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ACRONYMS

CBA  Community-based awareness
CBE  Community-based education
CHW  Community health worker
ECE  Early childhood education
GAP  Gender Action Plan
GATE Girls’ Access to Education
GBV  Gender-based violence
GFP  Gender focal point
ILO  International Labour Organization
JPPP Joint Positive Parenting Programme
MHM Menstrual hygiene management
MMS Multiple micronutrient supplementation
NEET Not in employment, education or training
NGO Non-governmental organisation
LNOB Leave No One Behind
PHC Primary health care
SDG Sustainable Development Goal
SRH Sexual and reproductive health
UNICEF United Nation’s Children Fund
UNICEF ROSA UNICEF Regional Office for South Asia
WASH Water, sanitation and hygiene
WGSS Women’s and girls’ safe spaces
Women and girls in South Asia continue to suffer from the impact of the COVID-19 pandemic, including the increasingly frequent climate-induced disasters, economic shocks and emergencies and humanitarian crises. At the heart of these challenges are discriminatory gender norms and social structures, which, combined with the polycrisis, have increased the number of children who are out of school, suffering from malnutrition and anaemia, trapped in child marriage and gender-based violence (GBV) and facing an uncertain future with soaring youth unemployment.

Unemployment has affected women much more than men, and more women than men have left their jobs to care for others, a gap that has only worsened after the pandemic. The ripple effect of school closures during the pandemic has taken a disproportionate toll on girls’ lives and future opportunities as they routinely assumed caregiving roles at home and were likely to drop out of school and not return due to economic pressure and child marriage. The risk of various forms of GBV has also been exacerbated by confinement to residences with more women losing jobs and over a million girls out of school globally. A new regional data snapshot on violence against women shed light on the high prevalence of intimate partner violence across the South Asia region for the first time.¹

The United Nations Children’s Fund (UNICEF) is committed to an equal future for all girls and boys, recognizing that gender equality and the empowerment of women and girls is central to achieving the Sustainable Development Goals (SDGs) and advancing the United Nations (UN) reform agenda. To address the challenges and to build back better, UNICEF and its partners have focused on mitigating the effects of COVID-induced disruptions, prioritizing service delivery, while reorienting and redesigning regular programming.

The year 2022 was the first year of implementing UNICEF’s 2022–2025 Gender Action Plan (GAP),² a roadmap for promoting gender equality and empowerment of women and girls. For South Asia,³ the year 2022 saw compelling and tangible results across the strategy’s goal areas including scaling up implementation of programming with and for adolescent girls as a priority for the region to operationalize GAP.

The empowering girls and women for a prosperous South Asia Report aims to summarize the targeted and integrated gender results in South Asia in 2022 as UNICEF continues to roll out interventions that focus on agency and empowerment of girls and women, including a focus on key gender equitable approaches across the eight countries in the region: Afghanistan, Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan and Sri Lanka.

According to the 2022 Global Gender Gap Report, South Asia ranks the lowest among the eight world regions in terms of gender equality, with only 62.3 per cent of the gender gap closed in 2022. This lack of progress extends the timeframe for closing the gender gap to 197 years due to a broad stagnation in gender parity scores across most countries in the region. At the same time, there are considerable variations between levels of gender equality and progress made so far: Bangladesh and Nepal lead regional progress with over 69 per cent of their gender gaps closed, while Afghanistan evidenced the lowest level of overall gender parity for the region and the world and the worst gender indicators due to the protracted nature of the conflict situation and severe forms of gender discrimination.

The repercussions of the COVID-19 pandemic have been felt across all sectors and have left a lingering effect on the regions whose coping capacity has been compromised by various socioeconomic challenges and natural disasters. According to the United Nations Office for the Coordination of Humanitarian Affairs’ Pacific Regional Focus Model and risk index that identifies and analyses where (humanitarian) crises requiring international assistance may occur, four of the eight South Asian countries are categorized as ‘high risk’ and Afghanistan has been categorized as ‘very high risk’.

Regional Context - SOUTH ASIA

<table>
<thead>
<tr>
<th>REGIONAL GENDER FACTS</th>
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<tbody>
<tr>
<td>An estimated 600 million adolescent girls aged 10–19 and a third of them live in South Asia</td>
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<tr>
<td>50% of women and girls (235 million) are anaemic</td>
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<td>19% of adolescent girls (32 million) are underweight</td>
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<td>South Asia is home to 290 million child brides - accounting for 45% of the global total</td>
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<tr>
<td>Female youth NEET rate is as high as 49%</td>
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<tr>
<td>Only 50% of girls complete secondary education</td>
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<td>There is a 41% gap between girls and boys in accessing digital platforms</td>
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<td>201 million women lack access to mobile phone technology</td>
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<td>1 in 3 ever-partnered women has experienced physical or sexual violence by an intimate partner in their lifetime</td>
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Sources: UNICEF, Undernourished and overlooked, 2022; UNICEF Global Data Warehouse; GSMA, The Mobile Gender Gap Report, 2022; kNOwVAWdata, measuring prevalence of violence against women in Asia-Pacific - regional data snapshot, 2020

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5 Ibid.
6 OCHA Asia and the Pacific, Regional Focus Model, 2021.
South Asia experienced various emergencies across the region in 2022 that have put girls and women in increasingly vulnerable positions. Humanitarian crises impact women, men, boys and girls differently because their needs, as well as their resources, capacities and coping strategies in emergencies, are distinct and often shaped by pre-existing gender inequalities that disproportionately affect women, girls and people with diverse sexual orientations, gender identities and expressions, and sex characteristics.7

In Afghanistan, more than 24 million people, including 13 million children, need humanitarian assistance. Secondary schools remain closed to girls. These restrictions directly and systematically exclude 1.1 million girls from secondary education and confine them to domestic structures, exacerbating domestic violence.8

In Bangladesh, 80 per cent of the Rohingya refugee population are women and children.9

Bangladesh, India and Pakistan have faced catastrophic floods that severely impacted the lives of nearly 42 million people, half of them women. Approximately 53 per cent of the refugee population are women and girls, with the largest gender discrepancy being among the population of working age (aged 18–59), where 55 per cent are female.10

Migration (climate or human induced) is a deeply gendered phenomenon that often forces women with restricted mobility and limited economic resources to stay behind and face the crises. In Sri Lanka, as a result of the ongoing economic crisis, there is an estimated 5.7 million women, men, girls and boys in need of urgent humanitarian assistance.11 Social bias, gender discrimination and GBV rates are high, with one out of three women in Sri Lanka having experienced GBV.12

The COVID-19 pandemic exacerbated the economic vulnerabilities of female-headed households and accelerating inflation linked to rising global prices due to the energy crisis continues to pose serious challenges to making ends meet. In 2022, an estimated 714 million women in Central and South Asia subsisted on less than $5.5 per day.13 Financing for pre-primary education, especially in low and lower-middle-income countries, is becoming more challenging,

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10 Ibid.
disproportionately affecting girls who already face structural barriers in graduating from secondary school and entering the labour market.

In 2022, two years after the start of the pandemic, most schools have reopened but sizeable impacts on learning remain, including among marginalized and vulnerable groups of girls. In rural Pakistan, learning losses are higher among girls than boys across all subjects and grades. In Afghanistan, girls are no longer allowed to attend secondary school and university, and the country trails behind every country in almost all dimensions.

Economic shocks and climatic catastrophes have further undercut food security in the region in 2022. With less access to education, information and financial resources, women are most affected by such catastrophes. In South Asia, male labour force participation stood at 72 per cent as opposed to 22 per cent for females in 2021, which only worsened as the pandemic dragged on, according to International Labour Organization (ILO) modelling estimates. Moderate or severe food insecurity among adult women rose during the pandemic from 27.5 per cent in 2019 to 31.9 per cent in 2021. Women in food-insecure households face a higher risk of anaemia. In 2019, nearly one in three women of reproductive age (15–49) were anaemic, accounting for 571 million women.

South Asia remains the region where the highest levels of women and girls who are not in education, employment or training (NEET) are concentrated. An ILO analysis of the 2017–2018 labour force survey of Nepal found that 92 per cent of female NEETs were doing work in the household (e.g., caring for children, cooking, cleaning), which was three times greater than the share of male NEETs doing household work. Pakistan is the country where women have the smallest share of senior, managerial and legislative positions (4.5 per cent), while Afghanistan has the second lowest level of parity in income equality globally at 18 per cent.

There is also a significant gender digital divide, with girls far less likely to own or have access to digital devices and fewer opportunities to gain digital literacy skills and tackle humanitarian situations. Among the countries in the region with the highest humanitarian risk, Afghanistan and Pakistan have the largest gender digital gaps. An estimated 201 million women in South Asia lack access to mobile phone technology. Key barriers identified by women in these countries include affordability, accessibility, the lack of literacy and digital skills, social norms such as the disapproval of family members, and the perception of the internet as being an unsafe space. During the pandemic, girls’ education was more impacted than boys’, further increasing the gender gap in science, technology, engineering and mathematics, particularly information and communications technology.

The risk of various forms of GBV has also been exacerbated given confinement to residences during the pandemic, with women and girls trapped in abusive domestic situations referred to as the ‘Shadow Pandemic’. Job losses and increased economic insecurity may also force families to marry their daughters to ease financial burdens, which are estimated to result in 10 million additional child marriages before 2030, a particular concern for South Asia – the region with the highest rates of child marriage in the world.
Regional Highlights in 2022

The year 2022 was the first year of implementation of GAP for South Asia, which aims to strengthen gender integration across programming areas with a targeted priority on adolescent girls. The strategy envisions a significant and measurable change in underlying harmful and gender-discriminative social norms through transformative gender programming and interventions. It builds on a holistic approach that reaches beyond sectoral silos towards repressive, systemic, structural transformations in existing gender norms, power dynamics, systems and institutional hierarchies. The past has seen compelling results across the strategy’s three priority areas and brought tangible results in accelerating programming for adolescent girls despite multifaceted challenges hindering progress in gender equality.

Health, nutrition and WASH

Gender parity in health and nutrition in South Asia presents a concerning picture: only Sri Lanka has closed its gender gap. Almost half women of reproductive age (15–49) were anaemic in South Asia in 2019. Through country-specific, tailored interventions, UNICEF supported maternal and adolescent well-being, expanded its capacity to improve Menstrual Health Management (MHM) practices through training and investments related to water, sanitation and hygiene (WASH), and advocated for exclusive breastfeeding and mother-friendly workspaces. A total of 28.8 million

26 UNICEF, Gender Equality Strategy for South Asia 2022–2025-.
adolescent girls and 24,000 pregnant women have been reached with weekly iron-folic acid supplementation as part of the region-wide anaemia reduction initiative.

Through governmental collaboration, UNICEF set up the first-ever human milk bank in Nepal and introduced maternal micronutrient supplementation (MMS) for pregnant women across the region. Responding to the needs of women in countries with political and economic crises, more than 27,000 pregnant or lactating women were reached with nutrition-sensitive cash transfers. To address limited access to and knowledge of sexual and reproductive health (SRH) as well as taboos that exacerbate gendered vulnerabilities, UNICEF engaged with 152,000 women and girls to share knowledge on MHM, SRH and rights, and gender-responsive WASH facilities.

UNICEF’s region-wide programming on developing positive parenting skills tackles the underlying causes of gender inequality. In 2022, nearly 32,000 parents and caregivers were reached with knowledge sharing on child marriage, girls’ education and SRH to help them provide an enabling and protective environment for girls with a special focus on adolescents.

To ensure service continuity of primary health care (PHC) services, UNICEF invested heavily in programmes targeting pregnant and lactating mothers with nutrition-sensitive cash transfers, antenatal care services, MMS and breastfeeding sessions held by trained community health workers (CHWs). Weekly supplementation of iron-folic acid as part of the region-wide anaemia reduction initiative was scaled up, reaching an additional 28 million adolescent girls and mothers.

**Education, learning and skills**

To address losses in educational attainment, UNICEF intervened with new initiatives and expansion of existing community-based education (CBE) and early childhood education (ECE) programmes to counter losses in literacy due to school closures and to ensure continuity in educational services.

In 2022, more than 860,000 girls in the South Asian region had been reached by CBE, ECE and Girls’ Access to Education (GATE) interventions, re-enrolling girls to school, providing them with alternative and flexible learning opportunities and training female community teachers to build local teaching capacities. In Afghanistan, despite adverse domestic politico-economic conditions, the number of CBE classes in private homes and other locations had doubled to 20,000 over the past year.

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29 End of Year Results Summary Narratives – Bangladesh, Maldives, 2022.
30 End of Year Results Summary Narratives 2022 – aggregates from UNICEF country offices.
31 Ibid.
32 Ibid.
33 Ibid.
serving some 600,000 children, more than half of them girls.34

Going forward, continuous innovative efforts and bolstering of community-based teaching capacities are required to reverse the current trend and preserve the hard-gained pre-pandemic results made in education.

As a response to rising unemployment rates that have affected women much more than men in South Asia, UNICEF scaled-up its regional programmes targeting adolescent girls with diverse social, financial, digital and other 21st-century skills to bolster their employability and diversify economic opportunities in the face of reduced post-pandemic labour demand. Regionally, over 20 million girls have been reached with skill-enhancement initiatives like UPSHIFT, Rupantaran and Skills4Girls.35 Bangladesh, Nepal and India have seen an increasing share of women in professional and technical roles, while female labour force participation have regressed significantly in Bhutan and Afghanistan.36

Prevention and protection from harmful practices and GBV

UNICEF leads regional innovation to bring mental health to the fore and has immense potential to leverage its reputation and technical knowledge to advocate and strengthen regional capacities. Successful integrated psychosocial support services targeting adolescent girls, pregnant mothers and GBV survivors was piloted in some South Asian countries during 2022 with the potential of replication and scaling up in 2023.

In face of increasing levels of GBV, UNICEF provided multisectoral services in women’s

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34 Afghanistan: Humanitarians await guidelines on women’s role in aid operations | UN News, 30 January 2023.
35 End of Year Results Summary Narratives 2022 – aggregates from UNICEF country offices.
GENDER ANNUAL REPORT FOR SOUTH ASIA 2022

Safe Spaces Provide Critical Support to Women and Girls in Afghanistan

As systematic erasure of women and girls from public spaces and restrictions on their mobility have intensified in Afghanistan, women and girls have faced increasing difficulties accessing public spaces, work, schools and health facilities. These restrictions have not only impacted access to life-saving services, but they have also disrupted access to income-generating and livelihood activities, social networks, solidarity and support, resulting in increasing social isolation and mental health challenges for women and girls. It has been imperative for UNICEF to develop a strategy to continue to reach women and girls with critical life-affirming information and services.

UNICEF has worked with women-led organizations to successfully establish and support 116 women’s and girls’ safe spaces, across 19 of Afghanistan’s 34 provinces. Through these safe spaces, 78,452 women and 53,388 girls have been provided critical information and services, including on gender equality and GBV and referrals and psycho-social support. Safe spaces allow women and girls to meet, reconnect and strengthen friendships and networks and provide each other solidarity and support. In order to meet the practical needs of women and adolescent girls, UNICEF utilised skill-building activities as the entry point to ensuring community acceptance and to meet the very real need for skills, in particular, among adolescent girls, who have been locked out of schools since August 2021. The safe spaces are poised to become a strategic space for ensuring the delivery of an integrated package of interventions to adolescent girls at community level as other UNICEF programmes and those of its partners also use the safe space to provide health information, immunization information and nutrition counselling services.

A key lesson learnt is the importance of having a strong focus on the engagement of men and boys in a context such as Afghanistan, where traditional gender norms and patriarchal cultures reinforce discrimination against women and girls and compound their vulnerability to poverty, exploitation and abuse. UNICEF is utilizing the engagement of men and boys to strengthen social acceptance of the safe spaces to create an enabling environment for women and girls to safely access them. A total of 42 men’s and boys’ networks have been established in the 19 provinces with safe spaces, reaching 20,653 members (8,015 boys and 12,638 men) with training on gender equality and the empowerment of women and girls, GBV prevention and child marriage, with a view to specifically promoting positive masculinity.

and girls’ safe spaces (WGSS) for more than 16,000 GBV survivors, including psychosocial counselling, case management, referral and legal services.\(^{37}\) WGSS initiatives have been extensively piloted in Afghanistan and Bhutan. UNICEF also supported partners to broaden the scope of GBV-related programming through consultations with women and girls on emerging GBV risks by implementing community-based awareness (CBA) interventions and building service providers’ capacities. Nepal is leading innovation in CBA programming regionally.

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Targeted gender results for South Asia

Targeted priorities on adolescent girls’ well-being and empowerment

PRIORITY AREA 1: HEALTH, NUTRITION AND WASH

During the pandemic, countries in South Asia had some of the highest numbers of COVID-19 cases globally, straining the limits of the capacity of their health care systems. With only 1 doctor for every 1,000 people in India and every 1,335 in Nepal, the burden of care for sick and vulnerable family members fell largely on women, putting them at risk of infection and increasing an already exhausting unpaid care load.38

Through adaptation and expansion of its previous crisis response programming, UNICEF focused on ensuring service continuity in PHC, WASH and nutritional services while working closely with respective ministries and exploring public and private sector partnerships. For example, in Nepal, it collaborated with the Ministry of Health and Population to roll out iron-folic acid supplementation and reached 284,000 adolescent girls, while in Bangladesh, the same initiative was carried out in partnership with the government, reaching 3.5 million adolescent girls against a target of 4.2 million in 2022.

The provision of basic WASH services has benefited 18,855 girls in Nepal and 3,800 girls in Bhutan, who have been equipped with knowledge and skills on MHM, which is expected to reduce the dropout rate among them.


Since 2016, UNICEF has supported the Government of Nepal’s weekly iron-folic acid supplementation programme to address the high prevalence of anaemia among adolescents in the country. Under the programme, most schools across Nepal administer iron-folic acid tablets to female students between 10 and 19 years of age.

In 2022, UNICEF and its partners reached 284,000 adolescent girls with supplementation.

In Bangladesh, UNICEF collaborated with the government to strengthen access to nutrition services. Its advocacy with the Directorate of Secondary and Higher Education resulted in the scaling up of the weekly iron-folic acid supplementation and essential nutrition for adolescent girls in 22,000 schools nationwide, reaching over 3.5 million girls.
For the adolescent girl students of Zilukha Middle Secondary School in Thimphu, menstruation is not a barrier to attending school or participating in other activities. A supportive school environment, accessible WASH facilities, changing rooms and easy access to sanitary supplies have helped female students to be more comfortable during menstruation and not feel that they have to skip school, fearing shame or stigma.

“We now have more people including our boy classmates who support us and understand menstruation,” says a Grade 10 student, Dawa Zam, 17. “In case we run out of sanitary products, they help us buy them from the nearby shop.”

“Sometimes, we request our friends to collect the sanitary napkins from the school health coordinator,” adds her friend and classmate, Dechen Yangzom, 17.

With sanitary supplies easily accessible and classmates and teachers understanding their need to visit the toilet, the students say that they feel more comfortable to attend classes during menstruation. “The changing rooms give us privacy and the comfort to manage and maintain menstrual hygiene in the school,” says Chimi Chogyal, 16, another Grade 10 student.

School health coordinator Yangchen Dema observes that advocacy around menstrual hygiene picked up pace after schools started observing the global Menstrual Hygiene Day annually on May 28. A series of programmes and activities were held in schools to mark the day that has led to increased awareness on menstrual hygiene management (MHM).

“Earlier, education on MHM was provided only to girl students but, gradually, the programme started to include boys and then the whole school,” says Yangchen Dema who has been the school’s health coordinator since 2013. “We also started seeing sanitary products being donated, which helped normalize the conversation around menstruation.”

In preparation for the school reopening and to ensure easy access to a variety of sanitary products for effective management of menstrual hygiene, UNICEF in partnership with the Ministry of Education distributed 2,000 menstrual cups, 17,000 reusable sanitary pads, 500 sanitary tampons and 5,500 disposable sanitary pads to 139 schools across the country. The menstrual hygiene supplies will result in safeguarding the health and well-being of 2,700 adolescent girls as well as support their learning without having to experience stress or shame.

Students were introduced to reusable sanitary products such as menstrual cups, reusable sanitary pads and tampons as an alternative to disposable sanitary napkins. “We are excited to use the reusable sanitary products as it would help us save money,” says Dechen. “And we are happy to have the support of everyone – in the school as well as at home,” her classmate, Dawa, adds.
PRIORITY AREA 2: GIRLS’ EDUCATION, LEARNING AND SKILLS

To recoup learning losses due to school closures on all levels, UNICEF expanded the Girls Access to Education Programme, providing basic numeracy, literacy, education and life skills to more than 6,800 out-of-school adolescent girls in Afghanistan and Nepal. In Bhutan, similar adolescent skills and employability projects were implemented, reaching 25,000 girls with courses on multimedia, entrepreneurship, civic engagement and participation, and WASH facilities were constructed in 13 youth learning centres.

Countries in the region were given technical assistance to design and implement gender-responsive school curricula, master’s degrees and education sector plans. Training and mentoring were provided to 600 female Alternative Learning Platform facilitators in Pakistan, providing access to quality teaching and learning for 32,059 girls, and ECE classes were established benefiting 147,104 pre-primary schoolgirls. In 2022, UNICEF significantly expanded CBE programmes in Afghanistan, reaching over 286,000 girls in 28 provinces, with corresponding teachers and school management shuras being recruited and trained.

PRIORITY AREA 3: PREVENTION AND PROTECTION FROM HARMFUL PRACTICES AND GBV

To address both the immediate needs of GBV survivors and persistent underlying gender-discriminative social norms, UNICEF is leading in the design and implementation of multisectoral initiatives, including ensuring access to case management, referral and legal services, psychosocial counselling and health care within WGSS to ensure safety and privacy of girls and women.

In Nepal, 149 members from women’s and girls’ networks were mobilized following UNICEF-supported consultations with partner organizations to spread awareness against GBV in their communities. This resulted in over 6,000 women and girls and their
wider communities being reached with GBV messages, including where to access services. A total of 5,422 women and girls were supported with various GBV-related services.41

To tackle harmful practices and ingrained social norms, UNICEF supported the scaling up of the ‘Rupantaran’ parenting package in Nepal, reaching 8,462 parents with the knowledge and skills needed to provide an enabling and protective environment by understanding the devastating consequences of child marriage, child labour and corporal punishment. In addition to parents and caregivers, 8,799 girls were reached with life skills, and psychosocial and family reintegration support to address child marriage, exploitative labour and GBV.42

41 End of Year Results Summary Narratives – Nepal, 2022.
42 Ibid.
INTEGRATED GENDER RESULTS FOR SOUTH ASIA

Gender equality for girls and boys, and in care and support for all children

GOAL AREA 1:
MATERNAL, NEWBORN AND ADOLESCENT HEALTH AND NUTRITION

The COVID-19 pandemic devastated health systems, disrupted essential health services and medical supply chains and left more vulnerable women without care and in worse physical and mental health. Drastic declines in maternal health care, including antenatal services, have occurred across the countries of the region. However, considerable strides have been made towards a more gender-equal society by implementing projects both specifically targeting women and girls and through sectoral collaborations and enhanced gender mainstreaming.

To address losses in health services, UNICEF supported high-impact interventions in 600 Afghan health facilities in reproductive, maternal, newborn, adolescent and child health. To facilitate access to care, a Humanitarian Cash Transfers project helped reduce out-of-pocket expenses for 24,000 pregnant women in Daikundi province, while Maternal and Child Health Handbooks were distributed to 2 million pregnant women and mothers in all 34 provinces.

Addressing the worsening regional nutritional landscape caused by deteriorating household capacity to devote resources to balanced and nutritious diets, UNICEF reached over 8 million girls and boys aged 6–59 months with vitamin A supplementation and approximately 1.17 million children with multiple micronutrient powder supplementalations in Afghanistan. In addition, a total of 822,231 children (412,891 girls) and 1.7 million mothers received MMS in Pakistan and Bhutan.

Substantial investments in building local capacity have supplemented and scaffolded interventions as UNICEF trained over 27,000 health workers in Pakistan, reaching 2.1 million mothers with counselling on infant and young child feeding, and 200 CHWs in the Maldives to deliver key messages to parents and pregnant women. In Bangladesh, UNICEF
UNICEF partners with Bangladeshi garment industries to support mothers at work

"Providing targeted support for women in the workforce and ensuring women can earn a living, while also having the needed support to care for their children, is critical for women and their children and is an investment that benefits all."
—SHELDON YETT, UNICEF REPRESENTATIVE TO BANGLADESH

Under the UNICEF-led Mothers @ Work initiative, UNICEF and the Bangladesh Garments’ Manufacturers and Exporters Association and the Bangladesh Knitwear Manufacturers and Exporters Association will support factories to provide breastfeeding spaces and breaks, childcare facilities, paid maternity leave, cash benefits, health care, employment protection and a safe work environment for working mothers and pregnant women.

Building on lessons learned from a UNICEF pilot project, this partnership will improve working conditions for 130,000 women and provide better nutrition services and day-care facilities for 8,000 children. Starting in 80 factories, the initiative will gradually increase to ultimately reach over 4,000 factories in Bangladesh.

spearheaded various innovative approaches for maternal well-being, for example, through partnerships with the Bangladesh Garment Manufacturers and Exporters Association and Bangladesh Knitwear Manufacturers and Exporters Association to support factories to provide breastfeeding spaces.

As a regional innovation, mental health screening tools during antenatal care visits have been developed and piloted in Bhutan’s Jigme Dorji Wangchuk National Referral Hospital with the potential rolling out of initiatives to 15 additional hospitals.

GOAL AREA 2: LEARNING AND SKILLS

Pandemic-related disruptions to education systems further exacerbated access and deepened learning inequalities for vulnerable groups of girls and young women. Yet, these groups are the ones that would benefit most from equitable access to education as evidence shows that each additional year of schooling can boost a girl’s earnings as an adult by up to 20 per cent.43

Women also face other challenges while transitioning into the labour market as a result of the complex interplay between traditional norms perceiving them as primary providers of care services in the home, corporate hiring processes and national legislations. South Asia remains the region where the highest levels of women not in education, employment, or training are concentrated.44 An ILO analysis of the 2017–2018 labour force survey of Nepal found that 92 per cent of female NEETs were doing work in the household (e.g. caring for children, cooking, cleaning), which was three times greater than the share of male NEETs doing household work.45

43 UN Women, ‘Progress on the sustainable development goals, The gender snapshot 2022’.
44 ILO, “I am Generation Equality”: Ideals and reality in Asia and the Pacific’s labour markets.
45 Ibid.
In 2022, UNICEF efforts were concentrated on accelerating integrated youth employment and skilling programmes (for example, Rupantaran in Nepal and Desuung in Bhutan), equipping young people with 21st century labour market relevant skills in digital literacy, including coding, financial management skills and career consultations sessions. UNICEF continued to support implementing a comprehensive school safety programme in 10 Indian states. There was a continued focus on out-of-school children, and 754,593 children (51 per cent girls) were identified and transitioned to formal education.

Reaching out with key information on positive parenting and mental health to parents and caregivers has also been an integral part of UNICEF programming aiming to transform culturally embedded harmful social norms inhibiting change in gender relations. In 2022, UNICEF Maldives supported the government to initiate the Joint Positive Parenting Programme (JPPP) aiming to enhance parents’ knowledge, attitudes, behaviours and practices to improve developmental, health, education and protection outcomes for children. The JPPP takes a life-cycle approach, includes gender-responsive content and was developed through a consultative process with children, parents and other key stakeholders.

GOAL AREA 3: PREVENTION AND PROTECTION FROM HARMFUL PRACTICES AND GBV

The pandemic shed light on previously concealed violent domestic situations of women and girls in South Asia. New data suggest that on average, one in every three ever-partnered women has experienced physical or sexual violence by an intimate partner in their lifetime, and 16 per cent had experienced it during 2022.

UNICEF has achieved significant results through integrated programming targeting both violence survivors and gatekeepers of harmful social norms and practices.

In Bhutan, support for WGSS enabled over 10,000 women and girls to access case management and livelihood and other services. In India, UNICEF’s scale-up of strategic partnerships enabled 12.9 million adolescents (68 per cent girls) to access comprehensive child protection information.
Social and behavioural change campaign addresses gender digital divide in India

UNICEF India has developed a social and behavioural change communication package in consultation with adolescents and community members from the states of Bihar, Madhya Pradesh and Rajasthan to address the gender digital divide. The package includes audiovisual materials like films, posters and discussion flip cards to facilitate discussions in small groups and create a platform for adolescent girls to put forth their views. Some 48,000 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.49

GOAL AREA 4: WATER, SANITATION AND HYGIENE

Unaffordable, inaccessible water has specific implications for women’s health due to the increased needs for water and hygiene during menstruation, pregnancy and postpartum recovery. The average basic water requirement for a lactating woman is 5.3 litres a day.50 For young girls, water stress can have significant impacts on education. In rural Nepal, a one-hour increase in the time spent collecting water decreases girls’ probability of completing primary school by about 17 percentage points.51

Since August 2021, UNICEF Afghanistan has shifted its focus to scaling up emergency WASH services delivery to meet the immediate needs in the country. As a result, it has reached over 5.5 million people (1.2 million women and 1.4 million girls) affected by drought, flood and earthquake, as well as returnees. In addition, 276,864 women and 312,976 girls in humanitarian situations gained access to safe means of excreta disposal.

In the area of MHM, UNICEF pioneered the example of high-level advocacy on menstrual health and hygiene with the important component of male engagement (‘Men Take Lead’). A total of 59 health coordinators from 49 monastic institutions as well as 145 nuns were trained on hygiene behaviour, benefiting 15,271 schoolchildren (7,797 girls). Expanding sectoral collaborations were

49 Ibid.
50 UN Women, ‘Progress on the sustainable development goals, The gender snapshot 2022’.
51 Ibid.
The Red Dot campaign is a nationwide campaign in Bhutan to raise awareness on menstrual health and hygiene. The theme of the high-level advocacy campaign is ‘Men Take Lead’, which encourages boys and men to take the lead and create a menstrual hygiene friendly environment in schools in Bhutan. The campaign has awarded certificates of appreciation to men who have supported Red Dot Bhutan in advocating menstrual hygiene management (MHM). A total of 59 health coordinators in 49 monastic institutions have received training on hygiene behaviour, benefiting 2,554 children. In addition, 145 nuns in monastic institutions have been trained on menstrual hygiene behaviours. In total, 287 female religious students and 15,271 schoolchildren (7,797 girls) have benefited from the training provided to adult teaching staff.

Besides ensuring access to menstrual products and raising awareness on MHM, the Ministry of Education and its partners announced that it would address the menstrual management needs of girls and women with disabilities in schools and institutions. There are 33 schools across Bhutan with 865 children with special educational needs, 491 of whom are adolescent girls.

The gender snapshot 2022’.53

GOAL AREA 5: SOCIAL POLICY AND PROTECTION

Progress in poverty reduction has reversed with the onset of the pandemic with women and girls paying a large price. In 2022, 82 million women in Central and South Asia subsisted on less than $1.9 per day and higher international poverty lines reveal an even grimmer picture: the female poverty headcount with less than $5.5 a day in the same regions reached 714 million in 2022.53 For many, poverty puts essential services such as piped water and clean cooking fuel out of reach. Such deprivations propel other gender inequalities as women spend more time on unpaid care and domestic work. While social protection measures expanded during COVID-19, most were short term and gender-blind.

In response to the worsening economic crisis and its severe impact on women and children in Sri Lanka, UNICEF supported nutrition-sensitive short-term cash transfers for lactating women. In collaboration with the Colombo Municipal Council and partnership with Sarvodaya, a local civil society organization, a pilot was initiated in Colombo providing Sri Lankan Rupees 5,000 ($14) per month for up to three months to 3,010 registered mothers.

In Bangladesh, UNICEF supported the strengthening of social protection coverage and increased access to basic social services for children and women in 25 tea gardens through an analysis to understand the targeting barriers of the social transfer schemes and to assess the poverty impact.
of a universal cash transfer programme for children. Policy dialogues were organized with the government, tea garden owners, UN and civil society with communication messages in special newspaper supplements and social media posts. Notwithstanding progress, enhanced and sustained operations and innovative approaches are required to reach vulnerable groups of women and girls in challenging operating environments as various humanitarian crises in the region are unfolding.

In Nepal, UNICEF continued to provide technical assistance to Madhesh Province in advancing girls’ educational rights and reducing child marriage. UNICEF supported accelerating the implementation of the provincial government’s social protection programme, ‘Beti Padao, Beti Bachao’ (Save the girl child, educate the girl child) by providing technical support to the programme review to improve its design and monitoring system and ensure a results-based management.

In India, the Ministry of Panchayati Raj has issued an order to all states and union territories in the country to institutionalize mahila (women collectives) and bal sabhas (child collectives) as part of localizing the SDGs.

UNICEF and UN Women have successfully adopted the ‘One UN’ approach to advocate for and strengthen gender responsive budgeting and a wider gender transformative agenda in the western state of Maharashtra, India. The partnership has made major inroads in developing a gender responsive ecosystem for planning and budgeting and in developing a gender equality and women’s empowerment policy for the state that grounds the Leave No One Behind agenda, mainstreams gender and promotes intersectoral convergence among departments. The accompanying action plan focuses on addressing the existing implementation lacuna, while simultaneously ensuring improved accountability. The fourth phase of the partnership (January to December 2023) that was signed in December 2022 will focus on rolling out a training package on gender and child-related goals for all officials as well as a gender policy.
In 2022, UNICEF ROSA made strategic shifts to upscale its work and leadership with its country offices in applying gender-equitable approaches for transformative results across goal areas aligned with the 2022–2025 Gender Action Plan. The regional office made a pronouncement on investing in a more intentional approach to adolescent girls’ programming, realizing that the South Asian region is home to two-thirds of the global girl population, an instrumental population bulge to tap on to achieve the SDGs by 2030. The adolescent girls’ programming is one of the key areas for acceleration in the region (see Figure 1).

Additionally, considering the 41 per cent gap between women/girls and men/boys accessing and using digital platforms, UNICEF ROSA has also prioritized breaking the gender digital divide as another key accelerator for the region and committed to investing more in adolescent girls, especially in the marginalized and indigenous communities, to access digital technology, equipping them with the necessary skills for inclusive and affordable access.

Towards gender transformative programming

UNICEF uses the GAP institutional standard with benchmarks for country offices to track their progress in programming in an increasingly transformative way. The benchmarks include the use of gender analysis in the country programme design, monitoring, resourcing, capacity and accountability. In 2022, South Asia achieved 75 per cent of the gender results, which indicates that the country offices have been increasingly focusing on integrating gender transformative results into sectoral programming. In 2022, five out of the eight countries had completed their gender programme review and six had integrated gender into their country programme documents.

Strategic partnerships

At the country level, UNICEF has prioritized working with women and youth in programme design and has ensured that gender is a key area of integration in all partnership documents. UNICEF South Asian country offices have also continued to expand its partnerships with grassroots women’s and girls’ networks and women and girl-led civil society organizations on GBV, digital literacy, MHM and women’s empowerment programming.

Gender capacity, parity and accountability for gender results

Seven out of the eight countries in the South Asia Region have complied with the GAP staffing guidance with gender focal points (GFPs) and gender specialists, indicating strong leadership and accountability on gender in the country offices. UNICEF ROSA focused on promoting peer learning in 2022 that included monthly GFP calls and webinars to cross-pollinate gender capacity across country offices.
Monthly gender focal points meeting: A regional platform for cross-learning

UNICEF ROSA meets monthly with gender focal points from country offices to share experiences and best practices and identify lessons learnt in implementing the regional Gender Action Plan across diverse country contexts.
GENDER ANNUAL REPORT FOR SOUTH ASIA 2022

MOVING FORWARD

Gender programmatic priorities in South Asia in 2023. As South Asia is entering into the second year of implementing the GAP, the regional office has prioritized the following programmatic priorities to address the issues relating to women and adolescent girls in the ground.

The adolescent girls’ programme will be scaled up and rolled out across the eight South Asian countries taking into account country-specific needs and challenges and focusing on reaching the poorest and most marginalized girls to bring tangible change in their lives and empower them to make their autonomous, informed decisions.

Adopting a gender-transformative approach to the use of innovation and technology is essential for a more inclusive and equitable digital evolution. UNICEF ROSA has prioritized breaking the gender digital divide as a key accelerator for the region. UNICEF commits to investing more in adolescent girls, especially in marginalized and indigenous communities, to equip them with the necessary devices and skills for inclusive and affordable access to digital technology and help address the gender and safety norms keeping women and girls from obtaining equal access.

South Asia has been shaken by consequent and parallel crises like floods, drought, earthquakes, economic crises, and conflict. Against the backdrop of the global COVID-19 pandemic and increasing strains of climate change, these crises undermined the coping capacities of the population, often resulting in families turning to negative response mechanisms, such as taking girls out of school and child marriage. UNICEF ROSA seeks to harness the opportunities created by the poly-crisis to scale up and adapt programming to emergency settings and reach girls affected by humanitarian crises.
“I can stand on my own two feet and support my family”

During the first half of 2022, UNICEF established 158 Multi-purpose Adolescent Groups (MAGs) with 3,097 members and 44 adolescent and youth networks with 440 members in Kabul, Helmand, Herat, Kandahar, Nimroz and Paktia provinces in Afghanistan. In total, 28,279 adolescent boys and girls were reached with skill development programmes and peer to peer mentoring.

Zarghona is illiterate and lives with her husband and two children in PD-13, Kandahar city. “I could not afford to send the children to school, my husband is jobless,” says Zarghona. “We had a lot of tension at home, my husband was always fighting with me and could be very violent. I got really depressed and the children suffered too.”

“We were not getting enough to eat. I was very lucky that I got involved with the WGSS [women’s and girls’ safe space] and became a member of MAG.”

Along with several other women, Zarghona joined a shampoo-making project. “When I got the kit, it was the best day of my life”, she says. “My husband’s behaviour has changed. I am more confident. I can earn enough money now to send the children to school.”

“I am grateful to my Almighty Allah and to you, for giving me that hope, trust and confidence and for giving me the energy to stand on my own two feet and support my family. I will share my life experience with other women who face the same problem. My example can give them hope to go on.”
Skills4Girls: Giving life and hope back to adolescent girls

Cities are places where dreams are said to come true. Being able to go to Kathmandu, Nepal’s capital, from a village and earn a livelihood is a matter of pride. Moreover, migrating to a foreign nation ignites the excitement and hope of making a better living. The current belief around migration makes young adolescent girls with aspirations from villages vulnerable to risks of trafficking and violence.

Maya Tamang always wanted to live the city life. She didn’t want to limit herself to only her village. Her dream came true when she met a boy who promised to take her to Kathmandu. She eloped with the boy at the young age of 15 without knowing his background and family. He took her to his home in Nuwakot (a village in Nepal) where she stayed for six months. During the time, Maya was mental and physical harassed by his family, who refused to accept her as their daughter-in-law. They did not even provide her with her basic food and clothing needs and even her so-called husband didn’t take care of her, rather he tortured her.

Due to the harassment and torture, Maya went back to her maternal home, where her family rejected her. She was shunned and reprimanded for having eloped. It was very difficult for her to stay in that environment. Being unable to tolerate the criticisms from her family and community, Maya ran away again. This time she ran away to Kathmandu with one of her friends, where a man lured them with a promise of a better lifestyle and good job opportunities in India.

The two girls were on the verge of being trafficked to India. When they realized that they took shelter with a relative of Maya’s friend. The relative engaged Maya at a restaurant, where she was asked to clean, cook and entertain the guests. She was really unhappy with her situation.

When field officers from a drop-in centre visited Maya, she shared her misery of working at the restaurant. She had not been paid but had only received clothes to wear and food from the owner. The owner subjected her to verbal abuse and threats, and constantly shouted and called her names in front of the customers. While working there, Maya was subjected to physical and sexual abuse. She unfortunately could not leave the job as she had no place to go and no means to support herself.

With support from the field officers, Maya was introduced to the Skills4Girls programme where she was able to undergo UPSHIFT training, through which she gained confidence and was able to speak and stand up for herself. Through the training she also got ideas on how to establish and run a business. The psychosocial counselling support she received in the drop-in centre helped her heal from the emotional and mental trauma. With the help of family counselling sessions conducted by the outreach workers, Maya was accepted back into her family.

Maya is now back at her village. She is happily and successfully running a small shop and earns her an average of around 800 Nepalese rupees profit a day.
Nutrition-sensitive cash transfers help Sri Lankan mothers face the economic crisis

Kanchana, 35, and her family of four are part of a shanty community located along the Bloemendhal goods trail track in Colombo – one of many underserved housing settlements scattered in and around Sri Lanka’s capital. Their dwelling is meagre, a small kitchen and bedroom Kanchana had managed to build on top of her parents’ little shack.

“We were able to put the four walls together just before the baby was born,” she says. “We got a small loan and I pawned my jewellery, but I am glad that we somehow managed to get a place of our own.”

Her baby, Dinali, is 7 months old. While her older daughter, eight-year-old Rochana, goes to school and her husband Chaminda, 39, goes out to find work, she spends her day taking care of the baby.

Like most others in the community, her family too makes their livelihoods by tapping into the city’s informal economic sector. Chaminda switches between running a three-wheel taxi and taking on odd jobs at the nearby port. Her parents are day labourers and their ad hoc working styles allow them to check in on the mother and baby during the daytime.

“This year has been very difficult for us,” Kanchana says, “with the current situation in the country, we find it very difficult to make ends meet. We have to buy special items for the baby and my husband hasn’t been able to find work regularly. We have had to borrow money and at times depend on my parents, even for the basic food items.”

“In a good day my husband earns Rs 1,500 (about $4). After paying off debts, I get less than Rs 1,000 ($2.70). Some days we don’t get anything. It has been like this since the beginning of the year [2022].”

In August 2022, to support many families like Kanchana’s, UNICEF partnered with the Colombo Municipality Council and Sarvodaya, a civil society organization, to launch a short-term, nutrition-sensitive cash transfer programme that supports mothers with infants aged 0–6 months and aims to improve their access to nutrition. Under the programme, eligible mothers registered at maternity clinics received up to three monthly tranches of Rs 5,000 ($13.50) each time between August and October 2022.

“I was fortunate to be part of the programme. Having that extra Rs 5,000 per month made a big difference in what we could afford; we used the money to buy dry rations and supplements for the baby.”

Like many mothers, Kanchana is hopeful that the economic situation will improve. But until then, they are dependent on programmes such as these to pull through. “I hope this programme continues. It will help me provide my baby better quality food as she grows older and becomes less dependent on my milk.”
UNICEF ROSA facilitated a three-day digital literacy workshop in Kathmandu, engaging civil society organizations from South Asia. The event was led by Women in Tech Maldives, an NGO focusing on online safety and closing the gender digital gap.

Rupantaran session on public speaking to improve the skills of adolescent girls delivered by UNICEF Nepal.
UNICEF ROSA leadership signing a call to action to accelerate regional results for girls during International Day of Girls 2022

Women-led CSOs’ presenting their challenges, quick wins and solutions to bridge the digital divide in South Asia
EMPOWERING WOMEN AND GIRLS:
For a Prosperous South Asia