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 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.	 UNICEF acknowledges and appreciates the comments on its draft country programme for 2023-27 from the Government of Canada and welcomes the opportunity to provide additional information that could not be adequately covered in a 6000 words document. UNICEF shares the concern over the ongoing humanitarian situation in the north-east and appreciates the recognition of our commitment.

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.

- UNICEF continues to place the outmost importance to the protection of most vulnerable children, including Children with disabilities. Overall, data on persons with disabilities needs to be strengthened in Nigeria. The Multiple Indicator Cluster Survey (MICS) 6 was recently completed and provides data on child functioning. Specifically, for the humanitarian setting in the Northeast, UNICEF is planning a disability needs assessment later this year. UNICEF will also continue to build awareness and capacity in partnership with the UN Disability group as well with all its partners.
- Programmatically, UNICEF is planning to strengthen its disability response within the education sector. This includes strengthening of the information systems to be inclusive, using school as a platform for inclusive delivery of child protection services and disability-sensitive WASH programming, and addressing social barriers by promoting the education of children with disability. Specific mention is provided under paragraph 34 on page 7 of the draft CPD.
- UNICEF recognises the urgency of addressing structural and normative barriers to gender inequality in Nigeria.
 Gender priorities have been identified through a gender review that informed the design of programme strategies across the overall country programme.
- An action plan is being developed to support women's leadership, changes in gender norms, and to protect and empower adolescent girls, as part of the Country Programme priorities with a focus on gender responsive programming.

• 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

- The underlying drivers of gender inequality cut across all areas of the UN's work in Nigeria. Accordingly, UNICEF will continue to actively engage with other UN agencies to find strategic entry points to address gender barriers and norms. Addressing gender inequality is an integral issue in the UNSDCF as well as Nigeria's National Development Plan 2021-25. Additionally, the Spotlight Initiative, chaired by the Minister of State for Planning, provides a framework for addressing issues around women and girls with an emphasis on gender-based violence. In addition, UNICEF will prioritize building partnerships with and empowering women-led organizations together with other UN agencies, including UN WOMEN, UNFPA and UNDP.
- UNICEF will continue to work on women's empowerment throughout its extensive community engagement work. In community networks supported by UNICEF, including Voluntary Community Mobilizers (VCM), WASH communities (WASHCOMS), and Mama2Mama groups, we deliberately promote women's leadership.
- As part of the Global Action Plan for Child Wasting (issued by the UN Secretary General in 2020), UNICEF works closely with four UN agencies (FAO, WFP, WHO and UNHCR) to support the government to plan for and provide services to reduce wasting from five to three per cent (in line with the SDG) by 2030. In accordance with the plan, in Nigeria, UNICEF has a joint workplan with WFP aligned with the UNICEF-WFP Global Partnership Framework particularly for the North East.
- In addition, in keeping with UNICEF's global mandate, UNICEF is the sector co-ordinator for the Nutrition

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.

Sector for the North-East part of Nigeria. In this role, UNICEF invests in good quality data and programmatic coordination. Specifically, UNICEF has contributed to a national micro-nutrient and food consumption national survey, various national and sub-national SMART nutrition surveys, and the joint needs assessment through the Cadre Harmonise in the North-East. These are widely used across partners to avoid duplication.

- At the national level, UNICEF co-leads the Scaling up Nutrition Development Partners Group (inclusive of the above-mentioned UN agencies), with USAID to ensure prioritization and effective co-ordination amongst various development partners across the country.
- The one UN approach in Nigeria derives from the UNSDCF as the core coordinating document. The UNICEF CPD, as well as programme documents of other UN agencies, derive from the UNSDCF. There are many examples of UN joint programming, including the Spotlight initiative and the joint SDG fund for social protection. In addition, six states use a 'delivering as one' (DaO) approach, and all UN activities in those states are coordinated through one lead agency per state.
- The National Multi-Sectoral Plan of Action for Food and Nutrition includes a plan for full integration of nutrition services (including prevention and treatment) within the PHC structure. Nutrition treatment commodities are included on the Essential Medicines List. UNICEF is working with federal and state governments to put this plan in action, including through the PHC MOU mechanism. On the RUTF supply chain, UNICEF has worked closely with government and private sector to enable approval of three local manufacturers of RUTF

which will improve the supply chain reliability. Additionally, UNICEF has instituted an innovative match-fund mechanism to unlock domestic resources for life-saving nutrition commodities. Regarding paragraph 19, as the domestication of the Child UNICEF will continue to invest in girls' education as Rights Act means that states are passing legislation that is this is recognized as the most important response to adapted for traditional and religious norms and practices, how reduce early marriage, FGM, child mortality and will UNICEF mitigate this toward reductions in early forced sexual and gender-based violence and to ensure women can play a leading role socially, politically and marriages, SGBV and harmful traditional practices listed in paragraph 41? economically The multi-sectoral response also includes convening all relevant partners, especially traditional and religious leaders, to put into practice the necessary safeguards already enshrined within the domesticated (state-level) Child Rights Acts as well as other legal instruments including the 'Violence Against Persons' (VAPP) act which have provisions that protect against violence against children and women (specifically FGM and SGBV). Overall, the emphasis is on a 'whole of community and whole of society' approach with gender at its core. Examples including mobilizing community-led groups, youths and adolescent girls and boys for child rights, including through the 'movement for good' initiative to end FGM in selected states and the Spotlight initiative.

	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.	 The 'scalable PHC model' described in paragraph 25 in fact implies the MOU model mentioned in the comment which covers 14 states with multiple partners. The paragraph describes the elements of the MOU, including financial and human resource capacities and accountabilities, as well as the provision of an integrated package, including routine immunization (RI). It puts gender and women's health at the centre of all responses. In Bauchi and the other thirteen high-burden states where the model is being applied, UNICEF recognizes that the close relationship with other partners is critical. This notably includes the contribution of the Government of Canada in Bauchi state which has allowed an increased focus on gender barriers to access to healthcare. UNICEF's priority is to strengthen and broaden the PHC partnership with Government of Canada, the Bill and Melinda Gates Foundation, Gavi, the Nigeria Governors Forum, the NPHCDA and other partners as a unique platform for coordination, alignment, advocacy and influence with the State governments for further
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	scale-up and impact of evidence-based interventions for advancing PHC quality and RI coverage.