Office of the Secretary of the UNICEF Executive Board

Template for delegations commenting on the draft country programme documents

2022 second regular session

Draft country programme document commenting period (<u>except for the draft CPD for Gabon</u>): <u>14 June to 5 July 2022 [18:00 EST]</u> Draft country programme document for Gabon commenting period: <u>17 June to 11 July 2022 [18:00 EST]</u>

Delegations are kindly invited to use this template to share their comments on the draft country programme document being presented to the Executive	e Board
during the forthcoming session.	

Delegation name: Canada

Draft country programme document: Nigeria

In accordance with Executive Board decision 2014/1, draft country programme documents are considered and approved in one session, on a no-objection basis. All comments received by the Office of the Secretary of the Executive Board before the deadline stated above will be posted on the Executive Board website, and considered by the requesting country, in close consultation with UNICEF.

	Delegation's comments	Response(s)
General comments	Canada welcomes UNICEF's draft Country Programme Document for Nigeria and the opportunity to provide comments.	
	We remain deeply concerned by the ongoing humanitarian situation in north East Nigeria, and commend UNICEF's commitment to staying and delivering life-saving assistance in the complex security setting, in addition to humanitarian access constraints.	

Comments on specific aspects of the draft country programme document	• The contextual analysis/programme rationale is fairly informed by sex, age data outlining the distinct needs and vulnerabilities, especially of women and girls. However, we observe that the entire CPD is completely lacking information on persons with disabilities which is concerning, since they face additional and unique challenges in humanitarian settings, including accessing relief. We would welcome additional information on this.	
	 The persistent and entrenched gender inequalities causing girls and women to experience far worse outcomes than boys and men is deeply concerning. For e.g., according to the CPD – education, 60% out of school children are girls; 1 in 4 girls are affected by sexual violence; almost one in five girls aged 15 to 19 years suffers from acute malnutrition and anaemia affects over two-thirds of children under the age of 5 years and more than half of women under 50 years of age. We strongly encourage UNICEF to continue to prioritize gender-responsive programming including more attention to addressing structural and normative changes/barriers to the underlying drivers of gender inequality. 	
	 Canada welcomes the core strategies (outlined in paragraph 20), which are essential in order to improve the effectiveness, quality and efficiency of responses. These should also include promoting and expanding locally driven responses. We urge UNICEF to promote feminist approaches, shifting power and leadership to local and national communities—specifically those led by women. We also encourage more partnerships with women-led organizations in the region. 	
	• Canada commends UNICEF's efforts in responding to acute malnutrition and stunting, ensuring the nutritional needs of children are met. We note the enormous gaps (three million children under the age of 5 years are wasted). With the predicted increase in global acute malnutrition and rise in cost of treatment, interagency collaboration with other actors such	

as WFP/WHO is now more important than ever to address nutritional deficiencies. These should include for example, strengthening joint analysis response prioritization to avoid duplication, and to promote cost savings through robust coordination. We would appreciate more information on how UNICEF and other actors are currently working together or plan to partner for better outcomes?	
• More broadly, we would appreciate more information on whether there is a One UN approach to the UN presence in Nigeria.	
• For there to be integrated management of severe acute malnutrition within the primary health care system, we would be interested to know if there is a roadmap with the federal government and the states to ensure that nutrition is included in the minimum service package available at health facilities, and a reliable supply chain for RUTF.	
• Regarding paragraph 19, as the domestication of the Child Rights Act means that states are passing legislation that is adapted for traditional and religious norms and practices, how will UNICEF mitigate this toward reductions in early forced marriages, SGBV and harmful traditional practices listed in paragraph 41?	
• Regarding paragraph 25, Canada looks forward to seeing how this is integrated into the current project of the MOU for PHC in Bauchi State. This section would have been an opportunity for UNICEF to highlight the work done with other partners in other states under the MOU model for advancing PHC quality and RI coverage.	