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UNICEF Gender Action Plan 2014-2017

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I. Introduction

1. The Gender Action Plan (GAP) 2014-2017 presented in this document specifies how UNICEF will promote gender equality across all of the organization's work at the global, regional and country levels, in alignment with the UNICEF Strategic Plan 2014-2017. The GAP elaborates the gender dimensions of the programmatic results across the seven outcome areas of the Strategic Plan along with the relevant indicators for measuring success. It also specifies the steps UNICEF is undertaking with regard to institutional effectiveness in implementing the programmatic work on gender, through commitment of resources and strengthening of staffing, capacity and systems.

2. The promotion of gender equality and the empowerment of women and girls is central to the mandate of UNICEF and its focus on equity. In order to achieve the results for children that UNICEF sets forth in pursuing its mandate and to realize the rights of every child, especially the disadvantaged, it is essential to address one of the most fundamental inequalities that exist in all societies – gender inequality. A broad range of evidence shows that gender, poverty and geographic residence are three of the strongest factors determining disparities in child well-being and rights. As the only United Nations agency with the rights of children at the heart of its mandate, UNICEF is in a position to foster gender-equitable child outcomes as a catalyst to a more equitable world not only today, but also in the long term, by redefining gender roles and power relations for the men and women of tomorrow.

3. In implementing its mandate on gender equality, UNICEF has the comparative advantage of a strong field presence in 153 countries and its areas of work spanning a number of key sectors, including health, HIV/AIDS, nutrition, water, sanitation and hygiene, education, child protection and social protection, in both stable and emergency situations. This contributes to the far reach of the organization's work in promoting gender equality and capacity through multisectoral programming. It allows UNICEF to address the intersecting forms of discrimination – based on poverty, residence, ethnicity and disability, among others – a girl or boy may face that compound gender discrimination. Furthermore, as the lead agency for the Multiple Indicator Cluster Surveys (MICS) and in monitoring key indicators across the multiple dimensions of gender inequality affecting children, UNICEF also brings measurement, monitoring and evaluation capacity for tracking results related to gender equality.

UNICEF mandate on gender equality and the empowerment of girls and women

4. The UNICEF mandate for promoting gender equality and the empowerment of girls and women is grounded in both the Convention on the Rights of the Child (CRC) and the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), which are mutually reinforcing in the realization of the rights of children. UNICEF work in support of girls' and women's rights is also anchored in the landmark Beijing Declaration and Platform for Action. Within the United Nations (UN) system, the organization's work is guided by the requirement of all United Nations entities to mainstream gender as mandated by the Beijing Platform for Action, defined by ECOSOC 1997 and reinforced by the quadrennial comprehensive policy review 2012 (General Assembly resolution 67/226). UNICEF adheres to the standards set in the UN SWAP for gender for the promotion of gender equality and empowerment of girls and women. The GAP is defined in alignment with the UN SWAP for gender.

5. UNICEF adopted a policy on gender equality and the empowerment of girls and women in 2010, which constitutes the basis for the organization's work in the area of gender equality. This

Gender Policy informs the UNICEF articulation of gender results as outlined in the Strategic Plan and the Gender Action Plan. It mandates that all UNICEF-assisted programming, including in emergencies, contribute to gender equality in clearly defined and measurable ways. In 2010, the establishment of the Gender Policy was followed by the development of a three-year Strategic Priority Action Plan (SPAP) on Gender Equality, 2010-2012. The SPAP was extended by one year, to cover 2013, in order to allow for the GAP to align with the UNICEF Strategic Plan, 2014-2017.

6. In 2013, to inform the development of the GAP, an end-of-cycle review was conducted to assess implementation of the SPAP. The results of the review indicated that while institutional systems and processes in support of gender equality have significantly been enhanced, a stronger focus is needed on gender programming and results. The review also noted that UNICEF has made considerable progress on leadership commitment, interagency partnerships, strengthening of planning and reporting processes, and most of all, ownership by regional and country offices with regard to gender as an institutional priority. However, a programmatic framework, monitoring and tracking of gender equitable results, adequate technical capacity and expertise on gender, and the concomitant commitment of resources are areas the review noted require further improvement that the new Gender Action Plan should address.

7. Based on these findings and the foundation of institutional systems and processes established under the SPAP, UNICEF has developed the GAP with a focus on strengthening programming, results, capacity and resources. The Plan has been developed on the basis of extensive internal and external consultations.

Global context and progress on gender equality

8. The GAP is presented at a pivotal time in the sphere of global policy development. While the world works to achieve the Millennium Development Goals (MDGs) by 2015, efforts are underway to devise a new set of sustainable development goals to guide global development beyond 2015. At the United Nations Conference on Sustainable Development (Rio+20) in June 2012, participants reached consensus on the need for a more expansive development paradigm based on inclusiveness, equality and sustainability. World leaders affirmed at Rio+20 that gender equality and women's and girls' participation "are important for effective action on all aspects of sustainable development," as reflected in General Assembly resolution 66/288. Gender equality, rooted in human rights, is increasingly recognized both as an essential development goal on its own and as vital to accelerating sustainable development overall.

9. Despite progress since the Fourth World Conference for Women in Beijing in 1995, a range of challenges to gender equality, and especially girls' empowerment, remain. These include girls' unequal access to basic health and education services; social norms and practices such as son preference and child marriage that limit and devalue girls and their contributions and set them on a path of a lifetime of deprivations; and girls' disproportionate burden of work and frequent experience of violence both in and outside the home.

10. Adolescence continues to present an especially precarious period for girls and boys, when gender norms and expectations increase both risks and pose limitations to opportunities. For girls, these risks and limitations often have lifelong consequences, especially when early and/or unwanted sex leads to pregnancy and disease. For boys, definitions of masculinity that promote risk-taking behaviours like driving fast, drinking, and using drugs can lead to short- and longer term life and health consequences. Transgender, gay, and lesbian adolescents, as well as others who do not

conform to idealized gender norms, face a heightened risk of bullying, violence, and stigma in the adolescent years.

11. Women's lack of resources, decision-making and mobility coupled with their caregiving responsibilities continue to be major factors in the multiple deprivations faced by their children — both boys and girls—often perpetuating an intergenerational cycle of poverty and inequality. In the poorest countries, and in settings affected by violent conflict or natural disasters, gender inequalities often increase and their negative impacts on development are exacerbated.

12. At the same time, improved data and a broader range of evaluated programmes over the last two decades have provided a better understanding of more effective options for addressing both visible gender disparities as well as the underlying norms and dynamics. In supporting the acceleration of progress on gender equitable results within the Millennium Development Goals and contributing to the post-2015 framework, UNICEF will draw upon its leadership and experience in addressing gender issues in areas such as girls' education, female genital mutilation/cutting (FGM/C), child marriage, gender-based violence, maternal and child health, water and sanitation in schools, to name just a few. The organization will also draw upon the accumulating evidence base emerging from the field of gender and development. Going forward, UNICEF programme priorities build on this experience and learning, to help shape and achieve a broader range of more ambitious goals for women's and girls' empowerment and gender equality in the post-2015 framework.

II. Programming for gender equality and women and girls' empowerment

13. As framed in this Plan, gender equality means that women and men, and girls and boys, enjoy the same rights, resources, opportunities and protections, and to that end, the organization's programmatic efforts are directed at levelling the playing field. This requires working directly with girls and women, as well as with boys and men, parents, community leaders, and those with power and influence in the economic, political and social spheres. Gender is about the relationships between and among women and men, girls and boys; transforming these relationships requires the involvement of all the people, not just half of them.

14. An equally important fact, however, is that in societies around the world, gender discrimination and inequitable gender norms are much more likely to limit girls' ability to go to school, live free from violence, self-direct their life-course, and enjoy a level of social status and value equal as compared to their brothers and male peers. In a wide range of circumstances, gendered power structures privilege boys and men, giving them greater access to resources, greater personal freedom, and less vulnerability to the violation of rights than women and girls. A cursory glance of key indicators of well-being and freedom—from birth ratios to child marriage to sexual violence to the global HIV burden—shows clearly that *the disproportionate share of gender disadvantage is borne by girls and women*. Most frequently, therefore, protecting children's rights and enabling all children to survive and thrive requires interventions aimed specifically at addressing and mitigating the effects of gender discrimination on girls' well-being, development, and rights.

15. Despite the privileged position that gender norms accord males in most respects, these norms, which take root in early childhood, nonetheless create some vulnerabilities and negative outcomes for boys and men. UNICEF will continue to support efforts to transform the ways in which boys are raised to be men by working with schools, parents, and community leaders to change their assumptions about masculinity and femininity. This includes fostering a broader range

of life skills, including communication, care-giving, and sharing of responsibilities. UNICEF will continue to support the creation of positive, supportive learning environments in which boys and men can examine the ways in which current definitions of masculinity harm boys and men and explore how gender equality can benefit them, their families and communities.

16. Thus, the primary focus of UNICEF programming on gender equality will be in addressing the significant disadvantage that the large numbers and proportions of girls face in realizing their rights because of gendered discrimination and underlying gendered power dynamics. UNICEF will also address gender norms and socialization as they negatively affect boys and men. In both endeavours, it will engage with the range of actors who influence gender dynamics, including girls and boys, women and men, families and communities, leaders and champions.

Programmatic framework

17. The UNICEF Strategic Plan 2014-2017 emphasizes gender equality and the empowerment of girls and women as important results across all of the seven outcomes of the Plan: Health; HIV and AIDS; Water, Sanitation and Hygiene (WASH); Nutrition; Education; Child Protection; and Social Inclusion. The programmatic framework presented in the GAP consolidates and amplifies the gender equitable results and approaches by further elaborating on the underlying logic and cohesion across the identified priorities. As such, the GAP provides guidance and strategic entry points for UNICEF regions, countries and divisions for focusing their programmatic work on gender equality and the empowerment of women and girls within the parameters of the Strategic Plan.

18. In addressing gender disparities in key child outcomes, UNICEF will take a dual approach as significant evidence shows that successful integration of gender in field level programming and action requires both targeted efforts and mainstreaming gender in programmes. Over the next four years, UNICEF will utilize both routes in its efforts to advance gender equality and the empowerment of women and girls. The unique added value of targeted approaches is that they allow for sharpened articulation of particular outcomes from a gender perspective, and they facilitate crossing of sectoral boundaries that might otherwise limit the visualization of both the problem and the solution from a holistic perspective. Targeted approaches provide high value, high visibility “demonstration models” for catalysing organization-wide learning on “how to do gender” by demystifying gender analysis, gender programming, and gender results. Integrating gender or mainstreaming it in programmes is essential for achieving gender-equitable results across a broad range of organizational priorities and for sustaining organization-wide ownership of gender equality as a foundational principle and institutional mandate.

19. The Programmatic Framework for the GAP is presented in Annex A. For both targeted gender priorities and the full integration, or mainstreaming of gender in programmes, a focus on gender equality is necessary for achieving results for children in two fundamental ways.

(a) ***Gender disparity in important child outcomes.*** For example, in a number of countries and in poor communities, it is girls rather than boys who are less likely to complete secondary education. Similarly, the risk of being married as children is more widespread for girls than boys.

(b) ***Gender inequality creates bottlenecks and barriers that prevent the achievement of desired outcomes for all children.*** For example: lack of systematic maternity protection inhibits mothers’ ability to breastfeed both boys and girls, or women’s

lack of control over resources prevents them from accessing health services for their children, or from sending them to school. In its programming, therefore, UNICEF will apply a gender lens not only in considering how child outcomes and rights are gender differentiated, but also in understanding how specific limitations that women and girls face more broadly or specific gender norms that define male and female expectations constrain the demand or supply for services or the enabling environment that then affects outcomes for all children.

A. Targeted gender priorities

20. UNICEF will prioritize four cross-sectoral targeted priorities where consolidating and highlighting important gender issues across outcome areas in the Strategic Plan brings added synergies and advantage, and where UNICEF as an organization is well-placed to make a transformative contribution. The organization's four corporate priorities on gender during the 2014-2017 period are:

- (a) Promoting gender-responsive adolescent health;
- (b) Advancing girls' secondary education;
- (c) Ending child marriage;
- (d) Addressing gender-based violence in emergencies.

21. Country offices will choose from among these priorities as relevant for their local context and overall country programme. UNICEF will coordinate global, regional, and country strategies and aggregation of demonstrable results in these areas of work on gender through the monitoring of indicators in the GAP results matrix, which align with the indicators in the Strategic Plan results framework (see Annex B).

22. These four issues are prioritized because they are central to the UNICEF mandate and affect the lives of millions of children in a large number of UNICEF programme countries. They span the Strategic Plan outcomes (Health, HIV and AIDS, Nutrition, WASH, Education, Child Protection, and Social Inclusion) and, as complex issues, require cross-sectoral solutions. They build on existing work that UNICEF has been engaged in; they also represent emerging areas where UNICEF is especially well-positioned to accelerate action in the next four years. The issues are those for which evidence and expertise from the field of gender and development have an added value in identifying viable and innovative solutions.

23. The four priority areas are inherently interconnected, and a gender focus can create synergies and efficiencies that simultaneously improve more than one outcome. For example, girls with secondary schooling are up to six times less likely to marry as children, making education one of the best strategies for protecting girls and ending child marriage. Due to the difference in age and maturity with their, typically, adult partners, child brides are less able to negotiate sexual relationships than older women. They are, therefore, at greater risk of unwanted and frequent pregnancies and acquiring sexually transmitted infections such as HIV. Pregnancy-related complications are the leading cause of death for adolescent girls aged 15-19; therefore addressing gender issues in adolescent health is critical. Adolescent girls and women with some secondary education have greater understanding of HIV and are more likely to negotiate condom use with their partners and, if married, to have greater bargaining power and say when it comes to sexual relations.

24. In humanitarian settings, the negative impacts of gender based violence (GBV) are compounded by a breakdown in community support mechanisms and eroded health, social welfare, law enforcement and justice systems. Conflict and emergency situations not only increase girls' exposure to gender-based violence, but also increase their health risks, diminish their educational opportunities, and expose them to other rights violations. For example, parents are more likely to marry their daughters as children under emergency conditions, thus perpetuating the cycle of violence and discrimination against girls.

1. Promoting gender-responsive adolescent health

25. Gender disparities in health status and outcomes become more evident in adolescence as girls and boys undergo puberty and experience greater diversification in life transitions. Social norms around masculinity that encourage risk-taking and the violent resolution of conflict make boys more vulnerable to road traffic injuries and violence, and, in many settings, heighten their risk of tobacco, alcohol, and illicit drug use. In adolescence, pregnancy-related causes become prominent health risks for girls; complications related to pregnancy and childbirth are among the leading causes of death of adolescent girls.

26. Data from 21 developing countries indicate that more than one third of all girls aged 15 to 19 suffer from anaemia, which causes particular harm in pregnancy. Infants born to adolescent mothers face a heightened risk of morbidity and mortality. In addition, 60 per cent of the almost 2.2 million adolescents living with HIV are girls; girls are more biologically vulnerable to HIV than adult women, and harmful practices like child marriage and early unions heighten girls' risk of contracting HIV. Moreover, exposure to the human papilloma virus (HPV), a sexually transmitted disease that causes cervical cancer and is a leading killer of women in the developing world, becomes a risk at this stage in girls' lives.

27. Furthermore, the practice of FGM/C, concentrated in a number of countries in Africa and the Middle East, leads to a range of immediate and long-term health problems, including severe pain, prolonged bleeding, infection, severe psychological distress, prolonged or obstructed labour, infertility and even death. When girls undergo this harmful practice as infants or small children, the reproductive health and rights consequences re-emerge strongly when they start to menstruate, become sexually active, and experience pregnancy and childbirth. At least 125 million girls and women have experienced FGM/C in 29 countries in Africa and the Middle East, and as many as 30 million girls under the age of 15 may still be at risk.

28. Gender and adolescent health issues are addressed across different outcomes of the Strategic Plan, including health, with regard to adolescent pregnancy and maternal health; HIV and AIDS, with respect to HIV testing, treatment, care and psychosocial support for both boys and girls; nutrition, in addressing anaemia among adolescent girls; water, sanitation and hygiene, in promoting puberty education and menstrual hygiene management; and child protection, in addressing the practice of FGM/C. The consolidation of these health risks and rights violations under a gender and adolescent health umbrella allows for a more integrated response in addressing the different issues adolescents face in this period of their lives. The GAP brings the different sectoral responses together for an aggregate view of results being achieved.

29. UNICEF will advance gender-responsive adolescent health outcomes by focusing on the specific needs, transitions, relationships, and vulnerabilities that adolescents experience during this important time in their life course, while also fostering the sense of self awareness, autonomy, and

agency that characterize adolescence. In collaboration with key partners such as UNFPA, WHO and global partnerships such as the Partnership for Maternal, Newborn and Child Health (PMNCH) and A Promise Renewed, UNICEF will work at:

(a) *Enhancing the enabling environment for better health outcomes for adolescent girls and boys.* UNICEF will assist countries to develop policies and plans for addressing the health needs of girls and boys during the second decade of life. These will support youth friendly services as well as self-management, learning, judgment, and negotiation skills on health related issues. This will include working with health ministries to develop specific policy frameworks and action plans on adolescent pregnancy, anaemia and HIV risk as well as bringing the health and education ministries together with communities and young people to integrate life skills, puberty, menstrual hygiene management, and sexual and reproductive health curricula in their policy frameworks and implementation strategies. UNICEF will work with health and child protection systems to support systematic legal and policy reform on FGM/C. The collection, analysis and use of sex- and age-disaggregated data will be a priority, especially in efforts to advance the evidence base on the contribution of structural determinants and gender norms in shaping adolescent health outcomes. UNICEF will support South-South collaboration to strengthen the evidence base on effective strategies to address gender issues in programmes, including prevention of adolescent pregnancies, FGM/C abandonment, HIV risk and treatment, and menstrual hygiene management (MHM).

(b) *Increasing and integrating gender-responsive services for adolescent health needs.* Since children often fall off the routine health service delivery mechanisms during the second decade of life, maximizing opportunities to deliver integrated services for multiple purposes through single delivery platforms will be an important area in which UNICEF will provide support to countries. The immunization platform provides a critical opportunity for delivering pregnancy prevention information and services to deliver as well as information on how to promote health and wellbeing in general to adolescent mothers and young men, an area for service integration that UNICEF will work with PMNCH, UNFPA and WHO to advance. UNICEF will also work with partners, including the GAVI Alliance, to maximize the opportunity of integrating health services for girls during HPV vaccine delivery. UNICEF will advance delivery of high impact interventions to prevent and treat HIV among girls and boys, and promote country-specific MHM guidance packages for incorporation into existing national WASH in School programmes. Schools are the ideal platform for comprehensive evidence-based quality sexual education. Special attention to pregnant adolescents and babies born to adolescents, including postnatal follow-up, is a priority, as is making health service delivery more friendly and responsive to adolescents.

(c) *Creating demand for addressing the underlying gender norms and inequalities in adolescent health risks.* UNICEF will support awareness-raising, education, and communication initiatives to create broad social movements against the practice of FGM/C and the stigma and discrimination associated with HIV. It will also work to address the structural barriers to HIV prevention and treatment as well as the risk of early pregnancy through social protection interventions, with a specific focus on violence and economic barriers. UNICEF will support the empowerment of girls and boys in being agents of change in protecting themselves from adolescent health risks associated with HIV, FGM/C, sexual and physical violence, and early pregnancy. Similarly, the organization will engage young people and advocates in improving knowledge and awareness about WASH in Schools and menstrual hygiene management.

2. Advancing girls' secondary education

30. There is overwhelming evidence that girls' secondary education can be a powerful transformative force, for girls themselves and for entire societies. Girls' education—especially at the secondary level – is the one consistent factor that can positively influence not only girls' lives, but practically every desired development outcome: from reducing child and maternal mortality, to ending poverty and achieving equitable growth, and changing social norms.

31. And yet, the transformative potential of girls' education has not been realized in many parts of the world. In fact, recent estimates predict that only 62 out of 168 countries will achieve gender parity in secondary education by 2015. In too many countries, especially in sub-Saharan Africa, the Middle East and North Africa (MENA) and South Asia, gender gaps for girls, especially those belonging to marginalized groups – for example, those who are poor, living in rural areas or from ethnic minority groups, or living with disabilities – widen at the secondary education level. In sub-Saharan Africa, barely any progress has been made in girls' access to secondary school since 1999, and the most recent figures report only 83 girls enrolled for every 100 boys. In other regions, even as girls have high rates of secondary school completion, the quality of learning and skills acquired is not adequate for their success and empowerment in the personal, social, political, or economic spheres.

32. The UNICEF Strategic Plan includes a focus on increasing access to secondary education and ensuring that young adolescent girls make the transition from primary to secondary education; and prioritizing quality learning to reduce gender-gaps in learning particularly in rural areas and disadvantaged communities. Fundamentally, it aims to contribute to the development of girls as women who have the capacity to take action toward personal and social transformation.

33. The programming focus on girls' secondary education will cover a broad range of countries. In sub-Saharan Africa and South Asia, addressing gender disparities in educational access and completion at the secondary education level is key as is the demonstration of demand and political will to prioritize this issue in education sector plans. In these regions, UNICEF will especially—although not exclusively—target secondary school programming in countries where child marriage is an issue in order to build country level synergies. In many other settings, as for example the Middle East or the Latin American regions, the programming focus will be on the quality and relevance of education and skills for girls at the secondary level as important entry points for employment and livelihoods opportunities.

34. In collaboration with key partners such as UNESCO, United Nations Girls' Education Initiative (UNGEI), and the Global Partnership for Education (GPE), UNICEF will engage in three critical areas with respect to girls' secondary education:

(a) ***Strengthening enabling environments to support girls' secondary education.*** UNICEF will work to build national capacity to improve education data at national and local levels so that it better captures specific barriers faced by girls to inform planning as well as track progress. UNICEF will support evidence-based advocacy for improved financing, policies and legislative reform to improve gender equity within secondary education, including recruitment, training and incentives for female teachers; and concerted action against school related gender-based violence.

(b) ***Increasing and improving secondary level educational opportunities for the most vulnerable girls.*** UNICEF will work to ensure transition and access to lower secondary education through multiple, flexible approaches in formal and non-formal learning environments with a focus on teacher professional development, gender-responsive curricula and pedagogy, and ensuring safe and supportive and learning environments. UNICEF will support service delivery with evidence, expertise and innovation to track and improve learning outcomes for girls; and support school-to-work transitions and other life opportunities.

(c) ***Creating demand for education of girls at the community, national and global levels.*** UNICEF will support efforts to address socio-cultural barriers to girls' education through systemic interventions which address discriminatory social norms which prevent girls from meaningfully participating and completing secondary education, including the expectation for girls to marry during childhood. It will work to address financial constraints through stipends, scholarships and cash transfers to help parents and households to send girls to secondary schools. UNICEF will provide strategic leadership and support UNGEI to strengthen global, regional and country partnerships to engage in advocacy, improving the availability of evidence needed to underpin programming in girls' education and promote education as a channel for girls' empowerment.

3. Ending child marriage

35. Globally, around 1 in 3, or approximately 70 million, young women aged 20-24 in developing countries were married before the age of 18, with one third of them marrying under age 15. Child marriage occurs in a wide range of countries, with prevalence rates of 20 per cent or higher in 61 countries across all regions. Additionally, a number of countries, especially in Latin America and West Africa, have early consensual unions as a common practice, the underlying gender dimensions for which often result in similar lifelong negative consequences for girls.

36. The consequences of child marriage for girls and societies are as serious as they are wide-ranging. The evidence demonstrating the relationship between child marriage and higher maternal and infant mortality rates, lower education levels for girls, and low ranking on the human development index at the national level is compelling. Child marriage denies a girl her childhood, disrupts her education, limits her opportunities, exposes her to the risk of pregnancy and complications from child birth, and increases her risk of contracting sexually transmitted infections (STIs), including HIV, as well as her risk of being a victim of violence and abuse. Compared to babies born to adult women, babies born to adolescent mothers are more likely to be small for gestational age, to be premature, to have low birth weight, and to die in the neonatal period.

37. Thus, child marriage cuts across the full range of programmatic priorities outlined in the Strategic Plan. It has a clear equity dimension: girls living in poor households are more than twice as likely to be married as children as girls in higher income households; girls living in rural areas are more likely to be child brides than their counterparts in urban areas; and the highest rates of child marriage are found in countries that rank among the world's poorest. Girls from marginalized groups also face a higher rate of child marriage; for example, about half of Roma women in the CEE/CIS region were married before the age of 18.

38. Together with other United Nations agencies – including UNFPA and UN-Women – governments, and civil society partners, UNICEF is bringing greater attention and urgency to end child marriage as a key gender issue. It has been developing the relevant data and evidence base on

defining the issue's scope and viable solutions. In now accelerating action to address child marriage and early unions, UNICEF will work in the following three main areas:

(a) ***Supporting the enabling environment to end child marriage.*** UNICEF will continue to work with both countries and international human rights bodies to support policy frameworks and international standards that define the minimum age for marriage as 18 and require the full participation and consent of young women and men in the process. UNICEF will collaborate with key partners such as WHO, UNFPA, UN-Women, Girls Not Brides and other civil society organizations, for the incorporation of a child marriage indicator within the gender goal in the post-2015 development framework; and in line with the organization's mandate to coordinate data on child marriage, UNICEF will take leadership in the development of intermediate measures of success in addressing this issue, and will support the development of budgeted national action plans to end child marriage.

(b) ***Increasing opportunities for girls to acquire education, life skills, and health information and services.*** As education, especially at the secondary level, has been shown to be the best preventative measure against child marriage, UNICEF will intimately link its child marriage prevention and support efforts with programming to advance secondary education for girls. Similarly, life skills have been shown to be a contributing factor in delaying marriage, and UNICEF will support programming for life skills acquisition in both school and out-of-school settings and pair it closely with the delivery of integrated health services for adolescent girls. This will be especially important for girls who have been married as children since gender-and-age-responsive health services and alternative education programs are essential elements for mitigating the negative consequences of child marriage.

(c) ***Creating demand at the community and family level, and among girls, for ending child marriage.*** UNICEF will build on the existing evidence base which shows that communications campaigns, community mobilization, and cash and incentive programmes are important interventions for addressing child marriage because they can serve to address the underlying factors, such as family poverty, marriage transactions, the value of girls, their roles and expectations, and most fundamentally, gender norms, that define child marriage as a desirable or acceptable option for a girls.

4. Addressing gender-based violence in emergencies

39. Gender-based violence (GBV) is one of the most pervasive violations of human rights across the world. UNICEF has made great strides in mainstreaming GBV into its health, WASH, HIV, and education work overall, and GBV is a key focus of the organization's child protection programming. GBV in emergencies as a targeted priority in the GAP builds on this ongoing work by bringing even greater focus to the needs of a population particularly at risk. Limited access to or availability of adequate services or formal systems of protection and justice during emergencies, including health, psychosocial, protection and justice services, forced displacement, and separation of families and communities put women and girls at increased risk of multiple forms of GBV.

40. Conflict situations and disasters can intensify various forms of GBV that children and women live with even in times of peace and stability – including domestic violence. Child marriage is another practice that at times is used by families in emergency contexts with the intention to 'protect' girls from sexual assault but may actually expose girls to sexual and other forms of

violence. Emergencies introduce into affected settings new manifestations of GBV that are directly or indirectly linked to the conflict or disaster. Poverty, displacement and increased dependency resulting from conflict or disaster may compel women and girls to engage in sex in return for safe passage, food, shelter, or other resources; and insufficient security in camps puts women and girls at higher risk of sexual assault, and, in some settings, trafficking. In addition to these forms of GBV, the collapse of moral and social order and pervasive impunity that are inherent in conflict settings exacerbate sexual violence, including its use by combatants as a tool of war. Emergencies also heighten adolescent boys' vulnerability to recruitment into armed forces as well as sexual violence.

41. UNICEF work on GBV in emergencies addresses both prevention and response. Prevention centres on implementing and evaluating short- and long-term initiatives to tackle the underlying causes of GBV towards its elimination while response is centred on delivering life-saving, comprehensive, multi-sectoral care and services for survivors of GBV. In collaboration with key partners such as UNFPA, the International Refugee Commission (IRC), the Interagency Standing Committee (IASC) Gender Reference Group, and the GENCAP Standing Capacity Project, the organization's efforts in addressing gender based violence in emergencies will focus on three key areas:

(a) ***Supporting the enabling environment for prevention of GBV in emergencies and care and rehabilitation of survivors.*** As an essential complement to the work carried out towards GBV prevention and response, UNICEF will focus on strengthening gender equality programming in its humanitarian action more broadly so as to address the underlying causes of GBV that are exacerbated during a disaster or conflict. UNICEF will continue to engage in the development and enforcement of international mechanisms and standards that call attention to GBV in emergencies as a gross human rights violation and highlight the need for concerted international action for its prevention. This includes the role of UNICEF as co-coordinator of the global GBV Area of Responsibility. UNICEF will support these efforts with best practice guidance and tools. Leveraging its leadership and programming across different sectors, UNICEF will integrate GBV prevention and response activities in humanitarian action, including by leading the revision of and operationalizing the cross-sectoral Inter-Agency Standing Committee (IASC) GBV Guidelines. UNICEF will undertake research to generate evidence on what works to prevent GBV and will work to measure the impact of using a social norms perspective and economic strengthening programmes to prevent sexual violence, empower girls and women, and build community-based systems for response.

(b) ***Supporting the delivery of essential services for preventing GBV in emergencies and supporting survivors.*** UNICEF will support capacity building for rapid scale-up of GBV programmes in Level 2 and 3 emergencies, including provision of health and psychosocial support services for survivors from the earliest stages of crisis response. It will integrate a gender perspective in providing water and sanitation services in emergencies, keeping the safety and security of women and girls in mind. UNICEF will pre-position and distribute 'Dignity Kits' that include protective items (such as flashlights) to help keep women and girls safe, and promote the use of HIV post exposure prophylaxis (PEP) kits and 'safe spaces' as platforms through which children and women can access information and referrals to care, psychosocial support and protection.

(c) ***Raising awareness and supporting community level and structural changes that address gender norms and behaviours to prevent gender-based violence.*** UNICEF will support engagement with men, women, girls and boys, as well community, religious and other leaders to

raise awareness and question the gender norms that perpetuate GBV. It will also support communications campaigns (such as the End Violence campaign) that bring out the power collective voices emphasizing the unacceptability of GBV. UNICEF will work to build based systems for response through the pilot programme “Communities Care: Transforming and Preventing Violence in Somalia and South Sudan” and support economic strengthening programmes to promote the empowerment of adolescent girls and women and to mitigate their risk of GBV.

B. Mainstreaming gender in programmes

42. To date, UNICEF has achieved considerable success in mainstreaming gender in two key areas: gender based violence, and girls’ education at the primary level. As witnessed by the recent work in areas such as HIV/AIDS, WASH, and health, there is emerging progress on mainstreaming gender in sectors beyond child protection and education. Moving forward, UNICEF will be building on these areas of success and progress by maximizing opportunities within and across its sectoral work to not only meet girl and women specific needs, but also to help reshape gender relations in terms of opportunities, burdens, responsibilities, and expectations. This programming to mainstream gender will be above and beyond programming on the targeted priority areas of gender and adolescent health, girls’ secondary education, child marriage, and gender-based violence in emergencies.

43. Over the next four years, the organization’s approach to mainstreaming gender in its programming will be to emphasize quality over quantity: rather than seeking to address gender equality in everything, which can lead to a superficial treatment of the issue and a lack of accountability for meaningful results, the focus will be on addressing it well for a limited number of strategic priorities as relevant in country contexts and across the organization’s work. Outlined below are some defining principles and an illustrative rather than exhaustive list of some key issues for integrating gender equality throughout the Strategic Plan outcome areas.

1. Health, HIV/AIDS and nutrition

44. Given the mandate of UNICEF, two key principles define the prioritization of issues for mainstreaming gender in the areas of health, HIV/AIDS and nutrition beyond the targeted priority on adolescent health: the first is a focus on gender differentials in child health and survival where they exist; the second is the value placed on a mother’s life and well-being. The former is important because ‘son’ preference in significantly large parts of the world manifests itself in both overt and subtle discriminatory practices against girls. The latter is important not only because of the impact it has on child health, survival and development, but also because child bearing and rearing comprise the ultimate gender differentiated role borne by women for the perpetuation of humanity. Respect, dignity, and support for that role are essential elements for promoting gender equality.

45. Supporting high impact maternal and child health interventions from the prenatal period to adolescence is at the heart of UNICEF work in health. As data increasingly reveal child survival gaps between girls and boys beyond biological sex differences, and as evidence is emerging on patterns of differential care, addressing discrimination against girls in survival and care is essential. With regard to nutritional status of girls and boys as measured by stunting, underweight, or breastfeeding rates, data at the global and national levels do not reveal significant gender differences. However, these differences may exist at the subnational level, particularly among disadvantaged groups. Unfortunately, the sad reality is that sometimes a lack of sex difference in

stunting prevalence is the result not of adequate nutrition for girls but rather their excess mortality from malnutrition. For surviving girls, lower school enrolment and retention rates are linked with under-nutrition, and malnutrition rates decline when literacy rises.

46. In UNICEF work on maternal health, protecting women's right to safe deliveries and survival is an aim in itself as well as a key factor in children's ability to survive and thrive. In the area of maternal and newborn health, supporting the provision of emergency obstetric care is a crucial, highly strategic area. Life-saving interventions during delivery for mothers and their newborns are critically important not just for the woman and her neonate but also for that woman's other children. Skilled delivery is an equally important intervention, along with accessible pre-and post-natal care. Equally important are demand side interventions that increase women's knowledge and information regarding appropriate care or make service access more viable with subsidies and support systems.

47. Maternal nutrition, particularly the prevention of anaemia in women of reproductive age through micronutrient supplementation, is a Strategic Plan priority. A child's nutritional status, particularly during "the first 1000 days," the time from pregnancy to a child's second birthday, after which time the effects of malnutrition are largely irreversible, is highly dependent on the mother's nutritional status prior to and during pregnancy. Anaemia, two-thirds of which is caused by iron deficiency, is highly prevalent among women in developing countries; it increases the risk of maternal death and makes it more likely that women will give birth to premature babies or low-birth-weight infants who suffer from infections, weakened immunity, learning disabilities, impaired physical development and, in severe cases, death.

48. Gender inequality and the low status of women remain principal drivers of HIV and fundamental challenges in scaling-up the children-and-AIDS response. In addition to the adolescent focus in HIV prevention and care described in the targeted gender priorities, two areas of work in the Strategic Plan outcome area on HIV and AIDS demand effective integration of gender equality: preventing mother-to-child transmission of HIV (PMTCT) during pregnancy, child birth and the lactation period, and keeping HIV-positive mothers healthy and alive. Provision of life-long anti-retroviral therapies (ART) to HIV-positive women is the cornerstone of efforts in both areas. A majority of women, their partners, and their children do not yet have access to basic PMTCT services, which include HIV testing and counselling, family planning, infant-feeding counselling and support, anti-retroviral (ARV) prophylaxis, and ART for mothers who need it.

2. Water, sanitation and hygiene (WASH)

49. The most important principle for integrating gender in WASH is the recognition that the organization's chief objectives in WASH, namely access to safe drinking water and elimination of open defecation, are inherently gendered goals. The world over, domestic water supply is predominantly the domain of girls and women: they shoulder the heaviest burden for water collection and use the bulk of a household's water in their gendered tasks of childcare, cleaning, cooking, and laundering. In many developing countries, hauling the water they and their families need takes unacceptably large shares of a woman's time. For girls it is a domestic chore that can interfere significantly with school attendance and success. Access to safe drinking water closer to the home, or, ideally, household water connections, benefit everyone, but especially women and girls.

50. Likewise, women and girls are disproportionately affected by lack of sanitation services. Gender norms and physiology make privacy more important for females than for males, and biological realities around the requirements of post-partum and menstrual hygiene heighten women's and girls' need for adequate sanitary facilities nearby. Women and girls who lack toilets at home suffer indignity and harassment and risk sexual assault as they seek privacy to relieve themselves and address their MHM needs.

51. A strategic priority for addressing gender equality in WASH is reducing the time it takes for women and girls to access water and sanitation services. Community Approaches to Sanitation, a participatory approach to sanitation demand-generation and supply provision, offers women and girls an opportunity to participate in identifying their community's sanitation needs, planning to meet them, and enforcing a new set of social norms that enhance their dignity, health, safety, and freedom through improved sanitation options.

3. Education

52. In addition to the secondary school focus core to the GAP, promoting gender equality—and not just gender parity—in pre-primary and primary education as well as in conflict and peacebuilding, continues to be central to the work of UNICEF. The key principles driving mainstreaming in education are a focus on quality and learning, and the importance of education as an important foundation for more equitable gender socialization.

53. The “equity” pillar of the Strategic Plan education result area calls for strategies to improve regular attendance and learning outcomes of girls from early childhood onwards. It identifies as priorities addressing gender barriers to a quality education; working with partners to support schools that are safe, child-friendly, and inclusive; and advocating for girls to start school at the right age and progress through school year-on-year. Early childhood education, or preschool, provides another valuable starting point for promoting gender equality through the education sector. It is during early childhood that gender norms and identities are formed and solidified, and moreover, caretaking and teaching during this period is a disproportionately female role that is often unpaid or poorly paid.

54. Recognizing the increasing frequency and protracted nature of crises, both natural and man-made, and their differential impact on girls and boys, UNICEF will improve reporting and analysis of gender disaggregated data on education in emergencies, and the gender dimensions within the Peacebuilding, Education and Advocacy programme will be strengthened. UNICEF will continue its global level policy advocacy and strategic leadership with UNGEI. There will be an ongoing commitment to advancing the global agenda on school related gender-based violence, development of gender-responsive sector plans in GPE countries, and strengthened mechanisms to monitor gender equality in education. As we begin shaping the post-2015 development agenda, UNICEF will continue to advance the girls' education and gender equality agenda, leveraged through partnerships and large-scale initiatives such as the Secretary General's Global Education First Initiative (GEFI).

4. Child protection

55. In addition to the targeted gender priorities of child marriage and gender based violence in emergencies, UNICEF will address important gendered dimensions of child protection, with the prevention of gender-based violence among children more broadly as a key institutional priority.

The principle for mainstreaming gender in child protection is the recognition that gender norms result in different protection risks among boys and girls who may have different needs and choices, and may possess different skills, knowledge and coping strategies.

56. Both boys and girls experience violence due to gender norms, but often in different ways. For girls, gender-based violence may include sex-selective abortion, lack of prioritization in access to food and services, and sexual exploitation and abuse as domestic workers. For boys, gender-based violence is often characterized by recruitment to armed groups, experience of corporal punishment in school, bullying, and socialization to become violent. At the same time, data suggest that the rates of violence are much higher for girls. For example, evidence from five recent national household surveys on violence against children in Africa and the Caribbean suggest that approximately 25 per cent to 38 per cent of girls, and 14 per cent of boys, had experienced sexual abuse before the age 18.

57. UNICEF will support legal and policy reform to address violence against girls and boys so that their rights are protected by laws and policies according to international standards. It will support service provision for strengthening families, and women in particular, to reduce the risk of gender based violence, as well as the provision of comprehensive services and justice for the victims of violence. UNICEF will leverage existing positive social trends and work to raise community awareness and engagement—including that of girls and boys—in an effort to change social norms that underlie gender based violence against children.

5. Social inclusion

58. The primary principle for mainstreaming gender through UNICEF work on social inclusion is that protection systems may be aimed at the household or they may be gender blind, thus many times effectively short-changing women and girls' rights and options. Women-headed households disproportionately experience multidimensional poverty the world over; this feminized poverty, particularly when coupled with social exclusion, can negatively affect the well-being of these women and their children by putting life's necessities out of reach, harming their health, and increasing their vulnerability. Women's social exclusion can muffle their voices and ability to influence decisions that affect their lives, limiting their prospects for a better future, and engendering social isolation.

59. Social benefits and protections such as child care and parenting support as well as maternity and paternity leave have the potential to not only allow women to meet their urgent obligations and responsibilities, but also contribute to their longer-term options and economic opportunities. They are also important for addressing gender stereotypes. UNICEF will advocate for social protection benefits for girls and women that promote their full participation in the social, political, and economic lives of their communities and countries.

C. Gender-related bottlenecks and barriers

60. In addition to working to achieve these important gender outcomes, UNICEF will focus on addressing key gendered bottlenecks and barriers that inhibit gender equality and the realization of rights, capabilities, resources and opportunities for children, often both girls and boys. Gender inequality as a determinant of child well-being and rights is integral to the Monitoring of Results for Equity System (MoRES), the organization's framework aimed at enabling more effective programme design, implementation, and monitoring. MoRES emphasizes strengthening the

capacity of government and partners to regularly monitor intermediate outcomes so that timely course corrections in plans and strategies can be made.

61. Specifying a core set of gender bottlenecks and barriers will greatly strengthen country programmes in their articulation of where and how gender disparities exist; how and why particular gender barriers prevent the achievement of specific outcomes in each outcome area; what programming options can overcome the barriers; and what indicators are meaningful for tracking progress. The five bottlenecks and barriers that tend to consistently undermine the achievement of results for children in all of the seven outcome areas in the UNICEF Strategic Plan include:

- (a) Women's and girls' lack of safety and mobility;
- (b) Women's and girls' lack of resources and decision-making;
- (c) Limited access to information, knowledge, and technology for women and girls;
- (d) The excessive time burden and dual responsibilities experienced by women and girls;
- (e) Damaging and detrimental masculine and feminine ideals and expectations.

62. Below are illustrative examples of how gendered bottlenecks and barriers readily articulate some of the specific obstacles in the areas of enabling environment, supply, and demand--- the three key categories of the MoRES determinant framework – for achieving results across the seven Strategic Plan outcome areas.

1. Enabling environment

(a) *HIV/AIDS.* Absent or inadequate social protection policies for women and girls living in poverty increases the risk that adolescent girls and women resort to “survival sex” to meet their own and their children’s basic needs for food and shelter, greatly increasing their own and their children’s risk of contracting HIV.

(b) *WASH.* In communities where women have little voice or access to decision-making, their strongly felt need for safe, private sanitary facilities may go unmet.

(c) *Nutrition.* Lack of maternity rights at the national level can leave a new mother little choice but to abandon breastfeeding because she must return to work or lose her job.

(d) *Social inclusion.* Lack of equal pay laws as well as lack of inheritance rights or protection in the case of divorce contributes to higher rates of poverty among women leading to multiple deprivations for children.

2. Supply and delivery of services

(a) *Health.* In societies where mothers are reluctant to see a male vaccinator, female health workers can help to facilitate access to immunization services

(b) *HIV/AIDS*. Health services that stigmatize adolescent girls who use drugs or adolescent boys who have sex with men—and thus do not conform to gendered expectations and ideals—drive away HIV-positive adolescents who fit those categories.

(c) *WASH*. Women’s unpaid labour in hauling water may reduce the urgency and perceived need for adequately funded water supply and sanitation (WSS) service provision.

(d) *Nutrition*. Social norms may make it unacceptable for a woman to receive breastfeeding information from a male health-care worker.

(e) *Education*. Education curricula with strong gender stereotypes are likely to perpetuate gender inequitable norms in both girls and boys.

(f) *Child protection*. Lack of adequate shelters and services for women experiencing violence in the home contributes increased exposure to the risk of violence as well as deprivations in terms of food, clothing, shelter, and schooling.

3. Demand and utilization of services

(a) *Health*. A free health clinic set up for families living in poverty may be located in a place that a woman cannot get to on her own due to safety concerns, or social prohibitions, making it difficult for her to secure timely care for her sick child.

(b) *Nutrition*. Lack of agency and financial decision-making power at the household level can hinder a woman from ensuring that her child is well-nourished.

(c) *Child Protection*. Social norms that make approaching official systems for birth registration a male responsibility can reduce uptake of registration systems since women are the primary caretakers of newborns and infants.

(d) *Social inclusion*. Women with limited education and access to information may not be aware of the services and programs that exist to help them and their children.

63. The specification of these bottlenecks and barriers will provide a concrete entry point for a broad range of UNICEF staff, both in the field and in headquarters, to consider the implications of gender inequality for their work in programmatic terms, and in a way directly relevant to the results they are aiming to achieve. That is the approach that underlies the full scope of the programmatic framework and priorities specified in the GAP: integration of gender into UNICEF programming must help achieve equitable results for children in the countries where UNICEF works.

III. Institutional effectiveness: operationalizing the Gender Action Plan

64. The scope of the programme of work specified above is practical but ambitious, and UNICEF will commit resources and invest in the required staffing, capacity and systems support for its implementation.

65. Since the launch of its gender equality strategy in 2010 and the implementation of the SPAP 2010-2013, UNICEF has made significant progress in developing an institutional framework for strengthening its work on gender equality. Among other measures, this has included mandatory

gender reviews of country programmes at least once during the country programme cycle; external reviews of country programme documents against criteria for gender mainstreaming; the implementation of the gender marker for tracking the relative contribution of output related expenditures to gender equality and the empowerment of women and girls; a strong policy aimed at achieving gender parity in senior level posts; and collaboration with other United Nations agencies, civil society, governments, and in global partnerships aimed at achieving gender equitable results for children.

66. In implementing the GAP, UNICEF will build on this foundation, further enhancing organizational systems and technical capacity for executing the programmatic priorities, and adapting its institutional framework to align with UN SWAP for gender, which calls on all United Nations organizations to take specific measures to increase accountability and oversight for mainstreaming gender equality and women's empowerment and ensuring gender equality results. UNICEF is implementing the 2012 QCPR recommendations on gender equality.

A. Results framework and performance monitoring

67. The consolidated results framework for the programmatic results prioritized in the GAP is presented in Annex B, drawn directly from the results framework of the UNICEF Strategic Plan 2014-2017. It incorporates 42 indicators in total, 22 tracking progress on the targeted gender priorities, and 20 tracking progress on the broader integration of gender in programming. While at the corporate level UNICEF will report to the Executive Board only on the indicators in this consolidated results framework, it will simultaneously be working with country offices to identify and track key additional indicators that may not be measurable cumulatively at the corporate level, but are nevertheless important and feasible for capturing results on gender issues in specific contexts.

68. In addition, UNICEF has identified five performance benchmarks to track its progress on improving institutional effectiveness in achieving results on gender equality and the empowerment of women and girls. These benchmarks map to the key areas of systems strengthening, capacity enhancement and resource investment that UNICEF is making in implementing the GAP. The specific measures for the performance benchmarks, with baselines are provided in Annex C. The benchmarks include:

- (a) Programme expenditures on gender results;
- (b) Gender staffing and capacity across the organization;
- (c) Gender performance of country programme management plans;
- (d) Gender performance on evaluations of UNICEF programmes;
- (e) Effective knowledge sharing and communications for promoting gender quality.

B. Accountability

69. The accountability for implementing the GAP and achieving prioritized results lies with UNICEF management, in a chain from the Office of the Executive Director to Regional Directors to Country Representatives whose responsibility it is to deliver results on the ground. To manage

regular oversight on implementation and delivery of results, UNICEF is instituting the GAP Steering Committee, chaired by the Deputy Executive Director of Programmes and consisting of senior managers from the Regional Offices as well as headquarters.

70. The GAP Steering Committee will be responsible for the implementation and monitoring of systems, capacity strengthening, and resource allocation processes outlined below and for regularly assessing progress on results. The Steering Committee will oversee that accountability for performance on GAP implementation and results is integrated into the job descriptions and performance evaluations of regional and divisional directors and managers reporting to them. It will assess country and divisional performance on GAP programmatic results and institutional benchmarks on a regular basis, providing feedback, guidance, and the necessary support to relevant divisions and regions, and reporting progress on results to the Executive Director.

C. Financial resources

71. UNICEF is taking important steps to increase programming resources and institutional investments for its work on gender as required for the implementation of the GAP.

1. Financial target

72. In line with the UN SWAP for gender, UNICEF is setting a financial benchmark targeting that by 2017, the final year of the Strategic Plan period, some 15 percent of programme expenditures are on programming that advances gender equality and the empowerment of girls and women. This target applies to programme expenditures supported by both Regular and Other Resources, and includes programming for both development and humanitarian response. If successful at reaching its revenue targets, UNICEF projects to invest about \$1.15 billion over four years in gender equality related development programming. Gender related expenditures in humanitarian response will be in addition to this amount. Approximately 18-20 per cent of these expenditures are expected to be on the targeted gender priorities with the remaining on broader UNICEF programming explicitly contributing to gender equality or the empowerment of girls and women, alongside its primary objectives. These figures, by necessity, are projections rather than firm budgeting figures, since the final allocation of resources to outcomes and outputs is determined through the decisions of each country office based on the priorities of the Country Programme of Cooperation agreed with national partners.

2. Core resources

73. Over the budget period (2014-2017), UNICEF plans to invest \$19 million of core resources in strengthening regional and headquarters capacity in programming for gender equality. This amount signifies an investment of \$12 million in additional core resources than what has been budgeted in the past. If necessary, UNICEF will submit a request to the Executive Board to raise the organization's Institutional Budget ceiling when presenting the mid-term budget review in 2016 to allow for a further increase in resources to be invested in gender equality.

3. Gender Thematic Fund

74. In alignment with the Strategic Plan, UNICEF has established nine thematic funding pools for 2014-2017, one for each outcome area, and one each for the two cross-cutting areas of gender equality and humanitarian action. Thematic contributions are soft-earmarked pooled funds categorized as other resources (OR) to support the achievement of outcomes or results as outlined in

the Strategic Plan. The 2012 quadrennial comprehensive policy review (QCPR) report specifically mentions thematic funding in the context of innovative approaches to improve the predictability of funding for development activities. Establishment of a separate gender equality pool responds to the Executive Board's call to UNICEF to give prominence to achievement of gender equality and the empowerment of girls and women in the Strategic Plan, giving donors the option to contribute directly in support of work on promoting gender equality as well as through the thematic funds by outcome area.

75. The Gender Thematic Fund is intended primarily to support work on the cross-sectoral elements of UNICEF work on gender, especially as specified in the four Targeted Gender Priorities and the gender bottlenecks and barriers that are common across the seven outcome areas in the Strategic Plan. It will help to seed innovation, strengthen data and measurement, and leverage regular and other resources for gender programming. The Thematic Funds for each outcome area would more systematically support the mainstreaming of gender equality activities and objectives as relevant for each sector. In mobilizing resources for sectoral and humanitarian work, UNICEF will systematically budget for gender priorities.

4. Other resources

76. The organization's resource mobilization efforts for other resources will aim to maximize the opportunities to raise funds for both targeted gender priorities and the integration of gender equality activities and objectives into the overall programming of UNICEF. There is already significant donor interest in some of the prioritized areas of work on gender as for example, child marriage, FGM/C, girls' education, integrated services for adolescent health. A more concerted effort will be made to budget for gender programming and expertise in areas where gender needs to be mainstreamed, as for example in the work on water and sanitation, immunization, community health, nutrition, and humanitarian activities.

D. Gender architecture

77. As an organization, UNICEF is striving to take advantage of its multi-sectoral mission and talent-base to shift toward flexible, multidisciplinary, issue and results based teams that pool their talents to forge solutions for advancing the rights of the most disadvantaged children. In this mix, experts with skills to address the challenges of gender inequality bring not only critical added value, but also serve as important catalysts for cross-sectoral collaboration.

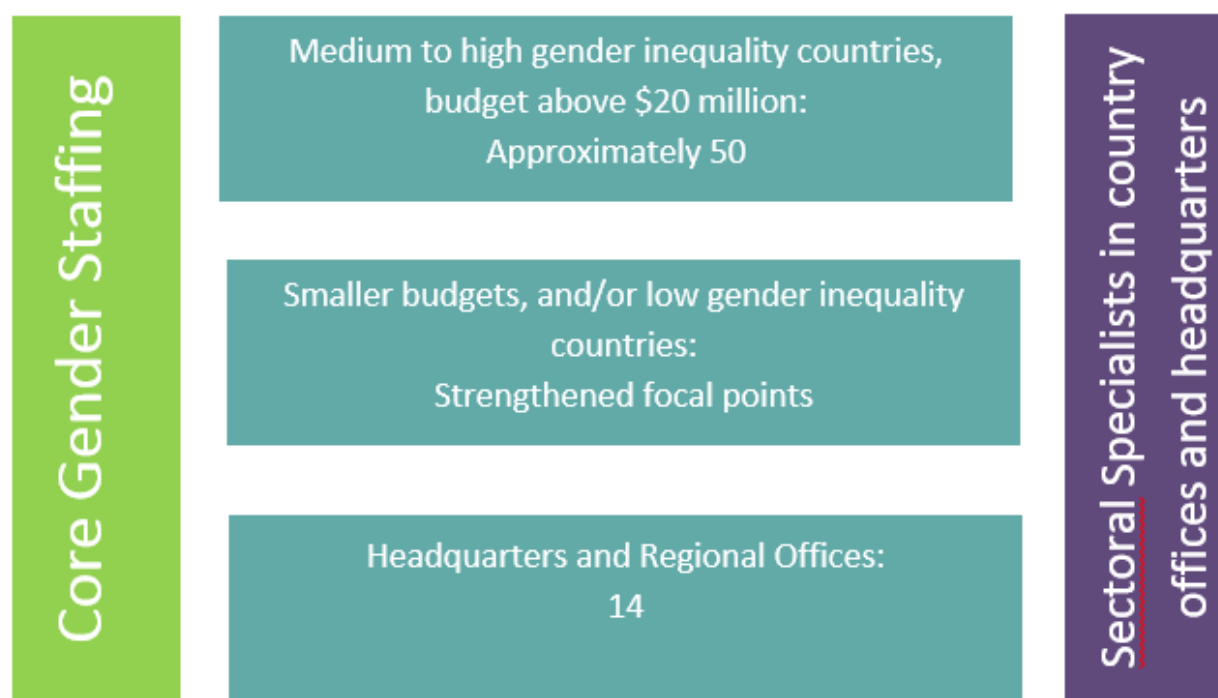
78. To this end, UNICEF is strengthening the core gender architecture of the organization with an expanded staff of specialists who have dedicated responsibility on gender and cross-sectoral collaboration. The gender team at headquarters will be strengthened so as to effectively serve as the anchor for GAP implementation, coordinating the overall technical, strategic, and operational support and guidance for both programmatic and institutional portions of the GAP. This anchoring role will be complemented by regional gender specialists so that the implementation of the GAP is a reality in field based programming and results.

79. In view of the organization's focus on building country capacity, emphasis will be placed on the recruitment of gender specialists in country offices. Guidance will be issued for country offices to ensure staffing on gender commensurate with their budget size and programming focus--on the Targeted Gender Priorities and the mainstreaming of gender into programming. It is expected that in countries with demonstrated medium to high gender inequality indicators and country office

throughputs above \$20 million, there will be at least one dedicated gender specialist. Over the next two years, countries will utilize their Country Programme Document (CPD) and Medium Term Review (MTR) cycles to ensure adequate staffing on gender in response to this guidance, utilizing whichever source of funds they find most appropriate.

80. In countries where full-time gender experts are not an option due to the limited size and scope of the country office, a gender focal point will be required to meet a minimum skills requirement, seniority, and accountability on gender. Countries will be encouraged to leverage expertise with partner agencies, and to benefit from the formulation of gender teams, cross-sectoral working groups, peer learning and country-to-country collaboration. The Regional Gender Advisors and the headquarters gender team will support country offices in planning, programme design and quality assurance processes.

81. Equally important, UNICEF will encourage and support hiring practices and job redefinitions that increase the proportion of sectoral gender specialists who bring the benefit of combined expertise in gender and areas such as health, HIV/AIDS, nutrition, WASH, education, or protection. Experience suggests that sectoral gender experts not only facilitate the practical translation of gender concepts into specific technical areas of work, they form one of the most sustainable ways of mainstreaming gender equality in organizational practice.



Gender parity

82. UNICEF will continue to make strides in achieving gender parity at all levels and fostering a more gender-equitable work environment. Striving for gender parity in senior-level posts remains an organizational priority, with evidence of improvement over time. At the end of 2012, 42 per cent of all P5 or higher positions were held by women, and this figure increased to 44 per cent in 2013.

83. UNICEF has put in place concrete policies and measures with the goal of achieving gender parity in senior-level posts within approximately four years. The Executive Director has reiterated his commitment to achieving gender parity in senior positions, especially at D1 and D2 levels, underscoring the message that gender balance should be one of the key selection criteria for recruitment, and that senior managers are responsible for operationalizing this principle. UNICEF is making sure that selection panels are gender balanced and short lists of candidates include women. Additionally, UNICEF is nurturing female staff from middle level upward for leadership positions and adding qualified females to 'talent groups', as part of efforts to build a ready pool of qualified candidates.

E. Capacity and systems strengthening

84. Building on the foundations laid during the SPAP 2010-2013, the emphasis in implementing the GAP will be to further enhance systems and improve the quality and effectiveness of the work on gender that UNICEF undertakes at all levels. An important priority will be to use the enhanced core capacity, especially at the regional level, to build skills and capacity on gender for a wider range of staff, with particular emphasis on data, indicators, evidence building, innovation, and cross-sectoral solutions on gender. There will be emphasis on strengthening guidance and tools to provide more concrete programming models and options for achieving gender equitable results.

85. In building capacity and strengthening guidance, UNICEF will make a strong effort to leverage sectoral programming, training, networking, and measurement efforts in order to make the integration of gender relevant and sustainable. At the same time, since cross-sectoral collaboration is a key strength of UNICEF work on gender, training opportunities and guidance materials that provide a broader understanding and skill base on gender equitable programming, beyond sectoral constraints, will be developed and utilized. The training and capacity building activities will be constructed in conjunction with quality assurance processes so that organizational learning and staff learning go hand in hand.

86. UNICEF will work to support the integration of gender priorities through all stages of the country programme cycle, starting from situation analysis to the development of the Country Programme Documents, their translation into the Country Programme Action Plans (CPAP), and especially their execution through the Country Programme Management Plans (CPMP) and Annual Work Plans. Concrete entry points and options for integrating gender as reflected in the GAP will be integrated in the programme guidance and quality assurance tools and within the Programme Planning electronic Manual (PPeM).

87. The importance of gender inequality as a structural bottleneck and barrier across numerous positive child outcomes has been incorporated into the initial rollout of MoRES and will be strengthened with additional guidance on evidence-based strategies. A concerted effort will be made to integrate concrete examples and case studies of a gender-focused determinants analysis into the MoRES toolkit and training processes, and a core set of indicators will be developed.

88. An equally important priority will be the enhancement of monitoring systems to more systematically track gender results and key benchmarks on institutional progress on gender programming and results. The indicators and benchmarks on gender associated with the Strategic Plan have already been strengthened considerably. UNICEF will further refine the application of the gender marker, which it launched in 2011, requiring all outputs to be rated against a four-point scale indicating their contribution toward the achievement of gender equality. UNICEF will refine

the gender marker by linking it to key decision-making exercises, such as annual reporting at all levels, and utilizing its results in annual strategic planning and reporting. Improving quality assurance and more routine analysis of the Gender Marker will be an essential step to tracking both the expenditure of resources and the quality of gender programming. The tagging of the Gender Marker will be assessed against the Specific Intervention Codes (SICs) to help countries achieve better alignment between their stated outputs and proposed activities related to programming on gender.

89. In addition, UNICEF will continue to strengthen its accountability and evaluation mechanisms with the adoption and implementation of a set of criteria for all programme evaluations to systematically assess the effective integration of gender equality as a cross-cutting issue. As the scorecard on evaluations by the UN SWAP on gender is still under development, UNICEF will use the UNICEF Global Evaluation Reports Oversight System (GEROS) for benchmarking performance. The GEROS criteria are based on the United Nations Evaluation Group (UNEG) standards for assessing the quality of reports, integrating gender considerations.

F. Partnerships and coherence

90. UNICEF will continue to engage in United Nations interagency processes at all levels and seek synergies and collaboration as it implements the GAP. UNICEF will work with sister agencies to maximize shared goals and synergies so that its added value, commensurate with its mandate, is demonstrated and coherent support is provided to partners and country governments.

91. At the global level, UNICEF will continue to contribute to the Inter-Agency Network on Women and Gender Equality (IANWGE), the UNDG Gender Task Team, Inter-Agency Standing Committee (IASC) gender reference group, Beijing Plus 20, ICPD Plus 20 and the post-2015 discussions on gender equality. UNICEF is the designated global lead for the International Day of the Girl Child and it will continue to work with other United Nations agencies and external partners to celebrate the Day.

92. UNICEF will work towards strengthening interagency collaboration and partnerships at the regional level. At the country level UNICEF will continue to play a pivotal role in the setting of the United Nations system-wide gender priorities through the UNDAF process. In addition as part of the gender theme groups and other inter-agency initiatives, UNICEF will support the tracking of performance on the MDGs, CRC, CEDAW and others emerging from the post-2015 agenda. UNICEF will work with UN-Women and other agencies to strengthen national capacities on gender.

93. UNICEF will leverage a number of key partnerships to advance its work on gender equality, such as A Promise Renewed, UNGEI, the Global Education First Initiative (GEFI), and the UNiTE to End Violence against Women campaign. The organization has worked closely with UN-Women in support of the United Nations System-Wide Action Plan, in particular by sharing knowledge and experience with other agencies concerning the performance standard on tracking resources and developing gender markers. UNICEF collaborated with UN-Women on advocating for a stand-alone goal on gender equality in the post-2015 development framework and on specific indicators and targets.

94. UNICEF will continue to facilitate reporting by United Nations country teams to the Committee on the Elimination of Discrimination against Women during its pre-sessional working

group meetings. In addition, UNICEF will continue to co-chair, with the United Nations Development Programme (UNDP), the sub-group on accounting for resources for gender equality of the United Nations Development Group Task Team on Gender Equality.

G. Knowledge sharing and communications

95. Increased focus and capacity with regard to gender equality programming and systems will go hand in hand with improved efforts at sharing knowledge across the organization. With the enhancement of gender expertise at all levels, an internal network of gender professionals will interact on a regular basis, including through an annual network meeting. As the institutional systems on knowledge management and sharing are upgraded, this extended network will take full advantage of improved capabilities for sharing best practices and key achievements, which will be highlighted and routinely shared with extended networks for other technical areas. A team site will be established and maintained for regular sharing of tools, materials, case studies, etc. The targeted gender priorities will be especially important for fostering South-South cooperation among countries that are working on a common priority within and across regions.

96. UNICEF communication priorities in 2014 identify gender equality, along with equity and rights, as a key cross-cutting theme. As such, gender equality will be mainstreamed throughout the organization's core narrative and messaging. This strength in communication and the strategic approach to public advocacy will enhance the development and dissemination of high-quality messaging and products at key moments, maximizing on the opportunity to share and build synergies with partners and the public, especially young people. Through dedicated internal and external communication platforms, UNICEF will repackage and share the latest research and evidence on what works on the priorities identified in the GAP so as to mobilize the relevant audiences for action. These include men, women, girls and boys, local leaders, civil society, governments and other partners. Through key global opportunities such as International Day of the Girl Child and campaigns such as End Violence, UNICEF will advance specific gender issues among a broader audience base, with particular focus on the four targeted gender priorities. Communication efforts will support the organization's aim of UNICEF becoming a knowledge leader in these areas. These communication efforts will also support fundraising and enable UNICEF to ensure the launch and sustainability of the Gender Thematic Fund.

97. It will be critical for public communication to support programmes in changing attitudes and beliefs against gender discrimination. Strong emphasis will be placed on sharing knowledge and best practices in UNICEF and beyond on work that advances gender equality, focusing especially on results. The Division of Communication (DOC) will work closely with the Division of Policy and Strategy as well as the Communication for Development section in the Programme Division on advancing the goals of the GAP by building on the existing and upcoming evidence base to engage relevant audiences on advocating for enabling environments and changing gender norms and practices that are preventing the achievement of gender equality.

IV. Reporting and assessing progress on the Gender Action Plan

98. UNICEF will report annually to the Executive Board with regard to progress on the GAP, providing progress updates on both the programmatic results in the priority areas outlined above and on the performance benchmarks to track progress on institutional effectiveness.

99. As the GAP is aligned with the UNICEF Strategic Plan 2014-2017, progress toward achieving results will be measured against outcomes, outputs and indicators incorporated in the Strategic Plan, consolidated for the GAP in Annex B. The performance benchmarks outlined in section 3 will be measured in accordance with the measures specified in Annex C.

100. In addition, all regions will assess country level performance against the GAP on an annual basis, with the GAP Steering Committee assessing it organization wide. These reviews along with annual reports from countries and monitoring data collected on institution wide performance will inform the report on implementation of the GAP, which will be presented annually to the Executive Board at its annual session.

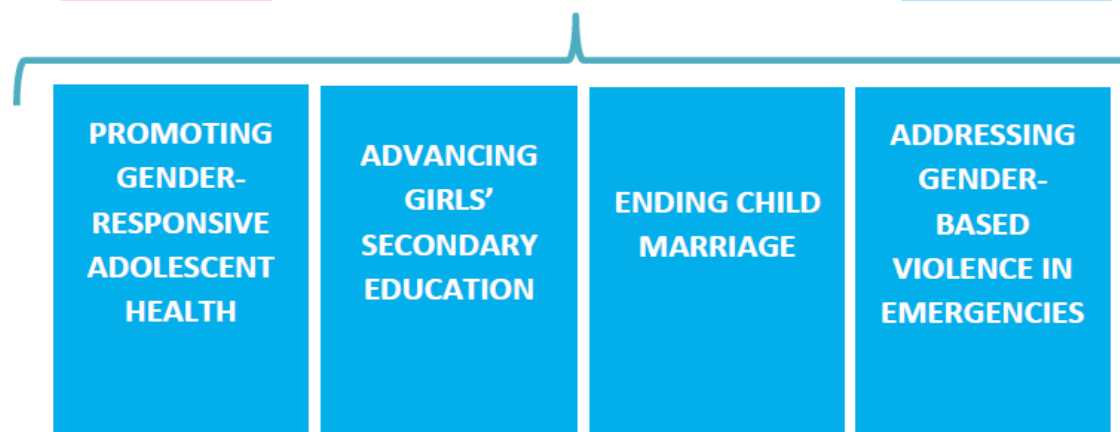
101. UNICEF is due to undertake an evaluation of its work on gender equality and the empowerment of women and girls in 2016. This evaluation will be undertaken with a view to serving, in part, as a midterm performance review of the implementation of the GAP.

Annex A GENDER ACTION PLAN – PROGRAMMATIC FOCUS

MAINSTREAM GENDER IN ALL STRATEGIC PLAN OUTCOMES

1 HEALTH E.G. Maternal health, gender equality in child survival	2 HIV/AIDS E.G. PMTCT coverage & ART coverage for HIV positive women	3 WASH E.G. Access to water and sanitation at home	4 NUTRITION E.G. Improved maternal nutrition, anaemia reduction	5 EDUCATION E.G. Gender equality in education, ECD & caretaking	6 CHILD PROTECTION E.G. Reduction in gender-based violence, child labor	7 SOCIAL INCLUSION E.G. Social protection benefits to women & girls
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FOCUS ON TARGETED GENDER PRIORITIES ACROSS STRATEGIC PLAN OUTCOMES



ADDRESS GENDERED BOTTLENECKS AND BARRIERS

Women's and girls' lack of safety and mobility	Women's and girls' lack of resources & decision making	Limited access to knowledge, information & technology for women & girls	Excessive time burden & dual responsibilities for women & girls	Masculine and feminine ideals and expectations
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Annex B

Programme results – GAP results matrix

Targeted gender priority	Indicator	Baseline	Target
Promoting gender-responsive adolescent health	P1.1 Countries with at least 80% of live births attended by a skilled health personnel (doctor, nurse, midwife or auxiliary midwife), disaggregated for the 15-19 age group	51 (2010-latest)	At least 60
	P1.2 Countries with at least 80% of women attended at least four times during their pregnancy by any provider (skilled or unskilled) for reasons related to the pregnancy, disaggregated for the 15-19 age group	18 (2010- latest)	At least 25
	P1.e.1 Countries that have plans with budget allocated to reduce pregnancy among teens	30	TBD
	P2.1 Countries with at least 80% coverage of antiretroviral treatment (ART) among eligible children aged 0-14 years and eligible adolescent girls and boys aged 10-19 years	0-14 – 6 10-19 – 0	38 UNAIDS priority countries
	P2.4 Countries with at least a 60% coverage in condom use at last sex among adolescents aged 15-19 years reporting multiple partners in last year	Males: 10 out of 14 Females: 1 of 13	38 UNAIDS priority countries
	P2.a.2 Countries with at least 80% of adolescents aged 15-19 years have comprehensive knowledge about HIV and AIDS in UNICEF targeted areas, disaggregated by sex	0	38
	P2.c.1 Countries reporting age and sex disaggregated data on HIV testing and counselling among adolescents 15-19 years and by sex	Females 23 Males 18	38
	P2.c.2 Countries with national HIV/AIDS strategies that include proven high impact evidence based interventions to address HIV among adolescents	24	38
	P2.c.3 Countries with national policies to implement sexuality or life skills based HIV education in upper primary schools	30	38
	P3.b.3 Countries with at least 50% of primary schools having access to adequate sanitation facilities for girls	87	100
	P3.e.2 Countries implementing menstrual hygiene management in WASH in schools programmes	39	50

	P4.c.2 Countries with a policy or plan targeting anaemia reduction in women and girls	Women: 77 Girls: 38	Women: 100 Girls: 50
	P6.4 Countries with 30% or more reduction in proportion of girls 0-14 years undergoing female genital mutilation/cutting	17 (2000-2012)	5
Advancing girls' secondary education	P5.1 Countries with primary/lower secondary school age out-of-school rate below 5%	Primary T = 46% F = 40% M = 40% L. Secondary T = 24% F = 22% M = 22% (2008-2012)	Primary T = 66% F = 52 M = 52% L. Secondary T = 27% F = 27% M = 27%
	P3.3 Countries in which more than 50% of primary and secondary schools have WASH facilities meeting national standards	87	137
	P5.e.1 Countries with gender parity (between 0.97 and 1.03) in lower secondary education	47	55
	P5.e.4 Countries with an education sector policy or plan that specify prevention and response mechanisms to address gender-based violence in around schools	68	88
	6b. Percentage of women aged 20-24 who were married or in a union by age 18	34% (2005-2012) (excluding China)	TBD
Ending child marriage	P6.7 Countries with 10% reduction in proportion of women 20-24 years married by age 18 years, in countries with prevalence of at least 25%	50 (2010-12)	8
	P6.b.4 Countries (of those with child marriage prevalence is 25% or higher) with national strategies or plans on child marriage with a budget	0 out of 50	12
	P6.d.2 Countries in humanitarian action where country sub-cluster or sector coordination mechanism for child protection and gender-based violence	31 14	100
Gender-based violence in emergencies	P6.d.3 Number and percentage of UNICEF-targeted children and women in humanitarian situations who experience sexual violence receive multisectoral support services (health, psychosocial, livelihood/economic strengthening and justice)	N/A	>80

Mainstreaming gender in programming	Indicator	Baseline	Target
Gender equality in child survival	P1.e.2 Countries that produce sex-differentiated infant and child mortality estimates	IMR: 68 U5MR: 64	IMR: 157 U5MR: 157
	P4.1 Countries with a current exclusive breastfeeding rate among children 0-5 months old > 50% and no recent significant decline	27	40
	P4.e.2 Countries that have undertaken a gender review of the nutrition policy/strategy in the current national development plan cycle with UNICEF support	20	40
Improved maternal and neonatal health	P1.1 Countries with at least 80% of live births attended by a skilled health personnel (doctor, nurse, midwife or auxiliary midwife)	51 (2010-latest)	At least 60
	P1.2 Countries with at least 80% of women attended at least four times during their pregnancy by any provider (skilled or unskilled) for reasons related to the pregnancy	18 (2010- latest)	At least 25
	P1.7 Countries with at least 80% of children aged 0-59 months with suspected pneumonia taken to an appropriate health provider	7 (2010- latest)	At least 20
	P2.2 Countries providing at least 80% coverage of triple drug regimens for all pregnant women living with HIV	8	22 Global Plan for EMTCT priority countries
	P2.d.1 Number and percent of HIV positive pregnant women (out of those targeted by UNICEF) in humanitarian situations who receive treatment (either initiated or continuing) to prevent mother-to-child-transmission of HIV	NA	80%
	4b. Percentage of women of reproductive age with anaemia	42% pregnant 30% non-pregnant	TBD
Access to water and sanitation at home	P3.1 Countries in which more than 75% of households have an improved source of drinking water	103	125
	P3.2 Countries in which more than 50% of the population has an improved sanitation facility	117	137
	P3.5 Countries in which more than 33% of the population practices open defecation	21	15
	P3.b.2 Countries implementing a national strategy to eliminate open defecation	15	35

Gender equality in education	5a. Number of primary school-age children out of school and related gender parity index (GPI)	T= 57.2 million F = 30.6 million M = 26.6 million GPI = 0.87 (2011)	0 GPI = 1.0
	5b. Primary completion rate (expressed as Gross Intake Ratio in the last grade of primary) and related gender parity index (GPI)	T = 91% F = 90% M = 91% GPI = 0.98 (2012)	100% GPI = 1.0 (2015)
Reduction in gender-based violence	P6.1 Countries with 10% reduction in proportion of girls aged 15-17 years who have ever experienced sexual violence (forced to have sexual intercourse), in countries with prevalence of at least 5%	Out of 26 countries with data and prevalence of > 5%	4
Gender-responsive legislation and policies	P6.e.2 Countries that have revised or improved child protection policies on the basis of a gender review supported by UNICEF	35	48
	7b. Number of countries that have ratified the Convention on the Rights of the Child and its Optional Protocols, Convention on the Elimination of All Forms of Discrimination against Women and Convention on the Rights of Persons with Disabilities, and are reporting regularly on their obligations	CRC: 190 CRC, OP1: 153 CRC, OP2: 165 CRC, OP3: 10 CEDAW: 186 CRPD: 141	193 (for all the instruments)
	P2.e.2 Countries that have undertaken a gender review of the HIV policy/strategy of the current national development plan with UNICEF support	0	38
	P7.e.1 Countries that have revised domestic legislation and administrative guidance in line with the concluding observations of CRC, CEDAW and CRPD committees	76 59 26	157

Annex C

Performance benchmarks

Benchmark	Indicator	Baseline	Target by 2017
Programme expenditures on gender results	Progress toward financial target on programme expenditures	8.2%	15%
Gender staffing and capacity across the organization	Progress on number of dedicated gender experts in headquarters and regions	3	14
	Progress on number of dedicated gender experts in countries	4	50
Gender performance of country programme management plans	Proportion of country programme action plans (CPAPs) with gender results validated by regional offices	TBD	100%
	Proportion of country programme management plans (CPMPs) with budget lines appropriate to the gender results	TBD	100%
	Proportion of country offices that have resources for their CPAP gender results approved in the budget by the regional Programme Budget Review (PBR)	TBD	100%
Gender performance on evaluations of UNICEF programmes	Proportion of evaluations being rated outstanding and highly satisfactory on incorporating gender by the UNICEF Global Evaluation Reports Oversight System (GEROS)	46% (2012)	70%
Effective knowledge sharing and communications for promoting gender quality	Annual gender network meeting held		
	Functioning GAP team site on UNICEF intranet		
	Communication plan for targeted initiatives developed and implemented		