The first two cases of COVID-19 in Angola were confirmed on 21 March and in less than a week, the Government declared a state of emergency. The Angolan Government swiftly introduced mitigation measures, and these, together with the youthful population, have resulted in relatively few deaths. As of 30 December, Angola reported 17,433 confirmed cases with 405 deaths, among which 2,043 cases were children under 19 years of age, with eight deaths. Notwithstanding the WHO classification of Angola as exhibiting a community transmission pattern of moderate incidence in 2020, the pandemic has led to a devastating socio-economic and health crisis.

In its fifth year of recession, the decline in oil prices further strained the economy, which is heavily reliant on oil exports. The economy had been confronting serious financial strains caused by the global drop and volatility of crude oil prices. The burden of debt service (with a debt-to-GDP ratio of 123%), inflation and the devaluation of the local currency added to the financial strain. The World Bank and IMF projected a 4 per cent contraction to the economy in 2020; while for 2021 a partial recovery is forecast, with GDP expected to grow by 3.2 per cent. Research by the African Union shows that the economic impact of the pandemic would be greatest in top oil producing countries. The economic downturn and the measures to contain the spread of the virus have indeed been damaging, especially given the large informal sector.

Angola is a highly unequal country, and inequality has continued to rise in recent years, from a Gini coefficient of 0.43 in 2008 to 0.51 in 2019, (National Institute of Statistics [INE], 2020). This high inequality is particularly worrying in the context of a pandemic, as it can lead to significant social unrest (IMF, 2020). Indeed, the country saw a series of demonstrations in the second half of the year, despite a ban on public gatherings to control the pandemic. In an effort to appease protestors, the President met with disgruntled activists, including young entrepreneurs, youth leaders, civic activists and religious leaders.

Angola ranks 148 out of 189 countries in the Human Development Index (0.58 in 2019), an increase in one position since 2019. However, adjusting the index for inequality leads to a loss of 3 positions in the ranking. The rapid rate of development between 2000 and 2010 decelerated since 2014, and the index is forecast to contract for the first time as a result of the pandemic (UNDP, 2020). Angola also stands among the lowest countries in the world in terms of the Human Capital Index (HCI), largely driven by the persistent and high prevalence of stunting.

The World Bank’s 2020 projections indicate an increase in poverty, from 53.6 per cent in 2019 to 56.4 per cent in 2020. Fifty-four per cent of Angolans are multidimensionally poor, with the rate increasing to 64 per cent among the youngest age group (0 to 9 years old), while the rate among the 10 to 17-year old was even lower at 48 per cent (INE, 2020).

Angola will present its first SDG National Voluntary Review at the 2021 High-Level Political Forum on Sustainable Development. Ensuring equitable socio-economic growth will be key to achieve the Sustainable Development Goals. It would be of strategic importance to invest additional efforts and put in place appropriate monitoring systems to effectively track progress.

Rapid population growth due to a high fertility rate at of 6.2 children per woman and accelerated urbanization at 63 per cent of the population (INE 2019) makes it challenging for service delivery and public investment in the social sector to keep apace, and makes it logistically challenging to serve rural areas with sparse populations. Overall, the allocations to the social sector have been declining over the
last 5 years and are projected to further decline by 13 per cent in real terms for 2021.

UNICEF engaged with the Government to ensure that children’s issues are at the core of the national COVID-19 response strategy. As a result, most of UNICEF’s recommendations like cash transfers as a modality to mitigate socio-economic stress, were included in the strategy. UNICEF Angola took the lead on risk communication and community engagement, while WHO took the lead on health, and UNDP on social protection. UNICEF’s social media platforms emerged as the most trusted sources of information with more than 10 million people reached.

Inevitably, COVID-19 had a major impact on the wellbeing of Angolan children. This was compounded by other emergencies including drought, and measles and polio outbreaks. Implementation of both development and humanitarian action was constrained due to the necessary mobility restrictions introduced by the Government.

Among the most widespread impacts on children resulting from COVID-19 was the closure of all schools. Before the pandemic, 8,767,995 children were enrolled in school (73 per cent of the school age population). Only secondary school students and Grade 6 students of primary school have returned to school since October 2020. As has been well documented, school closure has immediate adverse effects on children’s safety, wellbeing and learning, as well as longer term, negative consequences for socio-economic development. To some extent, this impact was offset by the Ministry of Education’s efforts to roll out distance learning through radio and television. However, only 51 per cent of households own a TV or a radio (DHS, 2015-16) and, therefore, many children, do not have access to these learning platforms. There is global evidence that the onset of COVID-19 has led to an increase in gender-based violence. There was a sharp rise in numbers in Angola as well. According to the Criminal Investigation Service, between January and June 2020, 1,640 cases of sexual violence against women were reported. This is an increase of 77 per cent compared to the same period in 2019. In 2020, 7,283 girls reported having experienced physical, sexual or psychological violence. If we combine data of all children, nearly 15,000 cases of different forms of violence were reported to the National Children’s Institute in 2020.

**Major contributions and drivers of results**

In the first year of the three-year Country Programme (2020-2022), UNICEF adopted an integrated approach to programming looking holistically at the needs of the child in a life-cycle approach - from early years to the second decade of life. The country programme is aligned with the National Development Plan of the Government, and the United Nations Sustainable Development Cooperation Framework.

During 2020, UNICEF Angola had to adapt its plans to the context created by COVID-19 pandemic while continuing to support the Government maintain services for children.

**Child survival and development (zero to five years): the early years**

As the Government of Angola adopted the Every Newborn Action Plan in 2020, UNICEF set in place measures to support its implementation. Responding to outbreaks of polio and measles, UNICEF provided technical, financial and human resource support to the Government’s immunization campaigns. One of the seven polio outbreaks were closed, and children in Cambulo, Lunda Norte Province now live in a polio-free environment. Between January and October 2020, in districts where measles outbreaks occurred, 3,923,505 children under five were vaccinated against polio, 295,986 children against measles, and 2,058,855 children received vitamin A supplement. In addition, a further 601,704 children under one year of age received the third dose of the DTP vaccine.

In collaboration with the Ministry of Health, UNICEF procured life-saving vaccines and other supplies
valued at USD 24 million. This significant logistics achievement was integral to the broader aim to strengthen the supply chain system. UNICEF supported the training of 39 health officers and technicians through the Strategic Training Executive Programme within the immunization supply chain management, and 641 health professionals from 428 health facilities trained on the Supply Chain Management Technological Platform (Logistimo). A total of 32 cold chain equipment sets were installed in Huila, Lunda Norte and Cunene Provinces. A National Vaccine Logistics Working Group was created to support immunization logistics and is now functional.

UNICEF provided technical support to the National AIDS Control Institute and the Reproductive Health programme to improve PMTCT service delivery and uptake with the implementation of bottleneck corrective action plans. UNICEF supported the development, printing and dissemination in Huila province of step-by-step guides for the referral and counter-referral for PMTCT and HIV patients between healthcare services. The HIV focal points from 13 municipalities were trained on the use of the referral guides; 57 health providers were trained in HIV counselling and testing, ART protocols, health information system and referral.

To respond to the impact of COVID-19 pandemic on paediatric ART services, UNICEF implemented a pilot project to support 825 children under five, living with HIV/AIDS and on antiretroviral treatment, to access an integrated social protection intervention package that strengthens the link between social cash transfers and access to essential services.

UNICEF supported the Government of Angola with the screening of 295,187 children under five for malnutrition. Of these, 26,166 children with severe acute malnutrition were admitted for treatment; while children with disabilities suffering from wasting benefited from early stimulation and family support as part of the national protocol for integrated management of acute malnutrition. More than 100 nutrition supervisors and 120 community health workers from Huila, Cunene, Bie and Luanda Provinces received training and personal protective equipment (PPE) to mobilize communities for mother/caregiver-led, mid-upper arm circumference (MUAC) screening, address malnutrition, promote exclusive breastfeeding and food diversification. UNICEF is leading the implementation of mother/caregiver-led MUAC screening.

Fundamental to these results has been community engagement to raise demand for services and promote behaviours required to save children’s lives. Over 12 million people have been reached with critical lifesaving messages on polio, measles vaccines, Vitamin A, COVID-19, infant and young child feeding, health and hygiene practices.

UNICEF’s work to promote exclusive breastfeeding for the first six months of a child’s life increased from 32 to 46 per cent in targeted municipalities.

Among the major underlying contributory factors to diarrhoeal disease in children under 5 years, is poor sanitation. In response UNICEF scaled up its efforts to promote Community led Total Sanitation (CLTS) to end Open Defecation. Nearly half a million people from 451 villages were mobilized by the CLTS programme. In addition, 151,370 people from 293 villages were certified as living in an open-defecation free environment.

UNICEF supported the construction of 6 rainwater harvesting reservoirs – a climate change adaptation – for the benefit of 83,866 people in Huila municipality. Furthermore, 40 water points were rehabilitated and water trucking to schools and health care facilities supported in drought affected provinces. UNICEF provided clean water for 350,396 people, basic sanitation for 187,512 vulnerable people and promoted hand-washing with soap to more than half a million people.

As part of the COVID-19 response, UNICEF also provided critical hygiene materials and PPE to seven provinces, reaching a total of 152,963 people. A total of 70 community leaders and 95 activists
benefitted from CLTS/COVID-19 training.

Birth Registration among children under five in the country rose from 25 to 38.3 per cent (INE 2019). Working with different ministries and systems, UNICEF facilitated the integration of birth registration units in health systems. Birth registration units have been established in 72 hospital maternity yards to make sure every newborn is counted and given a legal identity.

UNICEF collaborated with the Ministry of Education and the Ministry of Justice and Human Rights for the issuing birth certificates for school-aged children in 90 primary schools. Influencing social norms around responsible fatherhood and birth registration have shown positive impact. The reach of the UNICEF-supported mass media campaign has been 15 million, that is almost 50 per cent of the Angolan population. UNICEF will build on these initiatives to support the government’s future investments in line with the National Development Plan for further institutional strengthening, expansion of service delivery, scale up plans, and social mobilization to increase demand for services.

UNICEF supported the National Council for Social Action to work with the government and civil society organizations to draft a National Early Childhood Development (ECD) Policy and revise the 11 Commitments for Children.

UNICEF delivered integrated packages of services for families of children under five. For example, in the ‘Safe Havens’ emergency response to the drought in Cunene, families and communities benefitted from integrated packages of nutrition, health, and birth registration centres provided through common service touchpoints such as schools and health posts. The *Todos Unidos Pela Primeira Infancia* pilot project, supported by UNICEF, strengthened parenting practices of 660 families, benefitting 1,528 children (752 girls) in the Provinces of Bié, Moxico, Úige and Huila.

**Child development, protection and participation: from six to eighteen:**

Nationally, approximately 395,600 children from grade 0 to grade 9 continued to access education during the COVID-19 pandemic thanks to distance learning through TV and radio provided by the Ministry of Education (MED), with technical and financial support from UNICEF. TV classes included Angolan sign language to make them more accessible for children with hearing disabilities. UNICEF worked closely with MED to develop the comprehensive COVID-19 education sector response and developed safe school reopening guidelines.

Under the Child Friendly Schools and ‘Safe Havens’ initiatives, UNICEF worked with provincial education offices in Huíla and Cunene to strengthen the capacities of strategic actors (teachers, principals, parents, government officials, etc.) in student-centred pedagogy, literacy, foundational skills, school management, multi-grade classrooms, and education in emergencies. These skills will contribute to improved school environments and better conditions for a safe return to school.

To strengthen education data and evidence-based planning at national and decentralized levels, UNICEF continued to support MED with technical assistance for the school mapping of Namibe and Huambo Provinces. This involves data collection through mobile devices for each school, including georeferencing, school infrastructure, supplies, numbers of students and teachers, and other quality and equity indicators. The MED is scaling up the school mapping methodology to all provinces through the World Bank-supported Learning For All programme. UNICEF will lead the WASH data analysis component. UNICEF supported the development of tools for the Data Must Speak initiative which uses existing educational data from the EMIS to improve education planning and decision making, particularly at the decentralized level of schools, communities and municipalities.

UNICEF supported the Government of Angola to enhance the service provision for children at risk or survivors of violence. The programme focused on establishing accessible mechanisms to report cases of violence and strengthening procedures that connect relevant sectors for the protection of children.
UNICEF supported the National Children’s Institute (INAC) to roll out a national child protection helpline ‘SOS Criança’ to facilitate the reporting of cases of violence against children, in line with the Government’s commitment to implement the Convention on the Rights of the Child and its additional protocols and address some of the recommendations made to the Angolan State.

There has been an immediate uptake of this new hotline service since the launch on 16 June 2020. According to INAC administrative data, a total of 14,931 children (7,666 female) who experienced violence were reached by health, social work/social services or justice/law enforcement services. UNICEF trained frontline service providers on child protection principles and safe identification and referral and enhanced coordination between national, provincial and municipal levels, in partnership with Child Helpline International. This created the foundations for a functioning and accessible response system; a system that relies on human resources equipped to identify and respond to the specific needs of children exposed to violence.

With UNICEF technical assistance, and in collaboration with the International Bureau of Children Rights, Standard Operating Procedures were developed that highlight roles and accountabilities of each of the sectors that intervene in the child protection response were developed. These were endorsed by Executive Decree; co-signed by five Ministries, namely Justice, Interior, Social Action, Health and Education. This marked a milestone and a clear commitment of the GoA to advance child friendly service delivery in the country in order to address all forms of violence, exploitation and abuse against children and break the cycle of violence.

To further advance protection and justice for children, UNICEF supported the Ministry of Justice to operationalize an innovative one-stop-shop model for child-friendly service delivery for children in contact with the law in the Provinces of Luanda, Huila, Malanje and Moxico. The model integrates the Juvenile Court and the Guardianship Commission for Minors into a single physical space, adapted to ensure child friendly service delivery, including an Integrated Information Management system.

To foster evidence-based decision making, two evaluations were completed for both the EU-funded Birth Registration and Justice for Children Programme and for UNICEF’s contribution to the Education sector in the previous country programme.

**Investing in youth:**
UNICEF supported Bié Province to develop an action plan to operationalize the National Youth Policy, approved in September 2019, through a consultative process. More than 60 adolescents and young people from 36 youth associations from all of Bié's municipalities participated to identify priorities for youth.

The U-report was successfully launched in Angola by the Ministry of Youth and Sports, with assistance from UNICEF and UNFPA. It facilitates youth engagement to speak out on issues that matter to them and enables them to act as agents of change for the communities at large. It also provides a source of reliable and important information.

A public campaign was championed by UNICEF to raise awareness around adolescent health, with a focus on non-communicable diseases, mental health and well-being. UNICEF facilitated the participation of an Angolan young activist in the global launch of the 5-year partnership between AstraZeneca and UNICEF to create a global movement for young people on Non-Communicable Diseases.

Through a partnership with Yale University, the National Institute of Statistics and the National Public Health Institute, a mental health survey was conducted among adolescents and young people. UNICEF supported a self-help group of approximately 100 adolescents living with HIV in Luanda to advocate for broader health issues beyond HIV/AIDS, including continuity of essential health care services.
Strengthening capacities for decentralized convergent social services:
To mitigate the socio-economic impact of the COVID-19 pandemic on families, UNICEF and partners focused their actions at decentralized level. Over 18,000 children under the age of five in six municipalities in the Provinces of Bié, Moxico and Uige benefited from cash transfer top-ups in order to mitigate the negative impact of COVID-19. The programme was launched by the Ministry of Social Action, Family and Women's Promotion (MASFAMU), with assistance from UNICEF and financial support from the European Union. The project is addressing women’s unequal access to financial resources and contributing to women’s financial inclusion; almost 98 per cent of beneficiaries are women caregivers under the age of 35 years.

UNICEF’s project builds on an innovative partnership with three commercial banks (Banco Sol, Banco BAI and Banco Atlântico) with support from the regulator, the National Bank of Angola. The partnership has made inroads towards financial inclusion of young women and the communities at large by providing bank accounts in areas with low levels of identity registrations, a key component of social inclusion and poverty reduction strategies.

UNICEF launched an emergency cash transfer project in Luanda Province, with the support of the Provincial Government and MASFAMU. Over 1,400 children have benefitted so far. The initiative uses mobile payments, an innovative modality in the context of Angola. Efforts to promote financial inclusion of beneficiaries, mostly young female caregivers, were made by providing SIM cards to those who either did not have a phone or who only had access to a phone which belonged to male partners, thereby ensuring payments went directly to them.

In the context of COVID-19, the Centres of Integrated Social Action (CASI) emerged as key platforms for capacity building and inter-sectoral coordination. More than 300 staff from local partners were trained on COVID-19 prevention, design and implementation of socioeconomic mitigation measures through CASI in 6 municipalities of Bié, Moxico and Uige Provinces. These CASI serve a population of approximately 550,000 people and have more than 50,000 registered households. The training materials were developed by UNICEF and MASFAMU, in consultation and coordination with local partners, and combined online and offline features.

The cash transfers projects are all disability inclusive, and disability disaggregated data on both beneficiaries and child recipients is regularly collected. Over 100 children with disabilities have benefitted from these programmes so far.

Civil society partners have actively engaged in local activity planning, coordination and joint implementation with the municipal administrations and the CASI. Young women were involved in community projects implemented by local CSO partners. More than 11,000 women were involved in economic development for women groups, child protection networks and community meetings.

UNICEF engaged the Ministry of Finance (MINFIN) to roll out budget literacy and communication efforts with a focus on youth and children. Five webinars reached over 7,500 online participants. At decentralized level, public finance management activities were implemented in the social sectors, resulting in improved budgeting for sanitation at municipal level, and the development of local integrated budgeted action plans for the CASI in six municipalities for 2021. Two of these municipalities are providing their own resources for integrated actions in at least three social sectors in 2020.
UN Collaboration and Other Partnerships

UNICEF continued to promote interlinkages between local governments and civil society organizations for decentralized social assistance interventions. This was done through joint planning and integrated implementation, as well as online capacity building activities in resource mobilization and human rights, in partnership with World Vision, MASFAMU, INAC and the Provincial Governments of Bié, Uige and Moxico.

UNICEF signed its first ever MoU with the Ministry of Finance, aiming to raise the profile of Public Finance for Children and improve budget literacy with a focus on youth and children.

Civil Society partnerships, namely with People in Need, Lutheran World Foundation, and Salesianos Dom Bosco, in collaboration with provincial governments, municipal administrations and several key ministries (Health, Education, Environment) were key to the implementation of the CLTS programme, and also the nutrition, child protection, health and education emergency-related interventions.

UNICEF worked with WHO and the Ministry of Health in preparing and delivering the vaccination campaigns against polio and measles outbreaks, and with WHO and UNFPA in support of the adoption of the Every Newborn Action Plan. The Vaccine Alliance remained an important partner in our support for routine immunization strengthening in the country.

UNICEF continued supporting a model for non-custodial sentencing of children in Luanda to reduce deprivation of liberty of children in conflict with the law. A total of 113 children benefitted by this UNICEF-supported initiative, implemented in partnership with Salesianos Dom Bosco. As part of the COVID-19 response, this partnership also enabled child friendly services in shelter for 2,170 children (1,048 girls; 1122 boys) without parental care in Luanda Province, and provided 2,330 children and caregivers with community-based PSS and access to safe channels to report cases of sexual exploitation and abuse. With the onset of COVID-19 in the country, UNICEF worked closely with the Resident Coordinator’s Office and sister UN agencies to support the UN’s Strategic Humanitarian Response in Angola. Additionally, UNICEF worked with UNDP on an analytical report on the socio-economic impact of the COVID-19 pandemic in Angola.

Together with parties from the government, national assembly, academia, other UN agencies, private sector and civil society, UNICEF Angola is participating in the Sustainable Development Goals platform. The platform is contributing to the first Voluntary National Review (VNR) in the country, which aims to monitor progress towards achievement of the SDG. The platform plays a crucial role in identifying gaps in implementation, strengthening coordination across the Government and raising awareness about the SDG in Angola. The review is scheduled to be concluded in July 2021. UNICEF continues to enjoy a successful partnership with the private sector bank Banco Fomento de Angola (BFA). The BFA increased their funding to the Safe Havens project in 2020 and expressed their interest to support UNICEF’s intervention to address malnutrition in one high burden province. In addition, financial institutions and the Central Bank of Angola continued to leverage significant commitment to support vulnerable families through the cash transfer projects, even under such the pandemic context and in areas with low levels of identity registration.

Lessons Learned and Innovations

Lessons learned:
Despite the many challenges, the COVID-19 context reinforced a more proactive move towards convergence and intersectoral teamwork at the programmatic level, rather than just geographical juxtaposition. The impact of school closures on children, families and communities and the link between the epidemiological situation and plans for school reopening created new opportunities for
intersectoral coordination and partnership. The increased involvement of the Minister of State for Social Affairs in the COVID-19 response, and the multi-stakeholder technical working group for U-Report, show that the need for integration may be becoming more evident among government partners.

The pandemic necessitated remote working modalities to support communities with service delivery. UNICEF adopted innovative approaches to deliver services, such as payment to vaccinators/supervisors through mobile phone, and remote data collection for nutrition surveys and distance learning.

Municipal administrations and provincial governments have proven to be open to new approaches and have embraced the use of new virtual meeting platforms for capacity building purposes. This allowed, for example, for more than 300 staff from CASI and local partners in Bié, Mexico and Uige Provinces to be trained on COVID-19 prevention and socio-economic mitigation measures. This opens the door for a more flexible and tailored support package to partners at local level, which can be sustained in the future regardless of the emergency level and contribute to efficiency gains.

The COVID-19 crisis provided stark evidence that UNICEF needs to support continued investment in risk-informed programming and disaster risk reduction across multiple sectors. Weak coordination mechanisms and lack of deployable technical resources in many ministries, made rapid response to the pandemic difficult.

COVID-19 can become an opportunity for reviewing public finance aspects with a social lens. It is however important to complement advocacy and capacity building activities at local and central level, joining efforts among key stakeholders including civil society, local and central government, development partners. A practice yielding good results in terms of sustainability has been to depart from the common areas of interest with key government partners, such as MINFIN, with the communication and budget literacy activities focused on youth and children.

In the context of decentralization, national strategies to further simplify birth registration procedures must be coupled with training of the professional workforce, mainstreaming the simplification procedures at all levels. In line with current strategies implemented by Ministry of Justice and Human Rights with support from UNICEF, a pool of trainers was formed at central level for easy deployment to provinces at a regular basis.

The negative impact on essential healthcare delivery and uptake during the first months of the COVID-19 pandemic in Angola, triggered an increased recourse to different cadres of community health workers and community-based organizations to support communities among others in nutrition emergency response. The ADECOS programme led by the Ministry of Territorial Administration that was meant to be expanded progressively across the country stalled as a result of decreased funding. This prompted the Ministry of Health to consider developing a national community health policy and strategy for which a technical working group on community health has been set up with UNICEF as member. UNICEF sourced technical assistance from the University of Oslo to support the Ministry of Health develop a Community Health Information System that will be interoperable with the current DHIS2.

Innovation:
To enhance the accountability of provincial health departments on the correct use of lifesaving nutrition supplies provided to municipalities affected by drought and COVID-19, UNICEF set up a mobile digital platform using the KOBO-Collect application. This enables central and provincial health authorities to ensure timely reporting of nutrition indicators into the routine health management information system, including supply tracking up to the end user. For this to happen, UNICEF procured 260 mobile phones and distributed these to 176 nutrition treatment centres in Huila, Cunene, Bie and Luanda Provinces for data collection and entry to the project information system. This system
enhances the quality, accuracy and timeliness of information concerning undernutrition during the COVID-19 pandemic and related lack of food supplies or loss of jobs by families.

UNICEF and partners were introduced an innovative GIS database to the CLTS monitoring system in Bié Province by reconciling sanitation issues with vulnerability at the village level. These may include women-headed households, households where older adults are responsible for grandchildren because parents died from HIV or left the village in search of livelihood. The system provides a clear map of where we have a vulnerable child with or without services. UNICEF’s interventions in Bié Province include sending life-saving messages to mothers and caregivers through the mHealth platform. The project combines two approaches: sending voice messages with information on neonatal care to mobile phones, and training of traditional birth attendants in safe delivery practices and neonatal care. The service automatically delivers two messages per week on topics like breastfeeding, prevention of diseases, nutrition and hygiene, during the first 6 months of the baby.

UNICEF and partners transformed the COVID-19 context into an opportunity for innovation in the Cash Transfers projects. The projects replaced all paper-based operations with digital processes using offline data collection via tablets to aid the registration, confirmation and payment of beneficiaries. The electronic tools were pre-populated with data from the MIS system and pictures of all beneficiaries. The use of IT tools provided protection against the risk of infection for interviewers and beneficiaries, sped up processes, increased efficiency, enhanced security and mitigated the risk of fraud.

UNICEF adjusted systems and processes in the COVID-19 context to ensure business continuity. Measures included transforming the processes into the e-format, adapting the electronic signatures and DocuSign, adjusted HR emergency procedures. The procedures/controls were discussed at CMT meetings and shared with all staff. UNICEF facilitated teleworking since March 2020; establishing a monitoring system to ensure results delivery as expected and maintain constant contact so that staff are aware of guidelines on international travel during COVID19 and return to duty station, adjustments of salaries and entitlements.