The combined effect of the pandemic and the global economic downturn, continued to negatively impact the lives of children and families in 2022. While the severity of infections reduced during the third COVID-19 *omicron* wave at the beginning of the year, particularly the secondary pandemic impact related to learning loss, mental health and household income implications continued to be felt.

Nepal held municipal, provincial and federal elections through two election rounds in May and November 2022, resulting in a new coalition government as no party secured an outright majority at either federal and provincial levels and a significant drop in the participation of women compared to the first elections. The fluid governance context and related further delays in passing critical pending legislation starting with the Civil Service Act and other acts in most sectors to define roles and functions at all governance levels, continued to inhibit the federalization transition and much needed attention to pandemic recovery priorities.

The economy rebounded in 2022 and Nepal confirmed its aspiration to graduate to middle-income status by 2026. While the socio-economic situation improved gradually, the April 2022 Child and Family Tracker revealed that job and livelihood losses fell from 60 per cent for households with children in May 2020 to 6 per cent in April 2022, while households reporting having to incur debt to cope financially dropped from 42 per cent to 27 per cent. However, households at risk of income poverty are still 3 per cent higher than the May 2020 baseline figure. Drivers of child vulnerabilities, such as access to services, livelihood, psychosocial support, health and nutrition, have not yet recovered. While there has been significant progress in many social indicators over recent years, critical challenges remain in key child-related indicators.

Equitable access and utilization of quality health services, particularly in underserved rural and peri-urban communities, remains challenging. Mental health and emerging non-communicable and vector-borne diseases brought on by climate and environmental changes need urgent attention. Under-five mortality reduced to 33/1000 births, but neonatal mortality remains stagnant at 21/1000 births (NDHS 2022). The percentage of pregnant women who attended four antenatal care visits increased nationally from 70 per cent in 2020/21 to 79.2 per cent in 2021/22, with Bagmati Province exceeding targets at 139 percent, while Madhesh Province recorded the lowest at 48.8 per cent. The proportion of children fully vaccinated (basic antigens) increased from 78 per cent in 2016 to 80 per cent in 2022; urban Gandaki has highest coverage at 96 per cent and rural Madhesh the lowest at 63 per cent (NDHS 2022).

The number of COVID-19-positive cases reduced, with approximately 320,000 confirmed cases (a 51 per cent reduction from the previous year). 2,557 deaths were recorded with a case fatality rate of 0.8 per cent (Nepal Joint Annual Review report 2022). Public health outbreaks affected health systems: There were 76 cases (three in under-five children) of cholera with no deaths reported, and 54,232 cases (approx.14 per cent children affected) of dengue with 67 deaths (EDCD).

The water and sanitation situation remains challenging with only 19 per cent of urban and rural households accessing safe water and open defecation slippage of up to 20 per cent in some deprived areas. This has promoted waterborne disease, such as diarrhoea and cholera. To address the requirements for WASH services, challenges remain over functional structures and the capacities of local and provincial government despite the WASH Act and the WASH Policy having been passed by the federal government. Increasing extreme weather events and the pandemic also exacerbated
deprivation, bringing adverse effects to the quantity and quality of WASH services.

Nepal has achieved a significant decline in stunting and wasting rates in under-five year old children from 32 to 25 per cent and 12 to 8 per cent respectively towards achieving the SDG targets. The impact of the combined effect of pandemic and global economic downturn income loss, agricultural production and food security at household level on nutrition rates requires specific attention.

The pandemic challenged reforms and service delivery in the education sector. The pending Federal Education Act creates a legal vacuum and lack of clarify on delineation of roles and responsibilities in local government. Although the net enrolment rate reached 94.9 per cent in basic education and 87.6 per cent in early childhood education in 2021/22, the quality of education remains challenging. School closures due to the pandemic added to the staggering results, highlighting the need for robust learning recovery campaigns. Encouragingly, there is gender parity at all levels of education.

The stigma associated with mental health prevents people from seeking help, especially among isolated and excluded children and caregivers. Due to a combination of poverty, limited educational opportunities, and social norms factors, families and children have adopted negative coping mechanisms, such as child marriage and engaging in child labour. Gender-based violence continues to be a grave concern with police data (2021/2022) indicating that 64.22 per cent of sexual violence survivors are girls. Inadequate parental care remains a major concern, leading to institutionalization of children with a high risk of child abuse in institutional facilities. Despite the provision for diversion in the Act Relating to Children 2018, implementation of diversion and non-custodial correctional measures for children in conflict with the law remains a challenge.

The pandemic’s omicron-fueled third wave in early 2022 impacted lives across the country. UNICEF’s response to COVID-19, except for vaccine support, occurred largely during the first quarter. The prolonged 2022 monsoon triggered disasters that claimed 127[1] lives (63 females, 64 males) and affected over 2,321 households. The 6.6 magnitude earthquake in Doti district on 9 November claimed six lives and affected over 7,000 families in Doti and neighbouring districts. In 2022, Nepal experienced a surge of cholera (after June) as well as a major outbreak of dengue from late August. UNICEF supported the government in its response.

https://bipad.gov.np/np/communication_centers/detail/1102 & MoHA/DRR Portal data (accessed 15 Dec, 2022) taking three main monsoon-related incidents (floods, landslides, and heavy rain) data only
https://bipad.gov.np/np/communication_centers/detail/1102

Major contributions and drivers of results

Health
UNICEF supported the government in providing equitable access to quality maternal and newborn health services by revising and updating national policies, standards, and guidelines, and strengthening health workers’ capacity. A particularly encouraging result was that 80 per cent of live births in 2022 were attended by skilled health personnel (NDHS, 2022), greatly exceeding the 69 per cent target. UNICEF worked closely with the MoHP to implement all COVID-19 prevention and control measures, including the delivery of 63 million vaccine doses and supporting immunization efforts. The results include achieving the WHO cut-off points for the primary two doses of COVID-19 vaccination coverage before the deadline. UNICEF further ensured the provision of routine vaccines to prevent childhood diseases, and 91 per cent of children aged between 12 and 23 months were fully immunized in 2022 (DHIS2).

UNICEF maintained its efforts to mainstream children’s and adolescents' mental health in primary healthcare, including through training of health workers resulting in more than 33,000 adolescents
aged from 10 to 19 years receiving mental health support from trained health workers. In support of health systems strengthening, UNICEF provided substantial contributions to the MoHP in drafting the Nepal Health Sector Strategic Plan 2022-2030 and in mainstreaming disaster risk reduction and climate change adaptation in the health system.

UNICEF technical and financial assistance contributed to an increase in government health facilities that electronically report to the Integrated Health Management Information System, from zero in 2017 to 35 per cent in 2022 (NHFS, 2021). A critical results driver was a significant increase in the health budget, from both government and development partners, including UNICEF’s Health programme budget in 2022 (planned $2.7 million and funded $9.6 million). Other factors were expanded technical support and capacity building for provinces and municipalities, and supply and logistics support for routine and COVID-19 immunization which strengthened the National Immunization Programme and the entire health system. The results directly contribute to the UNDAF Social development outcome, by enhancing health systems to support equitable access to quality health services with higher availability and rational use of services, thus contributing to Nepal’s progress to achieving SDG Goal 3.

Nutrition

Nepal has achieved a significant decline in stunting and wasting rates in under-five year old children, among whom the prevalence of stunting and wasting fell from 32 per cent (MICS 2019) to 25 per cent (NDHS-2022); and from 12 per cent (MICS-2019) to 8 per cent (NDHS-2022) respectively. The SDG targets for stunting and wasting are 15 per cent and <5 per cent, respectively.

UNICEF supported the MOHP in establishing the first ever Human Milk Bank – a Comprehensive Lactation Management Centre (CLMC) in Paropakar Maternity Hospital in Kathmandu which benefited 98 per cent of neonates and 200 at-risk infants.

UNICEF helped MOHP increase the number of nutrition rehabilitation centres (from 21 to 26) and outpatient therapeutic centres (OTCs) (300+) in 63 districts. These OTCs and NRHs now have the capacity to treat acute malnutrition. UNICEF supported the family MUAC approach in four districts to manage acute malnutrition of children aged between six and 59 months. In 2022, 12,620 under-five year old children with severe acute malnutrition were treated (annual target: 10,000) from 1,150 OTCs. Of those, 11,200 were discharged and 86 per cent (9,701) recovered; 0.2 per cent died (25); and 13 per cent (1,474) defaulted. With UNICEF's technical assistance, 97 per cent of children aged between six and 59 months received Vitamin A capsules through the national Vitamin A campaign. UNICEF supported MoHP in expanding the MNP programme from 52 to 76 districts.

UNICEF further supported the Ministry of Federal Affairs and General Administration (MOFAGA) in increasing Multi-Sector Nutrition Plan (MSNP) interventions to all 753 municipalities, and developed the capacities of newly elected local authorities, MSNP volunteers, and sectoral nutrition workers for MSNP programming and roll out.

As nutrition cluster co-lead, UNICEF assisted MoHP to strengthen the nutrition cluster coordination mechanism for Nutrition in Emergency (NIE) preparedness and response at federal and provincial levels. UNICEF trained 150 nutrition cluster members in all provinces on NIE preparedness and response and conducted SMART nutrition surveys in five of the most nutritionally vulnerable districts.

Education

UNICEF supported the finalization of the new long-term School Education Sector Plan (SESP; 2022-2030), the first education sector plan developed in full alignment with the federalized system. UNICEF supported learning continuity for the most disadvantaged children, and worked closely with government, development partners and the education clusters to produce and distribute over 80,000 self-learning packs and organizing 2,378 tole Sikshya sessions. This reached over 90,000 children from early grades to grade 3 and initiated parenting education through FM radio. Centrally, UNICEF supported development of the Recovery and Accelerated Learning (ReAL) plan which is to ensure targeted additional programming and financing for areas and groups of learners that have been disproportionately affected by school closures during the pandemic. UNICEF continued supporting the Girls Access to Education (GATE) programme targeting out of school girls and other flexible learning
opportunities that helped to mainstream and return 6,600 adolescent boys and girls to school. UNICEF supported the development of guidelines, manuals, and tools for disability-inclusive early childhood education and development (ECED). To help measure progress against a standardized benchmark, summative assessments began in collaboration with Education Review Office (ERO), while formative assessment was developed with Centre for Education and Human Resource Development (CEHRD).

UNICEF continued to support the Nepal Education Cluster mechanism. The development of provincial emergency response plans advocated for implementation of the government-endorsed comprehensive school safety (CSS) minimum package. 163 schools implemented this package, 6,577 students (2,235 girls) improved their knowledge of emergency preparedness and regularly participated in the school drill. Around 878 schools developed disaster management plans in three provinces.

**Child Protection**

With UNICEF technical support the Children’s Regulation 2022 was enacted. It establishes additional minimum criteria and provisions for child protection human resources, services, and facilities. The statute of limitation for reporting rape was increased from one to two years for adults, while for minors a case can be filed within three years after a child turns 18 years old.

UNICEF assisted in adapting and piloting the Child Protection Information Management System (CPIMS+) for effective case management of vulnerable children. UNICEF also helped to expand Protection Monitoring and Incident Reporting to 57 districts. 60 local levels conducted vulnerability assessments and 9,972 children needing preventive and response services were identified. 6,254 children and families benefited from services because of this effort. Approximately 40,000 service providers, local elected representatives, and community members increased awareness of their roles, available services and case reporting due to UNICEF-supported capacity building efforts.

Through the **Rupantaran** programme, 8,384 girls were reached with life skills, financial literacy/micro enterprise development training; and psychosocial and family reintegration support to address child marriage, exploitative labour situation; and GBV. 8,462 parents gained knowledge and skills on parenting and addressing harmful practices, such as child marriage, child labour and gender discrimination. Some 51,000 people were supported through psychosocial interventions. Through awareness raising activities, over 16,000 people were capacitated on GBV prevention and risk reduction. Around 5,000 women and children who had experienced GBV received age-appropriate and gender-responsive services.

The civil registration system was strengthened to provide inclusive services because of collaborative actions fostered with UNICEF support. The overall achievements have contributed to the UNDAF outcomes 2 and 4, and SDG goals 5, 8 and 16.

**WASH**

UNICEF worked with government as co-lead of the WASH Cluster to support the response to the third COVID-19 wave, and its recovery programme reaching over 285,817 people (including 100,036 children) in high density, low-capacity communities, schools, points of entry and health care facilities. UNICEF also supported COVID-19 response joint monitoring visits to all seven provinces, which informed key recommendations for improving WASH service delivery and coordination. UNICEF also provided humanitarian assistance to over 78,325 people (including 27,414 children) during floods, landslides, earthquake and a cholera outbreak.

Significant progress was made in safe water supply and sanitation. 134,288 people (including 47,000 children) from 250 communities benefited from safely managed water, while 116 communities in 19 municipalities were declared water-safe, benefiting 51,467 people (including 18,013 children) in rural and urban communities. UNICEF directly supported another 17,595 people (including 6,158 children) in access to basic sanitation in 103 communities. 38,065 students gained access to basic WASH services in 112 schools, while 28 health care facilities were provided with WASH facilities benefiting 62,631 people (including 21,921 children). 52 schools and seven health care facilities’ WASH services were improved.

With UNICEF’s direct support, 29 municipal WASH plans were developed in 2022. Another 102
WASH plans are in the pipeline. The WASH plan inventory is taking place in 439 municipalities that received NWASH data. In 2022, the Federal Water and Sanitation Act was enacted along with the enactment of WASH acts by 125 municipalities in three provinces. UNICEF provided technical support to government in developing the WASH priority project in the National Adaptation Plan (2050), which has an estimated budget of $1 billion. The *Hand Hygiene Roadmap* (2022-2030) was finalized to promote and sustain universal hand hygiene practice and is expected to be endorsed by Ministry of Water Supply MOWS soon. This will help create an enabling environment ensuring accessibility of hand hygiene facilities and services leading to changed behaviors and social norms on hand hygiene in Nepal”

**Social Policy**

The Child & Family Tracker continued to be the key instrument for assessing changes in the conditions of children and families, informing the national response and re-programming development and emergency interventions to mitigate secondary impacts of the pandemic. UNICEF developed Social Sector budget briefs on health, nutrition, education and social protection stimulated policy discussion about allocation efficiency and equity. The evaluation on *Cash transfer through digital wallets* highlighted the pros and cons of this approach in emergencies. The Assessment of Crowding out of Routine Services due to COVID-19 expenditures was instrumental in understanding how government and development actors worked together to manage the financing need during the pandemic. An Early Childhood Development cost-benefit analysis highlighted the urgency of investing in the early years.

UNICEF and five city governments partnered to foster citizen’s engagement in the budgetary process with the aim to increase budget transparency and accountability. With support from UNICEF, five city governments are developing civic engagement policies and producing citizen's budgets. Three Public Finance capacity development events for provincial governments were organized in 2022 involving 78 government officials. Establishment of the Economic Innovation Lab has great long-term potential for Public Finance Management-related problem solving and facilitation of decision-making.

UNICEF’s child-friendly governance work furthered the federalization process by capacitating local government and promoting the meaningful participation of children in planning and budgeting at all levels of the federal structure. In 2022, UNICEF helped 22 municipalities to start child-friendly local governance adoption and the declaration process, and oriented 4,937 local government-elected representatives, government staff, teachers, and health workers. Additionally, 430 child clubs were formed, and 8,504 child club members (4,337 girls) were oriented on child rights; child-friendly local governance; local planning process; and the roles and responsibilities of child club members during the planning process.

Evidence-based advocacy and strategic policy engagement accelerated the expansion of the Child Grant to 1.3 million children, contributing to achievement of SDG 1.3. UNICEF, with the government, introduced online registration of CRVS, and a social protection registration system in 104 low-capacity wards that reduced the time for registration. A new model for disability screening, jointly introduced by UNICEF with SAVE the Children and local governments was instrumental in addressing the exclusion of people living with disability from the social protection system. The government developed a shock-responsive social protection guideline at the federal level and 18 local governments pre-identified the most disaster-vulnerable households for cash or in-kind support during disasters. The Joint UN Humanitarian Cash Framework developed with partners encouraged coordinated humanitarian cash programming in Nepal.

**Programme Effectiveness: DRR, SBC and Communications**

UNICEF worked in collaboration with local governments and partners to responded to humanitarian needs triggered by localized flood and earthquake disasters in over 23 districts across Nepal reaching
61,191 people (female 26,330), including 22,000 children (11,325 girls) as well as 26,459 people (female 13,494) during the third COVID-19 omicron wave. To integrate multi-hazard risk considerations into local government planning, UNICEF supported 23 municipalities to develop and update child-sensitive local disaster and climate resilience plans [LDCRPs (15)] and flood/disaster preparedness and response plans [DPRPs (8)]. UNICEF enhanced the capacities of 38 local governments in disaster information management systems localization (DIMS)/BIPAD portal [1], developed by the National Disaster Risk Reduction and Management Authority (NDRRMA) to help improve information systems. A joint UNICEF, UNDP and UNWOMEN earthquake preparedness and response programme in western Nepal worked in partnership with NDRRMA, provincial and local governments and civil society in training 100 Community Emergency Response Team (CERT) volunteers and 188 community leaders (females 104) on earthquake simulation; and 1,459 community members (female 772) on rapid vulnerability mapping.

To reduce climate and environment hazards for children and families, a UNICEF Eco-Zone collaboration with six local governments in Karnali and Sudurpaschim provinces, which mitigates indoor air pollution and promotes better health, nutrition and education of children, distributed improved eco-cookstoves to over 9,800 households and capacitated 5,000 children to act as change agents in raising awareness on climate change and disaster risk reduction through Child Clubs as part of the Child-Friendly Local Governance initiative.

Social behaviour change efforts focused on addressing harmful gender and social practices and encouraging positive norms and behaviors, with special focus on health seeking behaviors. Systems strengthening efforts led to establishment of the Behaviour Science Centre at Kathmandu University. 18 districts improved their capacity in Human Centred Design. Cross-cutting social behavior change support included 156 episodes of the Rope Guna Phal (You reap as you sow) radio drama series, with a focus on corporal punishment in schools.

Risk communication and community engagement efforts focused on awareness about COVID-19 vaccination and public health safety measures particularly during the third COVID-19 omicron wave. Gaps in immunization coverage highlighted through formative research were tackled through localized community engagement efforts in 32 priority municipalities in partnership with the Nepal Scouts leading to increased awareness and boosted coverage (Madhesh Pradesh, coverage increased from 84 to 98 per cent).

UNICEF further leveraged COVID-19 risk communication partnerships and channels to disseminate information about children's concerns in other emergencies. Proactive content generation during emergencies, strategic media engagement during important milestones and capacity building of journalists helped to increase awareness of child rights. Over 100 emotive videos and stories, influencer and youth engagement, tailored content packages, and co-creation with young people helped to expand UNICEF digital supporter base by 23 per cent. Social media content reached over 19.9 million individual users, gathering over 770 million impressions and 130 million engagements. UNICEF engaged nearly 1,900 children, adolescents and young people including interaction with parliamentarians, youth advocates programme, and volunteer initiatives.

UNICEF’s advocacy efforts have resulted in better policies and programmes for children, including the country increasing its co-financing for routine vaccines, a new 10-year education plan for learning recovery and other sector policies and strategies.

UN Collaboration and Other Partnerships

UNICEF chaired the Health Development Partner group between 2020-2022, coordinating and facilitating development partner engagement with the MoHP and joint contributions to the Nepal Health Sector Strategic Plan 2022-2030 formulation, the Health Sector Wide Approach and its Joint
Financing Arrangement. UNICEF partnered with GAVI and WHO to support the National Immunization Programme and through the global COVAX facility to accelerate COVID-19 vaccination.

UNICEF collaborated with the National Planning Commission in coordinating partner contributions towards better nutrition outcomes as the technical lead agency for the Multi-Sector Nutrition Plan and through participation in the Nutrition and Food Security Steering and Coordination committees at federal, provincial, and local levels. UNICEF also led the UN nutrition network and national nutrition groups.

UNICEF served as focal point for the Education Development Partner Group, facilitating joint development partner communication and coordination with the MoEST and coordinated the evaluation of the Education Equity Strategy and contributions to the new School Education Sector Plan 2022-2030 development (focus on equity, quality, post pandemic learning recovery), the Education Sector Wide Approach and its Joint Financing Arrangement and Nepal’s contribution to the global Transformative Education Summit.

UNICEF developed strategic partnerships with the Municipal Association of Nepal, Nepal Association of Rural Municipalities and Federation of Water Users Committee Nepal to scale up local government policy advocacy and planning frameworks. UNICEF collaborated with the Environment and Public Health Organization and Urban Environment Management Society to pilot a Water-Safe Communities approach in urban areas of the Kathmandu Valley. Collaboration with WHO on WASH standards for healthcare facilities and with UN Habitat on City Wise Inclusive Sanitation ensured joint support to government.

UNICEF expanded its partnership with the National Planning Commission and the Department of National ID and Civil Registration to strengthen the social protection system. UNICEF’s partnership with the Ministry of Finance led to the establishment of the Public Finance Innovation lab.

UNICEF strengthened collaboration with MoHA, the NDRRMA, MoFAGA and the Ministry of Forests and Environment on Disaster Risk Reduction, Emergency Preparedness and Response and with six municipalities in Karnali and Sudurpaschim provinces on Climate, Environment and Energy programming. Under a new Business and Community Resilience initiative, UNICEF extended partnerships with the private sector to support local community preparedness and response capacity during disasters.

UNICEF continued to lead humanitarian clusters on education, WASH, nutrition, and protection and the Risk Communication and Community Engagement working group jointly with government line ministries.

UNICEF continued to lead the UNDAF Social Development Outcome, and partnered through the GBV, Domestic Violence and PSEA coordination mechanisms. To strengthen joint UN youth action, UNICEF co-chaired the UN Youth Group advancing the Youth 2030 Agenda. UNICEF also partnered with the National Youth Council, ILO and UNDP in hosting the GenU Youth Challenge focusing on youth mentorship and disability-inclusive practices.

A new GoN-UN-EU partnership ‘Empowered Women, Prosperous Nepal' was designed to leverage the comparative advantages of UNICEF, UNFPA, ILO, and UN Women in supporting the GoN in gender equality efforts. Nepal is considered a ‘front runner’ for this new strategic partnership globally.
Lessons Learned and Innovations

At the conclusion of the 2018-2022 Country Programme of Cooperation, key lessons learned from the current programme cycle and the COVID-19 pandemic response include: (1) the importance of strengthening decentralized child-friendly social service systems and capacities in line with the Government’s federalization policy by supporting capacities of provincial and municipal governments; (2) To close service coverage disparities, considerations related to wealth, geography, mobility, ethnicity, caste, gender, and disability have to feature not only in policies, frameworks and plans, but also be reflected in equity-focused programming, budget allocations, implementation and monitoring.

To ensure that UNICEF will remain ‘fit for purpose’ to support Nepal in building on these lessons the six components of the new Cooperation Programme on health; nutrition; water, sanitation and hygiene and child-sensitive climate and environment action, education; child protection; and social protection and child-friendly governance, will have four overarching priorities:

1. **Child-friendly governance** building capacities for child-friendly policies, plans, strategies, programmes, resource allocations and strengthening service delivery systems at national, provincial and local government levels involving children, families and communities.

2. **Gender equality programming by promoting the well-being and agency of** adolescent girls through equitable schooling and skills development, adolescent health and nutrition, positive gender norms, enhanced protection and prevention of harmful practices, especially child marriage, early pregnancy and gender-based and other violence, and mental health support.

3. **Social inclusion focus** addressing disparities by age, caste, disability, education, ethnicity, geography, gender, migration and wealth status by modelling effective, equity-focused service delivery approaches.

4. **Disaster risk reduction, climate resilience and environmental sustainability** building community resilience, child-sensitive climate adaptation and mitigation models, and enhancing child-centred disaster risk reduction and emergency response capacities of young people and government.

Operationally, UNICEF will adapt its current field presence to ensure further increased support to priority provinces and municipalities/palikas in the federalization context.

**Education**: Initially triggered to facilitate continuity of learning during the pandemic-induced extended school closures, UNICEF developed and implemented innovative self-learning approaches which continues to be applied in disaster situations where regular schooling has been interrupted. Using mules and porters, over 140,000 UNICEF-designed self-learning materials were distributed while basic digital technologies such as tablets with audio-visual content focusing on reading and numeracy skills were incorporated into more than 2,400 community-based centres. Widget software was used in picture aided communication tools designed to support holistic development of youth affected by disruption. Additionally, data collection using KOBO’s analytical tools enabled effective systematized reporting methods for responding volunteers facing crises situations.

**Nutrition**: UNICEF supported the MOHP in setting up the first ever ‘Human Milk Bank’ – a Comprehensive Lactation Management Centre (CLMC) in Paropakar Maternity Hospital aimed at addressing nutrition risks for premature low-birth weight children and helping to tackle chronically high wasting rates in Nepal. The innovation is to serve as a model for roll-out across Nepal.

**Water, Sanitation and Hygiene**: UNICEF initiated an innovative water-safe community concept to help Nepal accelerate access to safely managed drinking water, sanitation and hygiene services through effective campaigns inspiring people's engagement in the Open Defecation Free (ODF) movement. To leverage better collective results, UNICEF continued to promote integration of Water Sanitation and Hygiene (WASH) in the health, nutrition and education sectors. With climate change effects threatening important WASH gains made, increased focus in the collaboration between
government, civil society and private sector partners is needed on maintaining sustainable supplies of safe drinking water facilities nationally.

**Child Protection:** As a result of the utilization and optimization of data availability systems, along with rolling out vulnerability assessments, protection monitoring and incident reporting tools - not to mention child/police information management systems as well as Cluster & Civil Registration platforms - evidence-based advocacy for children's rights has been solidified. Moreover, these initiatives have enabled better programme planning within existing resources while supporting local investments in protecting vulnerable populations worldwide.

**Youth Engagement & Participation:** UNICEF continued to facilitate and promote meaningful engagement with young people across all areas of programming and advocacy efforts. Engaging young people has enriched programmatic strategies, outreach to communities and feedback mechanisms employing U-report and related tools. Tapping into this powerful youth network has also further strengthened advocacy for children's rights. The popularity of social media platforms and applications, particularly amongst young people, has made digital storytelling an important part of the modern communications mix. In 2022 UNICEF took advantage of this opportunity by employing a TikTok to showcase mental health campaigns and other youth-focused content.

**Climate Action for Children:** By introducing carbon finance mechanisms, UNICEF's Eco-Zone initiative achieved a triple win: financial innovation to direct extra funding toward households and municipalities; technological advancement with the creation of accessible stoves that meet robust standards; and market strengthening through private sector support for post-installation services.

**Social Protection:** To increase impact and strengthen coordination in implementing cash transfers in emergency situations, UNICEF led inter-agency efforts in developing a Joint Humanitarian Cash Programming Framework. This innovative mechanism brings government and humanitarian agencies together to align aid delivery with local needs while creating synergistic opportunities that benefit both communities and local government alike.

**Child-Friendly Governance:** UNICEF has started a new collaboration with the Ministry of Finance to set up an *Economic Innovation Lab* with a focus on developing innovative public finance strategies and solutions, particularly benefiting the social sector.

**Gender equality and social inclusion:** In order to ensure equity, gender parity and observe social norms in a more holistic manner, it is vital to adopt an approach of comprehensive planning through intensified community engagement coupled with the utilization of localized research findings, embedding human-centred designs within relevant ministries while simultaneously reinforcing regulatory frameworks devised by provincial directorates as well as local authorities.