Equatorial Guinea

Update on the context and situation of children

Equatorial Guinea continues to struggle to emerge from the economic recession caused by the 2014 slump in oil prices. According to the IMF, the real GDP decreased by 29% between 2014 and 2019 and experimented a negative growth of 6% for 2020 regarding annual change. The IMF also estimated an inflation rate of 3% and the current account balance of the country, as percentage of the GDP, as –9.6% for 2020. The IMF emphasized the importance of addressing weaknesses in the banking sector to foster financial stability and support the recovery of the non-oil economy and economic diversification and the need to continue making progress on improving the business climate.

With a total estimated population of 1,222,442 (census 2015), it is estimated that around 30,000 households live in vulnerable condition (based on administrative records and information gathering with community leaders). The vulnerable employment is about 77.3% (HDR, 2019), and in the rural areas only 6.6% (HDR, 2018) has access to electricity. Internet access is relatively low (26.2%) (WB, 2017). The country statistical yearbook (INEGE 2017) indicates only 3,055 (0.24%) people had a disability which is significantly lower than WHO's estimate on people living with disability globally (15%). The migrant population, which in 2015 had reached 153,000 people, is at risk of seeing its income significantly affected due to the precariousness linked to informal work.

Equatorial Guinea confirmed its first COVID-19 case in March 2020. As of 15th December 2020, the country had a cumulative total of 5,277 positive cases and has implemented strict preventive measures. Although the Government acted quickly to limit the virus spread, like many other African countries, it has been experiencing an economic downturn which risks reversing development gains in the past decades (World Economic Situation and Prospects 2021).

The Government, in collaboration with UNICEF, WHO and other partners developed an Emergency Plan for Prevention and Contingency. UNICEF has been a key partner for the Government in the COVID-19 response. This work has been done in close collaboration with all line Ministries, UN agencies and NGOs. To respond to the needs and mitigate the pandemic effects on children and adolescents, the Government and UNICEF worked jointly to adjust the signed workplan. Moreover, a Government-UN agencies retreat was organised to readjust the UN Assistance Framework to align it with Government-designed priorities in its 2035 national development agenda. The Government also requested the UN Agencies' support to advocate for the reclassification of Equatorial Guinea in the World Bank ranking. While it is listed as a high middle-income country (GDP per capita US\$8,132), there are still challenges affecting its development.

Furthermore, the CO went through some restructuration because of the increased in national staff salaries (including two years of retroactive payment) and needed to downsize. Nevertheless, the funding mobilised directly by the CO or through the RO provided an opportunity to support the Government's response to the pandemic.

According to the 2020 Human Development Report, Equatorial Guinea's Human Development Index (HDI) for 2019 was 0.592 (0.582 in 2018), placing the country in the medium human development category, positioning at 145 (144 in 2019) out of 189 countries. Despite Equatorial Guinea's progress, the country's HDI for 2019 is below the average of 0.631 for countries in the medium human development group, but above the average of 0.547 for Sub-Saharan Africa.

The production/collection of data to improve the social sector remain a challenge. The pandemic delayed the launch of the household economic survey. The survey focuses on economic and social

vulnerabilities and its completion is expected in 2022. Meanwhile, the existing national data is outdated (DHS from 2011) but remain the main source of information.

In health, the under-five mortality rate is estimated at 81.85 per 1,000 live birth, which is high for a middle-upper income country. The main causes of child mortality remain malaria, acute respiratory infections and diarrhea. Child immunization against preventable illnesses remain inadequate. However, <u>intensifi</u>ed routine immunization activities achieved a <u>national coverage of DTP3 a 64% (61% in 2019)</u>. Equatorial Guinea is still far from the global target to reduce maternal mortality ratio to less than 70 per 100,000 live birth, with 301 deaths per 100,000 live births (HDR, 2017).

Existing nutrition data indicate a misalignment with the economic status of the country (26.2% stunting in children under-five compared to an average of 6.3% for middle-upper income countries. The country heavily depends on food imports (80%); with the closure of borders and restrictions on transport logistics, and the food price inflation, it is likely that child nutritional status has deteriorated, especially in vulnerable households.

Equatorial Guinea has a generalized HIV epidemic with an estimated prevalence of 7.1%, with higher prevalence among women (8,8%) (UNAIDS, 2019). The prevalence among young people and adolescents remains alarming at 3% (compared to 1% in the region). Despite the availability of HIV prevention and treatment services, children and adolescents have less access than adults.

The access to WASH facilities in schools remains inadequate. In pre-primary and primary, over 83% lack potable water while over 35% do not have latrines. It is estimated that more than 220,000 students were affected in their learning cycle and would have lost approximately 26% of the education provided in a normal school year (Socioeconomic impact of COVID-19, 2020). This excludes potential school dropouts caused by a reduction in household income.

Regarding gender equality, the country still faces challenges to ensure women's participation and equal opportunities for leadership in political, economic and public life with 19.2% of seats held by women in the national parliament (compared to 22% in 2019).

Despite UNICEF's advocacy, the three drafted legislations on gender-based violence, code of persons and family and penal code for minors are still pending for approval.

Social protection is limited but with UNICEF's advocacy, the COVID-19 pandemic has created the opportunity to reduce inequities and address actions and relaunch the process of establishment of a social protection system.

Major contributions and drivers of results

The CO entered its second year of the implementation of UNICEF's Country Programme 2019-2023, which is aligned with the National Sustainable Development Plan, Horizonte 2035. The Country Programme focuses on Child Protection and Equity, and Child Survival, Development and Learning to contribute to the SDGs and the Key Results for Children in Immunization, Learning Outcomes, and Birth Registration. To rapidly respond to the pandemic, the CO adapted its 2020 Annual Management Plan, in collaboration with the Government and partners.

The CO contributed to the establishment of a legal and regulatory framework fit for children. While the drafts of the National Policy on Social Protection and the National Plan on Child Rights are pending, the CO continued advocate for the Government to ensure the needed regulatory framework on social protection. Responding to the COVID-19-, Ministry of Social Affairs and Gender Equality, in

collaboration with CO, the Civil Registry (SIREC) and the NGO BiriaElat, developed a digital application for the Single Social Registry (RUS). In its pilot phase, out of 35,788 identified vulnerable families, the application collected data on 25,000 families, including data on gender-based violence.

The current social protection system only reaches a limited proportion of the formal sector in urban areas. However, the COVID-19 pandemic provided an opportunity to reinitiate the process in establishing a more robust system. With support from UNICEF and IMF, the Ministry of Social Affairs and Gender Equality launched its first Social Guarantees Programme (Decree 43-2020) to mitigate the COVID-19 impacts utilising the Government's own funding. The Programme reached the most vulnerable population, targeting 11,118 households, including elderly, children experiencing homelessness and/or children without parental care, families with unemployed parents, female headed households with children, people with disabilities and other vulnerable groups. A total of 12,550 families (out of the 35,788 households in need) benefited from the hygiene kits and food distribution in the first phase. The CO will intensify its advocacy to the Government on the second phase implementation and the piloting of cash transfers in 2021. Furthermore, the CO supported the setup of a safe channel for psychosocial care for children, women and men who experience violence or abandonment by families, in collaboration with national NGOs (BiriaElat, Africa HUNA, and Bocamandja). To date, 19 children (9 boys, 10 girls) and 29 adults (10 males, 19 females) have used the safe channels.

To strengthen the establishment of a National Plan on Child Rights, the CO supported the training of fifty judges and lawyers on sensitization on human rights and children's rights to strengthen capacities in legal intervention with minors. The model of a District Plan for the well-being of children was also discussed with 240 local authorities and community leaders from four districts. The results of the discussions in the four districts will be used to elaborate the National Plan on Child Right by the National Committee.

Regarding gender discrimination and gender-based violence, advocacy was made to keep pregnant students in schools a bilateral high-level meeting with the Vice-Prime Minister for Human Rights and during the sub-regional conference on gender violence. A Joint Declaration on gender-based violence was signed by the representatives of the three participating countries (Cameroon, Gabon and Equatorial Guinea).

The Household Expenditure Survey supported by the World Bank had limited progress because of the pandemic. Meanwhile, UNICEF and other agencies are advocating for the preparation of a MICS survey. This was included as a recommendation in the report of the Government-UN retreat.

On reducing preventable child diseases, the CO supported the health centres and communities to improve child immunization. The health centres did not stop providing services during the pandemic and routine vaccination was intensified to reach 12,574 children U5 who had been missed out, plus 7,173 girls and women with the Td vaccine. Despite the COVID-19 mobility restrictions, the Government, with UNICEF support, avoided the stock-out of illness-preventable vaccines which was a huge win. Additionally, the management of vaccines was improved with the digital platform "VIVA Platform", which was introduced in 2019 and reinforced its use in 2020 for COVID-19. The cold chain and stock control were improved, several cold chain materials were purchased vaccine refrigerators were repaired. With funding from Alwaleed Philanthropies through WCARO, the CO supported the nationwide measles vaccination campaign, with a total of 103,692 children reached (74% national administrative coverage; 95.8% after a random survey suggesting an issue with the population target in some districts).

On child health services, the CO supported the Government in elaborating the Health National Development Plan. Moreover, 36 district managers were trained in the preparation of local micro plans with the Reach Every District strategy.

On innovation, the CO signed an agreement with MUNI, a mobile phone operator, and the Ministry of Health to use Mobile Money for transactions during the measles campaign and communication on COVID-19 risks campaign. In total, 192 beneficiaries received direct payments through mobile phones.

The pandemic context created space to raise awareness on nutrition and the need to improve the diet diversity in children. Interventions carried out included messages on young child feeding and healthy diets and distribution of food baskets to vulnerable families with young children. Community leaders and communication workers were also trained to support families in the period of confinement promoting the use of local nutritious foods. The intensification of the routine vaccination was an opportunity distribute vitamin A supplementation reaching 38,121 children aged 0-59 months and it was distributed for the first time during the measles campaign.

Different interventions were implemented to prevent the vertical transmission of HIV/AIDS, including the mother-child transmission study protocol developed for the four districts with treatment centres, the family-based approach to HIV diagnosis focused on testing of contacts of index cases as pilot strategy in Bata, the HIV and syphilis duo-tests implemented in antenatal consultations in nine facilities in the insular region. Furthermore, the early diagnosis of HIV in children by PCR was initiated in two treatment centres and integrated with the national tuberculosis programme reaching 409 children. In MNCH the postnatal care was integrated in HIV/AIDS follow up reaching 1,551 mothers and enabled services in 28 (43%) health facilities. In the COVID-19 response, in collaboration with UNAIDS, food and hygiene kits were distributed for people living with HIV and 5,350 HIV/COVID-19 communication materials were distributed to HIV affected families.

With CO's support, the Government developed the 2020-2022 Skills Strengthening Plan of the National Programme to Fight AIDS, concluded the update of the National Guide on HIV/TB, updated the protocol for Antiretroviral Treatment for children based on WHO guidance (replacing Abacavir). An HIV pocketbook and other materials for people living with HIV and for health workers were produced. Moreover, a survey to the stakeholders has been completed on Adolescent Girls and Young Women HIV Prevention Operational Framework for programming purposes and focus on more effective interventions. The survey results showed that improvement is needed in the area of advocacy, communication and demand creation, and quality assurance for referrals.

The CO contributed to the prevention of malaria with the distribution of insecticide-treated bednets to 11,550 mothers with young children through UNICEF-supported programme on DTP3 routine vaccination activities.

To ensure continuity of essential services, the CO supported the Ministry of Health in conducting 40 rapid assessments of Infection Prevention and Control (IPC) - WASH in 60% of the health facilities. The assessments revealed that 50% of the facilities did not meet the IPC international standards, 44% did not have adequate water provision, and 31% did not have PPE for the staff to respond to the pandemic. In collaboration with partners, the CO provided IPC training to 885 persons (health professionals, journalists, and NGOs). Over 27 health centres with trained personnel were supervised on IPC-WASH. Over 1,000 hygiene kits and masks were distributed for health centres, 3,800 hygiene kits were distributed to families and vulnerable groups, and 18 oxygen concentrators purchased for national health centres.

The closure of all schools for five months, excluding holidays, affected a total number of 221,247 school children. The WASH situation in schools posed a challenge at the re-opening. To this end, UNICEF supported the MoE to conduct a situational analysis of the school WASH in all preschools and primary schools (secondary may also be included), with RO support. The finalisation is planned for 2021 and will be part of the Ministry's evidence-planning to address any gaps.

In a country with only 26.2% (World Bank 2017) having access to internet, the Government launched distance education with UNICEF support. The distance education includes TV and radio programmes for preschool and primary, an online platform to download broadcasted materials and the development of home-based learning materials for students at primary. It is estimated that 127,000 preschool and primary school children (78%) were reached. Over 1,000 learning guides were downloaded monthly from the platform, while 13,994 primary school students in Sixth Grade (6,933 boys and 7,061 girls) had access to the printed materials on Mathematics during the school closure. Moreover, 1,143 school supervisors, directors, and teachers were trained and sensitized in COVID-19 prevention while more than 124 teachers and staff of the Ministry were trained on delivering distance education programmes. With CO's support, the Ministry of Education established a teacher resources and training room (equipped with desktop, projector, printer and TV) with high-speed internet to facilitate the uploading of broadcasted materials to the online platform (http://escuelaencasa.gg/).

For safe operation at the reopening, the CO and the MoE distributed sanitary and hygiene kits (water buckets, soap, gel, bleach, thermometers, masks) to 530 preschools and primary schools reaching over 50,000 children. The consistent usage of face masks for teachers and students remains a challenge, particularly in vulnerable schools.

The Out of School Children (OOSC) study remained unvalidated by the Government. For the sensitivity of the findings, the CO continued to explore viable avenues to manage the data with the Ministry of Education. However, the focus on COVID-19 response resulted in delays in advancing the study. Nevertheless, as part of the OOSC work and through UNICEF's advocacy, the Government is open to improve special education which is a critical turning point.

UNICEF continued to support the Government in strengthening of the modernization of the birth registration system. With UNICEF support, Ministry of Justice digitally registered 35,000 births from paper registers in the while 10,000 new births were directly digitally registered.

The CO advocated for the strengthening of the civil registry system with intersectoral coordination and facilitated online exchange of best practices with African countries. Approximately 1,300 Ministry staff, district delegates, community counsellors and NGOs personnel were trained on the new directives of administrative decentralization and identification and case management of vulnerable families. On birth registration, the development of the MoU between the Ministries of Justice and Health did not advance due to the COVID-19 response.

The CO continued with the implementation of a decentralized integrated service package to promote child rights through the Child Friendly District initiative, consolidating health, education and child protection interventions initiated in 2019 in Akurenam, supported by C4D strategy. It is estimated that UNICEF's work in Akurenam is positively impacting over 3,300 (21%) children's health, education, protection and empowerment.

A register book system covering general census information, births, teenage pregnancies, deceases, and criminal records, was implemented in all communities of Akurenam. Meanwhile, training delivered to update and maintain data collection in 2019 to community leaders was bearing fruit and supported the planning of the vaccination campaigns in 2020.

The expansion of the Child Friendly District initiative to the district of Mbini was not implemented as projected due to the pandemic and financial constraints. The CO will continue the implementation of the initiative in 2021 with the aim to scale up to at least another district.

The collaboration possibilities on digital learning (using tablets learning mathematics, languages, science, social studies) in Akurenam and other districts with Profuturo, via UNICEF Spain are still

being reviewed. Further understanding will be needed to ensure sustainability.

Despite the significant staff turnover (including the change of Representative) and the COVID-19 restrictions, the CO closed seven out of eight audit recommendations. Meanwhile, the programme structure is under review for adjustments to reflect the CO's affordability. Only five out of nine programmatic visits were completed (two unregistered). Indeed, the COVID-19 restrictions set back the planned visits. The CO will also continue to strengthen this area ensuring all staff is familiar with the usage of E-tools.

Regarding the prevention of sexual exploitation and abuse (PSEA), UNICEF shared the UN PSEA Protocol with the Ministry of Foreign Affairs for its dissemination to all Government partners. The CO also shared the Protocol with CSO partners who developed their own action plans. Sexual Exploitation and Abuse Risk was assessed in partners with cooperation agreements. A training on PSEA for UNICEF staff and local NGOs was carried out. Furthermore, a joint action framework on PSEA with the UN agencies and CSOs is being finalised.

Equatorial Guinea's 2020 Annual Management Plan was highly ranked by the WCARO. Fraud and resources misuse were identified as high risk for the CO during the risk assessment (ERM), therefore, the CO reinforced its purchasing processes with enhanced transparency and segregation of tasks. With DFAM's approval, the ceiling of the CRC was reduced from 100,000 USD to 50,000 USD, and a similar procedure was taken for the small-scale purchasing process and the CO limited to 2,500 USD the Low Value Purchase Order. Reductions were also made for Petty cash payments.

For the COVID-19 pandemic, the CO established new priorities and indicators that were regularly monitored through monthly and bimonthly Situation Reports and COVID-19 response plans.

The CO finalized its the BOS 2.0 migration. On common services with the UN System, four areas for common services were identified for collaboration including ICT, administration, finance and logistics. The collaboration will help make savings and improve quality in the services. The Operation Management Team held nine statutory meetings and five ad-hoc meetings.

On the new salary scale for UN national staff, the CO's regular resources (RR) annual ceiling for 2020 -2021 was reduced as a result of the advance of RR allocation loaned to the CO to settle the retroactive payment to 17 staff (12 GS and 5 NO). The CO submitted a special CPMP to review the current office structure for further adjustments in 2021. The fund utilization rate was 100% and there were no lost on expired grants.

The CO conducted an awareness session on COVID-19 prevention for staff and dependents. For staff resilience, a teleworking simulation exercise was carried out, and training on disinfection technics for all staff. Moreover, the CO installed a handwashing station and automatic hydroalcoholic gel dispensers, ensured availability of PPE at UNICEF offices, <u>and promoted</u> of physical distancing and provision of PPE to UNICEF staff. During the lockdown, the CO supported staff on setting up internet to ensure business continuity while only essential staff were at the office. A back-to-the-office strategy and improvement plan was developed before the staff physically returned to the office.

UN Collaboration and Other Partnerships

The pandemic has provided an opportunity to strengthen or develop new partnership and alliances.

An assessment on the socio-economic impact of COVID-19 was developed by the UN agencies in collaboration with the Government and the response and communication (RCCE) plan is being finalised. Particularly the CO partnered with WHO, and other UN agencies on capacity development of health workers and social mobilizers. The CO and the FMI supported the Ministry of Social Affairs and Gender Equality in the design and implementation of the Social Guarantees Programme to reach the most vulnerable population and the pilot of the application for the Single Social Register (RUS) to gather data and case manage vulnerable families. The CO also partnered with UNDP, US Embassy and NGOs to distribute water tanks to schools as COVID-19 prevention measure. Similarly, the CO strengthened its partnership with the private sector through an agreement with MUNI, a mobile phone operating company, to pilot a Mobile Money scheme. UNICEF continued to explore the collaboration possibilities to expand digital education with Profuturo, a foundation by Telefonica and Caixa Banks. Several calls were held with Profuturo, in close coordination UNICEF Spain, HQ, RO and PFP in Geneva.

The increased coordination within the UN Agencies and the frank discussions during the Government-UN retreat helped to agree on key priorities for 2021 including securing funding for the the second phase of the Social Guarantees Programme; support for implementation of health district plans; acceleration of interventions to achieve the SDGs defined as priorities by Equatorial Guinea in the 2022 National Voluntary Report; follow up of the recommendations of the Universal Periodic Review; and the creation of a Multi Donor Trust Fund.

To maximize impact of interventions at the field level, the CO facilitated through advocacy and technical assistance a platform approach with NGOs, which was implemented for the strengthening of interventions coordination and amplifying COVID-19 messaging. The national NGOs BiriaElat and ASAMA were empowered and trained to coordinate two NGOs platforms, comprising 20 NGOs. The functions of these platforms are to improve the NGOs performance in multiple areas such identification of vulnerable families, monitoring, funding management, and messaging on COVID-19 prevention.

New resources were mobilised for the first time from USAID to address gaps in the COVID-19 response, particularly for IPC and WASH in COVID-19 isolation centres and other targeted public spaces and institutions in six target districts. The support includes the provision of critical hygiene and other USAID-approved supplies, and provision of technical assistance in knowledge management and monitoring and evaluation.

The alliance with Alwaleed Philanthropies, facilitated by the RO, was a remarkable support in facing the challenges for the Expanded Programme on Immunisation (EPI). To address the decline in immunization coverage due to the lockdown and prevent the spread of the measles virus (two cases detected), the Ministry of Health and Social Welfare, through EPI organized a series of intensive activities implemented jointly with WHO in districts with lowest coverage rates, targeting the 6,552 children without Pentavalent 3.

Lessons Learned and Innovations

While the pandemic caused disruptions and required UNICEF to adjust its programme with the Government to mitigate the impact on children and adolescents, it also created space for innovations and for continuing our advocacy on child rights issues. For example, the implementation of the first

phase of the Social Guarantees Programme for vulnerable families relaunched the establishment of a social protection system. The risk of having children not being able to receive education because of school closure helped reopen the discussion on out of school children. The distance learning also highlighted the importance of addressing the digital divide and inequities as over 20% do not have access to radio or television while only 26.2% have access to internet.

The office remained very functional during the pandemic through teleworking and by doing pre-testing to ensure connections, providing staff with high-speed internet as needed. UNICEF also advocated for Government counterparts to attend key meetings online to ensure continuity. This experience has helped to build trust and prepare for another eventual emergency.

The Country had its first national measles campaign in four years but the coverage was less than expected. It was partly due to the delay in implementing the social mobilization campaign but it also highlighted a problem of coordination and supervision at the field level. On the other hand, good planning made it possible to have all the antigens available and to avoid stock-out during immunization activities. The planned multi-country evaluation on routine immunization, which includes Equatorial Guinea, should help identify and address some of the routine vaccination service bottlenecks.

The Child-Friendly District Initiative showed that the use of community registers contributed to foster ownership among community leaders and a mean to help mobilize communities for vaccination or other activities.

In terms of innovations, to strengthen efficiency and transparency in transferring funds to counterparts and partners, the CO collaborated with the Ministry of Health to pilot a Mobile Money scheme through signing an agreement with the mobile phone operating company MUNI. Through UNICEF's support, the Ministry of Health held a national vaccination campaign to reach unvaccinated children in all 18 districts. For the campaign, the involved health workers and volunteers' incentives were paid through MUNI Dinero (Mobile Money). As a pilot of its first kind in the country, this payment modality was deemed as a success by multiple parties. By using MUNI Dinero, both unbanked or underbanked health workers and volunteers (including those in remote areas) timely received their incentives in a trackable manner while applying a paperless process. Moreover, verification processes to enable transactions further strengthened accountabilities as recipients are required to have identity documents and are given unique security codes. Through UNICEF's negotiations with the MUNI, the CO obtained a competitive transaction cost at 3% which was a win.

Based on these experiences, the CO will explore the expansion of this paying scheme to other sectors such as education and social protection. The lessons will also be reviewed before the expansion. For example, a minority of the participants did not have identity documents and had to rely on senior government officials' MUNI dinero accounts. Nevertheless, UNICEF's verification report confirms that all 130 participants received the transactions as planned.

To ensure continued learning during the COVID-19 pandemic when all schools were closed, UNICEF worked with the Ministry of Education and launched the country's first distance education through TV and radio for preschool and primary school children. The Government estimates that 127,000 (78%) students in preschool and primary are reached. The TV and radio learning programmes were broadcasted three times a week. The radio programmes were also live which allowed users to call in for clarifications and feedback which was a welcomed component. However, the content of the materials remained somewhat limited and the frequency of broadcasting was insufficient for each grade. UNICEF will further work with the Ministry of Education to improve quality. While the schools are re-opened, the distance education through TV and radio is planned to continue. These platforms reinforce the basics in Maths and Spanish and other subjects which are beneficial to strengthen foundational learning. Moreover, the programmes are expected to reach students and beyond, including out of school children, elderly and wider communities.

The CO collaborated with UNICEF Cameroon to order directly from Cameroonian factories and providers to procure hand sanitizers and buckets at a reduced-price. For cost efficiency and timely deliveries in emergencies, the CO exceptionally used local boats from Douala to Malabo, signing a contract with a trader to cover the potential risks of the shipment from UNICEF hub warehouse in Douala to the Equatorial Guinea UNICEF's partner warehouse. Through using this unusual mode of transport, the CO secured timely supplies donated to the Government and distributed to vulnerable children and population affected by COVID-19.

With restricted movements due to lockdown and confinement measures, the CO has been reviewing the possibilities for electronic payments with a local bank. The processes are still ongoing at time of writing this report. Meanwhile and as advised by DFAM's banking unit, the CO signed a short-term agreement allowing payments instruction to be sent to the bank via e-mail during the lockdown. A call back process (in addition to the email) has been put in place to verify the authenticity of the email received by the bank.

The reduced RR ceiling for 2021 due to the advance of RR allocation loaned to the CO to settle retroactive payment to national staff coupled with the challenge to mobilize COVID non-related OR in 2020 will require the office to make additional adjustment to its structure. This will also be informed by the planned mid-term review and review of UNICEF strategic positioning in the country. The CO will spare no effort in implementing its resource mobilization strategy including landscaping non-traditional partners while continuing to work with UN Agencies for joint programming and fund raising.