

Brazil

Update on the context and situation of children

In the nearly two years of the COVID-19 global pandemic, Brazil has become one of the countries hardest hit, with around 620,000 deaths (the second-largest total globally) by early 2022.[1] Since the start of the pandemic Brazil has registered 1,449 deaths of boys and girls up to 11 years old because of the Covid-19 and more than 2,400 cases of Pediatric Multisystem Inflammatory Syndrome associated with Covid-19. Also concerning is the increase of around 130% in the number hospitalizations of children 0-18 years due to SARS, when comparing the first week of 2022 with the same week in 2021. [2]

During the peak of cases in April 2021,[3] many cities in Brazil were facing a near collapse of the health system, with stock-outs of basic medical supplies and a slow start to the vaccination campaign. Towards mid-year, though, the situation had improved thanks to accelerated vaccination efforts. By December 2021, 310 million vaccine doses had been given, and 62.9% of the population were fully vaccinated.[4]

Despite the improved public health situation, Brazil remains severely affected by the economic impact of the pandemic. In the second quarter of 2021, the average individual income of people in Brazil was 9.4% below the pre-pandemic level. The poorest half of the population suffered an income loss of 21.5%.[5] The last available official data show that 38.6% of children aged 0–14 lived in poverty in 2020.[6]

Although the “Auxilio Emergencial” (Emergency Aid) initially fuelled economic recovery and has been a key protective measure during the pandemic, its subsequent reduction is expected to lead to more poverty. There has also been a generalized acceleration of inflation, with the worst impacts felt by the poorest segments of the population due to rising food prices (which have gone up by 8.3%):[7] a recent survey estimated that over 55% of households were experiencing food insecurity.[8] The recently created cash-transfer programme “Auxilio Brasil” – rolled out by the government in 2021 as a replacement for the “Bolsa Familia” – is likely to cause more economic uncertainty. Although the new programme is broader in terms of its beneficiaries and its monthly stipend has increased, there are concerns over its sustainability - as financing for the programme is guaranteed only until December 2022 - whether it will be an appropriate response to the worsening poverty situation.[9]

Brazil endured one of the world’s longest closures of public schools. By late 2020, over 5 million children had lost contact with their school – either due to lack of remote activities or because they were not enrolled. This level of exclusion was last seen around the year 2000. Despite increasing public pressure, many municipalities kept their public schools closed during the first half of 2021. After the mid-year break, more than 85% of municipal schools finally reopened for face-to-face classes, often in combination with online education. A significant number of schools continued to provide only remote classes, however.[10] In many cases, distance learning has been hampered by insufficient internet access. In rural areas, a third of households do not have access, compared with 14% in urban settings. In total, almost 5 million children aged 9 to 17 still do not have internet access. [11]

There have been indications of increasing rates of child labour, often due to the prolonged school closures and rising poverty. With 64% of families reporting that their income had decreased during the pandemic, many resorted to child labour to supplement their income: 5% of the respondents in a UNICEF survey reported that a child or an adolescent in their household had engaged in remunerated activities.[12]

The pandemic also had a significant impact on the mental health of adolescents. According to the same survey, 41% of participants mentioned that an adolescent living in their household had shown signs of deteriorating mental health during the pandemic.[13]

Rates of childhood immunization have substantially decreased, especially for children aged 0–4 years: while in 2019, 82% of children had received the MMR vaccine (complete scheme) and 68%, the polio one (complete scheme), these rates have fallen to 42% and 43%, respectively, based on the preliminary data for 2021.[14]

According to a study on lethal and sexual violence in Brazil, by UNICEF and the Brazilian Forum on Public Security, and based on police data, between 2016 and 2020 a total of 35,000 children and adolescents were assassinated in Brazil – an average of around 7,000 per year. While the number of adolescents aged 15 to 19 who were killed fell to just under 4,500 in 2020, from just over 6,500 in 2016, more children aged under 5 died because of acts of violence. And 787 adolescents aged 10 to 19 died during police operations in 2020 alone. Preliminary data for the first semester of 2021 point to a rise of 14% in the cases of children (up to 14 years old) being survivors of sexual violence treated in the public health system, to a total of almost 17,000 cases, with 85% being girls.[15]

The Brazilian border, after remaining closed for 15 months due to COVID-19 restrictions, was reopened to Venezuelan migrants in June 2021. The year ended with more than 44,800 people having crossed the border in Pacaraima, 35% of whom were children. The “Operação Acolhida” – led by the federal government with over 100 partners, including UNICEF – has supported the relocation of more than 66,000 people to other parts of Brazil since 2018. By November 2021, over 161,000 Venezuelan migrants had been granted temporary or indefinite residence status and more than 81,000 were seeking asylum. Another almost 50,000 were granted refugee status.[16] Following the border closures in 2020, the federal government eased restrictions for Venezuelans and allowed the regularization of migrants who had entered the country irregularly during the pandemic.[17] As a result, 2021 was characterized by a backlog of increasingly vulnerable migrants (including increased health needs) waiting for regularization.

[1] <https://bit.ly/32lTEER>

[2] <https://bit.ly/3IOcYL8>

[3] <https://bit.ly/3qanDYH>

[4] <https://bit.ly/3mkcJi3>

[5] <https://bit.ly/3Fdlxxy>

[6] Less than US\$5.5 per capita purchasing power parity.

[7] <https://bit.ly/32d4vBt>

[8] <https://bit.ly/3yHOW0z>

[9] <https://bit.ly/3FhrKbP>

[10] <https://uni.cf/3Jh6yW3>

[11] <https://bit.ly/3mmy5eO>

[12] <https://uni.cf/32axeXu>

[13] <https://uni.cf/3eaF8CM>

[14] <https://bit.ly/3slZRf9>

[15] <https://bit.ly/3GVvMHj>

[16] <https://bit.ly/32dyvwX>

[17] <https://bit.ly/30JySPj>

Major contributions and drivers of results

Containing the COVID-19 crisis via increased public health measures

In the first part of the year, UNICEF focused on responding to immediate needs of the overstretched health system, supporting COVAX vaccine deliveries, while strengthening public health measures to contain and reduce transmission, and advocating for safe school reopening.

As the chair of the United Nations COVID-19 Response Working Group, UNICEF's role was instrumental to enabling the arrival of more than 13 million vaccines via the COVAX facility and to facilitate the coordination of United Nations support. UNICEF provided medical supplies and personal protection equipment, including 64 oxygen concentrators and 37 helmet-based ventilators benefiting approaching almost 3,900 health units, with a focus on Manaus and Fortaleza, the two cities experiencing the worst health system collapse at that time. In the north of the country, UNICEF worked closely with the government to provide direct support to community health facilities to expand outreach of health and nutrition services for migrants living in shelters in Boa Vista and Pacaraima.

UNICEF continued to roll out the SAFE strategy against transmission in key hotspot municipalities, via infection prevention and control measures.[1] The strategy supported the safe continuity of education, health/nutrition and social assistance services in the Amazon and Semiarid regions, reaching nearly 790,000 people with critical water, sanitation, and hygiene (WASH) supplies and around 3.6 million people through targeted behaviour-change communication. The locally adapted campaigns aimed to overcome resistance to immunization and to support prevention behaviours, particularly among adolescents and young people. Feedback mechanisms, ensuring accountability to affected populations, engaged over 22,500 people.

Supporting COVID-19 vaccination roll-out through its digital platforms, UNICEF reached up to more than 43 million people per social media post. In addition, a campaign in partnership with Facebook to influence people's perception of vaccine effectiveness reached more than 32 million people.

In the Amazon region, UNICEF supported the activation of state- and city-wide WASH sector coordination in Belem and Manaus to respond to the most immediate WASH needs to strengthen public health measures in hard-to-reach communities. In partnership with Coordination of Indigenous Organizations of the Brazilian Legal Amazon (COIAB), UNICEF was able to work in 64 indigenous territories, training 2,500 health and child protection professionals to contain transmission while also promoting mental health and well-being.

Advocacy for safe school reopening and children's right to education

UNICEF took a major role advocating the safe reopening of public schools, uniting with relevant stakeholders at national, state and municipal levels as well as United Nations partners.[2] UNICEF regularly published data, research and evidence on the extent and negative impact of the school closures on children's mental health and learning opportunities, and on the country's development.[3] UNICEF launched a website on safely reopening schools[4] to support managers, school principals and teachers with self-assessment tools[5] on WASH and on infection prevention and control preparedness, and with online training courses and guidelines, including on epidemiological monitoring.

After the mid-year break, more than 85% of primary schools went back to offering face-to-face classes, often combined with online learning. Education leaders in large cities such as Rio de Janeiro and São Paulo explicitly referred to UNICEF guidance. Through public and evidence-based advocacy, UNICEF made mental health, menstrual poverty, and lethal and sexual violence issues of public debate with 4,200 reports in key media. The organization reached more than 96 million people through online and print media, and the TV presence grew by 121% compared with 2020.

UNICEF engaged more than 3,000 Brazilian municipalities and trained over 215,000 education

stakeholders on the School Active Search strategy to identify and re-enrol children.[6] Over 329,000 out-of-school children were identified and more than 14,000 were re-enrolled. In addition, over 135,000 children and adolescents were supported with distance and home-based learning.

Strengthening systems and capacities to address the impact of the pandemic on the most vulnerable children and adolescents

UNICEF launched the seventh edition of its Municipal Seal of Approval, inviting newly elected municipal governments to commit, with UNICEF technical assistance and support, to measurable progress in child outcomes during their term of office. The 2021–24 edition was designed to consider the pandemic and post-pandemic scenario, focusing on seven results aligned to child-focused Sustainable Development Goals. More than 2,000 municipalities across 18 states enrolled in the initiative.

UNICEF also designed a new urban governance and engagement strategy to address the vicious circle of poverty, racism, discrimination, exclusion, and violence affecting children and adolescents in the low-income neighbourhoods of Brazil’s major urban centres. With the tag, #AgendaCidadeUNICEF, this will engage eight cities and support municipal policies to advance a positive, opportunity-based agenda for adolescents and youth, based on UNICEF’s flagship methodologies in education, child protection and mental health, and in skills development to enhance school-to-work transitions.

Complementing the School Active Strategy, UNICEF continued to invest in quality learning, via the Successful School Pathways flagship strategy.[7] Eight states received online technical support to improve learning, engaging close to 3,000 teachers across 247 schools and reaching some 20,000 students. New materials were launched to support return of children to quality schooling and to engage adolescents themselves in inspiring peers to continue their studies.

With over 4.8 million children and adolescents (9–17 years old) being without internet access at home, [8] UNICEF and the Lemann Foundation partnered to foster quality internet access and digital connectivity for schools. This partnership is aligned with the global initiative Giga[9] to map and develop low-cost solutions for regions without internet access, while advancing public advocacy for increased government investments in digital inclusion. UNICEF also distributed connectivity kits (smartphones, internet data packages and information material) to over 4,500 adolescents from ethnic minorities living in remote areas, so they could access educational opportunities, including life skills training.

As part of UNICEF’s Generation Unlimited strategy, UNICEF continued to lead the 1 Million Opportunities[10] partnership, engaging companies, governments, and civil society organizations to provide education, skills development, jobs, and entrepreneurship opportunities for vulnerable adolescents. Over 120 bodies have partnered with the initiative, including 66 companies and private-sector associations, 48 civil society organizations and six government institutions. Not far off 20,000 job opportunities and almost 105,000 skills development activities were generated.

UNICEF further contributed to strengthening the life skills of over 95,000 adolescents and young people, including from traditional, indigenous, and migrant communities, and adolescents in conflict with the law.

Children’s and adolescents’ mental health and well-being remained a key concern due to prolonged social isolation and school closures. UNICEF partnered with professional networks and specialized civil society groups to develop the web-based platform Póde Falar.[11] The platform provided more than 36,000 adolescents with psychosocial support and more than 14 million adolescents and youth with information via social media. This was complemented by dedicated strategies for hard-to-reach minorities: for example, UNICEF offered training on mental health and psychosocial support and on child protection for indigenous groups, reaching more than 2,500 adolescents and youth. UNICEF also launched the Topity[12] chatbot on body confidence and the promotion of girls’ self-esteem, engaging

over 3,500 adolescents. Together with UNFPA, UNICEF launched a Menstrual Health and Hygiene Report which influenced the federal government bill on ensuring menstrual hygiene services for women and girls.

To address the increased prevalence of violence, UNICEF supported the Ministry of Women, Families and Human Rights, and other stakeholders to launch the SABE application and protocol,[13] where children can report cases of violence and abuse and learn about their rights. UNICEF also continued to support violence prevention, including sexual violence, via awareness raising campaigns reaching 1.2 million people on social media. Within the integrated Education that Protects strategy,[14] UNICEF reached over 435,000 people online and trained nearly 3,500 education and child protection actors on how to identify, report and refer cases of violence against children.

As routine vaccination coverage rates dropped from 85 % to 52% in the past 10 years, UNICEF has been partnering with key actors, including the Pan American Health Organization and the Brazil Immunization Society, and is designing an innovative data-driven strategy, Vaccine Active Search, that will be rolled out via the Municipal Seal of Approval initiative, supporting municipalities to identify unvaccinated children and improve coverage.

UNICEF further strengthened integrated early childhood development interventions. Through its Early Childhood-Friendly Units initiative,[15] UNICEF supports community health facilities and preschools to improve their performance and results via an evidence-based certification strategy. The initiative was launched in six urban centres, engaging 400 health units and 114 preschools and training over 1,500 education and health professionals.

At the federal level, UNICEF continued to promote enhanced public investments for children, by publishing jointly with the Institute for Applied Economic Research an innovative methodology for identifying child-related public expenditures[16] and advocating the prioritization of early childhood investments. Together with the Ministry of Economy, UNICEF launched an evaluation of the flagship national cash transfer programme, Bolsa Familia.[17] Its findings and recommendations informed the reform of the programme, launched in November as Auxílio Brasil. Jointly with LACRO, lessons learned on how UNICEF national evaluation capacities development and evaluation of public policies advance child rights, were shared in a webinar. Partnership with the national network of social assistance services, Congemas, was strengthened to improve the emergency responsiveness of social assistance services to the most vulnerable families.

To respond to increasing poverty levels, UNICEF supported state and municipal governments to design and roll out a humanitarian cash transfer programme to address child hunger and extreme poverty, reaching over 4,500 of the most vulnerable families in 13 hotspot municipalities in Semiárido, Amazon and south-east regions. In addition, UNICEF supported social assistance services at the national and local levels to increase the shock-responsiveness of social protection systems by launching a policy guide and supporting related national regulation on services.

Humanitarian assistance for migrants and refugees from Venezuela expanded and further strengthened

In 2021, UNICEF continued to scale up its multisectoral humanitarian interventions, in support of Operação Acolhida[18], the federal response to address the needs of the most vulnerable Venezuelan women, children and adolescents. This includes work in 17 official shelters, 30 informal settlements, and screening and reception in transit centre facilities and Venezuelan indigenous communities. With the reopening of the border in the second half of the year, UNICEF adapted its strategies in support of local health and social assistance services, strengthening service-level outreach capacity while also designing culturally adapted multisectoral responses for indigenous populations. In addition, UNICEF continued to work closely with R4V (Response for Venezuelans) platform partners, providing effective and coherent coordination of the education, WASH, nutrition, and child protection sectors.

UNICEF strengthened health surveillance mechanisms, leading to the vaccination of more than 11,700 children and adolescents (regular vaccines), the nutrition screening of not far off 2,200 children and iron and folic acid supplementation for almost 1,200 pregnant and lactating women. Over 40,000 migrants and refugees were provided with adequate WASH services. Integrated educational and psychosocial support interventions reached almost 18,000 children and adolescents through 30 child-friendly spaces (Súper Panas) and via local social assistance services. Child protection case management[19] was strengthened, ensuring the rapid identification and documentation of close to 1,900 unaccompanied and separated children and of nearly 2,400 undocumented children – facilitating 442 family reunions. UNICEF trained all implementing partners and almost 1,300 military personnel on guidelines for the prevention of sexual exploitation and abuse (PSEA). UNICEF reached over 43,000 people with life-saving information on rights and access to services and scaled up digital tools for engagement and monitoring. A community mobilization with adolescent participation strategy was rolled out to strengthen accountability mechanisms and engage almost 3,600 people in the collection of feedback information.

Private-sector engagement and partnerships

UNICEF Brazil raised 77.5 million Brazilian real (US\$14.5 million), 14% growth in 2020. Despite economic uncertainty, the office managed to consolidate the historical record of income achieved in 2020, transforming emergency support into longer partnerships thanks to the contributions of 71 companies and over 230,000 individual pledge donors. On top of that, an additional 3.4 million Brazilian real (more than US\$ 600,000) was mobilized as in-kind contributions. Key success factors included: the timely strengthening of the high-value partnerships team; the close support provided by the chief executives of the Business Advisory Board opening new fundraising opportunities; and the good collaboration with programmes enabling the timely presentation of quality proposals and reports.

The individual giving operation continued to grow, mainly driven by the success of direct-response TV; the continued face-to-face fundraising operations with a focus on quality rather than volume; and the development of cash giving; the improvement in donor care and pledge optimization. UNICEF also used the Business Advisory Board to engage chief executives and their networks in advocacy on school connectivity, school reopening and opportunities for young people.

Internal management and work climate

The Brazil Country Office continued to strengthen duty-of-care measures, contracting two medical doctors (with the United Nations) and one psychologist, hiring home care services, purchasing oxygen concentrators, and promoting mental health sessions in all affected field offices. The office also played a key role to bring the United Nations vaccination programme to Brazil, with a positive impact on staff well-being.

Based on strict protocols, the office alternated periods of full teleworking with hybrid work to facilitate staff interactions and enable key meetings, contributing to team cohesion. The global staff survey action plan was implemented, and staff engaged in activities to promote diversity, ethics and PSEA. The Committee for the Prevention of Harassment and the ethics focal points played a key role including through the development of an ethics app that is being replicated in other UNICEF offices globally. Brazil rated at 77 % in the Pulse Survey, giving it a fourth place ranking for the Latin America and the Caribbean region. The office continued to promote career development and facilitated six stretch assignments/missions, while 16 colleagues upgraded their job positions.

Key governance and oversight structures have been functioning effectively. Potential conflicts of roles were addressed, and more efficiency was achieved, resulting in a saving of around US\$380,000 through innovative operational initiatives (vehicle rental agreements, a new mobile phone service, and the use of prepaid cards). An in-depth refurbishment of the premises in Brasilia was initiated in December to ensure more modern, open, and collaborative spaces.

Procurement continued to play a key role with a budget (including in-kind contributions) totalling around 33 % of the total implementation (i.e., US\$9 million). Around 470 low-value procurement processes were completed, and 14 long-term agreements were newly established, with 51 valid ones maintained. The unit was active in supporting the COVAX initiative, the distribution of CIK and support to the COVID-19 Interagency Coordination Group.

The information and communications technology team (ICT) managed to double the bandwidth in Brasilia and to increase it by five times in five field offices, for a 30% lower cost. ICT also continued to facilitate Technology for Development by providing cost-efficient solutions for key projects: School Active Search, Successful School Pathways, and the WASH self-assessment tool.

[1] Highly affected communities with a high degree of socio-economic vulnerability

[2]<https://uni.cf/3pV40DW>

[3]<https://uni.cf/3yrjnrt>

[4]<https://uni.cf/3EWNWrE>

[5]<https://bit.ly/3oX00n0>

[6]<https://bit.ly/3iAska2>

[7]<https://bit.ly/2LOPVbk>

[8]<https://bit.ly/3ywO3rj>

[9]<https://gigaconnect.org>

[10]<https://bit.ly/3qB2FB0>

[11]<https://bit.ly/3dYzGTu>

[12]<https://uni.cf/3q2aroP>

[13]<https://uni.cf/3oYrrNy>

[14]<https://uni.cf/3GNXiln>

[15]<https://uni.cf/3pYYK2k>

[16]<https://uni.cf/3F4pPXU>

[17]<https://bit.ly/3maO67o>

[18]<https://bit.ly/3gmeDuY>

[19]<https://bit.ly/3E9Zx5n>

UN Collaboration and Other Partnerships

Despite a complex year, owing to the pandemic and ministerial changes, UNICEF deepened and expanded its partnership with key ministries, including the Ministry of Women, Family and Human Rights for the prevention of violence against children, the Ministry of Health on COVID-19 vaccine roll-out, the Ministry of Citizenship on social assistance and early childhood development, and the Ministry of Economy.

With the launch of the new cycle of the UNICEF Municipal Seal of Approval initiative the organization renewed its partnership with municipalities. A record 2,023 municipalities across 18 states enrolled. UNICEF established a network of key institutional partners, including (i) state governments via the consortia for the Amazon region and for the north-east, (ii) national associations of municipalities and mayors, including the Frente Nacional dos Prefeitos, the Associação Brasileira de Municípios and the Consorcio Nacional dos Municípios; and (iii) the national networks of municipal education, health, and social assistance services (UNDIME, CONASEMS, CONGEMAS).

UNICEF further strengthened its collaboration with the congress, engaging with parliamentary commissions and hearings on key topics, including school reopening, the public budget and child benefits, violence against children and adolescents, mental health, digital connectivity, and early childhood development.

UNICEF chaired the United Nations COVID-19 Response Working Group. Joint efforts included the provision of key supplies, the promotion of prevention, and joint advocacy on school reopening. UNICEF engaged the United Nations Educational, Scientific and Cultural Organization and the World Health Organization/Pan American Health Organization in a high-level public advocacy event for urgent school reopening involving the main education stakeholders and mobilized the United Nations to issue a manifesto. Key urban centres such as Rio de Janeiro, which has the largest network of public schools in Latin America, took the lead in returning to in-person education, paving the way for other cities. UNICEF continued to lead the SDG Fund joint programme on early childhood development and the WASH, nutrition, education, and child protection sectors as part of the Response for Venezuelans (R4V).

UNICEF further worked with the Brazilian Society of Immunization and the Brazilian Society of Paediatrics - plus the Brazilian cartoonist Mauricio de Souza, creator of the UNICEF Ambassador Monica – to engage in COVID-19 prevention, reaching 40 million people on digital media with the promotion of COVID-19 vaccination.

UNICEF strengthened its partnership with the indigenous network COIAB, allowing access to communities for culturally relevant COVID-19 prevention and mental health and child protection support, positioning UNICEF as a trusted partner among indigenous communities in the Amazon. UNICEF partnered with 81 private-sector companies via the 1 Million Opportunities initiative to create job and learning opportunities for vulnerable adolescents and youth to facilitate school-to-work transitions. Through the Business Advisory Board UNICEF engaged chief executives for school connectivity, the reopening of schools and opportunities for young people. UNICEF acted as United Nations MEDEVAC coordinator and chaired the United Nations Human Resources Network. This network has been instrumental to promoting United Nations duty-of-care measures and has played an important role in enhancing diversity within the United Nations.

Lessons Learned and Innovations

Brazil was heavily impacted by the COVID-19 pandemic. The crisis escalated, with the health systems in key states collapsing at the beginning of the year. Mass COVID-19 immunization was delayed due

to political divergence between the federal government and state governors, and delays in securing vaccines, all exacerbated by a wave of fake news. Despite the lack of federal government-led lockdowns and social isolation, most public schools remained closed for the first half of the year due to strong political pressure from education stakeholders. UNICEF stepped up, leveraging its convening role with the network of municipal education managers, state and municipal authorities and other actors, the congress, and the United Nations Country Team to advocate safe school reopening.

UNICEF's vocal positioning and technical support made a crucial difference, including in large cities like São Paulo and Rio de Janeiro, where municipal governments reopened schools and referred to UNICEF guidance. This attests to the importance of UNICEF taking on difficult advocacy positions to advance the best interests of children, even against a lack of public support. The UNICEF survey was key to shedding light on the devastating impact of the prolonged closure of public schools on children and adolescents – on their education, mental health, and protection – and on the overall development of the country. While most schools reopened, the fragile context will require continual advocacy to guarantee educational continuity.

The escalation of the crisis in the first half of the year also required rapid adaptation to deliver timely and effective responses where they were most needed. Digital interpersonal communication channels continued to be fundamental in maintaining community engagement, two-way communication, and feedback tools. At the same time, UNICEF expanded its risk communication and community engagement beyond digital outreach and the distribution of printed materials. The identification of key local actors such as neighbourhood organizations, community and religious leaders, and youth groups, and their involvement, were fundamental for achieving large-scale mobilization results, including in social media.

As part of its response, UNICEF rolled out the framework for accountability to affected populations, and developed feedback mechanisms and tools, allowing local teams to better understand and respond to the needs and aspirations of low-income, minority and indigenous communities. The strategy on community mobilization with adolescent participation has consolidated itself as an innovative and cost-effective tool that has made it possible to do surveys efficiently through local youth, collecting insights and feedback for programming, advocacy, and interagency coordination.

Programme effectiveness was enhanced via three important exercises: a UNICEF country programme evaluation, a partnership review, and a gender and race programmatic review. The recommendations from each exercise will be used to inform the next country programme. In addition, UNICEF elaborated a comprehensive narrative report on the situation of children, including a summary SDG data gap analysis that will provide the basic data set for the development of the Country Programme Document rationale, including the prioritization exercise of vulnerable groups.

UNICEF's field presence via its nine field offices has been critical to ensure locally adapted strategies serving the most vulnerable populations. The development of partnerships with community-based organizations has been key not only to reaching the most vulnerable communities, but also to strengthening partnerships with indigenous civil society networks, minority communities and low-income groups in urban centres.

The adoption of extended duty-of-care measures has been fundamental to protect staff and preserve their mental health. The visit of the representative to seven field offices and of human resources colleagues to Manaus when the state's health system was collapsing brought additional proximity with the staff. It enabled the office to further adjust well-being actions and internal measures to respond to each specific situation. Visits by operations colleagues will be further intensified in 2022.

The office continued to adopt flexible work modalities while promoting collaboration. Based on epidemiological data, periods of exclusive teleworking alternated with periods of using hybrid work modalities that have been key to strengthening interactions. The different teams also took advantage of

lower levels of COVID-19 cases after August to travel to the field, meet authorities and partners, organize safe events, and strengthen interpersonal relations. Work and contract modalities will be further adapted as part of preparing the new country programme in line with the new options developed by the organization.

UNICEF Brazil has continued to hone its humanitarian response capacity in the context of both COVID-19 and the Venezuelan migration response. A stronger approach to risk-informed programming and preparedness planning is emerging and informing the development of UNICEF strategy around climate change and child rights in Brazil.

The new edition of the Municipal Seal of Approval was designed considering lessons learned and the post-pandemic scenario, leading to a reduced set of priority results for municipalities to achieve by 2024. Seven integrated results were developed, and the hotspot approach used in the COVID-19 response was adapted to identify the most vulnerable municipalities, ensuring increased outreach and investments for these communities. Furthermore, an outcome on WASH was introduced to ensure that measures for WASH and infection prevention and control were integrated as a key feature, particularly to improve hygiene behaviours in schools and at the community level. Finally, an online learning strategy is being developed to support cost-effective hybrid technical assistance modalities.

The Business Advisory Board continued to be an effective forum to involve chief executives in advocacy priorities and events, to engage them on key initiatives such as 1 Million Opportunities and to mobilize funds through their networks. Meetings were intensified to get their valuable advice on campaigns and fundraising initiatives that mobilize private companies, and on advocacy about school connectivity and opportunities for young people.

UNICEF's strong partnerships with national and subnational governments were instrumental to advance public finance for children and strengthen shock-responsive social protection systems, including via humanitarian cash transfers and by supporting government-led evaluations. The experience has shown that high-level political engagement and commitment remains key to gain scale and sustainability in social assistance and in equity-based policies, working alongside decentralized approaches to strengthen community engagement.