

Zimbabwe

Update on the context and situation of children

Zimbabwe has a population of 15.1 million inhabitants with a growth rate of 1.5 per cent. More than half (52 per cent) of the population are female and 61.4 per cent live in rural areas. (Zimbabwe 2022 Population and Housing Census Preliminary Report).

The National Development Strategy 1 (2021-2025) of the Government is aimed at achieving a middle-income country status by 2030, anchored on the devolution to promote inclusive local governance and decentralized service delivery. The next harmonized elections are planned for 2023.

The economy slowed from a Real Gross Domestic Product growth rate of 7.8 per cent (2021) to a 4.6 per cent projection for 2022 by the Ministry of Finance. The exchange rate depreciated by more than 500 per cent and inflation increased to over 250 per cent, impacting the economy negatively, eroding purchasing power and limiting provision of social services, with increased burden on vulnerable households and children. The situation was worsened by the residual effects of COVID-19 and the impact of the Russia-Ukraine conflict on the supply chain for food, fuel and commodities.

Overall Government spending on the social sector in 2022 was at 36.6 per cent of the national budget. Health sector spending was 12.7 per cent, below the 15 per cent Abuja Declaration target. Expenditure in water, hygiene and sanitation (WASH) stood at 4.8 per cent and education was at 12.8 per cent, below the Dakar Framework for Action goal of 20 per cent.

Zimbabwe ranks 146th out of a total of 191 countries on the Human Development Index and 61 per cent of children experience multidimensional poverty - worse in rural areas, high-density and peri-urban informal settlements, and for those with disabilities.

The maternal mortality ratio decreased from 462 to 363 per 100,000 live births; and under-five mortality declined from 65 to 39.8 deaths per 1,000 live births between 2019 and 2022, respectively (MICS, 2019 and Census 2022). Neo-natal mortality rate has remained static at 31 deaths per 1,000 live births (MICS, 2019). Health service coverage, particularly in remote and urban poor areas remains low due to weak and underfunded health systems and insufficient human resources, the impact of the COVID-19 pandemic, and harmful social norms, including religious beliefs and practices that exclude women and girls.

Malnutrition remains a key cause of the health burden in Zimbabwe. Stunting rates are at 23.5 per cent amongst children aged 0-5 years (MICS 2019). Wasting significantly increased from 4.5 to 7.2 per cent, and severe wasting increased from 2.1 to 4 per cent, respectively, between 2020 and 2022 (ZIMVAC 2022) representing the highest prevalence in the last 15 years. Poor dietary intake is influenced by inadequate knowledge, cultural and gender norms, breaks in the global food supply chain and inadequate financing, and the sub-optimal coverage and quality of nutrition services.

Adult HIV prevalence is at 11.6 per cent (UNAIDS, 2021). Against the UNAIDS 95-95-95 targets, Zimbabwe is on track: 96 per cent of people living with HIV know their HIV status; 96 per cent of people who know their status are on anti-retroviral treatment (ART); and 93 per cent of people on treatment have achieved viral suppression (2021 HIV estimates). However, only 71 per cent of children and adolescents (0-14 years) are on ART. The majority of new HIV infections are among adolescent girls and young women (15-24 years) with an HIV prevalence of 5.15 per cent compared to 2.86 per cent amongst males. Key bottlenecks include low uptake of antenatal care by pregnant women, high staff turnover and the limited participation of men and boys in HIV/AIDS services.

Equitable access to WASH services remains a challenge for the rural and peri-urban population. Nationally, 63.6 per cent of the population uses basic drinking water services. In urban areas, 92 per cent of the population have access to basic water supply and 43 per cent to basic sanitation compared to 51 per cent and 34 per cent, respectively, in rural areas (MICS 2019). Compared to the national average of 22 per cent, more households (31 per cent) still practice open defecation in Matabeleland North province (MICS 2019). Despite modest increases since 2020, current WASH investments fall short of sector financing needs and there is inadequate maintenance and upgrading of WASH infrastructure.

The receding effects of COVID 19 facilitated learning for students in 2022. Net Enrolment Rates for primary education remained high at 90.3 per cent (up from 85.7 per cent in early 2020). A significant improvement (63 per cent up from 32 per cent in 2019) was seen in the enrolment of age-appropriate early learners. Despite these achievements, the percentage of primary and lower secondary school-age populations who are out of school remain high at 10 and 17 per cent respectively. Schools lack resources to deliver quality education, and parents and communities continue to pay school fees and levies.

The child marriage rate remains high at 21.2 per cent for adolescent girls aged 15-18 (MICS 2019), driven largely by poverty and social norms. Under-5 birth registration has risen to 49 per cent (MICS 2019) yet is among the lowest in the region (World Population Prospects, 2019). Violence against children remains a concern with 64.1 per cent of children experiencing violent discipline (MICS 2019) and 26 per cent working in hazardous situations in agriculture, artisanal mining and waste management sectors (Labour Force and Child Labour Survey, ZIMSTAT 2020). Progress is constrained by limited resources for child protection services and a shortage of social workers.

In 2022, donors supported UNICEF with over US\$137 million for programming. Support from traditional donors, development partners and United Nations (UN) joint programmes continues but is impacted by the economic impact of COVID-19 and the Ukraine-Russia conflict. New opportunities in private sector partnership, engagement of non-traditional partners and joined-up UN approaches also contributed to results achieved for children.

Major contributions and drivers of results

The UNICEF Zimbabwe Country Programme (2022-2026) is aligned to the National Development Strategy (NDS1) (2021-2025) of the Government of Zimbabwe and contributes towards the Zimbabwe United Nations Sustainable Development Cooperation Framework (2022-2026) and UNICEF Global Strategic Plan (2022–2025).

Social Policy

UNICEF's evidence-based advocacy informed by policy briefs on WASH, Education, and Social Protection, and quarterly socio-economic analyses contributed towards the increase in public spending on the social sector from 28 to 33.6 per cent of the national budget between 2021 and 2022. To increase fiscal space in the 2023 national budget compared to 2022, advocacy through the UNICEF 'Child Budgeting Series on child protection' – a knowledge platform on public finance - resulted in an increase in social welfare budget from 0.6 to 2 per cent. Likewise, the country's engagement in the Transformative Education Summit, with UNICEF's support, contributed towards an increased in the budget allocation to education from 12.2 to 15 per cent in 2023.

Technical support towards budget transparency improved Zimbabwe's score under the Open Budget

Survey (OBS) from 49 (2021) to 59 (2022) out of a score of 100. Ongoing work to strengthen child sensitive service delivery at subnational level resulted in the production of capacity building modules on planning, budgeting and equity-based service delivery.

UNICEF continued to co-chair the Social Protection Steering Committee with the Government to sustain oversight and partnerships and supported system strengthening to improve targeting and shock responsiveness of the system and development of policy options to strengthen social protection for persons with disabilities (PwD).

The UNICEF-supported Emergency Social Cash Transfer (ESCT) programme was expanded from three to eight districts reaching over 58,000 children, (above the 25,000 target) and transitioned 7,176 households in 2 districts to the national programme. Through a combination of cash transfers and complementary nutrition and child protection services, the ESCT contributed to improved food security and protection services for 26,000 households. UNICEF's advocacy and technical assistance to the Government resulted in an estimated 1.8 million children (24 per cent of the child population) being reached through various social assistance programmes, indexed to the US dollar value to protect against inflation.

In collaboration with the World Bank and ZIMSTAT, UNICEF supported high-frequency telephone surveys (Rapid PICES) on the socio-economic impacts of COVID-19, which informed food insecurity projections, child vulnerability monitoring and COVID-19 response. UNICEF established a new academic partnership with Midlands State University to enhance evidence generation for child sensitive research, policy and programmes.

Health

In 2022, UNICEF supported health system strengthening and service coverage improvement. Technical and financial support to the Health Labour Market Analysis informed finalization of the Human Resources for Health (HRH) Policy, a critical instrument to address staff attrition. UNICEF supported the development of the Zimbabwe's National Surgical, Obstetric and Anesthesia Strategy and the Quality of Care and Patient Safety Implementation Framework to improve quality of surgical care including caesarian sections for pregnant women and care for newborns.

The multi-donor Health Development Fund (HDF), managed by UNICEF, contributed towards an increase in the ante-natal care coverage from 39 to 58.9 per cent, and skilled birth attendance rate from 86 to 91.5 per cent, between 2021 and 2022 respectively, in 14 districts, through provision of medical supplies and equipment, operational budgets and quality improvement initiatives. UNICEF's partnership with UNFPA and WHO in clinical mentorship and on the job training of health workers in five provinces contributed to the availability of BEmONC in 94.62% of primary health care (PHC) facilities and CEmONC in 93.3% of district hospitals.

Under the HDF, UNICEF procured essential medicines and commodities worth US\$6 million, managed results-based financing (RBF) in 42 districts and supported the training of 20,212 village health workers (VHWs). Consequently, 96.3% of health facilities maintained over 80% availability of essential drugs, only 0.37% of facilities were charging user-fees, and 8.7 million people (2.2 million women 15-49 years and 1.4 million children under 5 years) accessed primary health care. UNICEF supported 16,000 VHW's with training and kits, resulting in 57,000 children (27,000 boys: 30,000 girls) with diarrhea receiving oral rehydration solution and Zinc at community level.

UNICEF procured and deployed 144 new Solar Direct Drive vaccine fridges and 2 incinerators that improved cold chain coverage to 99.2 per cent of facilities. UNICEF's technical and financial support for out-reach and vaccination campaigns resulted in 1.98 million under-5 children (85.9 per cent coverage) vaccinated for measles, and 86 per cent of children under-1 receiving at least 3 doses of Diphtheria-Pertussis-Tetanus-containing vaccine. UNICEF reached 2.6 million people with COVID-19

prevention messages and with vaccination contributed to a decrease from 24,557 new-cases and 21 deaths in December 2021 to 187 new-cases and 2 deaths in December 2022.

HIV and Adolescent Participation

To improve HIV coordination and programme, UNICEF provided technical support for the review and extension of the Zimbabwe National AIDS Strategic Plan (ZNASP) 2022-2025 to 2026, consolidated HIV prevention and treatment guidelines, and integrated mental health for adolescents living with HIV (ALHIV) into the national package for mental health. Deliberate alignment of the ZNASP with the Global Fund application process is enabling the Country to access US\$433 million in the new grant.

UNICEF contributed to HIV treatment coverage by strengthening the capacity of service providers with new tools, knowledge and skills. UNICEF trained 68 medical doctors on the effective transition of children and adolescents to optimal treatment regimen resulting in over 36,000 pregnant and breastfeeding women and 50,000 children and adolescents living with HIV receiving services. This contributed to 90 per cent of anti-retroviral (ART) coverage in pregnant women (meeting target) and 71 per cent ART coverage amongst children and adolescents, against the targets of 75 and 90 per cent in 0-14 years and 15-19 years old, respectively.

To enhance adolescent participation, UNICEF trained 290 child parliamentarians, engaged junior councils and established an Adolescents and Youth Advisory Committee (AYAC), resulting in meaningful engagement of 109,000 adolescents and youth (target of 125,000). UNICEF, in collaboration with the Government, UNFPA, UNESCO and WHO, supported the design and implementation of an adolescent pregnancy study to better understand the prevalence and root causes of adolescent pregnancies in Zimbabwe. The study findings will inform policy and programme action in 2023.

Nutrition

To enhance access to multi-sectoral nutrition services including for adolescents, UNICEF's technical and financial support contributed to the finalization of the Multisectoral Food and Nutrition Security Strategy; the Food Fortification Strategy; the Adolescent Nutrition Social and Behavioural Change Communication (SBCC) strategy and drafting of the School Nutrition Guidelines. UNICEF and WHO supported the revision of Statutory Instrument 46 of 1988 on the Code of Marketing of Breastmilk Substitutes to strengthen support for breastfeeding. UNICEF convened high-level engagement on Early Childhood Development (ECD), resulting in the formalization of the ECD coordination body chaired by the Office of the President and Cabinet.

UNICEF supported nutrition counselling to strengthen resilience of communities, established 9,055 care groups in 18 districts and integrated early childhood development support, including responsive caregiving and nurturing care, reaching over 546,000 mothers and caregivers (against a target of 400,000). Through UNICEF's procurement and distribution of therapeutic feeding to health centers, 11,449 children (6388 girls and 5061 boys, against annual target of 12,685) with moderate and severe malnutrition received treatment with a 70 per cent cure rate. Nutrition messages covering maternal nutrition, infant and young child feeding, and micronutrient supplementation were rolled out through the weekly radio shows, reaching over 1.5 million listeners. UNICEF scaled up Vitamin A supplementation (VAS) to reach 1.7 million children (above 670,748 target, semester one) through integrating nutrition into national immunization campaigns and strengthening community VAS through VHWS.

WASH

UNICEF supported the Government to utilize the African Sanitation Policy Guidelines to develop a

policy discussion paper to guide the development of the National Sanitation and Hygiene Policy that will support elimination of open defecation in Zimbabwe by 2030. UNICEF's advocacy contributed to the national WASH budget increase from 2.8 to 4.8 per cent between 2021 and 2022. To enhance quality, UNICEF in partnership with Stockholm International Water Institute and the Government, is developing the National WASH Service Standards to improve performance measurement.

Although UNICEF/WHO Joint Monitoring Programme data shows stagnation of the WASH indicators in 2022, at service delivery level, UNICEF provided 563,353 people (113% of target) with basic water services and 134,771 people with basic sanitation services through the construction and rehabilitation of infrastructure, behaviour change communication and community and district level systems building. A total of 259,570 people in emergencies were reached with critical supplies. To address sustainability and climate-resilience, UNICEF established 78 solar powered piped water schemes and trained 478 communities in eight districts to assess water supply climate risks, identify climate-resilient infrastructure improvements, and develop drinking water safety and security plans for sustainability. Overall, 1.3 million people (670,000 female; 3,602 PwD) gained improved knowledge on safe hygiene practices through UNICEF-supported hygiene promotion.

UNICEF provided climate-resilient water supply and/or gender and disability-inclusive latrines and piloted climate resilient low-water use group handwashing facilities in 97 schools, benefiting over 50,000 learners. WASH infrastructure upgrades were provided in 95 health care facilities, benefiting 256,000 people.

Education

UNICEF supported the Ministry of Primary and Secondary Education (MoPSE) to conduct a second Joint Sector Review and developed the School Financing and the Early Learning and Inclusive Education Policies – awaiting Cabinet approval. UNICEF supported the Government's preparation and participation in the Transforming Education Summit which has improved political commitments to state funded free basic education, implementation of inclusive education policies and reimagining education, including broadening access to e-learning.

Provision of teaching and learning materials and sensitization on disability inclusion reached 9,778 schools and benefited over 4.5 million learners. UNICEF's efforts contributed to an increase in enrolment rate for early childhood development from 45 to 63 per cent and stabilized primary school enrolment at 90 per cent, similar to 2021.

The School Improvement Grants (SIG) under the Education Development Fund, managed by UNICEF, disbursed to 4,283 schools (98 per cent of the target) improved the learning conditions for nearly 1.5 million learners (49.8 per cent girls). A further 836 schools benefitted from Complementary SIG (supported by the Global Partnership for Education) for infrastructure upgrades.

Approximately 640,000 learners benefited from the printing and distribution of 70,000 learning materials distributed to 1,294 schools. In addition, 77,000 children with disabilities - CwD (42,000 boys, 35,000 girls) received assistive devices with UNICEF support, enabling continued access to education. UNICEF provided technical and financial support to MoPSE for the production and broadcasting of 385 Cycle 5 Radio Lessons, benefiting 3.1 million learners. To support digital learning, UNICEF led the installation of internet and solar energy in schools contributing to an increase in schools with internet connectivity from a baseline of 26 to 28 per cent in 2022. The Learning Passport, a digital learning platform developed by UNICEF and Microsoft, provided online lessons to 109,000 learners. UNICEF supported MoPSE to provide WASH facilities in 190 schools in 19 districts, resulting in more than 73 per cent (against a baseline of 69 per cent) of schools having functional water sources.

Child Protection

UNICEF's advocacy and support to improve legal protection for children resulted in the passage of the Marriages Act that prohibits child marriage, the Guardianship of Minors Amendment Act that considers the best interest of the child in access to guardianship and development of a five-year Costed Strategic Action Plan on Civil Registration and Vital Statistics system to scale up birth registration. The second periodic report to the African Charter on the Rights and Welfare of the Child was finalized and approved by the Cabinet to improve child rights monitoring.

UNICEF's support to the strengthening of the social welfare system, including placement of Case Management Officers (CMO) in 23 districts and mentoring of 3,857 community case workers (69 per cent female), resulted in 68,000 children (27,000 males and 41,000 females) including 7,000 CwD accessing care and protection services surpassing the 65,000 target. Together with Civil Society Organization (CSO) partners, a comprehensive package of services was provided to 38,000 adolescents (aged 15-19) who are gender-based violence (GBV) survivors, meeting the target. UNICEF's training of 1,245 justice professionals (710 females) resulted in 17,000 child offenders and victims receiving child friendly justice services.

Through development of social mobilization tools and support for community caseworkers, UNICEF reached 75 per cent of children in 32 target districts with information and messaging on protection risks and reporting of child rights violations, resulting in an increase from 40 to 73 per cent in adolescents who felt it was appropriate to report sexual abuse.

UNICEF trained 285 social workers in 65 districts and supported secondment of 14 Case Management Officers to emergency prone areas resulting in 46,000 girls (against 60,000 target) who received critical child protection services and another 57,000 people, against a target of 70,000, who accessed GBV risk mitigation, prevention and response interventions. UNICEF trained 55 social workers resulting in 41,000 children and caregivers (45,000 target), accessing community based mental health and psychosocial services.

Cross-cutting issues

The launch of the office Climate, Energy and Environment Strategy and the Clean Green Zimbabwe Initiative and the development of the child sensitive Nationally Determined Contribution Implementation Plan, with the government has positioned children in the climate change agenda. To implement the National Disability Policy, a national coordination committee was inaugurated. The office developed the Gender Action Plan (GAP) to address child marriage, prevent and respond to GBV and address adolescent pregnancy, being implemented with partners; and the Resilience Strategy to guide risk informed programming towards multiple vulnerabilities and building capacity for humanitarian-development nexus. To address harmful social norms, including stigma against PWD, UNICEF coordinated Risk Communication and Community Engagement efforts, oriented 1,800 interfaith champions, 6,000 social mobilisers and 60 youth ambassadors across 40 districts to support social mobilization across all programme areas.

Emergencies

UNICEF mobilized US\$11.1 million, (33 per cent of the 2022 Appeal) and reached 2.2 million children with assistance and over 5 million people with key messages in response to multi-hazards of drought, floods, epidemics (including cholera) and the economic crisis.

Enablers

Budget utilization was 99 per cent and HACT implementation at 100 per cent for programmatic visits

(181) and spot checks (66). The country office audit was completed with a partially satisfactory rating, evaluation plan implementation was 75 per cent and 93 per cent completion rate for management responses.

Public engagement reached over 6.5 million people through UNICEF's digital media (Twitter, Facebook, Instagram, LinkedIn and YouTube), a 20 per cent increase from 2021. Media mentions grew from 134 to 240, and 32 stories were posted. Effective partnerships with donors resulted in US\$107.7 million being mobilized (67 per cent of plan). Prevention of sexual exploitation and abuse (PSEA) assessments and actions plans were completed which lowered PSEA risk ratings of CSO partners; and 1.5 million beneficiaries accessed community-based feedback mechanisms to provide feedback to UNICEF.

The office had an overall satisfactory rating (72 per cent) in the people management key performance indicator. Programme delivery was supported with procurement of supplies and services worth US\$61 million, bulk direct payments of US\$22.5 million in cash transfers to 24,000 recipients and deployment of technology solutions.

UN Collaboration and Other Partnerships

In 2022, UNICEF collaborated with the Ministry of Health and Child Care, UN Population Fund (UNFPA), World Health Organization (WHO) and development partners Foreign, Commonwealth & Development Office, European Union, the Embassy of Ireland and Gavi to deliver critical health services through the Health Development Fund. UNICEF led the Nutrition Cluster, and the UN Network for Scaling Up Nutrition and worked with Civil Society Organizations (CSOs) to support nutrition programmes.

UNICEF collaborated with International Labour Organization (ILO) and UN Development Programme (UNDP), to design a programme under the Generation Unlimited partnership investing in adolescents and youth skilling, entrepreneurship, employability, and social impact. Through this partnership, a team of young people in Zimbabwe won a Youth Challenge global award on their innovative lighting project in schools. UNICEF worked with UNFPA, UNAIDS and WHO under the Swedish Government-funded UN 2Gether4SRHR programme to deliver sexual and reproductive health, HIV and GBV services.

UNICEF co-convened the Child Budgeting Series with the Ministry of Public Service, Labour and Social Welfare and Zimbabwe Economics Society, contributing to increased Government allocation to protection. UNICEF collaborated with World Food Programme on joint social protection programming and with GOAL and World Vision on cash transfers. UNICEF led the Development Partners Social Protection coordination platform and co-chaired the National Development Strategy (NDS) Social Protection Cluster.

UNICEF's partnership with Parliamentary Portfolio Committee on Education contributed to the Government's announcement of free basic education. Partnership with the United Nations Educational, Scientific and Cultural Organization (UNESCO) resulted in capacity strengthening of Government in research skills. UNICEF led the Education Cluster and was secretariat of the Education Coordination Group to strengthen sector coordination. UNICEF worked with UNESCO and the Ministry of Primary and Secondary Education to conduct a "Re-Imagine Education" workshop to garner political and financial support for solarization and internet connectivity for schools nationwide.

UNICEF continued its partnership with ILO, UNDP, UNESCO, UNFPA, UNICEF and UN WOMEN under the Spotlight Initiative to address Gender-Based Violence (GBV) and harmful practices affecting children. UNICEF partnered with International Organization for Migration to support evidence generation and programming for Children on the Move.

UNICEF worked with multiple CSO partners including OXFAM, Mercy Corps, Africa Ahead and the National Action Committee for WASH (a multi-stakeholder coordination structure) on service delivery.

To support resilience, UNICEF worked with UNDP and other UN agencies under the Zimbabwe Resilience Building Fund in the areas of nutrition and WASH. UNICEF entered partnerships with UNDP and Food and Agricultural Organization (FAO) for the integration of nutrition and WASH into resilience under the Enhancing Resilience for Vulnerable Households in Zimbabwe programme. Under the World Bank-funded Zimbabwe Cyclone Idai Recovery Programme, UNICEF, with UN Agencies, including the UN Office for Project Services, the national Government, local authorities and CSOs, supported communities to strengthen resilience, including through the risk-informed Drinking Water Safety and Security Planning approach. UNICEF also partnered with WHO to support COVID-19 social behaviour change programming and WASH in institutions strengthening.

UNICEF led the UN Programme Management Team for enhanced inter-agency collaboration.

Lessons Learned and Innovations

UNICEF's experience in Zimbabwe in 2022 in implementing the new Country Programme 2022-2026 produced numerous lessons learned that offer great potential to accelerate results, at scale, going forward.

Cross-sectoral and Integrated Programming

UNICEF has increasingly moved towards a cross-sectoral programming approach to support social services delivery and achieve optimal results for children. Building from the Country Programme (CP) Document 2022-2026 and the work done under the last CP, UNICEF developed specific work plans for cross-cutting issues such as adolescents and young people, disabilities, climate, mental health and psychosocial support and gender, in order to focus and coordinate efforts to achieving results in these areas, as part of the broader rolling work plans. This work has enabled UNICEF to better plan and monitor for results in these areas.

UNICEF has also progressed in implementing convergent and integrated approaches across sectors. The Emergency Social Cash Transfer programme has provided an important platform to scale up results for children across health and nutrition and child protection, using social cash transfers as the entry point, utilizing data collected through the programme to target households with information and other referral services. UNICEF utilized integrated outreach services to reach more children and families with services, particularly remote communities, combining health and nutrition services, including Vitamin A Supplementation to extend reach to 1.7 million children. The office has harnessed data from the 2022 Census as well as ZIMVAC 2022 to identify key deprivations at district level which will also inform UNICEF's approach to enhance convergence and integrated programming in 2023, leveraging also on the devolution and decentralisation agenda of the Government which provides entry points for strengthening collaboration and convergence programming at subnational levels.

Innovative approaches

UNICEF continued to lead innovative approaches to improve programming and data systems in 2022. In the area of technology for development, UNICEF supported the use of Computer Assisted Personal Interviewing during the 2022 National Census, which enabled timely dissemination of key statistics to inform programme planning as the average waiting time for results was reduced from at least three months to one month from Census completion. The supply chain management system in the health

sector was strengthened through support for the rolling out of the electronic Logistics Management Information System (eLMIS) to all Health Development Fund (HDF) districts (42), provincial (8) and central (6) hospitals as well as all 59 health facilities in Makoni district. The eLMIS enables health facilities to efficiently manage supply chain management through timely ordering, stock management as well improving LMIS data quality for accurate national forecasting. In education, UNICEF supported the development of 4,152 lessons based on the curriculum, uploaded onto Learning Passport (LP) and more than 15,000 teachers were trained on remote teaching and learning in collaboration with UNESCO while 50 schools received basic Information Technology hardware to promote use of the LP, providing online lessons to 108,934 active users.

Programmatic innovation has also been taken forward in 2022. Implementation of nutrition SMART surveys enabled UNICEF to validate and improve the ZIMVAC methodology for increased reliability of wasting and acute malnutrition prevalence estimates at district levels, providing a better understanding of nutrition situation at sub national levels. The establishment of the young mentor dads (YMDs) approach drawing lessons from successful young mentor mother models was another major milestone to strengthen male engagement in pediatric and Prevention of Mother-to-Child HIV Treatment services, which had been one of the key barriers to women and children's access to timely diagnosis treatment and care. Further, community engagement in climate resilient WASH services is leading to sustainable solutions. In particular, the UNICEF-supported climate risk insurance schemes for solarized piped water initiatives established by water point committees, wholly funded by communities, will replace or repair high value components of the solar piped water system to reduce the impact of loss in unforeseen circumstances.

Social analytics and community feedback

Social listening and community feedback in the COVID 19 response promoted rapid use of information for informed decision making, responding to evolving needs. COVID-19 social listening enabled identification of community fears, rumours and misinformation contributing to vaccine refusal and hesitancy, thus provided UNICEF and partners with the foundation for reviewing, updating and adapting the national risk communication and community engagement strategy and communication assets. Based on feedback from social listening mechanisms, UNICEF supported the production and dissemination of key facts debunking rumours and providing factual information on vaccine safety how vaccines work; UNICEF also used information to update key messaging and vaccine Frequently Asked Questions - reference documents for community volunteers conducting vaccine demand promotion; and finally UNICEF used multi-media platforms to share life experiences and positive vaccination stories to build vaccine acceptance among hesitant populations.

UNICEF harnessed feedback also from other platforms to inform programming approaches. UNICEF supported the 393 Youth Help Line as platform for adolescents and youth to share their concerns and seek referrals for essential services, receiving an average of 200 calls a day. UNICEF supported Helpline Counsellors - available 24/7 - to listen to issues affecting young people's mental health and offer counselling and referral services; as a result, 270 cases on mental disorders were referred to therapy sessions. The Helpline has proved to be a confidential and safe platform preferred by adolescents and young people; 86 per cent of calls to the Helpline are from the 10-24 years age group, sharing their concerns and questions on access counselling services. In 2023, UNICEF will scale up social listening through the 393 Youth Help Line to identify, track and respond to issues affecting children, adolescent health and well-being, including drug and substance abuse.