UNFPA Update on the implementation of UNDS Repositioning: Country Examples

UNFPA
5 May 2020
Upholding rights in the times of COVID-19

UNFPA Tanzania

29 April 2020
Road to UN Development System Reform in Tanzania

- **2007**: Tanzania becomes one of eight countries worldwide to pilot the UN Delivering as One Reforms.
- **2010**: Tanzania launches the UN Development Assistance Plan I, the first systemwide UN business plan to be implemented in the country.
- **2016**: The UN and the Government launch the second UN Development Assistance Plan (UNDAP II) that will be implemented until 2021 (subsequently extended to 2022).
- **2017**: The UN and the government launch the area-based Kigoma Joint Programme (KJP) which consists of 17 UN agencies providing development support to communities hosting over 300,000 refugees in northwestern Tanzania.
- **2018**: Zanzibar Joint Programme (ZJP) launched which consists of 9 UN Agencies working together in Zanzibar across 4 inter-related themes with major focus on gender equality.
- **2019**: Implementation of the UN Development System Reform
- **2019**: Tanzania presents its first Voluntary National Review on implementation of the Sustainable Development Goals at the UN High-Level Political Forum on Sustainable Development (HLPF).
COVID-19 in Tanzania & UN Development System Reform

• **UN Resident Coordinator – strong leadership** supported by a UN Resident Coordinator Office that is being further strengthened.

• Agencies are supportive in using the **Resident Coordinator as their interlocutor** in reaching out to Government and Development Partners.

• **Strong coordination** between the Resident Coordinator and WHO; UN Country Management Team; Security Management Team; Programme Management Team and Operations Management Team.

• UN Agencies **active/co-leading the technical Pillars** of the Country’s National Response Plans (Tanzania Mainland and Zanzibar).

• **UN COVID 19 Action Plan for Care of UN Staff** in place.

• Joint UN Coordination and Response Framework being finalized with **3 Pillars: Public Health Response; Addressing the Socio-economic Impacts and Ensuring No One is Left Behind.**
Support to the national response

• National Contingency Plans - Tanzania mainland and Zanzibar

• Regional contingency plans – Kigoma and Simiyu

• UNHCR-led refugee plan, Kigoma Region
Participation in implementation framework

Pillars:
1. Coordination, planning and monitoring
2. Infection prevention and control (IPC)/case management
3. Risk communications and community engagement (RCCE)
4. Logistics, health systems strengthening and supplies

Also supported:
- Surveillance and case management
- Point of entry interventions
Our priorities

Upholding the sexual and reproductive health and rights (SRHR) of everyone, everywhere in Tanzania by:

• Ensuring access to quality, safe and consistent life-saving sexual and reproductive health (SRH) services continues.

• Supplies of reproductive health commodities – contraceptives and life-saving maternal health medicines – are uninterrupted.

• GBV prevention and response services are adapted and strengthened, protecting and supporting the most vulnerable.
Critical programme interventions

- **Strengthening** health systems – both human resources and supply chains – to support the uninterrupted delivery of the full range of SRHR services.

- **Training and protecting** frontline health workers to provide these services safely.

- **Enabling and encouraging** women, girls and young people to access SRHR services in the context of COVID-19.
Robust supply chains and timely distribution

• Projecting national reproductive health commodities and supply needs.

• Working with partners to ensure timely distribution, including at the last mile.
Training and protecting front line health workers

- **Supporting training** in IPC and SRHR in targeted regional, district and health level facilities – Simiyu, Kigoma, Dodoma and Dar es Salaam (Tanzania mainland) and Ugunja and Pemba Islands (Zanzibar).

- **Procuring essential supplies** for IPC and personal protection equipment (PPE) kits for targeted health facilities.

- **Providing technical and financial resources** to government for health worker training in COVID-19 IPC.
Supporting health workers on the frontline and clients accessing services

• Establishing COVID-19 and SRHR psychosocial counselling services – within the national toll-free COVID-19 hotline #199 and online – for both Tanzania mainland and Zanzibar.

• Developing counselling and support guidelines.

• Supporting equipment needs and training for phone and online counsellors.

• Working with partners to establish data analysis systems at call centres for evidence-informed programming.

• Providing technical support for the development and dissemination of messages to mobilize and encourage populations to use SRHR services.

• Engaging partners, religious and influential leaders to promote community dialogue on COVID-19 and SRHR.
Adapting the delivery of GBV services

• Reviewing GBV referral pathways.

• Linking GBV survivors and caregivers to services of partner national toll-free telephone helplines – Tanzania mainland, Zanzibar and refugee camps in Kigoma Region.
Leaving no one behind

As part of inter-agency efforts in refugee camps in Kigoma:

- **Procuring and prepositioning RH kits**, maternity/safe delivery and post exposure prophylaxis (PEP)/post rape kits.
- **Recruiting nurse-midwives and clinical officers** for surge capacity deployment to ensure the continuity of SRHR services.
- **Continuing to distribute dignity (sanitary and hygiene) kits** – menstrual pads, basins, soaps, kitenge etc. – to women and girls of reproductive age directly and through partners in refugee camps.
- Provided a **COVID-19 isolation tent**.
- Supported **COVID-19 IPC training** for 400 community workers and 77 influencers.
- **Distribution of information, education and communication (IEC) materials** is also on-going.
Youth as leaders

- Partnering with AfriYAN (African Youth and Adolescent Network).

- Providing youth with platforms – traditional and digital media – to exercise leadership and mobilize peers and communities in the fight against COVID-19 – in all 11 regions in Tanzania where the network is active.
Thank you!
Experience with and potential of UN Reform implementation in the Caribbean

Alison Drayton, Director
5 May, 2020
UNDS Reform in the Caribbean

- Resident Coordinators and RCOs
- UNCT collaboration and programming
- Relations with governments
- Resource mobilization
- Operations
Resident Coordinators and RCOs

Caribbean Experience

• Greater authority of RCs
• Strengthened capacity of Resident Coordination Offices (RCO)
• RC mediation role enhancing coherence
• Entry-point to government
• RCOs as common resource for UN system

Potential

• RC profiles
• Access to expertise within RCOs
• Better quality CCAs and Cooperation Frameworks
UNCT collaboration and programming

Caribbean Experience

- Multi-country Sustainable Development Framework (Regional UNDAF),
- Mainstreaming, Acceleration, and Policy Support (MAPS Missions)
- Coordinated collaboration with regional entities (CDEMA, National authorities, UN Agencies and other partners)
- Humanitarian Response Collaboration
- Spotlight Initiative
- COVID-19 response
- Engagement with ECLAC is more systematic

Potential

- Regional engagement with CARICOM
- Access to system-wide expertise
- Further harmonization of planning and reporting tools
Relations with governments

Caribbean Experience

• Improved access to information for governments
• SDGs as common platform
• Voluntary National Reviews (VNRs)
• Spotlight Initiative

Potential

• Enhanced alignment of resources for implementation
• Voluntary National Reports
Resource mobilization

Caribbean Experience

- SDG Fund
- Spotlight Initiative
- MPTF COVID-19 Fund
- Human Security Trust Fund

Potential

- Joint funding windows
- Partnership officers in RCOs
- More integrated analysis and response
Operations

Caribbean Experience

• Common premises
• Long Term Agreements (LTA) and rosters
• Country Business Operations Strategies (BOS)

Potential

• Regional BOS
• Common back office
Unity of purpose in time of COVID-19

UNFPA’s contribution to UNDS response in Peru
Peru COVID-19 response

- March 6th: Peru confirms first COVID-19 case
- March 12th: High-Level Multisectorial Commission to Combat COVID-19
- March 15th: Peru declares **State of Emergency** – measures physical distancing; quarantine measures; advisory group
- March 16th: Closure of all international borders
- March 17th: 1st. Economic bonus of S/ 380 for vulnerable families
- March 18th: Social immobilization
- March 29th: Govt. announced measure up to 12% of GDP to mitigate socio-economic impact
- March 31st: Villa Panamericana received its first patients
- April 1st: COVID-19 Command is constituted – aims to unify chain of command for COVID-19 response of highly fragmented Health System; includes responsibility for monitoring and distribution of assets of health services
- April 23rd: State of emergency extends to May 10th
COVID-19: Multifaceted impact in Peru

• Combination of health effects and socio-economic impact
  
  Fragmented Health System is a challenge to unified response of health sector (public investment 2.48% GDP in 2018, ECLAC)
  
  Use of available ICU beds; MV; and IC health professionals close to full capacity
  
  Lockdown (50 days +), impact on trade & drop of international commodity prices (ECLAC predicts – 4% GDP loss in 2020), and substantial increase in unemployment, poverty and inequality.

• Vulnerable population, including lowest income quintiles, informal workers (72.6% of total workforce), indigenous peoples, and migrants and refuge seekers disproportionately affected

• 42% of people in urban areas have either lost their jobs or their income (IPSOS survey, Apr).

• Internal migration - at least +170,000 persons trying to get to their home provinces
COVID-19 in Peru & UN Development System

• **UN Resident Coordinator (RC)** – Agencies reach out to Government and Development Partners through the Resident Coordinator (RC) or in close coordination with the RC

• **Strengthening of the RC Office** – Temporarily dedicated Public Health Specialist embedded in the ORC (interagency pooled funds)

• **COVID-19 advisory team** on stand-by for supporting RC/DO on decisions requiring specialized technical expertise (medical experts, epidemiologists, humanitarian specialist)

• **UNDS Peru Contingency Plan on COVID-19** – lines out modus operandi; **COVID-19 Coordinator is PAHO/WHO Representative** (BCP; UNCG; OMG, etc)

• **Strong coordination** between the Resident Coordinator and COVID-19 Coordinator; UN Country Management Team; SMT; Programme Management Team and OMT

• **COVID-19 socio-economic team**

• **National Humanitarian Network** co-chaired UN RC and Chief INDECI (Nat. Civil Defense Institute) and Working Group on Refugees and Migrants
Re-strategizing for 3 zeros

Whole of UNFPA approach in response to COVID19: Reprogramming to uphold universal access to Sexual and Reproductive Health & Rights and leaving no one behind:

• Safe pregnancies, re-establishment or continuity of life-saving services such as antenatal and postnatal attentions, institutional births, EmONC and protection from COVID19
• Ensuring universal access to family planning and contraceptives, including differentiated and innovative delivery modalities to reach adolescents and youth, rural populations, indigenous peoples and migrant and refuge seekers
• Preventing and promoting effective attention of gender-based violence and harmful practices, with emphasis on sexual violence, including approaches to change social norms
• Promoting access of health and protection workers to PPE
• Contributing to generate, process and use data in decision-making processes
Response & Recovery

Epidemic control; health & social
- Disease Control & Health System Strengthening
- SRHR / Maternal Health / FP commodities
- GBV prevention and response
- Prevention of adolescent pregnancies / A&Y
- P&D – data for health & socio – economic response
- Indigenous pop. access to SRH and GBV services

Humanitarian assistance to migrants & refugees

Risk communication with one voice

Adaptability – learning – regional harmonization
- Transitioning to sustainable long-term containment & control
- Catalyzing regional harmonization of control measures
- Promoting accuracy and transparency of data and use of data
- Coordination between Multilaterals – Regional Bodies – IFI
- CCA and post-COVID-19 UNSDCF
Thank you!