Update on the context and trends

The COVID-19 pandemic caused an unprecedented crisis, straining already overburdened social and health service delivery systems, triggering a global humanitarian, socio-economic and human/child rights crisis, and exacerbating the inequalities and vulnerabilities of children and their families. By the end of 2020, global COVID-19 reported cases had reached 80 million with 1.7 million reported deaths. However, official figures are likely underreported due to poor testing capacity of many healthcare systems and weak surveillance.

In just a few short months in 2020, the coronavirus disease has reached every country in the world, defying predictions of the pace and direction of its spread. It has taken very different courses in different regions, and in different countries in the same region. While the COVID-19 pandemic is universal in scope, its impacts are deeply unequal, as those left behind by the world’s uneven progress bear the brunt of its most damaging effects. The crisis exacerbates existing vulnerabilities, discrimination and exclusion.

Emerging in a world marked by deep inequalities, the COVID-19 pandemic has fuelled an unprecedented global crisis that has quickly become a crisis of child rights. While children seemed to be spared its worst health effects, they face devastating consequences from its socioeconomic impacts, as countries shut down their economies to limit the spread of COVID-19, households lose their livelihoods, and health and social services are curtailed. These impacts threaten to reverse decades of hard-won development gains for children, and jeopardize the accelerated progress now needed to achieve the Sustainable Development Goals (SDGs) and realize the rights of the world’s most vulnerable children.

The response to the COVID-19 Pandemic directed Programme Division’s (PD) actions and results in 2020. PD contributed to creating and guiding the programmatic content to UNICEF’s global response to COVID-19, as part of UNICEF’s L3 response, and under the overall leadership of the Global Emergency Coordinator (GEC). This process provided additional opportunities to strengthen programme’s contributions to humanitarian action and the accountabilities of each Section in supporting emergency response.

Major contributions and drivers of results

PD played an important role in efforts to support countries in their response to COVID-19, especially to mitigate the impact on children and support a sustainable recovery. Besides the sectoral guidance produced (details later in this narrative), PD consolidated its approach early in the pandemic in the Guidance Note on Programming Approaches and Priorities to Prevent, Mitigate and Address Immediate Health and Socio-economic Impacts of the COVID-19 Global Pandemic on Children - an important tool to provide programmatic coherence and consistency across UNICEF. The guidance, updated in November, supported the organization, country offices in particular, to reprioritize and orient programmes to address the crisis and its impacts.

PD also participated in the development of monitoring tools to track the immediate impact of the pandemic and engaged with D&A, Office of Global Insight and Policy, Innocenti, and external research institutes to assess the long-term effect on child-related indicators. PD Sections worked with DAPM and EMOPS to prioritize the collection and use of disaggregated data, including supporting the successful merger of humanitarian and development data collection and reporting. This allowed real-
time access to situational information to inform and advance programmes according to the evolving situation and paved the way for a more systematic approach to joint planning, monitoring and reporting.

PD showed its **programmatic leadership** by shaping the development of the 2022-2025 SP, including the institutionalization and consolidation of programmatic areas that have recently grown in importance e.g. Climate Change, Humanitarian-Development-Peace Nexus, and Mental Health. Moreover, as part of the wider organizational improvement efforts, PD undertook an in-depth review of its systems, structures, and ways of working with the primary aim to support enhanced programme excellence across UNICEF.

**Survive and Thrive**

2020 saw a significant disruption in delivery and utilization of essential **maternal and newborn health services**. Support for continuation of services was provided through development of global guidance notes. Quarterly data were collected from 48 countries to monitor service disruptions and analyse the impact. Findings were disseminated and presented to key stakeholders and donors with the aim of informing decision making and guide recovery efforts. PD-Health also provided key direct technical assistance to countries. Efforts included developing national response and health care workers capacity to improve quality of services. 47 out of 59 priority countries have been validated for MNT elimination, and another three countries have been partially validated. Despite the pandemic, UNICEF supported vaccination of more than 8 million women of reproductive age in six priority countries with supplementary immunization activities. Three new countries started delivering the **HPV vaccine** through their primary health care systems and an additional three successfully planned and prepared for its introduction. Focus on equity and zero-dose children and communities was maintained and mainstreamed into IA2030 and Gavi 5.0 as well as the recovery of immunization services following COVID-19 related disruptions. This directly resulted in Gavi’s commitment of additional $500 million to support enhanced service delivery for immunizations as well as broader primary health care in communities with high proportion of zero dose children. Besides, PD-Health took on a leading role in the ACT/COVAX initiative.

PD-Nutrition responded to the increased need for evidence-based early-childhood nutrition guidance during the pandemic with a series of documents and strategies produced together with WHO and other key partners. As the lead agency of the Global Breastfeeding Collective, UNICEF focused its advocacy efforts on skilled breastfeeding counselling: a policy ask for 2020 and a key priority for programme countries. To strengthen the legislative environment, PD-Nutrition produced a series of legal guidance documents including on the International Code of Marketing of Breast-milk Substitutes and International Trade, a Parliamentarian Handbook on Food Systems and Nutrition and an Internal Guidance on Regulatory Framework to tackle childhood overweight and obesity.

A major milestone achieved for improving young children’s diets was the release of UNICEF’s programming guidance. The guidance promotes a multi-systems approach to improving child diets and was applied in both regular and COVID-19 programming contexts, with more than 12 COs adopting it to design their policies, plans, and programmes on young children’s diets. Further, guidance on programming for improved child diets in the context of COVID-19 was released. PD-Nutrition worked closely with partners at global level to ensure that programmes for the early detection and treatment of child wasting have the necessary technical guidance, financial resources and programmatic coordination to ensure continuity of services in the context of COVID-19 and maintain previous levels of coverage in the face of severe service disruptions. The joint FAO, UNHCR, UNICEF, WFP and WHO Global Action Plan on Child Wasting Framework, was a key product related to early detection and treatment of child wasting and was used to launch the development of 23 Country Roadmaps for its implementation.
PD-HIV kept supporting the implementation of the global agenda on prevention and treatment of HIV. The team has provided direct online support to countries, including Thailand, the Philippines, and Cote D'Ivoire, by providing technical assistance to government-led pilots and demonstration projects to validate the acceptability and feasibility of delivering oral Pre-Exposure Prophylaxis to most at-risk adolescents, using multifaceted delivery approaches (peer-mediated, public sector-led, private provider networks, and digital technologies). Similarly, the team supported access to age-appropriate sexuality education implemented at scale, including Botswana, Thailand, Mozambique and Cote D'Ivoire. PD-HIV also supported point-of-care (POC) early infant diagnosis (EID) in 20 countries in sub-Saharan Africa, including investments (technical assistance, testing commodities, community engagement) to scale up POC in 10 West and Central Africa countries.

Technical support to enabling environments and uptake of multi-sectoral ECD packages was strengthened in 40+ countries. The programme focus and implementation strategies for field engagement were adapted in technical guidance, capacity building, and learning exchanges to respond to the exacerbated crisis of care and learning of young children and their parents/caregivers’ well-being in the context of COVID-19. Over 30 countries adapted their ECD and parenting interventions and approaches. An organizational Parenting Strategy was co-developed through collaborations across multiple HQ Divisions, PD sections, ROs and COs.

Learn

PD-Education developed, in partnership with UNESCO, the World Bank, and WFP, the Framework for Reopening Schools. Launched early in the pandemic, it helped dozens of governments to adapt their policies so children and adolescent can safely return to classrooms. To ‘build back better’ following COVID-19, PD-Education has spearheaded the ambitious programme to ‘Reimagine Education’, which fosters partnerships between public and private sectors and young people to ensure the most vulnerable communities’ access to digital learning opportunities, while maintaining a multiple-pathway approach to education and training. The initiative promises to overcome the digital divide, advancing innovative solutions for capacity building of teachers and caregivers and preparing youth with 21st-century skills.

Guidance and support on COVID-19 safety protocols for early childhood education were developed and disseminated. A user-friendly 'ECE Accelerator Toolkit' was finalized to help strengthen systems, and continued advocacy is underway to protect post-COVID-19 investments in pre-primary education.

Work to strengthen provision of health and nutrition services in schools continued in partnership with WFP. In 2020 UNICEF took over the chair of the Global alliance of disaster risk reduction and resilience in education systems, utilizing this new role to launch an update of the Comprehensive School Safety Framework, strengthening the components on climate change and public health emergencies.

For CwD, UNICEF supported the development of global technical guidance on remote learning and return to schooling with specific regional strategies. PD-Education also developed a resource catalogue and a practitioner’s guide on inclusive remote learning. UNICEF continued its partnership with UNESCO’s IIEP to strengthen the capacity of partners through training on Foundations for Inclusive Education Sector Planning. Two cohorts from ESAR, 72 participants and ROSA, 63 participants completed the training.

Protected from Violence & Exploration

PD-Child Protection played a leading role in building interagency understanding of the impacts of COVID-19 and consensus on strategic response interventions. These included the implications of COVID-19 on protection of children in the home and online, as well as on the mental health and psychosocial wellbeing of children, caregivers, and frontline workers. Through PD-CP leadership,
UNICEF developed strategies to maintain services, e.g. UNICEF’s ‘COVID-19 Operational Guidance for Implementation and Adaptation of MHPSS Activities for Children, Adolescents, and Families. Recognizing the essential role of the social service workforce, CP advocated for and issued technical guidance to strengthen the capacities of social service workers to respond to the needs of children during the pandemic. UNICEF was a major force behind the multi-partner Parenting for Lifelong Health COVID-19 initiative, which reached 134 million families.

CP issued technical guidance to support country offices in ensuring that child marriage and female genital mutilation would remain on the agenda during the pandemic response and recovery. 13 technical notes were also published to provide support on other areas related to harmful practices.

The UNICEF-led GBV AoR Helpdesk issued the first publicly available guidance on adapting GBV case management and the GBVIMS Steering Committee spearheaded tips on GBVIMS/GBVIMS and Case Management, with an accompanying podcast series as part of UNICEF’s interagency roll-out of the Interagency GBV Case Management Guidelines.

As part of ongoing work to facilitate and assess the use of knowledge around COVID-19 in Child Protection, a pilot project was initiated to develop a framework that will enable users to examine and assess how their knowledge product is being utilized. The framework will be rolled out as a supplement to the series of Child Protection COVID-19 learning briefs by HQ (GBV and MHPSS are already published), and results and lessons from the roll-out will be used to refine the framework further to create a ‘Knowledge Use Assessment Framework’ that is applicable beyond COVID-19 and Child Protection.

In 2020, PD-Migration developed practical guidance, worked across sectors to ensure all critical organizational guidance included consideration for children on the move and generated evidence to monitor the situation. The team led on global advocacy on issues faced by migrant and displaced populations during COVID-19, such as stranded migrants, returns, release from immigration detention, decline in remittances, and inclusion in prevention and response efforts. UNICEF/UNHCR Blueprint was rolled out in 11 pilot countries - a major boost for a true refugee inclusion agenda and the implementation of the Global Compact on Migration (GCM) and the Global Compact of Refugees (GCR).

Safe & Clean Environment

The entire UNICEF WASH programme was mobilised to respond to the COVID-19 pandemic. This included IPC response and the delivery of hygiene supplies on a large scale, expanded hand hygiene promotion campaigns and urgent steps to ensure the functionality of existing water and sanitation systems, with a focus on marginalised groups including displaced people, and poor urban neighbourhoods. PD-WASH developed a comprehensive set of guidance materials for field staff and partners on WASH and COVID-19. Regular WASH programming also continued, although constrained by the pandemic. UNICEF continued to strengthen sectoral systems in programme countries, support the elimination of open defecation, and shift its programming towards more climate resilience.

With HQ support, UNICEF implemented community-based handwashing promotion programmes in 110 countries. UNICEF procured and distributed tens of millions of hygiene kits, brokered major donations of soap from global manufacturers, and worked with local companies to increase soap manufacturing capacity and strengthen supply chains. Efforts coalesced around the Hand Hygiene for All initiative with WHO and others. Also with WHO, PD-WASH launched the State of the World’s Sanitation report, a flagship document. Through the ‘Periods don’t stop for pandemics’ campaign, UNICEF helped girls and women get access to menstrual pads and information. PD-WASH and UNHCR advocated for the inclusion of refugee support into national WASH policies.
and budgets and the development of joint action plans in host countries. Water Under Fire Report Vol. 2 was launched with the Global WASH Cluster to promote predictable, quality humanitarian responses. PD-WASH evaluated programming in protracted crises, assessing response and coordination activities in 21 countries across five regions.

The PD-Urban team developed global guidance materials to strengthen/adapt social services to respond to the health, social and economic crisis. The Team supported local governments in 55 countries to make their development plans child-responsive, updated the urban strategy and issued a procedure for context-specific urban programming.

PD-CERP supported HQ, regional and country offices, in accelerating climate actions leading to 57 country offices directly engaging in climate and environmental policy support. UNICEF published a range of advocacy documents, including the organization’s global response to climate change in the face of a COVID 19. These were complemented by eight climate landscape analysis for children reports. In response to widespread requests from children and young people to learn more about climate change UNICEF launched its first U-Report Climate chat bot with over 12,000 young people engaged. Similarly, CERP supported the development of a toolkit for young people to engage in climate policy that now serves as a model for other global partners as part of the contributions to the World’s Largest Lesson.

Equitable Chance in Life and Cross-Sector

Child poverty was at the centre of the debate on the impacts of COVID-19 and the need for a tailored socio-economic response. As soon as the crisis hit, PD-Social Policy began a rapid monitoring of socio-economic situation in countries. The mapping clearly demonstrated to partners how UNICEF was able to respond swiftly by engaging in over 70 socio-economic impact assessments, and 62 country level analyses to highlight the disproportionate impact of the crisis on children. SIP also supported country offices in their responses, through sharing best practices and guidance and provision of TA. Significant work was also undertaken in engaging and learning from countries on the policy and programme responses to child poverty. Child poverty and social protection became one of four key advocacy priorities.

Given the socio-economic impacts of COVID-19, the top priority in 2020 was to ensure that social protection featured strongly in both UNICEF and countries’ responses. SIP lead the drafting of the interagency Joint Statement on social protection as well as the statement on Gender Responsive Social protection; coauthored the social protection pillar of the Secretary General’s socio-economic response to COVID; lead the grand bargain sub group on social protection; and launched the global report on Universal Child Benefits, connecting its recommendations to the pandemic.

In Public Finance for Children, the focus was on strengthening national social sector budgets, to ensure the adequacy, effectiveness, efficiency, transparency and equity of national social sector budgets. The COVID-19 crisis was a major challenge to social sector spending and UNICEF country offices were provided technical support to engage effectively with Governments and International Financial Institutions to leverage resources for children as part of their response, and to use the crisis as an opportunity to expand social spending.

While COVID-19-related measures constrained in-person engagement, online platforms for adolescents increased and provided new opportunities. 7.2 million adolescents participated in civic engagement interventions in humanitarian and development settings. Areas of engagement included COVID-19 awareness raising, countering harmful social norms and promoting peace and social cohesion.

The Disability Section and Supply Division finalized a Joint Action Plan for Assistive Technology with WHO, with the aim to drive catalytic impact to provide products at scale. The momentum created
by this collaboration will also support the United Nations Disability Inclusion Strategy (UNDIS), as well as contribute to the progress towards achieving the SDGs 3, 4, and 10. The Section kept investing in data and evidence generation. Seventeen survey reports were released, which contained data collected through the Child Functioning Module. This number includes 15 MICS surveys, as well as two national surveys done with other forms of UNICEF’s support.

The C4D team worked to reaffirm UNICEF’s leadership in Social and Behaviour Change, including partnership with WHO and IFRC to establish the Risk Communication and Community Engagement Collective Service, a cluster-type mechanism overseeing the pandemic response, and co-chairing of the community workstream of the COVID-19 ACT Accelerator. With a joint call-to-action by ED Fore and in collaboration with the world’s largest inter-faith network – Religions for Peace - a global Faith-in-Action COVID-19 Response initiative was launched with 13 of the top World Religions. Strategic partnerships also facilitated integrating community engagement standards in MNCH Quality of Care, and developing contact tracing, community engagement and M&E aspects of the GAP/PHC framework. A Global Committee on Social Norms was also formed to accelerate the development of interagency strategies and tools.

The Gender team kept working with country and regional offices to guarantee that the advancements reached was not completely erased by COVID-19. A series of guidance for gender integration in COVID-19 response were developed and launched: “How-to” for strengthening gender analysis; Family friendly policies; Parenting strategies; Addressing stereotypes; and promoting gender responsive social protection. Partnerships were strengthened, including the launch of UNFPA-UNICEF Global Programme to End Child Marriage Phase II; the Global Resilience Fund to promote girls and young women’s activism in crisis; Lego; Geena Davis Institute, Aerie, Getty and Dove to address gender related stereotypes in advertising and marketing. The Spotlight Initiative was launched in Central Asia, Caribbean and Pacific, The Africa and Caribbean regional programmes mobilized USD 14 million for UNICEF COs. In 2020, the team also advanced on the conceptualization and application of adolescent girl empowerment and gender transformation programming approaches for the Gender Policy (GAP3).

The Human Rights Unit supported child rights monitoring by global human rights mechanisms, including technical assistance to 28 country offices reporting to the CRC as well as providing general orientation and guidance to 61 countries going through CEDAW, CRPD or UPR reviews. As a result, recommendations made to State parties by the various mechanisms largely reflected national priorities and therefore formed a solid normative base for improving the lives of children and reinforcing States’ accountability.

The PD business unit, in consultation with PFP, drove the formulation and activation of the global UNICEF B4R framework. In 2020, the team has: (i) integrated business into UNICEF programme strategies (for example, the development of thematic positioning paper on nutrition and the F&B industry in the context of COVID and emergency programming); (ii) invested in evidence generation (in partnership with the EO, implemented the global B4R readiness assessment); and (iii) further implemented the B4R capacity building strategy.
Lessons Learned and Innovations

UNICEF’s response to COVID-19 showed the importance of adaptive and agile programming, as well as flexible management. Programme Division investment in establishing global partnerships and coordination platforms in recent years, including in the humanitarian sphere, was critical to creating the momentum for unified advocacy and rapid delivery of technical guidance to guide programming at the global, regional, and national level. Flexible management of the Programme Division Directors Office empowered PD Sections to find their most efficient course of action, leading to rapid adaptations in how HQ implements its support to countries.

Collaboration across sectors has proven to be an efficient strategy to reduce duplication of efforts and to increase programmatic complementarity and reach. The Education, Child Protection, and Nutrition strategies were all developed in a participatory and inclusive way, creating products that are global goods that go beyond UNICEF’s programming. Internal collaboration between PD and EMOPS has improved the quality of the Core Commitments for Children (CCCs), and has increased buy in. Collaboration, however, cannot be forced through statutory mechanisms, which are proven to generate more bureaucratic bottlenecks.

Despite all the advances in evidence building during the past years, strengthening data disaggregation, collection, monitoring, analysis, and evidence generation are key for improving the quality of programming. The timely and quality promotion of data-driven knowledge and learning is indispensable to facilitate and prompt in-country uptake and programming adaptations, to facilitate programme course correction, to help in advocacy, and to boost fundraising opportunities. Engagement with D&A and strengthening of the monitoring capacity within PD were important investments. However, clearer terms of engagement with D&A, OGIP, and the Office of Research through shared programme of work that support the key goals in each sector is required in the future to minimize duplication of efforts and to increase the organization’s capacity to fill data and evidence gaps.

The work in fragile and humanitarian contexts requires a strong commitment to effective response, but also to renewed investments in prevention and risk management. Preventing and mitigating fragility and conflicts matter greatly for the rights and well-being of children. Some of the greatest threats and deprivations to child rights are concentrated in fragile and conflict-affected settings. Without focused action on preventing and mitigating fragility and conflict across all UNICEF advocacy and programmes, UNICEF will not be able to advance or sustain child rights as committed through the SDGs and the CCCs.

Digital engagement has the potential to take programming to scale, but equally there are considerations in terms of the level of service quality provided and the risk of widening the digital divide. While remote modalities contribute to the scale up of service delivery, they cannot substitute ‘in person’ services when cases require. As such, they should be used to complement, not substitute for, community-based interventions.