

Pacific Islands

Update on the context and situation of children

During 2020, the Pacific was hit by the unprecedented COVID-19 pandemic. However, there were no community transmission cases reported in the 14 Pacific Island Countries and Territories (PICTs). PICTs have managed the pandemic's public health threat remarkably well, with only a few countries recording relatively small numbers of cases and few deaths. The success in preventing the spread of the virus has been largely attributed to swift responses by the authorities at the onset of the pandemic, which included border closures, travel restrictions, lockdowns, and states of emergencies. The geographical isolation of PICTs has also prevented the transmission of the disease to these countries.

While dealing with the COVID-19 pandemic, PICTs also encountered two category-5 cyclones: Tropical Cyclone (TC) Harold, which affected Vanuatu, Fiji, Tonga and Solomon Islands in April, and TC Yasa, which devastated Fiji in December.

COVID-19 inflicted multiple socio-economic shocks on the economies of PICTs. The collapse of international tourism deprived PICTs of a vital source of foreign revenue, with a devastating impact on livelihoods and income. For many of these economies, external trade was also adversely affected by supply chain disruptions, including in the fisheries industry. Amid a deteriorating global economic outlook, PICTs have also seen a decline in commodity exports, remittances and foreign direct investment. The World Bank estimates that the economies of the PICTs as a group are projected to contract by 5.5 per cent in 2020, before experiencing modest growth of 3.7 per cent in 2021.

The pandemic's impact was compounded by the vulnerability of the Pacific to recurrent natural disasters and climate-related shocks. The Pacific Islands Forum Statement to the High-Level Meeting of the General Assembly to Commemorate the 75th Anniversary of the UN, emphasized the dual challenges as well as interlinkages of COVID-19 and climate change. The response to COVID-19 and humanitarian relief efforts have been complicated due to strict quarantine rules and lockdown measures, hindering the movement of emergency personnel and supplies.

The compounded impact of the simultaneous shocks of the COVID-19 pandemic and natural disasters pose significant risks for PICTs. Amid narrow economic bases and weak productive capacities, most of these countries lack sufficient domestic financial resources to effectively address these compounding challenges. In the absence of adequate social safety nets, the pandemic is likely to disproportionately influence the lives and well-being of the poorest and most vulnerable. In those Pacific countries that are dependent on tourism, more than half of the population are projected to fall below the national poverty line.

Overall, PICT leaders have urged more coordinated action to secure the health and well-being of Pacific people in light of the climate crisis and COVID-19 pandemic. The Cook Islands is scheduled to become the first PICT to achieve 'developed country' status, and Vanuatu migrated from least-developed country status to low middle-income country in 2020.

Despite the absence of community COVID-19 transmission in all 14 PICTs, essential health services were disrupted, and government revenues declined. Health workforces in the Pacific are small, and because they were redeployed or refocused on COVID-19 preparedness, including quarantine management, health workers were not as available to deliver essential services. As a result, UNICEF noted a slight downward trend in routine immunization coverage, along with limited capacity to engage in catch-up campaigns. Both the Asia and the Pacific Regional Overview of Food Security and Nutrition 2020 (<https://doi.org/10.4060/cb2895en>) reports increasingly poor diets. Essential service disruption was compounded by global and Pacific supply chain disruptions for routine and COVID-19

supplies as well as two tropical cyclones and a measles outbreak responses. Available information indicates that these disruptions could reverse gains seen in the Pacific on child health and nutrition. To maintain resource levels for health, PICTs will need to increase health budgets by on an average of 7 per cent.

The COVID-19 pandemic highlighted the importance of access to water, sanitation and hygiene (WASH), including handwashing with soap. However, the latest data show that the region is lagging behind in achieving the 2030 Agenda target of universal access to basic water and sanitation services. More than 95 per cent of the population in 10 out of 14 PICTs utilize basic drinking water services. However, three PICTs have sanitation coverage of less than 60 per cent, and only 40 per cent of people safely dispose of children's stools. Handwashing is not practised as frequently as recommended. Across PICTs, more than half of schools and more than 60 per cent of health care facilities lack functional handwashing facilities.

The COVID-19 pandemic also highlighted key vulnerabilities within education systems. twelve countries had unplanned school closures in 2020. The closure lasted several months in Fiji and Samoa. However, not all students could return to school due to COVID-19 related inter-island transport restrictions. PICTs remain on high alert, anticipating that school closures may be required again. This situation has led countries to continue to plan, build capacity and strengthen school systems to enable distance learning, and to strengthen safe school operations, with the development and implementation of context-specific guidelines on COVID-19 prevention and control.

The main child-protection-related impacts of COVID-19 have been a rise in stress levels due to fear of the disease, economic hardship, and the need for children and parents to stay at home during temporary lockdowns. Based on information from national NGOs working on GBV, there has been an increase in the number of domestic violence cases reported, which suggests that a higher number of children have been subjected to emotional abuse, and possibly physical abuse or neglect.

Many PICTs offer only partial protection against frequent natural disasters, public health emergencies and other social and economic shocks, with low government expenditures on social protection. Due to the COVID situation, there has been an increased appreciation that social protection is a pre-requisite for equitable and sustainable development.

Major contributions and drivers of results

UNICEF Pacific adapted its programming to respond to the COVID-19 pandemic and two severe tropical cyclones, while sustaining critical programme interventions, protecting development gains from earlier years, and reimagining post-COVID efforts. 2020 results must be viewed in light of the unusual circumstances experienced due to COVID-19, including travel restrictions, remote working modalities, longer-than-anticipated staff transfers and logistics and supply disruptions.

Improving and sustaining health and nutrition services

UNICEF procured personal protective equipment (PPE) sufficient to enable 8,179 frontline health workers in 14 PICTs to continue to provide essential services for six months and for case management during COVID-19. Biomedical equipment for COVID-19 critical care and 70,000 test kits were also procured.

UNICEF doubled the capacity of its sub-regional cold room to receive first-time delivery of human papillomavirus (HPV), rotavirus and pneumococcal conjugate vaccines. Cold chain capacity was

increased in nine countries (Cook Islands, Kiribati, Nauru, Niue, Samoa, Tokelau, Tonga, Tuvalu and Vanuatu) in preparation for the introduction of these new vaccines, resulting in advanced readiness for the introduction of COVID-19 vaccines.

UNICEF and ministries of health in six countries (Fiji, the Federated States of Micronesia (FSM), Nauru, Tonga, Solomon Islands and Tuvalu) introduced a COVID-19 distance education initiative through radio programme called “ Health Care on Air”for frontline health workers in remote locations with limited or no internet connection. Remote health workers who are mostly female gained confidence, skills and tools to deliver essential health services during the pandemic and motivate their populations to seek health care. The initiative combines old (radio) and new (RapidPro and Internet of Good Things) technologies and is the culmination of a multi-partner collaboration with the Fiji Nursing Council, Fiji Higher Education Board and Joint Incident Management Team (JIMT). Interactive engagement and assessment for accreditation are conducted through RapidPro, and content is certified by Pacific ministries of health and members of JIMT’s ‘training pillar’. By integrating accreditation, health workers are incentivized to listen, learn and complete assessment requirements.

Primary health care (PHC) quality improved in 66 per cent of facilities that received at least two supportive visits in seven sub-national locations across Kiribati, Solomon Islands and Vanuatu. Challenges identified included supply stock-outs, the absence of protocols, and weaknesses around community engagement, infection prevention and control and WASH. In Kiribati, all facilities receiving a second visit showed significant improvement, reaching the ‘three-star’ benchmark, signifying readiness to graduate to the next level. This is modelled after the three-star approach to WASH in schools. Supervisors leveraged visits to conduct COVID-19 risk communication assessments. Quality improvement actions resulted in improved access to safe water and the installation of locally-made handwashing stations (‘tippy taps’), construction of ramps (with financial assistance from island councils), and the introduction of gardens. UNICEF leveraged domestic resources to fund supportive supervision in one district.

In Solomon Islands, nutrition coordination improved with the establishment of the National Food Security, Food Safety and Nutrition Committee Technical Working Group, which includes permanent secretaries from the ministries of health, agriculture, education and fisheries. Kiribati’s Ministry of Health and Medical Services (MHMS) drafted a cabinet paper to establish a national committee to coordinate multi-sectoral nutrition action, with the first task to update the food security and nutrition policy. Formalizing the National Nutrition Commission in FSM was approved by the Secretary for Health.

Improving access to WASH

COVID-19 and the response to two tropical cyclones significantly impacted the implementation of UNICEF Pacific’s WASH programme. Despite these challenges, UNICEF was at the forefront of the response to natural disasters, i.e. tropical cyclones in Fiji and Vanuatu, and floods in Solomon Islands. UNICEF supported the governments of all PICTs in their WASH-related response to COVID-19, including the provision of supplies, risk communication and community engagement, guidance and remote technical support. Further, in 2020 UNICEF’s WASH programme expanded beyond Fiji, Kiribati, Solomon Islands and Vanuatu, to also include FSM, the Republic of the Marshall Islands (RMI) and Tuvalu.

UNICEF’s work on strengthening national WASH systems and institutional frameworks supported the completion of the draft National Water Resource Management and Sanitation Policy in Fiji, and the adoption of WASH in schools design standards in FSM, Kiribati, Solomon Islands and Vanuatu. In Kiribati, UNICEF technical support led to draft water resource management and sanitation policy that integrates disaster and climate risk issues. In Vanuatu, building further on the Tropical Cyclone Harold response, support continued to improve climate-resilience in WASH by expanding ‘resilient water safety planning’ and/or DWSSPs in communities, schools and health care facilities. This concept

contributed to the mobilization of additional funding for DWSSPs by GCF. As a result of collaboration between UNICEF, the World Health Organization (WHO) and Pacific Community (SPC), the Pacific WASH Strategy was endorsed at the Ministers of Health Meeting. To address a fragmented WASH policy environment in Fiji, UNICEF supported the development of a water and sewage act. Other significant activities included developing drinking water safety and security guidelines in Vanuatu, and ongoing consultations towards a national water resource management and sanitation policy in Kiribati.

To promote evidence-driven decisions, UNICEF helped strengthened data availability, monitoring and reporting systems, ensuring consideration of equity and rights with regard to rural and urban disparities in WASH. Notable achievements included an assessment of WASH in 159 health facilities in Solomon Islands, a COVID-19 school readiness baseline survey in 80 schools in FSM, and the ongoing multi-country Pacific WASH in schools formative evaluation, which will cover more than 600 schools in Fiji, FSM, Kiribati, Solomon Islands and Vanuatu, and will generate evidence on the impact and scale-up of WASH in schools.

The COVID-19 pandemic highlighted the importance of WASH services in communities, schools and health care facilities, and stressed the importance of hand hygiene (i.e., handwashing with soap). Under the banner of the global UNICEF-WHO Hand Hygiene for All (HH4A) initiative, Global Handwashing Day was celebrated at schools in Fiji, FSM, Kiribati, Solomon Islands and Vanuatu, helping foster partnerships between ministries, sectors, donors and private sector entities.

Immediately after TC Yasa in Fiji, UNICEF dispatched WASH kits and collapsible water containers to the most-affected areas. UNICEF's support for the response to TC Harold reached 71,813 people in the most-affected areas of Vanuatu and Fiji. UNICEF also provided technical support for cluster coordination.

Expanding access to quality education

With support from UNICEF, Kiribati and Tonga advanced their commitment to expanding access to quality early childhood education (ECE) nationwide by developing locally relevant ECE curricula and teacher training programmes. Despite the challenges posed by the COVID-19 pandemic, notable progress was made, with training of trainers ongoing and draft curricula and teacher guidance ready for piloting in both countries. Solomon Islands introduced pre-primary year, developed with support from UNICEF, in all government schools as part of basic education.

Kiribati and Vanuatu completed robust, relevant and equity-focused education sector analyses and plans with support from UNICEF and funding from the Global Partnership for Education (GPE). Solomon Islands is also undertaking the same process, with support from UNICEF, GPE, and the Australia, and New Zealand. UNICEF also supported FSM to finalize an existing sector plan in line with GPE guidelines. Sector plans in Vanuatu and FSM are being used for GPE grant applications. In the case of FSM, UNICEF is serving as grant agent and has supported the development of a US\$2.5 million ECE programme, which is undergoing GPE final review.

The ten-year Pacific Regional Education Framework (PacREF) partnership was finalized in 2020, with a US\$15-million, three-year implementation plan to be launched in 2021. Even before the formal launch of PacREF, UNICEF leveraged funds to support the establishment of a regional taskforce to guide the integration of key components from the Pacific Regional Inclusive Education Framework (PRIEF) into the Pacific Regional Education Framework. UNICEF also supported the initiation of an inclusive education review for the Pacific. Both successes will be highlighted at the Pacific Education Ministers' Meeting in early 2021.

Nine countries designed and implemented COVID-19 responses in the education sector, addressing short- and long-term strategies to improve child learning and well-being under all circumstances. All

eight GPE-eligible countries in the Pacific accessed GPE accelerated funding. UNICEF supported seven countries to develop the COVID-19 plans required for applications and serves as grant agent for six countries. Remote learning programmes, teacher training on the design and facilitation of student-led and home-based learning, safe school protocols and communication materials, and system development efforts are underway to strengthen resilience to COVID-19 in the Pacific. Fiji, Solomon Islands and Vanuatu also coped with the education-related impacts of tropical cyclones. Amidst border closures, travel restrictions, school closures and expectations around home-based learning, governments and communities, with support from UNICEF and other partners, utilized creative solutions to reopen cyclone-affected schools on the same timeline as others nationwide.

Child protection system building

The response to COVID-19 provided an opportunity to strengthen child protection systems, in particular through collaboration with the agencies working on gender-based violence (GBV). In FSM, where there is no child protection legislation, system, coordination mechanism, services or personnel, establishing a ‘Social Protection Cluster’ in the context of COVID-19 provided an opportunity to raise awareness on the need for child protection services. Similarly, in RMI, establishing a ‘Gender and Protection Cluster’, primarily to address domestic violence, provided the opportunity to raise the profile of child protection services (which currently exist only on the two most-populated islands), and for improved inter-agency coordination on child protection. In Fiji, FSM, Kiribati and Solomon Islands, GBV referral pathways were adapted to respond to the increased demand created by COVID-19. This provided an opportunity to include provisions related to child protection. In Fiji, guidance notes and video recordings on COVID-19 for GBV and helpline responders and community actors, were jointly developed with GBV stakeholders. In Kiribati, a general COVID-19 helpline was established with the intention that once COVID-19 is over, it will serve as a child helpline.

The response to COVID-19 provided an opportunity to increase collaboration between child protection, education and health sectors. For example, UNICEF provided technical inputs on child protection and mental health and psychosocial support (MHPSS) during the development of education guidelines and teacher training for the safe return to school, and to Health Care on Air, a radio-based training programme for nurses across the region. UNICEF also played a key role in providing child-specific inputs to guidelines and training materials developed by members of the WHO-led MHPSS coordination mechanism.

Despite of COVID-19, Fiji, Samoa, Tuvalu and Vanuatu continued working on their national child protection legislation, which are expected to be passed in the coming months except for Vanuatu where the process was delayed by TC Harold. Fiji passed its Adoption Act. Fiji, Kiribati and Samoa finalized their inter-agency child protection guidelines/referral pathway, and FSM integrated theirs with those related to GBV. Samoa finalized their national child protection policy and five-year costed multi-sector plan while Fiji is in the development phase. The quality of child protection services is expected to improve as a result of the five-week training of 90 social welfare officers in Fiji, Kiribati, Solomon Islands and Vanuatu on social work with children in need of care and protection and their families

Improving evidence and social protection for children

Despite COVID-19 related restrictions, the roll-out of Multiple Indicator Cluster Surveys (MICS) continued, including completing national MICS in Samoa, Tonga and Tuvalu and preparing four additional PICTs (Fiji, FSM, Nauru and Vanuatu) for MICS to begin in 2021. The adoption of MICS as one of the core surveys to support monitoring of the 132 Pacific Sustainable Development Indicators (PSDI) means that the results will help fill critical data gaps for up to 25 PSDIs and 33 Sustainable Development Goal (SDG) indicators, providing new evidence to inform budgets, programmes and policies for children. All MICS implemented in the Pacific included the Washington Group on Disability Statistics questions, providing key information to inform interventions for children and adults with disabilities. The newly established Pacific Group on Disability Statistics, of which UNICEF is a member, aims to streamline regional coordination for the generation of disability data. UNICEF contributed to Voluntary National Review (VNR) processes for FSM, Samoa and Solomon

Islands.

All PICTs, except Niue, are on track with their Convention on the Rights of the Child (CRC) reporting obligations. With technical support from UNICEF, the Cook Islands, FSM and Tuvalu completed their periodic dialogue with the CRC Committee. UNICEF participated at the pre-sessional dialogue with the committee on Kiribati. UNICEF partnered with SPC, the Office of the United Nations High Commissioner for Human Rights (OHCHR) and the United Nations Resident Coordinator's Office (RCO) in Samoa to support the 84th Extraordinary Session of the CRC Committee, held in Samoa. Budget briefs on the health and education sectors were shared with parliamentarians in Fiji, Solomon Islands and Tonga, providing crucial analyses on the consistency of government budgetary allocations, commitments to national/sector development plans and gaps in the response to the socio-economic impact of COVID-19 on children. A public expenditure tracking and quantitative service delivery survey on Vanuatu's health sector were completed. Survey results will help the Ministry of Health better align and reallocate resources to achieve health outcomes outlined in national development and health sector plans.

The development of National Child Policy (2020-2025) in Solomon Islands and the National Youth Policy (2020-2025) in Fiji set the framework for national commitments towards the realization of child rights. In Tonga, 27 youth (16 to 33 years of age) participated in the National Youth Parliament, providing them with a unique experience, engaging with government officials, development partners, and peers, empowering them to become drivers of change.

UNICEF supported the evaluation of the Cook Islands' social cash transfer programmes, contributing to an increase in the infirm benefit (from NZ\$200 to NZ\$400), announced by the government in November 2020. The evaluation is also contributing to learning and knowledge sharing among PICTs on formal social protection systems.

UNICEF supported socio-economic impact assessments in Fiji, Samoa and Solomon Islands, contributing to the body of knowledge on the impact of the COVID-19 pandemic on PICTs. The findings will guide the efforts of governments and partners to mitigate the impact of the pandemic on families and children through social protection responses.

Sustaining commitments for early childhood development (ECD)

ECD was recognized as a priority in the 2020 outcomes statement of the Forum of Economics Ministers Meeting (FEMM). The Pacific Regional Council for ECD (PRC4ECD), comprised of ministers of finance, education, health and social welfare, adopted a 10-year regional work plan for ECD. As secretariat of the PRC4ECD, UNICEF partnered with the Pacific Islands Forum Secretariat (PIFS) and other developmental partners (e.g., Australia, New Zealand and the World Bank) to promote comprehensive support for young children and their families.

With UNICEF support, Kiribati, RMI, Solomon Islands and Vanuatu drafted national ECD policies, informed by consultations with communities and other stakeholders. UNICEF also supported the establishment of multi-sectoral coordination mechanisms for ECD in FSM, Solomon Islands and Vanuatu.

UN Collaboration and Other Partnerships

UNICEF leveraged resources from WHO, SPC, government donors (Japan, United States of America, Australia, New Zealand, United Kingdom, India and the Republic of Korea) and the Asian Development Bank (ADB) for the implementation of COVID-19 action plans in 14 PICTs. Close collaboration of UNICEF and WHO is vital in supporting countries preparedness and readiness efforts to introduce a COVID-19 vaccine. UNICEF's partnerships with the World Food Programme (WFP), Australian Defence Force and Fiji Airways, who delivered COVID-19 and cyclone-relief related supplies free-of-charge, were crucial, especially given limited commercial flights during the pandemic.

UNICEF continued to expand its strategic role with regard to GPE in the Pacific, supporting education sector planning and PICT access to GPE funding. Pacific countries significantly increased their involvement with GPE in 2020, with eight countries (Kiribati, FSM, RMI, Samoa, Solomon Islands, Tonga Tuvalu and Vanuatu) officially joining this partnership.

UNICEF's collaboration with national statistics offices, the United Nations Population Fund (UNFPA) and SPC continued, with the implementation of MICS in three additional PICTs (Samoa, Tonga and Tuvalu).

UNICEF received financial resources from the New Zealand-United Nations Pacific Strategy Fund (NZ-UNPSF) to support health and nutrition, ECD, early childhood care and education (ECCE), birth registration and MICS. NZ-UNPSF is a multi-partner trust fund (MPTF) that aims to compliment other resources available for the implementation of the UNPS outcomes by UNICEF, UNDP, UNFPA and UN Women coordinated by two RCOs

UNICEF engaged the Pacific Islands Association of NGOs (PIANGO) as a third-party monitor to UNICEF's humanitarian assistance to Fiji and Vanuatu in response to TC Harold. PIANGO mobilized its partner organizations, including the Fiji Council for Social Services (FCOSS) and the Vanuatu Association of NGOs, to deploy field monitors in affected communities.

UNICEF collaborated with UNDP and the United Nations Economic and Social Commission for Asia and the Pacific (UNESCAP), successfully securing funds through the SDG Fund for the innovative financing of national development priorities in Fiji, RMI, Solomon Islands and Vanuatu. UNICEF similarly partnered with UNDP, UNESCAP, the International Labour Organization (ILO) and UN Educational, Scientific and Cultural Organization (UNESCO) on social protection. UNICEF also collaborated with UNDP on youth-led innovation, including the Youth Co:Lab and Innovation Hub initiatives with the University of the South Pacific. Also co-lead with UNDP on the Generation Unlimited Youth Challenge in Solomon Island on second chance education, with the two winning national teams joining the final global judging process

UNICEF led the social protection and basic services pillar of the UN joint socio-economic assessment for the immediate response to COVID in Fiji. UNICEF established a partnership with the World Bank to collect data on the impact of COVID-19 on children in Solomon Islands through high-frequency phone monitoring (HFPM) surveys. In Kiribati, UNICEF and the Food and Agricultural Organization (FAO) secured funds for food and nutrition activities from the Secretary General MPTF for COVID-19 response and recovery. UNICEF similarly collaborated with the International Organization for Migration (IOM) on WASH in FSM.

Lessons Learned and Innovations

The COVID-19 pandemic has been a major catalyst for innovation, creating significant opportunities for programmatic learning and improvements beyond the immediate emergency response.

The Health Care on Air initiative utilized an innovative way to train health workers during COVID-19 response, combining old (radio) and new (RapidPro and Internet of Good Things) technologies. UNICEF, the Fiji Nursing Council and the Fiji Higher Education board developed 41 made-for-radio training episodes on providing health and nutrition services during COVID-19, making them available to 14 PICTs, so far introduced in 6 countries. Once completed the course, the nurses will receive full accreditation for one year. Three important lessons emerged during the implementation:

- o Introducing RapidPro to health workers in the Pacific as part of the feedback and accreditation system has been challenging, requiring significantly more time and human resource investment than originally anticipated. However, once understood by health workers, RapidPro offers a flexible and versatile platform for future initiatives.
- o Efforts to promote listenership need to be a core element of programme design and should begin before the first episodes are aired. Promotion should be conducted across several platforms, including chat groups, SMS text messages, direct phone calls, government notifications and radio.
- o Integrating accreditation fulfilment into the initiative incentivized health workers to participate, including responding to assessment questions.

Since WASH played a critical role in the response to the pandemic, there was an opportunity to accelerate **the promotion of hygiene practices**. In Vanuatu, one provincial capital drafted a by-law requiring permanent handwashing stations at all institutions, including businesses, schools, government buildings, churches and restaurants. Other jurisdictions followed this example, with two other provincial capitals drafting by-laws. As a result, the number of durable handwashing stations, with piped water supply and drainage, is rapidly increasing in the country.

The pandemic also highlighted the need to revisit preparedness and response approaches to **'compounded' emergencies** of COVID and two severe tropical cyclones. It is crucial to coordinate risk communication with governmental and NGO to ensure that messages are consistent and do not cause negative impacts within schools and communities.

The RCCE response to COVID was guided by the information from complaint mechanisms, such as dedicated hotline numbers, radio talkback/call-in discussion programmes and social media campaigns on Facebook. UNICEF successfully advocated for the use of new technologies and qualitative research to generate evidence on audience behaviour.

There has also been an increased understanding that a more comprehensive approach to risk-informed planning, disaster risk reduction (DRR) and education in emergencies (EiE) work is required. EiE and DRR activities should include attention to COVID-19 and other disease outbreaks, noting that COVID-19 is not the first instance of school closures due to outbreaks in the region. Preparedness efforts must also shift away from a supply-focus and look at system readiness to keep students safe and ensure continued access to quality learning opportunities.

There is unprecedented demand for **national and sub-national data related to the COVID-19 pandemic**. The demand involves a wide range of data to better understand the socio-economic impact of COVID-19 and the consequences for children and families. Rapid data collection will help countries guide response and recovery efforts, including policy advocacy and programme planning to address children's needs. At the same time, COVID-19 containment measures have constrained both national management information systems and face-to-face surveys, the two main traditional sources of data on

the situation of children (although some of these activities are gradually returning). Therefore, additional support to strengthen the capacity of NSOs to rapidly collect data during emergencies through modern technologies, such as phone surveys, MICS Plus and online platforms, is critical.

The COVID-19 pandemic also highlighted the need for increased programme focus on building a **breadth of skills among youth**. The potential of empowering youth to take the lead on WASH and hygiene promotion within communities and schools in the context of COVID-19, as shown in FSM through the U-Report partnership with the College of Micronesia, is a good example. Moreover, the partnerships with national parliament in Tonga on youth parliament and ministry of youth in Fiji on youth engagement in the development of national policy, are critical to ensuring the meaningful participation of children, adolescents and youth in national development and political processes on issues that concern them.

UNICEF has partnered with the Pacific Conference of Churches (PCC) to **integrate child protection in church activities** with children, youth, women and men, and in priest/pastor training through the development of resources based on Christian scriptures, and to develop church child safeguarding policies. PCC membership includes all mainstream national councils of churches, thereby reaching 75 per cent of the Pacific population.

Health workers are often designated as change agents, yet they commonly lack the skills, motivation and interest to go beyond clinical care. Key innovations highlight the importance of investing in health worker behaviour and motivation to accelerate behaviour change in communities and contribute to the efficient use of scarce resources. A **simple 'how-to' guide for health worker engagement with communities** was designed in Kiribati. Its implementation demonstrated the importance of strong mid-level management leadership in building robust engagement systems that include communities, local governments and multi-sectoral referral pathways to co-create health outcomes. This contributed to 54 per cent of caregivers with knowledge of five essential family practices, exceeding the annual target by 34 per cent.

UNICEF continues its partnership with **Pacific Kids Food Revolution** through a children's cooking show in an innovative way that uses the power of reality television to share messages on healthy eating using fresh, local food that can be grown in backyard gardens. This edutainment show airing throughout the Pacific has led to an explosion of interest in the importance of healthy eating for young people.