021 showing further sharp declines.\textsuperscript{15} The closure of schools in response to COVID-19 further aggravated learning challenges and demonstrated the need for a more resilient education system. It highlighted the potential for digital learning but also indicated the stark disparities within and between PICTs in students and teachers having access to electricity, computers and connectivity.

15. Most PICTs have achieved near gender parity in enrolment at primary level, except for Kiribati and Samoa, which have slight disparities in favour of girls.\textsuperscript{16} Girls tend to outperform boys at primary and secondary levels in PICTs,\textsuperscript{17} although academic achievement is not reflected in increased financial empowerment and access to livelihoods for young women.\textsuperscript{18}

16. Despite countries reporting different options for the education of children with disabilities, few routinely collect and publish disability-disaggregated school enrolment data, with the evidence available suggesting very low participation rates. Promoting inclusive education is high on the political agenda, with many PICTs having legislated against discrimination in enrolment or attendance on the basis of disability, or introduced supplementary policies on inclusive education.\textsuperscript{19}

17. Several PICT governments have recently made progress in strengthening the legal and policy frameworks for child protection, but across countries, the social welfare workforce is limited. Most existing staff were not trained on child protection social work until UNICEF provided a five-week course and placed technical advisers

\textsuperscript{10} UNESCO Institute of Statistics, \url{http://sdg4-data.uis.unesco.org}, accessed on 27 October 2022.
\textsuperscript{11} Samoa Demographic and Health Survey Multiple Indicator Cluster Survey (DHS-MICS) 2019–20.
\textsuperscript{12} SPC Educational Quality and Assessment Programme, based on most recent available nationally supplied data (for 2019 or 2020).
\textsuperscript{14} Federated States of Micronesia National Department of Education, FSM Education Indicators: 2020, version 3.
\textsuperscript{16} Kiribati Education Management Information System, 2020; SPC, Educational Quality and Assessment Programme, 2021.
\textsuperscript{17} SPC, Pacific Islands Literacy and Numeracy Assessment 2021 Briefing Note, 2022.
\textsuperscript{18} Ibid.
\textsuperscript{19} UNICEF, Regional Inclusive Education Review, draft (2021).
in the relevant government ministries between 2019 and 2022. Most countries do not have case management procedures or standards for child protection service providers.

18. Customary kinship and family support systems across the Pacific remain important sources of care and protection for children. Despite these systems, children continue to experience violence, abuse and neglect at home, in schools, in their communities and online. More than one in five children in some PICTs report being subjected to severe physical punishment.20 The Pacific region has some of the world’s highest rates of gender-based violence, and over one third of girls and women aged 15 to 49 in some PICTs have experienced intimate partner physical or sexual violence.21 The underlying causes are harmful social norms, including the lower status of women and children, the normalization of violence, the prioritization of family and community cohesion over access by victims to justice and support services, along with increasing urbanization and migration, which have resulted in the breakdown of traditional support networks and family separation.

19. Most PICTs have growing populations of adolescents and young people who face diverse challenges, including limited access to sexual and reproductive health services and high rates of obesity and associated non-communicable diseases. Adolescents are at a higher risk of dropping out in upper secondary school and face significant barriers to formal employment opportunities, leading them to seek informal, seasonal, or temporary work, including migratory labour. There is limited data on adolescent mental health across PICTs.

20. The new multi-country programme (MCP) has been informed by the findings of recent evaluations as well as lessons learned from the COVID-19 pandemic response, which highlighted the need to strengthen synergies between emergency response activities and long-term development approaches. The health and nutrition programme evaluation (2022) and the formative evaluation of the three-star approach for WASH in Schools in the Pacific (2021) identified the importance of framing UNICEF contributions as catalytic within a wider change process and complementing the roles of other development actors. These recommendations influenced the strategic programme choices for 2023–2027.

Programme priorities and partnerships

21. The MCP will be implemented as part of the United Nations Sustainable Development Cooperation Framework (UNSDCF) under the coordination of three United Nations country teams, including through joint programmes and collaborative programming. It will be implemented in cooperation with the governments of 11 independent States and three territories, in collaboration with agencies of the Council of Regional Organisations of the Pacific, such as Pacific Islands Forum secretariat, Pacific Community, the Pacific Regional Environment Programme secretariat and the University of the South Pacific. Key partners will include non-governmental, community- and faith-based organizations, media, private sector, academia and donors, including the Governments of Australia, Japan, New Zealand, the Republic of Korea and the United States of America, as well as the European Commission and a number of global movements.

22. The MCP vision is that every child in the Pacific, including adolescents, and especially the most excluded, survives, thrives, learns, is protected and develops to her or his full potential, free from poverty in a safe environment and sustainable climate. This is aligned with the 2050 Strategy for the Blue Pacific Continent of the Pacific Islands Forum along with the 2030 Agenda for Sustainable Development and

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the Sustainable Development Goals, and the UNICEF Strategic Plan, 2022–2025 and Gender Action Plan, 2022–2025. The vision is derived from the theory of change of the UNSDCF, under which UNICEF will contribute to all four outcomes, enhancing its joint and complementary work with other United Nations entities.

23. UNICEF will contribute towards the achievement of the vision by addressing key system-wide barriers to universal coverage of quality essential social services and the realization of children’s rights through:

(a) Strengthening institutional capacities to deliver quality, inclusive (particularly, but not limited to, disability-inclusive) and sustainable services;

(b) Accelerating support towards mitigation and adaptation measures that ensure that infrastructure, social services, communities and individuals are climate-responsive and resilient to crises and natural disasters;

(c) Maximizing opportunities for multisectoral coordination and integrated delivery platforms;

(d) Generating evidence on high-impact, value-for-money interventions through piloting evaluable models in the field, in full partnership with government authorities;

(e) Filling data gaps and strengthening the use of evidence and analyses to inform policy, budgeting and programming;

(f) Leveraging resources and influencing public financing for increased investment in social sectors, particularly on climate-financing opportunities;

(g) Encouraging social and behavioural change to address harmful norms and practices and promote positive ones;

(h) Facilitating South-South cooperation through knowledge exchange and promotion of Pacific regional cooperation.

24. Learning from the experiences of the COVID-19 response, UNICEF will harness the transformational potential of digital technology to provide opportunities for young people to engage in the global economy and for the rapid expansion of service delivery coverage in the vast Pacific region.

25. Across all programming, gender-transformative approaches will be rigorously applied. In collaboration with United Nations partners – particularly the United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women) and the United Nations Population Fund (UNFPA) – UNICEF will actively address the structural causes of inequalities and adopt strategies that seek to challenge and transform social structures, relations, institutions and gender roles. This includes collaboration towards overcoming widespread existing barriers such as access to knowledge and skills; limited services for reproductive health; lack of productive resources for young women and low levels of inclusion in decision-making; and lack of critical age-appropriate actions to address the unacceptable levels of violence against girls within the broader context of gender-based violence initiatives. Partnerships will be expanded with organizations for women and girls, promoting the value and importance of their leadership, voice and agency in sustainable development.

26. Early childhood and adolescence will be addressed both by individual sectors and a coordinated cross-programme approach, maximizing opportunities for integrated delivery platforms. UNICEF will continue to promote the Pasifika Call to Action on Early Childhood Development, supporting governments to develop and operationalize national multisectoral ECD strategies. and will formulate a phase-out
plan for its role as secretariat for the Pacific Regional Council for Early Childhood Development towards full ownership, management and funding from member countries. UNICEF will continue to strengthen the capacity of government institutions and other stakeholders to meaningfully engage adolescents in decision-making and promote initiatives that empower children and adolescents to express their views and act as agents of change in their communities.

27. The consolidation of UNICEF differentiated programming emphasis in each country will allow for the development of operational workplans for each country – contributing to the respective UNSDCF Country Implementation Plans that promote and reinforce multisectoral synergies and ensure geographic programming convergence.

28. With the increasing frequency of climate-induced disasters affecting the Pacific, the MCP will systematically use risk-informed approaches and ensure application of the principles of accountability to affected populations. The MCP will enhance emergency preparedness and response and strengthen the resilience of systems and communities in line with the UNICEF Core Commitments for Children in Humanitarian Action. In emergencies, UNICEF will support direct assistance to affected children and their families as a provider of last resort and continue to assume cluster lead coordination roles in declared emergencies.

Health and nutrition

29. The health and nutrition component will contribute to UNSDCF outcomes 2 and 3 through collaboration with other United Nations entities, particularly with UNFPA, the Food and Agriculture Organization of the United Nations, the World Food Programme and the World Health Organization (WHO), to support governments in the Pacific to strengthen health systems to accelerate progress towards universal access to quality and climate-resilient health and nutrition services that are appropriate, affordable and accessible to children, adolescents and women, especially those in remote settings.

30. Efforts will be made to improve the competency of primary health-care workers, including through team-based approaches, and building technical, managerial and leadership skills of subnational primary health-care teams. UNICEF will continue to work with ministries of health to strengthen health worker engagement with communities, including outreach to remote households, focusing on improving caregivers’ knowledge of essential care practices.

31. Building on assessments of the environmental resilience of primary health-care systems, UNICEF will work with ministries of health, particularly in Fiji, Kiribati, the Marshall Islands, the Federated States of Micronesia, Palau, Samoa, Solomon Islands, Tonga, Tuvalu and Vanuatu, to strengthen the inclusion of climate and other emergency risks in health policies and plans. Technical assistance will be provided to identify solutions to improve the resilience of health facilities and equipment to natural disasters, and to increase the use of renewable energy. Support will be provided to update preparedness plans and UNICEF will pre-position emergency supplies for rapid deployment.

32. UNICEF will undertake budget analyses to advocate with governments for adequate and equitable financing of children’s health services and high-impact interventions, aiming to progressively channel domestic resources towards preventive primary health care.

33. UNICEF will support the revitalization of routine immunization services following a general setback due to the prioritization of COVID-19 vaccination roll-out, including targeted interventions to reach zero or low-dose communities,
particularly in Kiribati, the Federated States of Micronesia, Solomon Islands and Vanuatu. UNICEF will continue to coordinate the Vaccine Independence Initiative through which most PICTs procure childhood vaccines, including newly-introduced vaccines. Options will be explored for this mechanism to be expanded to include procurement of additional essential health and nutrition supplies.

34. UNICEF will accelerate efforts to promote multi-system and multi-stakeholder approaches to reduce stunting and improve the quality of foods, food environments and nutritional practices of children, adolescents and women and ensure household food security. Expanding high-impact nutrition interventions, including micronutrient supplementation, will be prioritized in Fiji, Kiribati, the Marshall Islands, the Federated States of Micronesia, Nauru and Vanuatu, which have the highest burden of malnutrition. UNICEF will support governments to strengthen the existing legislation and regulatory frameworks, or to develop new ones that support the availability and affordability of nutritious foods and regulate the importation and marketing of unhealthy foods. Given the growing prevalence of obesity in children, UNICEF will invest in multisectoral approaches to promote healthy lifestyles and dietary practices, including social and behavioural change initiatives, engagement with private sector food producers and strengthening school nutrition programmes.

Education

35. The education component will contribute to UNSDCF outcomes 1, 2 and 3 through collaboration with other United Nations entities, particularly with the United Nations Educational, Scientific and Cultural Organization and the World Bank, to ensure that more children in the Pacific are developing holistically, learning and building skills and resilience that prepare them for their future, in line with the aims of the Pacific Regional Education Framework (2018–2030) and the Pasifika Call to Action on Early Childhood Development.

36. Towards improved quality ECE, UNICEF will support the development, testing and implementation of curricula, materials and quality standards, and undertake teacher capacity enhancement. UNICEF will emphasize the relevance of early childhood education services, embedding Pacific cultures and values, and holistic learning, including foundational skills, in such services. While the initial focus will be on Fiji, Kiribati, the Federated States of Micronesia, Samoa, Solomon Islands, Tonga, Tuvalu and Vanuatu, UNICEF will be responsive to requests from other countries.

37. To strengthen equitable access to learning and skills that are relevant for the future of work and life, UNICEF will support the modelling and scale-up of “transformed” teaching and learning approaches, including digital learning, with an emphasis on building literacy, numeracy and life skills for the most vulnerable, including children with disabilities. This work will focus on Fiji, Kiribati, the Marshall Islands, the Federated States of Micronesia, Samoa, Solomon Islands, Tonga, Tuvalu and Vanuatu. UNICEF will test gender-responsive interventions that support retention, transition and multiple learning pathways for adolescents in the Marshall Islands, the Federated States of Micronesia, Solomon Islands, Tuvalu and Vanuatu.

38. To strengthen the resilience of education systems, UNICEF will continue to support capacity development for generation and use of data, evidence-based planning, budgeting and financing, and effective partner coordination. Evidence-based budget advocacy will aim to ensure that education sector plans are backed by adequate and well-targeted financial resources that are equitably allocated and efficiently spent, particularly in Fiji, Marshall Islands, Samoa and Tonga where overall education budget allocations are low. Technical assistance will be available
for updating national education sector plans, including embedding early childhood education, equity, risk-informed planning and resilience. This support will focus particularly on Fiji, Kiribati, the Marshall Islands, the Federated States of Micronesia, Samoa, Solomon Islands, Tonga, Tuvalu, and Vanuatu. In addition, UNICEF will support the institutionalization of quality and environmentally sustainable and resilient standards through school improvement planning processes.

39. UNICEF will continue to strengthen institutional capacities to develop and implement multisectoral ECD policies and services. This will include promoting coordinated approaches to ECD, promoting improved information management systems and referral mechanisms, building capacity for better public finance management, fostering evidence-based decision-making and empowering parents, caregivers and communities. The work will focus on Fiji, Kiribati, the Marshall Islands, the Federated States of Micronesia, Samoa, Solomon Islands, Tokelau, Tuvalu and Vanuatu.

**Child protection**

40. The child protection component will contribute to UNSDCF outcomes 2 and 4 through collaboration with other United Nations entities, particularly with the United Nations Development Programme (UNDP), the International Labour Organization (ILO), the International Organization for Migration, UNFPA, UN-Women and WHO, to build a rights-based and integrated protective environment in the Pacific that both prevents and responds to violence, abuse, exploitation and harmful practices against children, including adolescents. Gender-based violence, violent discipline and exposure to online risks are critical issues in all 14 PICTs and will be common entry points for intervention.

41. UNICEF will continue to support an incremental system-strengthening approach to build sustainable, coordinated and well-resourced child protection services, including universal prevention, early intervention services for children at risk and their families, and quality response services, while simultaneously addressing the underlying drivers of protection rights violations. Institutional capacity strengthening will continue, including the development of child protection case management, alternative care and juvenile justice guidelines and procedures; and the development, enhancement and enforcement of laws, multisectoral integrated action plans, regulations and services, particularly in the social welfare, justice, health and education sectors.

42. With significant deficits in qualified social welfare workforces across all PICTs, training in child protection social work will be supported through a combination of a foundational course, accredited by a regional Pacific educational institution, and on-the-job training. In addition to providing support for updating the existing social work undergraduate degree, the aim is to create institutionalized quality education opportunities for para-social workers by establishing an accredited diploma of social work, along with raising the status of the social work profession.

43. Recognizing the high levels of gender-based violence against girls across the region, UNICEF will increase its emphasis on prevention. Since harmful social norms make significant contributions to the perpetuation of violence against children and women, a stronger emphasis will be placed on social and behavioural change initiatives, including stimulating social movements. Working with UN-Women and UNFPA, there will be an increased focus on adolescent girls and boys through promotion of gender-equitable, violence-free and respectful relationships and supporting parents to develop and maintain healthy protective parenting practices and positive relationships with their children. Partnerships will be expanded with
traditional leaders and faith-based organizations to enable community dialogues that are inclusive, build trust and lead to behaviour change.

**Climate-resilient water, sanitation and hygiene**

44. The climate-resilient WASH component will contribute to UNSDCF outcomes 2 and 3 through collaboration with other United Nations entities, particularly with the United Nations Environment Programme (UNEP) and WHO, to support system strengthening – both public and private – to deliver sustainable and climate and disaster-resilient quality water and sanitation services, and to ensure that children and their families have the knowledge, skills and resources to practice safe WASH. UNICEF will promote the engagement of women in planning and overseeing the operations and management of WASH services in their communities.

45. Support for improvements in community and household climate-resilient WASH infrastructure, services and behaviours – including reducing open defecation and improving waste management practices – will primarily target countries with major gaps, including Kiribati, the Federated States of Micronesia, Solomon Islands and Vanuatu. To assist them to move to at least a basic and then to a safely managed level of service, UNICEF will support the development of climate-resilient, affordable and safe water and sanitation service delivery models, particularly for small and remote communities and informal urban settlements, and use them to formulate investment cases for leveraging resources. Research into the local drivers and enablers of key WASH behaviours in PICTs and building institutional multisectoral capacities to use the evidence for targeted social and behaviour change will be an important strategy.

46. Towards ensuring that all schools and health-care facilities in the Pacific have adequate and quality WASH services, UNICEF will leverage resources from key development actors to accelerate gender-responsive facility provision, including for menstrual hygiene. Closing the data gaps on WASH in schools and health-care facilities will be prioritized.

47. In collaboration with the regional Pacific humanitarian team, support will be provided for strengthening the capacity of governments to plan for and coordinate climate and disaster-resilient WASH emergency preparedness and delivery of timely and coordinated response, particularly at subnational levels.

**Social policy**

48. This component will contribute to UNSDCF outcomes 1, 2, 3 and 4 through collaboration with other United Nations entities, particularly with ILO, UNDP and the World Bank, to reduce multidimensional child poverty and strengthen the resilience of households to shocks and stress.

49. UNICEF will continue to strengthen national institutional capacities – particularly in the Cook Islands, Fiji, Kiribati, the Federated States of Micronesia, Nauru, Palau, Samoa, Solomon Islands, Tuvalu and Vanuatu – to routinely generate and use disaggregated data on the situation of children, adolescents and women to develop or strengthen social sector policies, strategies and programming. Nine multiple indicator cluster surveys will be supported. UNICEF will continue to promote opportunities for active engagement and dialogue by children and young people in social sector planning.

50. Across all PICTs, UNICEF will undertake analyses of social sector investments for children and advocate for adequate, efficient and effective spending, strengthen public financial management capacities of relevant government authorities and promote budget transparency and accountability.
51. As part of the normative agenda of the UNSDCF, UNICEF will continue to support governments to meet their reporting obligations on key human rights instruments, including the Convention on the Rights of the Child, the Convention on the Elimination of All Forms of Discrimination against Women, the Convention on the Rights of Persons with Disabilities, as well as the universal periodic reviews, and to take forward the ensuing recommendations.

52. UNICEF will support the Cook Islands, Fiji, Kiribati, the Marshall Islands, the Federated States of Micronesia, Niue, Samoa, Solomon Islands, Tokelau, Tonga, Tuvalu and Vanuatu to review and develop national social protection policies. In collaboration with a range of partners, support will be provided to the Cook Islands, Fiji, the Marshall Islands, Niue, Samoa, Tokelau and Tonga to assess and strengthen existing social protection programmes, including their information management systems, with the aim of improving their shock-responsiveness and focus on children, women and the most vulnerable families, along with identifying the need for new mechanisms. UNICEF will advocate for the use of humanitarian cash transfers in emergency responses and will promote the use of existing social protection delivery mechanisms to avoid parallel systems.

Programme effectiveness

53. This component will support effective programme delivery, including planning, monitoring, research and evaluations, and the application of risk-informed and gender-transformative approaches across all programme components, along with operational support to programme delivery, including management of field offices. Under this component, the MCP will coordinate social and behavioural change strategies and the use of innovation and digital approaches to achieve results at scale.

Summary budget table

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<tr>
<th>Programme component</th>
<th>Regular resources</th>
<th>Other resources</th>
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<td>Education</td>
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Programme and risk management

54. The MCP will be coordinated as part of the UNSDCF and implemented and monitored in cooperation with the respective governments of the 14 PICTs.

55. Achieving the ambitious UNSDCF and MCP results presents unique challenges and risks. This includes high transaction costs through dealing with scattered populations in 14 countries and territories, the region’s overreliance on development
aid, vulnerability to natural disasters, political instability in some countries, and the limited human and financial capacities within many governments.

56. To mitigate these risks, UNICEF will intensify efforts, as part of the United Nations country teams, on integrating preparedness and risk reduction into regular programming, escalating advocacy for sustained investment in children and social services with Pacific Island governments and development partners. UNICEF will continue to enhance service provision by systematically incorporating accountability to affected populations measures such as participation and community engagement strategies. UNICEF will continue to expand its range of resource partners, particularly those involved in climate change adaptation and mitigation. Environmental and social safety risks, child safeguarding and risks of sexual exploitation and abuse will be mitigated through implementation of prevention and response plans for staff and partners.

57. This MCPD outlines UNICEF contributions to the regional and national development priorities of the Pacific Island Countries and Territories and serves as the primary unit of accountability to the Executive Board. Accountabilities of managers at the country, regional and headquarters levels with respect to country programmes are prescribed in the organization's programme and operations policies and procedures.

**Monitoring, learning and evaluation**

58. The results and resources framework that will be included in the UNSDCF Country Implementation Plans will form the basis for outcome and output monitoring and reporting, which will be sex- and age-disaggregated to the extent possible. Ongoing implementation monitoring will be undertaken jointly with partners in countries. Annual reviews with the responsible government authorities and other partners will be coordinated within UNSDCF processes to assess progress and results achieved, identify opportunities and risks, and make appropriate programming adjustments. Key evaluations, as outlined in the costed evaluation plan, will analyse the effectiveness and sustainability of programme interventions and emergency responses, and used to enable evidence-based decision-making.

59. In addition to supporting the MICS, UNICEF will work with other United Nations agencies to strengthen and support routine monitoring systems, aiming to overcome the many gaps in the collection and analysis of sex- and age-disaggregated data on children and their families.
Annex

Results and resources framework

Pacific Island countries – UNICEF multi-country programme of cooperation, March 2023–December 2027

**Convention on the Rights of the Child:** Articles 2–40, 42 and 44.

**National priorities:** National development strategies/frameworks of 11 countries and 3 territories.

**United Nations Sustainable Development Cooperation Framework (UNSDCF) outcomes involving UNICEF:**

Outcome 1: By 2027, people, communities and institutions are more empowered and resilient to face diverse shocks and stresses, especially related to climate variability impacts, and ecosystems and biodiversity are better protected, managed and restored.

Outcome 2: By 2027, more people, particularly those at risk of being left behind, benefit from more equitable access to resilient, and gender-responsive infrastructure, quality basic services, food security/nutrition and social protection systems.

Outcome 3: By 2027, more people, especially those at risk of being left behind, contribute to and benefit from sustainable, resilient, diversified, inclusive and human-centred socio-economic systems with decent work and equal livelihoods opportunities, reducing inequalities and ensuring shared prosperity.

Outcome 4: By 2027, people enjoy and contribute to more accountable, inclusive, resilient and responsive governance systems that promote gender equality, climate security, justice and peace, ensure participation, and protect their human rights.

**Related UNICEF Strategic Plan, 2022–2025 Goal Areas:** 1–5

<table>
<thead>
<tr>
<th>UNSDCF outcomes</th>
<th>UNICEF outcomes</th>
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<tr>
<td>2 and 3</td>
<td>1. Health and nutrition:</td>
<td>More children, including adolescents, and women, benefit from improved equitable access to and use of quality, high-impact health and nutrition</td>
<td>*Number of high-burden countries reporting a reduction in number of children under 5 years who are stunted. B: Not applicable T: 6</td>
<td>Number of countries with over 50 per cent of children (0–59 months) with diarrhoea receiving oral rehydration salts and zinc.</td>
<td>Ministry of Health (MOH) reports</td>
<td>Governments in targeted countries have strengthened capacities for evidence-based primary health care and nutrition policy, planning and financing. Ministries of Health and their partners demonstrate</td>
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<td>services and practices, including in emergencies.</td>
<td></td>
<td>B: 0 T: 8</td>
<td></td>
<td>strengthened capacities to ensure improved, affordable and equitable quality primary health care services and practices.</td>
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<tr>
<td>*Number of countries with over 90 per cent of surviving infants receiving three doses of diphtheria, pertussis, tetanus vaccine.</td>
<td></td>
<td>B: 7 (2021) T: 14</td>
<td>World Health Organization (WHO)/UNICEF reports</td>
<td>Governments and partners demonstrate strengthened capacities to undertake multisectoral coordinated actions to reduce the triple burden of malnutrition.</td>
<td>Scaling up Nutrition movement, Asian Development Bank (ADB), World Bank</td>
<td>RR  OR  Total</td>
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<tr>
<td>1, 2 and 3</td>
<td>2. Education: More children, including adolescents and those in emergency situations, are developing holistically,</td>
<td>*Number of countries with participation rates in organized learning (one year before the official primary entry age) over 85 per cent.</td>
<td>Education Management Information Systems (EMIS)/MICS</td>
<td>Pacific education systems have improved capacity to deliver inclusive quality early childhood education and learning.</td>
<td>Ministries (or equivalent) of Education, UNESCO, World Bank, ADB Secretariat of</td>
<td>7 000 35 350 42 350</td>
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<td>learning, and building skills and resilience that prepare them for life and their future.</td>
<td>Number of countries with at least 60 per cent of children in Grade 6 achieving a minimum level of proficiency in literacy and at least 80 per cent achieving a minimum level of proficiency in mathematics.</td>
<td>Pacific Islands Literacy and Numeracy Assessment</td>
<td>Pacific education systems have increased capacity to deliver equitable, inclusive, relevant, quality teaching and learning.</td>
<td>Pacific education systems are more resilient, with improved evidence-based and risk-informed plans, policies and coordination mechanisms.</td>
<td>the Pacific Committee (SPC), University of the South Pacific, Pacific Regional Council for Early Childhood Development</td>
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<td>*Number of countries with completion rates over 95 per cent in primary and over 80 per cent in lower secondary.</td>
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<td>B: 5 (2021) T: 7</td>
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<td>B: 4 (2021) T: 8</td>
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<td>EMIS/MICS</td>
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### UNSDCF Outcomes

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<td>Number of targeted countries with at least a 5 percentage point reduction in the percentage of mothers (or primary caregivers) who think that physical punishment is necessary to raise/educate children. B: Not applicable T: 5</td>
<td>MICS</td>
<td></td>
<td></td>
<td>8 500</td>
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| 2 and 3        | 4. Climate-resilient water, sanitation, and hygiene: More children, including adolescents and their families, have equitable access to and use climate-resilient and safely managed water and sanitation facilities and practise safe hygiene behaviours with reduced natural disasters, climate, and environmental risks, including in emergencies. | Number of countries with over 80 per cent of the population using at least basic drinking water, sanitation, and hygiene services.  
B: 3 (2020)  
T: 8 | WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation (JMP) | Governments demonstrate strengthened capacities to ensure improved, climate-resilient and sustainable, safely managed WASH services and adoption of safe hygiene practices.  
Governments demonstrate strengthened capacities to improve the coverage, quality and resilience of WASH services in schools and health-care facilities.  
Governments and their partners have enhanced capacities to plan for and coordinate quality, climate-resilient WASH response emergency preparedness. | Ministries of Health, Education, Water Resources and Utilities.  
SPC, Pacific Region Infrastructure Facility members.  
United Nations Environment Programme, UNDP, WHO  
World Bank, ADB  
Sanitation and Water for All (partnership) | 7 000  
37 210  
44 210 |
| | Number of countries with over 75 per cent of schools having basic drinking water, sanitation, and hygiene services.  
B: 8 (2020)  
T: 12 | JMP |  |  |  | |
| | Number of countries with over 75 per cent of primary health-care facilities having basic drinking water, sanitation, hygiene, waste management, and environmental cleaning services.  
B: 0 (2020)  
T: 5 | JMP |  |  |  | |
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<td>1, 2, 3 and 4</td>
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<td>Number of countries that have increased the percentage of children covered by social protection floors/systems.</td>
<td>Government reports</td>
<td>Governments have strengthened capacities to generate, analyse and use data to reduce multidimensional child poverty.</td>
<td>Ministries of Finance and Planning National statistics offices National human rights institutions ILO, ADB, World Bank</td>
<td>RR: 9 000 OR: 10 000 Total: 19 000</td>
</tr>
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<td>1, 2, 3 and 4</td>
<td></td>
<td>Number of countries that have increased the percentage of total government spending on essential services (education, health, and social protection).</td>
<td>Government budget documents</td>
<td>Governments have strengthened capacities to deliver child-sensitive, gender- and shock-responsive social protection.</td>
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<td>1, 2, 3 and 4</td>
<td>6. Programme Effectiveness</td>
<td>Percentage of country programme results on track or achieved: (a) outcomes and (b) outputs</td>
<td>Insight</td>
<td>Planning, monitoring, and reporting Communication and partnerships Social and behavioural change Climate resilience and emergency</td>
<td>United Nations country team</td>
<td>RR: 19 950 OR: 15 000 Total: 34 950</td>
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*Outcome indicator aligned with the United Nations Sustainable Development Cooperation Framework indicator.

An additional $82.5 million is anticipated in other resources-emergency.