Update on the context and situation of children

With nearly 7.2 million inhabitants, Paraguay has a large young population. About 19.4% of the population is 0 to 9 years old, while 15.5% are adolescents (0-17 years). The proportion of people living in urban areas has increased over the years, estimated at 63% by 2020, and total poverty has decreased considerably, estimated at 23.5% (33.4% in rural areas) by 2019. Inequality gaps, however, persist with significant segments of the population highly vulnerable to downward economic and social trends.

The 2020-2024 Cooperation Programme in Paraguay is characterized by an innovative intersectoral and life-cycle programmatic approach, a stronger focus on gender and inclusive perspectives, and three overarching programme components: Early years (0 to 10 years); Adolescents (11 to 17 years); and Evidence generation to strengthen policies, plans and programs. In addition, the programme also emphasizes a strategic focus in municipalities with higher levels of vulnerability.

Due to the COVID-19 pandemic, the economic growth rate forecasted to 3.8% in 2020, contracted to -1%. By the second half of 2020, the workforce was 67% nationwide, the lowest proportion in the last three years, exacerbated by the fact that 64% works in the informal sector. The employment rate decreased 6.4 percentage points for women, compared to 2 percentage points for men. The economic recession and income inequality (Gini 0.46), and limited access to and coverage of basic services and social protection, severely impacted many vulnerable households especially those with children and adolescents.

The pandemic evidenced the need for greater social protection coverage, especially to address the unexpected period of mobility restrictions, and its negative effects on household income. Households adjusted their consumption amidst the crisis. In May 2020, about 13% of households were not able to afford essential food; which decreased to 8% by August. Among other measures, Congress passed a financial contingency law for USD 1.6 billion and the Government implemented economic, financial and social protection measures aimed at strengthening health services infrastructure, protecting employment, and assisting populations in poverty. Nearly 50% of households reported receiving government cash transfers by August 2020. Management of unprecedented amounts of resources destined to social expenditures, obtained mainly through external debt, demanded the rapid design of a beneficiary information system and the integration of various government programs.

The COVID-19 pandemic accentuated existing challenges to fulfill children’s rights. Despite progress made in maternal, child and neonatal health, important gaps that especially impact the poorest, indigenous and rural populations persist. Maternal mortality decreased from 162/100,000 in 2000 to 70.8/100,000 in 2018, and neonatal mortality from 10.9/1,000 to 9.4/1,000. Global malnutrition affected 4.1% of children under five years of age and chronic malnutrition 10.9%, with higher incidence rates in rural areas and indigenous population. Only half of newborns began breastfeeding within the first hour of life, and only 31.3% of children under 6 months were exclusively breastfed. By 2019, 14% of children under 1 year of age were not registered at birth (42.4% in indigenous populations). Maternal and neonatal health services (prenatal care, obstetric care and postnatal care) were affected by COVID-19 protective measures, which according to the MoH, may correlate with an increase in maternal and neonatal morbidity and mortality. About 75% of registered maternal deaths in 2020 were due to the third delay in obstetric care.

In the WASH area, according to official data, by 2019, around 88% of households had access to improved water sources, and 83% to safe drinking water; 82% counted with improved sanitation infrastructure, and only 8% had access to sanitary sewer systems. About 47.6% of people drink water contaminated with E-Coli. The WASH deficit has a more severe impact on peri-urban and rural marginal areas, populations living in poverty, dispersed communities, settlements and indigenous populations.
Before the COVID-19 pandemic, education already faced coverage and quality limitations. In 2020, 60% of children were enrolled in preschool, with evidence of greater inequality by area of residence: 68% of children in urban areas had access to preschool education compared to 48% in rural areas. Net enrollment rate in primary school was 75%, whereas in upper secondary school it amounted to 64%. Additionally, only 41% of those enrolled in primary school completed secondary school. School dropout was a contributing factor to child labor, about 26.4% of children and adolescents aged 5 to 17 (around 460,000) worked due to adults’ unemployment, extreme poverty and cultural factors. 1.5 million children enrolled in schools had to engage in remote learning, set up by the MoE due to the closure of schools. Paraguay reported that 97% of school children engaged in some form of virtual learning although primarily through platforms such as WhatsApp, which hindered reach and quality of education, particularly in rural areas.

More than 5200 cases of violence against children were reported throughout 2019. Family violence cases during lockdown increased, thus placing women, children and adolescents at greater risk. There was a 78% increase (in relation to 2019) in the number of calls to the domestic violence helpline (137). A report from the Ministry of Children and Adolescents (MINNA) revealed that in the first trimester of 2020, 4,754 violence complaints were received: 1,438 related to mistreatment, 327 to sexual abuse, 106 to abandonment, and 55 to sexual exploitation. Of the total cases registered through the helpline Fonoayuda 147 throughout 2020, 34% were abuse cases, 16% violation of the duty of care, 10% other at-risk situations, and 9% sexual abuse cases. Girls and adolescents were mainly affected, with consequences such as child/adolescent pregnancy. Closure of local offices of the child protection system impacted availability of services for prevention and response to violence against children.

Due to the COVID-19 pandemic, UNICEF rapidly reprogrammed key activities to provide emergency support to government and CSOs, especially to guarantee continuity of basic health and social services. In addition, adjustments of key activities requiring field presence were made. The CO reoriented financial resources to ensure that the most vulnerable families and children had access to essential supplies such as personal protection equipment and hand washing stations, and learning materials supporting continuity of education.

**Major contributions and drivers of results**

Major programmatic results in 2020 are aligned with Paraguay’s Agenda 2030 (in line with the SDGs) and with the Government Development Plan 2018-2023. UNICEF’s contributions focused on the continuity and access to improved health and WASH services for the prevention of the COVID-19; the creation of an enabling environment and the design and roll out of the government’s national strategy for early childhood development (ECD); the promotion of children and adolescents’ rights by ensuring the continuity of learning through remote learning and advocacy for a safe return to schools; the strengthening of institutional capacities to provide access to comprehensive child protection services and change harming social norms; and the participation of children and adolescents in civic engagement spaces. UNICEF’s work on data and evidence in social inclusion contributed to an informed decision-making process for life-cycle policies and programs that guide the implementation of the new Social Protection System (VAMOS).

The effectiveness of the government’s national preparedness and response to the COVID-19 was supported through UNICEF’s work on the delivery of essential personal protection equipment and WASH supplies; technical support to ensure access to health services; and capacity-building of front-line workers of government institutions – Ministry of Health, Ministry of Education, and MINNA. UNICEF’s co-lead role with the MoH in the implementation of the Risk Communication and Community Engagement pillar (RCCE), funded by USAID and under the Emergency Operational Center (COE), was a major driver of synergy between the Ministry of Information and Communication Technologies (MITIC), the PAHO/WHO, the Direction of Safe Water and Sanitation (DAPSAN), Ministry of Public Works (MOPC), the Urban Settlements Informal Network and other partners, and
contributed to effective coordination and promotion of key actions to engage communities, especially the most vulnerable, for adherence to key behaviors for prevention of COVID-19 (over 2.9 million people reached).

Through the RCCE pillar, UNICEF implemented the first COVID-19 perception survey, which informed a data-driven communication strategy to promote prevention measures and to raise awareness on COVID-19. Data collected included public perceptions about risk of contracting the virus, knowledge of the symptoms and forms of prevention, how the pandemic affects families and children in education and domestic violence situations experienced during lockdown, and reliable sources of information. This was complemented by ICSO’s (Social Sciences Institute) study on the effect of COVID-19 on children and adolescents, including inequalities in access to distance education and the risks of school dropout and interruption of health care. Data from both studies were widely disseminated and informed public debate, and high-level authorities (MoH and MoE) regularly used the data for public engagement and decision making.

The design and launch of a basic package of services (prenatal care, newborn care, child nutrition, gender-based violence, early childhood education and stimulation, birth registration, etc.) with an emphasis on ECD and a gender-responsive approach, key elements of the National ECD Strategy (Kunu’u), benefitted approximately 37,000 people in its initial roll out in 4 government-prioritized districts (selected based on criteria such as poverty rates in line with the Poverty Reduction National Plan). UNICEF’s support to the national government and strong public advocacy about the importance of continued ECD, especially in the context of the pandemic, were key drivers of this achievement. UNICEF also contributed to the establishment of coordination mechanisms between the two government institutions leading the national ECD strategy –MINNA, and the Technical Unit of the Social Cabinet (UTGS) of the Presidency, to ensure the operational linkage between the ECD Strategy and VAMOS. UNICEF also played a strategic role in increasing visibility of VAMOS among the general population, government institutions and cooperation agencies, key drivers for the success of the program. The approval of the European Union’s financial assistance to the Government for the scaling up of VAMOS coincided with UNICEF’s support to start on-the-ground service delivery and to implement the communication strategy of VAMOS.

UNICEF strengthened the MoH’s capacity for the improvement and expansion of maternal and child health services and programs, including response to COVID-19, through capacity-building of approximately 2500 first-level health care workers (HCW) to provide timely care services, specifically in nutrition and respiratory conditions affecting early childhood. These professionals increased their knowledge and capacities to improve service delivery and counselling to families and children. The incorporation of the training course on the MoH web platform makes it available to all health workers in the MoH and will potentially increase reach and impact. Around 44,650 women and children received essential health care in prioritized departments of San Pedro, Concepción, Asunción and Central.

Promotion of maternal and neonatal care, exclusive breastfeeding and young children nutrition was strengthened through the capacity-building of front line health workers, and the presentation of the operational guidelines for the Mother-and-Baby-Friendly Health Service Initiative (ISSANM) that will serve as the basis for the certification of the government’s health services (10 hospitals and 80 family health units) covering promotion, protection and support of breastfeeding. As part of the support to the Neonatal Alliance and the National Mobilization for the Reduction of Maternal and Neonatal Mortality, UNICEF commissioned the development of the Red Code Software, for real time monitoring, management and auditing of obstetric and neonatal care emergencies, which is expected to contribute to the reduction of maternal and newborn deaths in 2021.

Another significant result was UNICEF’s support to the continuity of learning of primary and secondary school children and adolescents. For primary school children (6 to 10 years old), UNICEF focused on indigenous families and children, the most vulnerable population in the country. The MoE and UNICEF jointly developed educational podcasts (Nahendumi) and supporting materials to respond to the learning needs of approximately 45,000 children (51% boys/49% girls), including children from three indigenous groups. In addition, out of the total number of children reached, 3% have some type of disability.
UNICEF strengthened the continuity of educational services for the 10-17 age group by building the capacities of school 6100 school teachers in the use of e-learning tools, platforms and educational materials for distance education, through the implementation of the program @Maestros Conectados in collaboration with private sector organizations (TIGO/Millicom) and through communication strategies with an interdisciplinary and inclusive approach. These teachers potentially reached 561.000 children and adolescents. More than 65% of students reached are over 11 years old and in the last years of primary and secondary school (52% are girls).

With the World Bank and UNESCO, UNICEF advocated to and influenced the MoE’s planning for a safe return to schools. Through high-level virtual forums and technical meetings, UNICEF facilitated exchange of global reopening strategies, guidance notes, and experiences in countries across the region. Technical assistance was provided to the MOE for the development of the 2021 Safe Return to School Plan, and jointly with the Paraguayan Red Cross, adjustments to the safe school operational guidelines were developed at the end of 2020, with a view to a gradual return in 2021. Data about WASH needs in more than 6,000 educational institutions nationwide were collected and provided to the MoE, which informed a gap analysis and plans for a safe return to schools.

Approximately 500 educators and psychologists, and more than 14,000 children aged 0 to 5 years (52% girls), including 745 children with some type of disability, benefitted from UNICEF’s technical support to the MoE and the MINNA in the development of guides and content packages with specific guidelines for distance education and support to families on psychosocial issues, early learning and family cohesion (e.g. Family Orientation Guide for Early Stimulation and Development in the COVID-19 emergency). Families and children were supported with culturally relevant tools and guidelines designed to ensure the continuity of child stimulation, particularly the promotion of early literacy.

UNICEF strengthened capacities of parents and caregivers on positive parenting through a communication strategy that included digital and traditional media channels, with geographic emphasis in the country’s capital, Asunción, and in prioritized districts in 6 departments. Parents were supported through online platforms developed in partnership with private sector companies. These included, educational programmes broadcast on Cable TV with an extensive reach; specific online talks about parenting without violence in times of COVID-19; and short audiovisual capsules and explanatory videos. In addition, “Diario de Casa”, a WhatsApp-based platform, which established a direct communication line with over 6000 subscribers, provided accessible information on how to educate without violence, support the continuity of learning through games, and support children’s mental health.

UNICEF supported the actions of the National Children and Adolescents Protection and Promotion System in the prevention and protection to different types of violence affecting children and adolescents. The system’s capacities to ensure access to services were enhanced, mainly through adaptation of on-site services’ delivery affected by preventive COVID-19 measures. Improved interventions emphasized an enhanced articulation of interdisciplinary work (including judiciary actors’ role) in the response to cases of violence against children and adolescents.

The 147 and 137 telephone helplines and the capacities of the direct response teams were improved through a partnership with UNDP that included cross sectoral and interagency support to the Ministry of Women and the MINNA. Communication campaigns such as “Todos somos Responsables” (Everyone is responsible) and “METETE” (Get involved) - were developed to prevent violence against women, children and adolescents within the family and community environment.

Local diagnoses were conducted in the Triple Border area (Paraguay, Brazil, Argentina), wherein risks of child trafficking, child labor and sexual abuse are prevalent, to assess the needs of local institutions and prioritize actions. UNICEF supported the MINNA’s child protection response strategy in the Triple Border area with a focus on protocols for articulation across complaints; criminal prosecution of situations of violence; promotion of adolescent participation with a focus on prevention, employability and resilience; training of the national child protection system’s stakeholders in prevention and protection; development of an App to collect adolescents’ complaints and provide key information; and follow-up of migrant adolescents, alone or accompanied, on their return to Paraguay due to the COVID-19 situation. At the municipal level, in collaboration with the Councils for the Rights of
Children and Adolescents (CODENIS), UNICEF supported intersectoral coordination to implement strategies to reduce different types of violence in 8 municipalities based on guidelines and protocols locally validated. Improved coordination will facilitate the future replicability of actions in other municipalities.

While adolescent participation has increased in recent years, mainly among organized groups in the education sector, it remains as a great challenge due to strong resistance to giving space to the voices of adolescents. The CO supported youth-led participation spaces and adolescent engagement focused on their proposals for solutions to the issues that concern them. A promising innovative example was the local implementation of Mi Formula (My formula), a technique to facilitate debate and discussion spaces that integrate different sectors and organized youth groups that are generally working on a specific human right issue but rarely share their work with each other. More than 1000 adolescents were part of the online discussion spaces under My Formula.

Collaborative actions with youth groups (i.e. National Network of Children and Adolescents (REDNNA), National Federation of Secondary Students (FENAES), Association of Primary School Student Centres) that have been leading and promoting youth participation for the fulfillment of their rights was initiated with a view to scale them up in 2021, including the roll out of U-Report. A total of 6352 adolescents participated in or led citizen engagement actions with UNICEF’s support.

Adolescents also engaged in UNICEF-supported efforts to address and mitigate the impact of COVID-19 on adolescents’ mental health. The CO supported a series of youth-led webinars and debates, applying the Mi Formula methodology to raise awareness about mental health and to promote adolescents’ use of health and counselling services.

Data collection on WASH conditions in 6200 schools (78% of schools nationwide), in 57 Family Health Units (FHU) and in 4 hospitals in the departments of Asunción and Central provided the MoH and MoE with key information to improve WASH services. The data collection mechanism was designed in collaboration with the Interinstitutional Water and Sanitation Roundtable (under the Ministry of Public Works and Communications), and it was validated by the MoE and the General Directorate of Statistics, Surveys and Censuses. Data collected from each educational center will be integrated into the MoE’s Information System, and linked to Individual Student Records, thus strengthening the annual microplanning process in schools. This will also improve data disaggregation presented in the national report to the Joint Monitoring Program for SDG 6 compliance. A UNICEF-supported study on national and local sector expenditure fueled an evidence-based debate about the system’s institutional model, which in turn led to the creation of the WASH Observatory.

Another result was the strengthening of coordination mechanisms to improve local management capacities with an intersectoral approach. An illustrative example, part of the Child-Friendly Municipalities Initiative, is the experience of inter-institutional coordination and participatory management developed in the Central Chaco territory. A team of 5 CODENIs in Central Chaco was formed to support and manage joint actions. Organizations and local institutions in Mariscal Estigarribia (a priority district in Chaco Central) developed a joint workplan thus consolidating a coordinated approach at local level that involved all UNICEF program areas and helped reach approximately 25,000 children and adolescents, especially indigenous people.

UNICEF implemented the Evaluation of the National Early Childhood Plan 2010-2020 which supported strategic decision-making by the MINNA. The evaluation of the Plan was a key input for the elaboration of the new Plan 2021-2030 and contributed to policy dialogue on the SDGs and Investment on Children and Adolescents that brought together ministers and directors from government institutions, civil society representatives, academia and international cooperation organizations to identify key priorities for increased investments in children’s programs.

Important progress was made in consolidating collaboration with Academia, through a partnership with the Institute of Social Sciences, that led to concrete outputs such as the creation of a Diploma Course on inequalities and human rights in collaboration with FLACSO (Latin-American Faculty of Social Sciences) and CDIA, and public debates about national trends on child and adolescents issues.

Decision-makers, broad audiences, and the private sector increased their engagement with and identified UNICEF as a leading organization with a voice on children and adolescents’ matters. Followers in social networks increased from 65,000 in 2019 visitors to 249,641 in 2020, and 35
advocacy and training webinars engaged 10,883 participants. UNICEF was mentioned 353 times in key news stories compared to 270 in 2019. A culturally relevant and targeted communication strategy aimed at young people for prevention of COVID-19, was developed with MoH and USAID. It generated more than 9,413,079 impressions on Facebook, engaged over 335,660 young people, and reached approximately 1,500,000 people through Radio and TV broadcasts. Actions leading to these results are aligned with national development priorities and expected outcomes outlined in the UNSDCF, the CDP 2020-2024 and the Annual Management Plan, to advance the fulfillment of children and adolescents’ rights with a lifecycle approach. As part of the implementation of the UNSDCF, UNICEF’s lead role of the People working group and its engagement in other working groups helped coordinate actions with other UN agencies.
Partnerships with government institutions, CSOs, private sector, and United Nations agencies continued to play a key role in UNICEF’s contributions to achieving results for children. Collaboration with the MINNA was key for the evaluation of the National ECD Plan 2011-2020; the launch of the National ECD Strategy, and the development of the National Children and Adolescents Plan 2020-2024.

Other collaborations with government counterparts included with the UTGS and the UGPR, charged with implementing the Social Protection System VAMOS, particularly the on-ground service delivery. UNICEF worked with the Ministry of Women, the Ministry of Justice, the Binational ITAIPU, the MITIC, the National Secretariat of Persons with Disabilities, and the Office of the First Lady on initiatives to address children’s needs in the context of the pandemic response.

Partnerships with private sector included with the U.S. Fund for UNICEF, through American Airlines, Kimberly Clark, and MILLCOM/Tigo which contributed to a rapid response to the COVID-19 pandemic. Other partners included Las Tacuaras, Colgate-Palmolive, Club Media, Focus Media, and Global Compact, which helped reach approximately 512,592 beneficiaries.

Collaboration with CSOs contributed to on-ground actions at local level to reach vulnerable communities. Among them: ALDA, Paraguayan Red Cross, the Front for Children and Adolescents, the Network of Informal Urban Settlements, the Early Childhood Network, Dequeni, Fortaleser, CDIA and adolescent organizations such as REDNNA and FENAES. Efforts to strengthen evidence generation and advocacy resulted in collaboration with Global Infancia and the Journalists for Children Network, FLACSO and ICSO to build capacities, strengthen policy dialogue, and engage the academia, public officials, and civil society to promote evidence-based policy debate.

Collaboration with PAHO, UNESCO, and the World Bank (WB) focused on advocacy efforts for a safe return to schools and educational centers. UNICEF and the WB also assisted the Direction of Safe Water and Sanitation (DAPSAN) to strengthen their capacity to formulate evidence-based WASH interventions and services.

The Project “Paraguay protects women, children and adolescents against violence, in the context of the COVID-19” led by UNDP, jointly with UNICEF and other actors, strengthened institutional capacities for the prevention and attention to violence and communication actions to reach vulnerable groups, especially in rural areas.

Cooperation with the EU and ILO was key to the roll-out of VAMOS, including the definition of a basic package, design of the communication strategy, and territorial coordination for the delivery of services in prioritized territories as part of the demonstrative phase with a view to scale it up in 2021.

Partnerships with and support from donors played an important role. In addition to financial and in-kind contributions from private donors, support from the USAID and from the EU, through ECHO, to expand WASH interventions, was crucial for implementation at scale and to reach thousands of children, families and communities through the UNICEF’s COVID-19 Response Plan.

With LACRO thematic funds, UNICEF started implementation of priority actions on adolescent development and protection against violence and sexual exploitation in the Triple Border Area specially to increase community engagement and awareness, to be scaled up in 2021.

Lessons Learned and Innovations
The COVID-19 pandemic evidenced the structural weaknesses that country still faces in several
areas, including health, education and protection services. UNICEF reprogrammed key activities and reoriented financial resources to support government institutions and CSOs in their response to the pandemic, specially to guarantee continuity of basic maternal and child health, education and social services. The rapid flexibilization of rules and procedures by the organization were very helpful in engaging in the response early on, under unprecedented conditions.

Online formats and the COVID-19 safety measures initially hindered access to field work, including monitoring and measuring of the impact of the training activities. An accelerated process to change and adapt work modalities to online platforms and virtual activities was a major lesson learned for the CO. Training activities such as the inclusive education and universal learning design (DUA), the @maestrosconectados, and the maternal and child health modules for health care professionals, as well as monitoring processes of field activities, shifted to online formats. Despite those challenges, a survey conducted among teachers participating in the online training modules showed that online training was well accepted by (around 95% of participants indicated satisfaction with the course). Similarly, health care professionals also expressed satisfaction with online training.

UNICEF also worked with community-based organizations with proven fieldwork access and experience. Existing community-based networks and organizations such as the Network of Informal Urban Settlements facilitated contact and reach to families, while work with community-based networks such as Techo and Habitat facilitated work with adolescents. Work with these organizations with capacity to promote community participation spaces and work with adolescents in prevention and protection against violence will be key to the CO’s work in 2021 on adolescent engagement.

Sustained advocacy and support to government institutions to advance the ECD agenda paid off, despite the challenges posed by the COVID-19 pandemic. Key government stakeholders and CSO partners continued to show strong commitment and political willingness to support ECD, including the launch of the ECD National Strategy with participation of the President and other government authorities, and the integration of ECD-related components in the roll out of the new Social Protection System VAMOS. However, the challenge of effective collaboration and coordination among social services institutions persists and it should be further addressed. For example, UNICEF’s technical support to facilitate coordination and collaboration mechanisms between the institutions leading the implementation of the National ECD Strategy and their articulation with the Health and Education sectors- was very strategic.

With support from UNICEF and the International Labor Organization (ILO), a Technical Coordination Committee of VAMOS was established to foster a participatory process for the roll out of the program. This example of interagency coordination provided important lessons that could strengthen UNICEF’s role in the Joint Working Program – UNSDCF and lead to new cost-effective coordination opportunities at local level to maximize impact of interventions as well as their sustainability.

Proactive engagement of stakeholders in key initiatives and programs remains a key lesson learned, especially with regards to sensitive issues. For example, the National Plan for Children and Adolescents, developed with UNICEF support, was strongly questioned by some social actors, mainly due to misunderstandings regarding concepts such as gender equality and inclusion. Following a series of public debates, the MINNA agreed to implement a new series of workshops and public forums to address key questions raised about the gender-equality approach of the Plan and eventually achieve its approval. The UNICEF CO will continue to provide technical support to ensure the promotion and fulfillment of adolescents and children’s rights in line with the country’s National Development Plan and the Sustainable Development Goals.

While the implementation of the WASHSIS survey to gather relevant data about the water and sanitation conditions of nearly 4 thousand schools was very successful, challenges such as high logistics costs to regularly reach schools in rural areas, and the lack of national standards for data collection had to be addressed. The involvement of school principals was critical to overcome these
shortcomings and to successfully implement the survey. On the other hand, this experience also increased cooperation, coordination, and knowledge management opportunities, and it represents an innovative contribution to the MoE as it enhanced its institutional information and knowledge management capacities. The tool designed for the rapid assessment and data collection, as well as the data gathered, was integrated into the MoE’s information system and in the Individual Student Records which should help monitor and implement actions aimed at improving the WASH conditions of schools and support to children.

In terms of the CO’s structure to achieve programmatic effectiveness, the intersectoral nature of the new structure required additional efforts to improve communication, articulation, and coordination among the different programmatic components. The creation of intersectoral teams under each of the Outcome Areas, comprised of technical staff from each of the technical areas, has gradually become more coherent including important steps towards coordination and engagement with government partners. Early Child Development, under the Early Years Outcome, for instance, has brought together staff and/or consultants from Health and Nutrition, Education, Social Inclusion, Child Protection, WASH, C4D, and Communication and Advocacy. Similar efforts were undertaken for the Adolescents Outcome.

Lastly, the COVID-19 pandemic and the need for telework posed many operational challenges to the CO, but it also provided many lessons learned, especially regarding the need to safeguarding Staff’s well-being and mental health, enhancing efforts to guarantee comfortable spaces for face-to-face and/or virtual work. At the same time, it allowed the CO to develop new tools and strategies to ensure the continued technical assistance to country partners and attention to the most vulnerable groups. It is also worth noting that the Operations area provided key and relevant support in the procurement and acquisition of critical supplies for the response to the pandemic, including the purchase of COVID-19 PCRs and other equipment in support of the Ministry of Health and other government entities. This required greater engagement of Operations in emergency response and wider programmatic work which has contributed to a stronger whole office approach.