

THE POWER BEHIND THE PROMISE  
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# IMPACT COMPANION

Core Resources  
Annual Report  
2025

# From the Deputy Executive Director

Progress for children is never made in a single moment. It is built across the years of childhood, slowly and in conditions that, once passed, cannot be recreated. Every partner whose contribution is reflected in this Impact Companion is doing something more consequential than funding a programme: they are co-investing in the conditions of childhood itself. This is the lens through which the stories that follow should be read.

The programmes documented here span the developmental arc: from early childhood into adolescence. Viewed together, they illuminate the same structural truth: childhood depends on a set of conditions that must exist at the same time, and the absence of any one weakens the rest. Some of the stories that follow begin with missing legal frameworks – the rights and protections that must be in place before anything else can reach a child. Others begin with the absence of physical safety, access to education or the conditions needed to shift the social norms that harm girls. The contexts differ. The problem does not: a condition of childhood is missing; and with it, so too is much of what childhood would otherwise make possible.

In every context presented in this publication, Core Resources were the instrument that made a sustained response possible – not by filling a single funding gap, but by sustaining the institutional presence, technical capacity and government relationships that effective programming requires and that no short-term grant can build.

Core Resources are the foundation on which every other investment in children depends, and they are under pressure at precisely the moment when the need for them has never been greater. Without them, more targeted investments lose the institutional infrastructure that gives them reach and staying power.

My ask to every partner reading this report is to consider not only whether to sustain your investment in Core Resources, but how to deepen it, and how to encourage others to do the same. What is built in childhood cannot easily be rebuilt later. Core Resources are the investment that reaches children in the years when reaching them can still change the course of life.



**Kitty van der Heijden**  
Deputy Executive Director,  
Partnerships, UNICEF

*“To co-invest in Core Resources is to co-invest in childhood itself: in the years that cannot be recreated, and in the systems that make them worth living.”*









# Core Resources Impact Directory

In 2025, partnerships continued to power UNICEF's mission. At the heart of this effort were Core Resources: unrestricted funding that are our most strategic funding source. Core Resources are allocated where the needs of children are greatest, and allow UNICEF to deliver results across:

7

regions

149

countries and territories

home to 2.1 billion children

The yearly allocation of Core Resources to UNICEF offices in low- and middle-income countries is driven by equity. Funds are allocated as follows:

- A fixed minimum amount of **\$850,000 per year** for each country programme.
- A variable amount resulting **from three indicators** that are used to determine the severity of children's deprivations, demand for social services, and the capacity of the countries to deliver these services to children:



**Under-five mortality rate**



**Child population**



**Gross national income per capita**

In this **Impact Companion**, you will read stories about how Core Resources are accelerating progress and delivering results across 12 of the 17 Sustainable Development Goals for children.



**57%**  
spent in least developed countries

**58%**  
spent in Sub-Saharan Africa



**Myanmar** In one of the world's most heavily mined countries, Core Resources reached nearly 410,300 people with explosive ordnance risk education in 2025, helping protect children from the grave violations of killing and maiming. For 143 survivors of maiming, Core Resources funded comprehensive care: medical treatment, psychosocial support and rehabilitation.



**Nicaragua** Nearly 15,500 community health workers trained and equipped through Core Resources reached 220,000 children with health services in 2025. Coverage for children with disabilities grew by 20 per cent. Child mortality has fallen by 25 per cent since 2020.



**Nigeria** Child marriage has declined by one-third since 2003. Core Resources are the foundation for continuing that progress: they sustain community-based child protection systems that identify girls at risk and shift harmful social norms, and the research capacity to drive evidence-based behaviour change. In 2025 alone, this infrastructure mobilized 400,000 people to protect girls.





**The Sudan** When conflict stripped Darfur and Kordofan of almost every other source of humanitarian funding, Core Resources filled the gap. They enabled the screening of 720,000 children for acute malnutrition and delivered Vitamin A supplementation – critical to child growth and survival – to 580,000 more.



**The Syrian Arab Republic** After 14 years without a national school-based needs assessment, Core Resources delivered the data Syria's education system urgently needed. They also helped institutionalize Safe Schools across 286 schools in 12 governorates, producing measurable reductions in school violence and meaningful improvements in the learning environment.



**United Republic of Tanzania** Since 2010, national sanitation coverage in Tanzania has more than tripled. Core Resources accelerated that progress through a new delivery model now scaled up across the country, bringing verified open defecation-free status to 132 communities and improving access to sanitation for over 350,300 people in 2025 alone.



**Pacific** In Fiji, Core Resources shaped a generation of child protection law. The Childcare, Protection and Child Justice acts raised the minimum age of criminal responsibility from 10 to 14 years. New evidence on the costs of violence secured a 40-fold increase in domestic finance for child protection. Across the Pacific islands, Core Resources sustained UNICEF's core mandate through policy, normative and data work, while maintaining capacity to respond to recurrent emergencies.



**Caribbean** When Hurricane Melissa made landfall in Jamaica as a Category 5 storm, UNICEF was already responding. An Emergency Programme Fund loan of US\$2 million, approved hours before landfall, enabled the delivery of emergency supplies to 190,000 people. Across the Caribbean, Core Resources and the Global Humanitarian Thematic Fund had built the standing capacity.

**30%**  
spent on  
humanitarian  
action



**Global** In Kyrgyzstan, Core Resources helped transform child poverty policy: the Bala Yrsky universal child benefit is now a permanent government commitment of \$73 million a year, delivering monthly cash transfers to 450,000 children aged 0–3 – a 1,014-fold return on UNICEF's investment. Across a further 10 countries, from Asia to Latin America, Core Resources drove comparable advances in mobilising domestic finance for children.



**Global** Core Resources have enabled UNICEF to support a sustained response to the HIV epidemic in children and adolescents. A 7 per cent Core Resources set-aside has driven targeted responses for adolescent girls, who now account for the majority of new HIV infections among adolescents, contributing to a nearly 20 per cent decline in new infections since 2020.

This map is stylized and not to scale. It does not reflect a position by UNICEF on the legal status of any country or area or the delimitation of any frontiers.



# No Safe Ground

How Core Resources keep Myanmar's children alive while the only permanent solution remains out of reach

Myanmar's conflict has turned homes, playgrounds and the paths to school into some of the most heavily mine-contaminated ground in the world, scattering landmines and explosive remnants of war across farmland and villages in virtually every state and region of the country. The people most likely to encounter them are not combatants. They are children going to school and parents getting to work. They are a child playing near home, drawn to something on the ground that looks like a toy.

Landmines and unexploded ordnance have become one of the leading causes of child killings and maiming in Myanmar. These grave violations sit at the heart of UNICEF's mandate in conflict settings, and the independence to invest unrestricted funding where it is needed most is what allows UNICEF to fulfil it.

Mine clearance – the only permanent answer to contamination – requires conditions of access and stability that years of escalating conflict have consistently removed. Until those conditions return, education and victim assistance are all that remain. Yet risk education and victim assistance are among the most persistently underfunded areas of mine action in Myanmar.

Core Resources ensure that UNICEF can reach children before an encounter with explosive ordnance becomes fatal and that those who survive can receive the coordinated care they are entitled to.

Naw Nee was 13 years old and had been planning to become a physician. In December 2023, she was playing with friends and her younger brother just outside their home after school. "I saw my younger brother picking up a round object the size of a marble with a nail-like attachment," she recalled. "It didn't last more than a couple of blinks before it blew up, killing my little brother and also injuring my friend and me, with pieces of shrapnel piercing my cheek, head and back." Her brother died. At least two pieces of shrapnel remain lodged in her body.



What Naw Nee's brother encountered on the ground near their home was an explosive remnant of war, with nothing to distinguish it – for a child – from the things children have always picked up. Explosive ordnance risk education exists to close that gap in knowledge before the encounter happens, rather than after it.



## SDG target 16.1.2

Nearly 410,300 people reached with explosive ordnance risk education aimed to reduce the risk of killing and maiming of children living in conflict zones.



## 2025 AT A GLANCE



**510**

**incidents** recorded with landmine and explosive remnants of war



**410,296**

**people** reached with life-saving explosive ordnance risk education



**745**

**civilian casualties**, of whom 155 (21%) were children



**143**

**survivors** receiving medical care, psychosocial support, rehabilitation and assistive devices

Ethnic IDP children reading mine risk education brochure during a UNICEF-led awareness session at a temporary learning centre.



## HOW CORE RESOURCES HOLD UNICEF'S WORK TOGETHER IN MYANMAR

### Core Resources enable and connect upstream and downstream work

#### Upstream: Systems and knowledge

- **Child protection system strengthening:** working alongside communities and civil society to build the frameworks that protect children from explosive hazards
- **Technical Working Group on Mine Action:** advising the national mine action response, maintaining operational structures alongside community-led channels as national coordination as per international standards has been dismantled
- **Information Management:** assembling incident data from multiple sources into a national picture that guides programme delivery and contributes to child rights monitoring

#### Downstream: Direct services

- **Explosive ordnance risk education:** 410,296 people reached in 2025 through formal schools, non-formal education settings and digital platforms when physical access is denied by security conditions
- **Victim assistance pathway:** 143 survivors of explosive weapons received coordinated medical care, psychosocial support, rehabilitation and assistive devices in 2025, following a single pathway from injury through to recovery
- **Case management and referrals to wider services,** ensuring survivors are not passed between separately funded services without guidance

In Kachin State, thousands of families have spent more than a decade in displacement camps. Many children have grown up there with no experience of safe ground. Community educators reach them using illustrated handbooks adapted into local languages. When security conditions close the routes that allow educators to reach a community in person, digital platforms carry the same sessions forward.

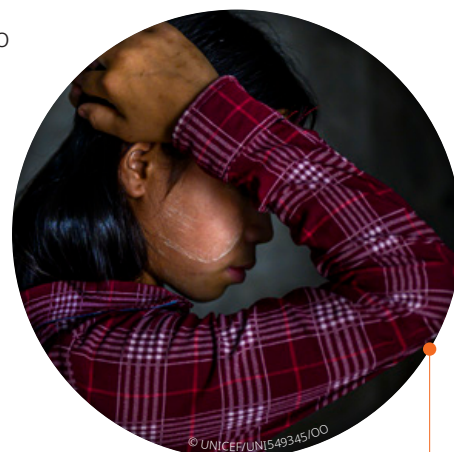
In 2025, education sessions kept running across delivery channels that had to shift whenever security conditions closed a route. Survivor support reached 143 people through a coordinated pathway that would not otherwise have existed for them. The Information Manager's incident data kept shaping where the programme went next.

The limits are real. There is no way to measure how many lives risk education has saved, because the tragedies it prevents cannot be counted. Mine clearance remains almost impossible while fighting continues, and children still make up a large share of the casualties.

Core Resources sustain more than direct service delivery. They fund analysis of incident patterns and field intelligence on accessible communities and routes as conflict conditions shift, and support relationships with medical and rehabilitation providers across insecure areas to enable victim assistance. Core Resources also drive advocacy with parties to the conflict to stop the use of landmines, explosives, and indiscriminate weapons. When large-scale mine clearance eventually becomes possible, the analytical infrastructure and field networks needed for a rapid scale-up will already be in place – laying the groundwork to protect children and families from landmines, unexploded ordnance, and the terror they create across Myanmar.

*"It didn't last more than a couple of blinks before it blew up."*

— **Naw Nee**, survivor, Kachin State



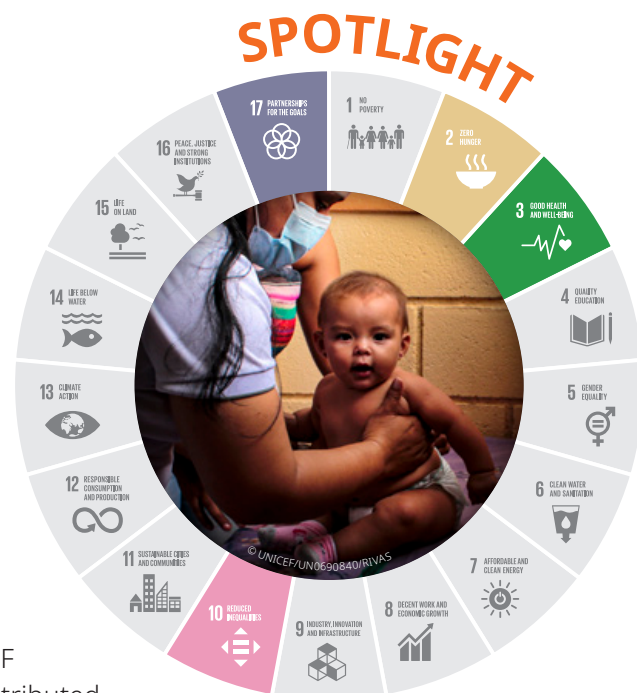
Naw Nee\*, a 14-year-old from the Bago region, bears the lasting scars of a tragic landmine explosion. The incident, which claimed the life of her brother, occurred when he unknowingly picked up a landmine, mistaking it for a toy, while playing just outside their home.  
\*name has been altered



# Beyond the Clinic Door

How Core Resources are helping Nicaragua close the gap between high coverage and equitable outcomes for every child

By most measures, Nicaragua's progress on child health is extraordinary. In five years, a lower middle-income country has driven child mortality down by nearly 25 per cent, enabled 99 per cent of deliveries across the country to take place in health facilities, and extended early prenatal care to the vast majority of expectant mothers, the result of sustained national investment led by the Ministry of Health. Nicaragua had long since surpassed the SDG 3.2 target on under-five mortality. But national statistics can flatten what they describe. Working closely with national and subnational teams as part of its ongoing technical assistance to the Ministry of Health, UNICEF undertook a more in-depth analysis of how those gains were distributed across different territories. The picture that emerged was more complicated than the headline figures suggested.



## SDG target 3.2

25 per cent reduction in child mortality since 2020.



Prenatal attendance and institutional delivery rates were already among the highest in the region, and the Government was continuing efforts to strengthen them further. UNICEF therefore focused on a different point in the care continuum: postnatal care, and in particular on the support available to a low-birthweight baby in the weeks following discharge from the health facility, in communities where the nearest health post might be hours away.

Across the Dry Corridor – a stretch of Pacific coastline recurrently affected by drought – home visits tended to prioritize other needs. In the most critical days of a child's life, the health system was strong at the point of birth, while continuity of care in the period that followed remained more limited.

The Ministry of Health had long relied on community health networks for vaccination campaigns and vector control. UNICEF's contribution, developed through a pilot in 2022 and 2023, was to formalize what those networks could do: an essential package of child health services, designed for trained volunteers working in communities where facility-based care had reached its limits. The Ministry adopted the strategy and led its implementation nationally. Core Resources funded two investments to make it operational: training for primary health-care workers and community network volunteers, and the tools they needed to do the job.

Through the Family and Community Health Model, UNICEF supported the Ministry to develop the protocols, monitoring tools and training that allow a health worker in a remote rural post to apply the same clinical standards as a colleague in the capital. Geography, in other words, is no longer a reliable

## 2025 AT A GLANCE



### 25%

**reduction** in child mortality between 2020 and 2024, from 12.6 to 9.4 deaths per 1,000 live births



### 99%

**of deliveries** nationally take place in health facilities



### 93%

early **prenatal care coverage**



### 15,450+

**community health volunteers** trained and equipped with UNICEF support



### 220,000

**children** reached through community networks in 2025

## THE BRIGADISTAS: COMMUNITY HEALTH IN ACTION

In northern Nicaragua, where reaching the nearest health facility can mean a two-hour walk, **Sonia Mercado** has turned her home into a community health point. As a *Brigadista*, she monitors the growth and nutrition of children in her area, follows up with premature and low-birthweight babies at home, supports pregnant women through referral and accompaniment, and ensures that families who cannot reach a clinic are not left without care.

Sonia is one of more than **15,487 Brigadistas** trained and equipped with UNICEF support, most of them women. In 2025, they collectively reached 220,000 children and achieved a **20 per cent increase in coverage of children with disabilities**. Their work includes identifying at-risk children and monitoring neurodevelopment, vaccination and growth. It also includes nutrition screening and supplementation, basic maternal and child health services, home follow-up for premature and low-birthweight babies, and support for Kangaroo Mother Care.

To carry out that work, each *Brigadista* is equipped with a Ministry of Health-approved Community Network Manual and Home Visit Flipcharts, and has access to SICO, the Community Information System that manages referrals and data flow across the health system. The infrastructure that reaches these communities is human: it is the *Brigadista* network, and it depends on the sustained, flexible funding that supports it.

predictor of the quality of care a child receives. The model has also made it possible to actively identify children who have missed vaccinations or check-ups, and to sustain follow-up after a clinical encounter ends, addressing the disconnect between what happens in a facility and what happens in the community afterwards.

The improved data monitoring that made this possible was itself funded by Core Resources. It exposed the gap between national statistics and community-level outcomes, enabling the Ministry of Health and UNICEF to pinpoint where children were being lost along the care pathway. In response, an essential package was developed, which reached 220,000 children through community networks in 2025.

Nicaragua's progress has required something different: five years of continuous presence across sectors and levels of the system, carrying out the sustained institutional strengthening efforts that are often invisible behind headline figures. In the communities furthest from the capital, that work is now visible: children are being identified and followed up; postnatal care is persisting beyond the clinic; and a mortality rate that stood at 12.6 per 1,000 five years ago has fallen to 9.4.



Volunteer brigade member Mayra de Jesús Herrera Ortiz with Dr Maryuri Sevilla, director of the San Pedro health centre, on their way to make follow-up visits to COVID-19 survivors in Sébaco, Matagalpa department.



# What laws cannot do

## How Nigeria is Pioneering the Science of Protecting Girls

The gap between what the law says and what communities do illustrates how harmful social and gender norms actually work. People rarely change longstanding behaviour because a statute tells them to. Change happens when the environment around them shifts in ways they can feel, or when someone whose judgement they trust speaks differently and reaches them in a register they recognize as their own. Legislation is essential for this process, but it is rarely sufficient on its own.

The most powerful barriers to protecting girls sit inside families and communities. The difficult decisions a parent or caregiver navigates when weighing a daughter's rights, safety and future against the social and economic pressures that can make child marriage feel like protection rather than harm are not moved by legislation alone. Addressing this requires understanding of how people make decisions, why access to information so often fails to change behaviour, and what it would take to shift a norm that is not only practised but also felt as one's cultural identity, tradition and sense of belonging. This is the terrain of behavioural science. In Nigeria, UNICEF is building national infrastructure to work in this terrain properly, at scale, with Core Resources as the foundation that makes it possible.

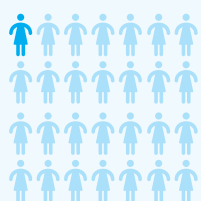
Across Nigeria, as part of the child protection system, auxiliary social workers within community-based child protection structures lead the day-to-day dialogues that address harmful practices, working in contexts where qualified professionals are too scarce. They are joined by religious and traditional leaders, who are mobilized alongside them as community champions.



### SDG target 5.3

Child marriage has declined by close to a fifth over the past decade.

## THE SCALE OF THE CHALLENGE



**1 in 28**

of the **650 million women** alive today who were married as children are from Nigeria



**Child marriage** has declined from 40.8 per cent in 2014 to 33.4 per cent in 2024



More than **400,000 people** were mobilized through community child protection structures in 2025



**BIRD-Lab** now spans 23 Nigerian universities

UNICEF brings together its expertise in child protection and social and behaviour change to guide this work. Government and United Nations partners recognize this as a leading national capability, one that sustains both a consistent community presence and the quality of the conversations held within it.

This kind of infrastructure is almost impossible to fund through earmarked grants. The outputs belong to no single donor, the timeline extends well beyond most grant cycles, and the work requires permission to test approaches, learn from what does not endure, and remain present in communities long after a typical funding relationship would have ended.

Core Resources provide that permission. Unattached to any single outcome, they sustain work with no fixed end date, and no single donor to satisfy.

## BIRD-LAB: BEHAVIOURAL INSIGHTS RESEARCH AND DESIGN LABORATORY

BIRD-Lab's purpose is to close the gap between what programme data show is happening and what is driving change beneath the surface, bringing together local academic institutions and federal agencies at the forefront of behavioural research for children. The aim is clear: Nigerian institutions generating Nigerian evidence to inform Nigerian programmes, and building a cadre of behavioural scientists whose expertise will outlast any individual funding cycle. It is part of a global UNICEF network dedicated to harnessing behavioural science to secure rights and achieve results for children.

***"A strategic addition to Nigeria's push for data-driven governance... a significant leap forward in our pursuit of the SDGs."***

**Professor Osibogun**, University of Lagos

The community network built with Core Resources was always intended to be underpinned by research. In 2025, this took formal shape with the launch of BIRD-Lab at the University of Lagos, a partnership that now spans 23 Nigerian universities. The research it generates sharpens every conversation the community structures hold, and it is these structures that reach girls before harm finds them.

Zainab (name changed), 16, fled armed violence with her mother and younger sibling, eventually taking shelter in an abandoned, doorless factory on the outskirts of Gusau. Their nights were marked by harassment, break-ins and fear. With no income, no schooling and no protection, Zainab's mother saw child marriage as the only way to keep her daughter safe.

That changed when a UNICEF-supported community child protection initiative reached Zainab through outreach and enrolled her in a peer learning and life skills programme. She gained confidence, accessed personal counseling and later joined a vocational tailoring programme and women's savings group. Today she earns an income and supports her family. As her mother put it: "I have begun to see the light of tomorrow after the darkness of my life."

In 2025, community-based child protection structures transformed awareness into community action, mobilizing more than 400,000 people to identify girls at risk of child marriage, challenge the pressures that drive it, and support the families and communities working to end it.

With Core Resources as the foundation, UNICEF has built national infrastructure capable of working at the pace that lasting change actually requires. The research sharpens every conversation the community structures hold. Nigerian institutions are now carrying both forward, beyond any individual programme cycle.



Kano, Nigeria. A 26-year-old mother of two is a powerful force for positive change in her community.



***People do not change longstanding behaviour because a statute tells them to. They change because the environment they live in has shifted in a way they can feel.***

The case for behavioural science in Nigeria



# Held in Trust

Syria's education system survived the conflict. Now, it can recover.

UNICEF has been present in the Syrian Arab Republic since 1970 and remained throughout the 14 years of conflict, ensuring sustained support to children and systems despite challenging operating conditions. The value of that decision is visible now.

Core Resources made this continuity operationally possible. Unrestricted funding could follow the needs: keeping the formal system functioning where schools remained open, keeping children connected to learning where schools were not, and keeping teacher training going in every governorate. The conflict took a devastating toll on Syria's teachers: many were killed, many more were displaced within the country or forced to seek refuge abroad. However, a significant professional core remained, sustained through continuous investment in training and support. The subject specialists, school counsellors, curriculum experts and national trainers whose professional development had taken decades did not disappear entirely. That core is what UNICEF worked with and worked to protect. A country that loses its educational professional class faces a generational recovery. Syria did not have to start from zero.

In 2025, nearly two million internally displaced Syrians returned to their areas of origin, more than 1.1 million of them children. Refugee returns from neighbouring countries brought the total number of returnees to Syria still higher. They returned to an education system that was damaged and overstretched. But it still had teachers, still had schools that opened their doors, and still had a professional workforce to receive the children arriving. None of that was accidental.

The political transition of December 2024 led to significant changes; for the first time since the conflict began, actors are aligned around a single agenda: reconstructing an education system that works for every child in Syria. UNICEF is co-leading the Education Sector alongside the Ministry of Education, bringing together more than 160 partners around a shared plan. This convening role was built on long-term presence and trust.



## SDG target 4.1

School needs assessment available for evidence-based education sector planning. Safe Schools institutionalized across 12 governorates.



## 2025 AT A GLANCE



**1.2 million**

**children** reached through UNICEF education programmes in 2025 through a portfolio of core and targeted funding



**7,000+**

**schools** estimated as non-functional at the start of 2025, highlighting the scale of the infrastructure challenge ahead



**2.4 million**

**children** remain out of school



Nearly **2 million**

internally **displaced Syrians** returned to their areas of origin in 2025, including 1.1 million children

When the transition came, reconstruction required information that was not yet available. Core Resources funded the first national school-based needs assessment in 14 years, supporting national efforts to map teacher capacity, student enrolment and the condition of school infrastructure across every governorate. These data are now the foundation from which every planning decision in the recovery phase proceeds.

Recovery efforts require schools that feel safe. Children who spent years in classrooms shaped by conflict and scarcity need to feel safe before they can learn. Two programmes funded through Core Resources are doing this work. Both have moved from pilot to national scale along the same path: Core Resources proved the concept, and the Ministry of Education carried it forward into the recovery phase.

The Safe School Initiative began as a pilot funded by Core Resources in 2024. By 2025, after demonstrating measurable reductions in school violence, improvements in the learning and teaching environment, and enhanced teachers' skills to manage classroom dynamics and promote positive learning, the Ministry endorsed the initiative and expanded it nationally. It now runs in 286 schools across 12 governorates, with 7,636 teachers and 116 national trainers working on violence prevention, positive discipline and building environments where children feel safe to learn. Its success generated momentum at the system level, prompting the Ministry of Education to request UNICEF's support to develop a national framework for school safety.

The Psychosocial Support programme, also funded by Core Resources, trained 10,658 teachers across 13 governorates. Drawing on arts, music, sports and drama, it gave educators practical ways to recognize a child who is struggling, and clear pathways to act on what they see.

In Damascus, Salma is a national trainer on the Safe School Initiative. She runs five-day intensive workshops for teachers and school counsellors across the city, working with educators who for years managed classrooms in conditions of conflict and shortage. At the training centre in Bab Sharqi, the sessions were practical: active listening, reading a classroom, learning to spot a child in distress. "These training workshops are vital to equip teachers with alternative tools for classroom management," Salma said. "They help ensure discipline and respect among students without resorting to violence." In the schools where teachers had completed the programme, the results were documented quickly: "We saw a significant drop in violence, and the positive impact on students was clear."

In 2025, children began returning to Syria in numbers not seen since the war began. The classrooms they walked into were damaged and crowded, short of almost everything. But they had teachers. They had a system that had kept functioning through years of crisis, kept training its workforce, kept itself together because Core Resources made it possible. Reconstruction will take years. But Syria's children were returning to schools that were still standing, taught by teachers who stayed. What was preserved is now the foundation. What comes next can be built on it.



Sahar, a teacher, takes part in an activity during a UNICEF-supported workshop on mitigating violence in schools, at Bab Sharqi training centre, Damascus.

*"We saw a significant drop in violence, and the positive impact on students was clear."*

— **Salma**, national trainer, Safe School Initiative, Damascus



Mohamed, 11, attends an Arabic lesson at a UNICEF-rehabilitated school in Jaramana city, Rural Damascus. "I couldn't believe my eyes when I saw the renovation. It feels like a completely different school," he said.



# The missing market

How Core Resources are funding the model that could close the United Republic of Tanzania's sanitation gap

One in ten Tanzanians still practices open defecation, and in rural areas the figure rises to one in seven. This is not a residual problem at the edges of a largely solved challenge: it is a direct driver of child stunting, developmental delays and recurring outbreaks of preventable disease, and it has persisted despite the country quadrupling its basic sanitation coverage since 2010. The Government has committed to meeting SDG 6, and the political will is real. What has been harder to resolve is why the communities that need sanitation most remain the hardest to reach, even as the national numbers move in the right direction.



## SDG target 6.2

3.5 times increase in basic sanitation coverage over a decade (from 13 per cent in 2010 to 55 per cent in 2022).



Two approaches have shaped sanitation programming across low-income settings for decades. Community-Led Total Sanitation (CLTS) works on demand: mobilizing communities to reject open defecation, making the practice socially unacceptable rather than merely inadvisable. Market-based sanitation works on supply: engaging local

businesses to make affordable, durable hardware available in communities where it has never previously been sold. In the communities where open defecation is most entrenched in the United Republic of Tanzania, both conditions are absent simultaneously: demand that has nowhere to go without accessible products, and a potential market that has no activated buyers to enter. UNICEF used Core Resources to test whether running both approaches together, in the same communities at the same time, produces something neither achieves independently.

## TANZANIA AT A GLANCE

**55%**

**basic sanitation coverage** in 2022, up from 13 per cent in 2010

**10%**

**of the population** still practise **open defecation**, rising to 14 per cent in rural areas

**350,350+**

**people** including **147,359 children** reached through the scale up of the hybrid model across 132 verified open defecation free communities in 2025

**98**

**villages** in Makete District achieved **open defecation free status**

The model – scaled up scaled with the Government, public and private sector partners including LIXIL under the Make a Splash initiative – brought both levers to bear together: CLTS sessions built demand while local sanitation shops, established and stocked with private sector support, gave that demand somewhere immediate to land. Getting the combination to work in practice – calibrating community entry points, artisan training and hardware pricing for contexts that vary considerably across Mbeya, Njombe and Kigoma – required the freedom to learn from what did not hold and adjust before moving on. That kind of iterative development has no fixed deliverable to report at 12 months, and does not fit inside a typical grant cycle. Core Resources made it possible to work at the pace the work actually required.

In Makete District in Njombe Region, the supply side of the model took the form of artisans like Mgaya, a self-taught carpenter who, before the programme, could build a small structure but lacked the technical knowledge to meet government sanitation guidelines. Trained through the partnership with LIXIL, he learned to reinforce

## THE HYBRID MODEL: HOW IT WORKS

The United Republic of Tanzania's hybrid sanitation approach operates on two tracks simultaneously. CLTS creates demand through community-driven behaviour change. Market-based sanitation builds the supply side. Running both tracks together addresses a failure each faces in isolation: CLTS can generate demand that finds no affordable product, while market-based approaches can build supply into a community that has not yet decided if it wants one. Where the two work in concert, behaviour change and commercial activity reinforce each other, and sanitation becomes something communities own and a market can sustain.



latrine substructures for Njombe's heavy rains, install SATO pans that reduce odour and flies, and fit hand hygiene stations at the point of use. "Before, I used to just dig holes," he said. The training turned ad hoc construction labour into something with a standard, a skilled person available in the community to build it, and another to maintain it.

In 2025, the model reached 350,356 people, including 147,359 children across 132 externally verified open defecation free (ODF) communities in Mbeya, Njombe and Kigoma with improved sanitation and hygiene services, bringing the cumulative number reached with at least basic sanitation to 1,267,842 (614,289 males, 653,553 females). In Makete District, all 98 villages achieved ODF status; in neighbouring Ludewa, more than half of the villages also attained ODF status in a single year. Where ODF status has been verified, children have cleaner ground to play on, waterpoints are less likely to be contaminated, and the disease outbreaks that follow poor sanitation are less likely to disrupt the school terms and clinic visits that shape a child's early years.

In 2025, building on those results, UNICEF mapped the national WASH private sector landscape and began developing an engagement strategy to extend the private sector partnerships beyond Lixil. UNICEF also partnered with the Ministry of Health and the Prime Minister's Office to develop the National Strategy for Accelerating Safely Managed Sanitation and Hygiene for All, covering 2025 to 2030. A model piloted in three regions three years ago now has a national policy framework behind it, a Ministry of Health strategy with the Prime Minister's Office as co-owner, and a growing private sector coalition ready to take it further. This progression from subnational pilot to government-owned strategy is itself a measure of what Core Resources make possible: not just the funding of a programme, but the sustained institutional engagement that allows evidence to travel from field results to national policy and stay there without UNICEF holding it in place.

Earmarked funding plays a critical role in scaling up what has already been proven and, in some cases, in piloting new approaches. However, the slower, adaptive work of designing something that does not yet exist – and refining it through adjustment, learning and calibration until it holds under real conditions – rarely fits inside a defined deliverable or fixed grant cycle. Core Resources provide the flexibility needed.

The hybrid model now moving toward national scale could not have been earmarked before it existed; it had to be developed first, in the space that only flexible funding can provide.



## Ready before Landfall

How Core Resources make it possible to respond to a crisis before it arrives

By the time Hurricane Melissa made landfall in Jamaica as a Category 5 storm on 28 October 2025, UNICEF country offices in the Caribbean were already responding. UNICEF's Operations Centre issued the first official alert six days before the storm reached Jamaica.

Hours before Hurricane Melissa, UNICEF approved a US\$2 million Emergency Programme Fund loan to rapidly procure and mobilize supplies and personnel ahead of the official appeal.

By the end of the first week following Emergency Programme Fund approval, UNICEF's response was fully operational across four countries. The Latin America and Caribbean Regional Office mobilized surge support within hours of Hurricane Melissa's landfall, deploying technical specialists in nutrition, health, supply and logistics, and community feedback, while activating disease surveillance and child protection assessments.

The speed of UNICEF's response was not improvised. It relied on standing capacity that Core Resources and the Global Humanitarian Thematic Fund sustain precisely because it cannot be built during a crisis.



### THE RESPONSE AT A GLANCE



**6**

**days** advance warning before Hurricane Melissa's landfall in Jamaica, by which time UNICEF's response was already underway



**25**

**surge deployments** of UNICEF staff and stand-by partners



**190,000**

**people** reached with emergency supplies



A student of York Castle High school examines the damage to one of the school buses parked on their school compound. The winds from Hurricane Melissa blew the zinc from off one of the classrooms and through the windshield of the school bus in St. Ann.

## THE EMERGENCY PROGRAMME FUND: HOW CORE RESOURCES ACT BEFORE A CRISIS PEAKS

UNICEF's Emergency Programme Fund (EPF) fast-tracks resources to country offices within 48 hours of request. In the Hurricane Melissa response, a \$2 million loan was approved hours before first landfall, enabling procurement to begin before needs assessments were complete.

As a standing mechanism sustained by Core Resources, the EPF can move in any direction to any country within two days. In 2025, it issued \$69.8 million in EPF loans to 25 countries and regional offices, supporting nutrition, WASH, health, education and child protection responses across the world's most fragile contexts.



EPF RESULT

**190,000**

**people reached**  
with emergency  
supplies as a direct  
result of the EPF  
investment

The difference was evident in Jamaica and Cuba. The flexibility of the Hurricane Melissa EPF enabled the UNICEF country team to act swiftly and anticipate needs, driving faster decision-making and a proactive response in line with UNICEF's mandate. This strengthened UNICEF's position as a trusted operational partner from the moment governments and communities needed one.

Readiness funded before a crisis peaks produces outcomes for children that no day-of-impact response can replicate. Core Resources make it possible to act before an appeal is launched, at a moment when the difference between early and late intervention can still be measured in lives.



Antwane, 12, talks with Olga Isaza, Representative, UNICEF Jamaica, about his experience during and after Hurricane Melissa. Antwane has been helping his neighbours clear fallen trees and debris to reopen the roads. UNICEF is continuing to work with local authorities and partners to support affected children and families across Jamaica in the aftermath of the disaster.



# The Largest Lever

## The returns on public finance reform and why they last

The resources that shape children's lives at scale are domestic: the public budgets that fund health systems, schools, social protection and water infrastructure. Shifting even a modest share of those budgets towards children's needs can change outcomes in ways that no external funding stream, however generous, can replicate alone. The question is how to make that shift happen.

UNICEF's Public Finance for Children (PF4C) programme works in more than 140 countries to strengthen the systems through which governments allocate, prioritize and sustain investment in children. The work is technical and long-term: analysing fiscal space, building the evidence base for child-centred allocation, embedding child-sensitive priorities in national budgetary frameworks and developing the institutional knowledge and political relationships that make gains repeatable across budget cycles, administrations and crises.



1

Peru 🇵🇪

In Peru, Core Resources (\$53,000) equipped officials from 16 Administrative Offices of 3 Regional Governments in Loreto, Ucayali and Huancavelica to design child-centred budgets for six preventive child health interventions. The result was a \$234,000 increase in public finance for health services for children, and optimization of another \$145,300 for critical supplies.

2

Zimbabwe 🇿🇼

In Zimbabwe, Core Resources (\$31,000) provided the high-quality budget analysis for child-centred advocacy, contributing to a 5 per cent increase in social sector spending on children, from 30.6 per cent in 2024 to 35.2 per cent in 2025, securing continued national investment in child- and adolescent-related services.

3

Burundi 🇧🇮

In Burundi, Core Resources (\$252,000) contributed to strengthening government capacities in programme-based budgeting for children and the case for child-centred public finance through sectoral budget analysis, contributing to a 71.2 per cent increase in WASH allocations (\$13 million): a 52-fold return on investment.

4

Kyrgyzstan 🇰🇬

In Kyrgyzstan, Core Resources (\$85,000) were instrumental to the introduction of the Bala Yrsky universal child benefit: a permanent annual government commitment of \$73 million (a 1,014-fold return on investment) reaching 450,000 children aged 0–3 with monthly cash transfers to alleviate child poverty and expand access to social services.

5

Mongolia 🇲🇳

In Mongolia, Core Resources (\$30,000) catalysed a high-impact public financing reform, generating increased government investment in children's services including \$6.1 million for child protection (a 47 per cent increase from 2024), and \$37.9 million for school meals reaching nearly 380,000 children.

This map is stylized and not to scale. It does not reflect a position by UNICEF on the legal status of any country or area or the delimitation of any frontiers.

6

## Ghana

In Ghana, Core Resources (\$200,000) funded specialist expertise in public finance management and in child-focused budget analysis, strengthening the evidence base for advocacy with government ministries, members of parliament and the International Monetary Fund. The result was a 2.4 per cent increase in social sector allocations for children, from 26.7 per cent in 2025 to a projected 29.1 per cent in 2026.

7

## Tunisia

In Tunisia, Core Resources (\$250,000) seeded a five-year engagement that transformed the national social protection system for children. Starting with evidence-based advocacy and a proof of concept developed through crisis funding, UNICEF mobilized over \$100 million in partner funds and helped make the case for a permanent, nationally funded and more adequate child benefit: resulting in a permanent annual government commitment of approximately \$85 million. Coverage expanded by 443 per cent to reach over 600,000 children – all children aged 0-18 in households registered as vulnerable. The programme was fully institutionalized in 2025 as a foundational pillar of Tunisia's social justice agenda.

8

## Lesotho

In Lesotho, Core Resources (\$40,000) funded a comprehensive social-sector budget analysis that provided the evidence base for advocacy, securing increased government allocations to child-focused health, education, nutrition, and social protection programmes – including a 10 per cent increase in cash transfers to children.

9

## Cameroon

In Cameroon, Core Resources funded the development of child-focused resource mobilization strategies for three municipalities (\$25,000 each). By building local government capacity to make the case for investment in children, the strategies helped each municipality mobilize an average of \$1.6 million in additional resources for nutrition, education and birth registration services: a 65-fold return on investment.

10

## Malawi

In Malawi, Core Resources (\$75,000) helped drive a 45 per cent increase in social sector allocations benefiting children, equivalent to \$480 million in government spending across education, health, WASH and social protection services: a 6,400-fold return on investment.

11

## Kenya

In Kenya, Core Resources (\$62,500) protected approximately \$65 million in social sector funding for health, education social protection and child protection and child protection at risk of being cut: a 222-fold return on investment, guaranteeing the continuity of essential services to children.

None of this is possible without Core Resources. PF4C is not work that can be structured around a fixed project timeline: it requires programme continuity across fiscal and political cycles and the capacity to recognize and act on opportunities when they arise. Core Resources provide exactly this flexibility. They fund the technical experts, the analytical tools and the in-country relationships that generate leverage on national budgets.

The country results above illustrate both the scale of leverage and the durability of what it has built: budgets protected, universal benefits introduced and investment in children embedded in national systems. The investment amounts invested are modest; the returns are extraordinary.



# Children First, Then and Now

How Core Resources are keeping UNICEF on the frontline of an epidemic that has never stopped evolving

In the early 2000s, at the height of the HIV pandemic, there was little focus on children in the HIV response. The global effort was real, the science was advancing, and billions of dollars were being mobilized. But pregnant women living with HIV and their children were largely absent from the conversation.

“Thinking back to that time, there wasn’t enough attention to the impact HIV was having on women and children,” recalls Anurita Bains, UNICEF Associate Director for HIV/AIDS. “There were gaps in the HIV response – with not enough attention and support at community level – yet we could see that if communities and women were supported, children would benefit.”


The solutions funded by Core Resources and enacted through teams of technical advisors in UNICEF country offices, resulted in one of the great public health achievements of the past quarter century: a global shift that reduced new HIV infections among children by 78 per cent between 2000 and 2024. UNICEF used Core Resources to build and sustain technical expertise, champion children to be on national and global agendas, and support work in communities over years.


**“Countries are showing leadership to protect hard-won gains; and innovations like lenacapavir – a single injection offering six months of HIV prevention. It has the potential to protect millions including adolescent girls and young women, who remain disproportionately affected by HIV in sub-Saharan Africa. With renewed commitment and sustained investment, we can deliver on the promise of a future free from HIV for every child, everywhere.”**




**Catherine Russell,**  
Executive Director, UNICEF


## THE GLOBAL PICTURE

 **78%**  
**reduction** in new  
HIV infections among  
children since 2000

Over  
 **1,500**  
**adolescent girls** newly  
acquire HIV every week  
in sub-Saharan Africa

 **33**  
**high-burden countries**  
where UNICEF supports  
a combination HIV  
prevention programmes,  
including pre-exposure  
prophylaxis, targeting  
adolescent girls,  
young women and  
young key populations

 **9 in 10**  
**new HIV infections**  
in adolescents in  
Eastern and southern  
Africa are among girls

 **\$5.8 million**  
**in Core Resources** invested  
through the 7 per cent  
set-aside to reach pregnant  
and parenting adolescent girls  
in 11 high-burden countries

While the global HIV response has made extraordinary gains, two decades later a specific population is being systematically missed: pregnant and parenting adolescent girls. More than 1,500 girls newly acquire HIV every week in sub-Saharan Africa, and 9 in 10 new HIV infections among adolescents in eastern and southern Africa are among girls. Most health programmes fail to differentiate between adult women and adolescents, while most programmes designed specifically for adolescent girls give little attention to pregnancy and parenthood. The needs of a pregnant adolescent girl, regardless of HIV status, are complex: access to quality antenatal support, a pathway back to school, and care for her own health and that of her newborn. For a pregnant adolescent girl living with HIV, the stigma of early pregnancy, fear of disclosure and absence of peer support can each be enough to keep her from the clinic. No single earmarked grant can cover that range of need. In July 2024, UNICEF's Executive Director approved a \$5.8 million investment from the 7 per cent Core Resources set-aside to address this gap directly, because no other funding instrument was shaped to do so.



Christine, 20, with her son Anff, 2, outside Chainda Urban Health Centre in Lusaka, Zambia. The clinic plays a vital role in supporting young mothers through free HIV testing, counselling, and services to eliminate vertical transmission of HIV. For young women like Christine, Chainda provides trusted, compassionate care close to home, helping them stay healthy and protect their children.

### SDG target 3.3.1

New HIV infections among adolescent girls declined by nearly 20 per cent between 2020 and 2024.



Our recent focus on pregnant and parenting adolescent girls exemplifies UNICEF at its best. Colleagues in the field identified that existing programmes were not adequately meeting the needs of adolescent girls, while our data analysis showed that a quarter of clients accessing prevention of vertical transmission services in sub-Saharan Africa were adolescent girls and young women. "Together, we recognized this gap and identified how to address it. It became evident that UNICEF, with its capacities across sectors, was uniquely positioned to act," adds Anurita Bains.

In KwaZulu-Natal, South Africa, Lethokuhle discovered she was pregnant at seven months. When the reality became clear, fear took over. "I couldn't face it," she recalls. "I felt ashamed. Like I had betrayed myself." Her parents' response surprised her: they were calm, and they supported her. Her mother accompanied her to clinical appointments, partly because she did not want nurses to judge her daughter for coming so late in the pregnancy.



Lethokuhle Ngema and her son Kusaselihle Ngema stand outside their home in KwaZulu-Natal. Lethokuhle receives support from the Young Mentor Mother programme (YMM). The program trains young women with lived experience to become mentors – supporting their peers with maternal and child health, sexual and reproductive health information, HIV prevention and treatment, mental well-being, parenting skills, and clear pathways back to education and other essential services.



After her son was born, Lethokuhle began attending a local clinic for vaccinations. That was where she met the Young Mentor Mothers, trained peer supporters named Sindiswa and Phumele who had had similar experiences themselves. “They asked about my life,” she says. “They listened. They promised they wouldn’t share my story.” They drew on their own experience when they spoke: “Sometimes we say: ‘This happened to me too,’” Phumele explains, “so they know they are not alone.” Lethokuhle remembers the effect. “They made me feel confident,” she says, “as a person and as a mother.” Lethokuhle is now raising her son and planning to study hospitality. She is one of the young women that programmes funded by Core Resources exist to find.

## THE YOUNG MENTOR MOTHERS: FROM EVIDENCE TO PROGRAMME

At its core, the Young Mentor Mothers programme builds on an approach recognized in the HIV response, evolving it to address a growing need. It does so by developing a trained, community-embedded workforce able to reach pregnant and parenting adolescent girls where formal health systems cannot. Young women are recruited from the communities they serve, and trained and deployed as peer supporters, thereby creating a cadre of skilled community health workers that governments and partners can build on. In Zimbabwe and Zambia, this approach is already generating the workforce and referral infrastructure on which the broader response depends.

Drawing on evidence from peer-led studies across eastern and southern Africa, the programme trains young women with lived experience to support pregnant and parenting adolescents. They provide sexual and reproductive health information, HIV prevention and treatment support, psychosocial care and parenting guidance, alongside referral pathways back to school or other learning opportunities and essential services. They also deliver the prevention service packages, risk assessments and referral frameworks required for an integrated HIV response.

In Zimbabwe, UNICEF supported the recruitment, training and deployment of 89 Young Mentor Mothers in 2025, achieving 99 per cent service uptake among pregnant and breastfeeding adolescents and young women, and expanding reach from four to five districts. In Zambia, the Young Mentor Mothers played a pivotal role in HIV prevention, reaching over 113,000 adolescent girls and young women with critical services, including over 18,600 who were pregnant or already parenting. For Sindiswa and Phumele, it was their first formal employment.

*“This job helped me accept who I am.”*

**Phumele**, Young Mentor Mother, KwaZulu-Natal



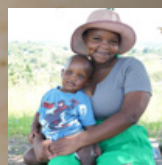
What has been built over decades is genuinely at risk. In 2025, sudden and significant reductions in external funding disrupted HIV prevention and treatment programmes that millions of women and children across sub-Saharan Africa depend on. Community-based peer support was among the first casualties, scaled back or discontinued in settings where bilateral funding had sustained it, and this is precisely a part of the response on which pregnant adolescent girls and women living with HIV rely most. In an analysis led by UNICEF with UNAIDS and Avenir Health, the projected cost of continued funding decline is stark: if current trends hold, by 2040, three million children will acquire HIV and nearly 1.8 million will die of AIDS-related causes, the vast majority in sub-Saharan Africa. In high-burden HIV countries, where external funding fell away, UNICEF country offices used Core Resources to support governments and communities to protect the continuity of HIV programmes for pregnant and parenting adolescents, covering the community-level services, peer support programmes and comprehensive services that earmarked grants could not fully provide.





Core Resources fund the technical advisors who translate evidence into policy, the data systems that identify which girls are being missed and why, and the advocacy that keeps children and adolescent girls visible in every national strategy, community plan and proposal to the Global Fund and other external partners. The \$5.8 million investment from the 7 per cent Core Resources set-aside is funding the scaling up of proven young mentor mother models and the expansion of integrated prevention service packages, including structured risk assessments and referral frameworks, across 11 high-burden countries in sub-Saharan Africa.

UNICEF has the tools, science and knowledge to help end AIDS among children and adolescent girls. Peer mentor models are being taken to scale across high-burden countries, risk assessment and referral frameworks are expanding access for the most underserved, and innovations like lenacapavir are entering the pipeline. UNICEF is helping to shape how each of these reaches the girls who need them most, ensuring that the adolescent girls most at risk are not passed over as the response evolves. That technical stewardship role – keeping adolescent girls visible at every level from community clinic to global policy forum – sits outside what any earmarked grant can fund. Core Resources make it possible to do this work continuously, including in the years when the world's attention and its funding are pointed elsewhere.



Scan the QR code or click on the image to read **Lethokuhle's Journey with Young Mentor Mothers**.



Scan the QR code or click on the image to read **Cost of inaction on HIV for children**.





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