
The Sustainable Development Framework brings together the work of the UN system in support of key national priorities, towards achievement of the SDGs. It was developed by the UN in India, in close consultation with the Government of India, guided by the overarching SDG principle to leave no one behind, echoing the Government of India’s message of Sabka Saath, Sabka Vikas.

India’s large size and great diversity inform how and what the UN supports the country. Most of our work takes the form of direct support to national, state and local governments’ development priorities, policies, programmes, etc. In this context, we are proud contributors to some of the world’s largest, most innovative and ambitious development programmes, such as Ayushman Bharat aimed at achieving Universalisation of Health Care; POSHAN Abhiyan aimed towards addressing malnutrition; Samagra Shiksha Abhiyan aimed at improving the quality of Education; Beti Bachao, Beti Padhao aimed at girls and women’s empowerment. We are also active supporters of the Government’s commitments to climate change adaptation and mitigation, energy efficiency, disaster resilience, biodiversity, cultural heritage, skilling and entrepreneurship, and more.

The Government of India and the UN are strategic partners in the ‘localisation’ of the SDGs. Along with many advances in mainstreaming the SDGs into national and sub-national planning, we have worked closely with the Government to develop the SDG India Index. The Index provides a holistic view on the social, economic and environmental performance of the country and its States and Union Territories. It aims to help leaders and change makers evaluate their performance on social, economic and environmental parameters.

I hope you will find this Annual Progress Report informative. Your feedback is welcome to further improve our work in India for the sustainable development of the people of this great country.

Renata Dessallien
UN Resident Coordinator, India
The UN Country Team’s programme of work reaches all 28 states.

In 11 states, the UN Agencies have high intensity programming.

The GoI-UN SDF represents the UN development system’s collective effort to support India in addressing key SDG and development priorities and gaps, including to leave no one behind.

Sabka Saath, Sabka Vikas:
Across 7 outcomes, Results Groups are focussing on priority states (Bihar, Chhattisgarh, Jharkhand, Madhya Pradesh, Odisha, Uttar Pradesh, Rajasthan), North East region and the most vulnerable population groups:

Programmatic Focus: Health, Nutrition, Gender Equality and Poverty remain the biggest portfolios in 2019, in line with national priorities
EXECUTIVE SUMMARY

The year 2019 marked the second year of implementation of the Government of India (GOI) - United Nations Sustainable Development Framework (UNSDF), a five-year strategy of action for the UN's support to India in its work to achieve the Sustainable Development Goals (SDGs). In this year, the United Nations system also rolled a major reform of the UN Development System, led by the United Nations Secretary-General, aimed at making the UN Country Teams fit for purpose and better equipped for the complex and interconnected challenges of the new decade.

2019 also saw India become an engine of the world’s achievement of the SDGs with the GOI taking critical steps towards unlocking the full potential of a $5 trillion economy and sustainable growth which ‘Leaves No One Behind’. India’s global leadership on the climate change agenda and ambitious social programmes was also highlighted at this time.

In 2019, the United Nations system in India, through its UNSDF Results Groups and individual agencies, provided support to the roll-out and scale-up of key national development schemes, in particular Ayushman Bharat (twin components – Pradhan Mantri Jan Arogya Yojana (PMJAY) and health and wellness centres), Poshan Abhiyaan (convergent inter-ministerial national nutrition mission), Mission Indradhanush (to accelerate universal immunisation), and the National Clean Air Programme.

The UN continued to support the government in the institutionalisation of the SDGs, contributing to the SDG India Index, SDG aligned vision documents by the state governments and the setting up of SDG Coordination Centres at the state level. The SDG India Dashboard developed for the Ministry of Statistics and Programme Implementation (MoSPI) as the data repository for the National Indicator Framework was also launched in 2019.

As part of the Measles-Rubella elimination efforts, more than 116 million children were vaccinated in six states, totalling to nearly 324 million children since 2017. The Integrated Health Information Platform (IHIP) is now operational in 11 states, covering a population of over 410 million and provides a single operating picture of India’s health data and information. The UN Joint Action Team on HIV/AIDS, in support of Gujarat State AIDS Control Society (GSACS), contributed to ensure that more than 95% of the estimated people living with HIV (PLHIV) knew their test status and that among them 76% were under treatment.
The UN supported the development of the Jal Jeevan Mission guidelines, capacity development initiatives reaching all 250,000 Gram Panchayats (GPs) of India and rolled out the Jal Shakti Abhiyan Campaign in 257 water stressed districts. Over 18 million people received access to household toilets for the first time in the UN supported districts.

Technical support was provided to NCERT on the use of National Achievement Survey (NAS) data for the mega teacher professional development programme (NISHTHA) to train 4.2 million teachers and school leaders (nearly 60% female). A career portal launched in five states to assist 10.26 million secondary school students (58% girls) in making informed educational and occupational choices.

Across the country, 1.3 million girls were reached with targeted interventions focussing on life-skills along with sexual and reproductive health information, and services. Life skills content, supportive pedagogy was developed for 5 million teachers in 10 states to use with adolescents in-school and out-of-school. The UN also launched several new partnerships to strengthen long term gains, including Yuwaah, which brings together young people and key stakeholders on youth skilling.

A Comprehensive National Nutrition Survey (CNNS), covering 112,316 children and adolescents across 30 states/UT, was undertaken by the Ministry of Health and Family Welfare, supported by UNICEF.

In Odisha, in the aftermath of Cyclone Fani’s landfall, UN support enabled a rapid Post Disaster Needs Assessment, reached 1 million children, and ensured the operational condition of 2 million handpumps.

The UN in India is supporting the development and roll-out of the National Clean Air Action Plan. The UN Country Team supported the Government of India’s #BeatAirPollution campaign through effective social media. The UN also supported India in its hosting of the 14th Conference of Parties of the United Nations Convention on Combatting Desertification.

UNDP, together with SDC, KPMG, and Social Finance India, launched an SDG Finance Facility aimed to incubate innovative financial instruments aligned to the SDGs. The UN India-NITI Aayog Investor Consortium for Women Entrepreneurs opened its first call for applications in July 2019 with nearly 300 applications.

On the innovation front, the UNDP India country office launched its national Accelerator Labs initiative in line with the global UNDP effort. The UN in India also established a partnership with the World Economic Forum through an MOU with the WEF’s Centre for the Fourth Industrial Revolution Network.

In 2020, many of these results and partnerships have been extended to further accelerate the achievement of Agenda 2030 in India and several strands of work have been adapted and repurposed to support the government’s action against the COVID-19 pandemic.
Outcome 1: "By 2022, institutions are strengthened to progressively deliver universal access to basic services, employment, and sustainable livelihoods in poor and excluded rural as well as urban areas."
1. Contribute to the localisation of the SDGs

The Government of India, through its coordinating agency NITI Aayog, has taken important actions to promote the localisation of the SDGs. UN agencies have been collectively supporting NITI Aayog and state governments to mainstream the SDGs in the planning processes and supporting the Ministry of Statistics and Programme Implementation (MoSPI) to address data gaps. Key results include:

- **SDG India Index:** With the support of the UN, NITI Aayog has revised the SDG India Index that measures the progress of the SDGs at the sub-national level. Launched in December 2019, it ranks states on the 16 SDGs (except on SDG 17). Besides, for the first time, the findings and the data of the SDG India Index were also visualised to ensure better outreach. SDG India Index dashboard can be accessed here.

- **Early lessons on SDG localisation:** The varied experience of the state governments in localising the SDGs are brought together in a publication titled, “Localizing SDGs: Early Lessons from India” with the support of the UN. The report was launched at the High-Level Political Forum 2019 in New York. The above document can be accessed here.

- **SDG India Dashboard:** The UN supported the MoSPI in the launch of the SDG India Dashboard, which served as the official data repository for the National Indicator Framework (NIF) for SDG monitoring. It presents status for over 200 indicators, disaggregated by time and geography. It also supported the preparation of the first baseline report on SDGs that shows progress and gap as per the NIF. The NIF SDG dashboard can be accessed here.

- **Institutionalisation of the SDGs at the state level:** The UNCT contributed to the framing of guidelines for the state governments to enable the preparation of their state-level monitoring frameworks for the SDGs. It also supported the preparation of the SDG vision document of the state of Chhattisgarh and the development of the state indicator framework in Haryana, Uttar Pradesh, Punjab and Nagaland.

- **SDG Coordination Centres:** SDG Coordination Centres (SDGCCs) were established in the states of Haryana, Uttar Pradesh, Punjab and Nagaland, following government cost-sharing model. SDGCCs serve as think tanks and knowledge centres to build capacities, awareness, and strengthen partnerships at sub-national levels including with CSOs, private sector, and elected councils for collective response to realise the SDGs.

  In Haryana, output-outcome framework document and SDG budget allocation report were prepared to orient state departments toward outcome-based planning and reporting leading to SDGs based 2019-20 budget allocations.

  In Maharashtra, where the UNCT supported Action Room to Reduce Poverty was operational since 2017, the state government announced setting up of an SDG Implementation and Coordination Centre under the Planning Department. The Maharashtra Cabinet also passed a decision for establishing an SDG Implementation and Coordination Centre.

- **SDG aligned planning at Gram Panchayat level:** UNDP supported SDG aligned Gram Panchayat (village level) planning in Paw Wala Soda, Uttar Pradesh to scale up to ensure that no one is left behind. Also, an end to end planning and monitoring tool (SDG Dashboard) was rolled out in Uttar Pradesh to capture real-time data from 13 districts.

- **Innovative financing:** The SDG Financing Facility was launched in 2019 in partnership with the private sector entities and the government to provide a collaborative platform to promote SDG aligned innovative financial instruments such as SDG bonds, impact bonds and municipal finance.

- **Supporting SDG 12:** Initiated report on “Supporting India on SDG 12 Monitoring and Reporting: An analysis of the SDG 12 National Indicator Framework and recommendations for its monitoring and reporting".
2. Strengthening the Social Protection Architecture for women and children at the national and state level

The UN supported evidence building and vulnerability assessments for social protection frameworks at the national and state levels:

- **Support to the National Advisory Committee on Social Protection**: UNICEF is working with NITI Aayog to establish a National Advisory Committee on Social Protection with representation across central ministries and key development partners. The established committee will inter-alia guide a Microsimulation to assess adequacy, incidence and distribution of benefits for key social protection programmes in India and suggest policy options for building an integrated system.

- **Cash transfers for maternity benefits**: UNICEF led the concurrent monitoring of the national maternal cash transfer (Pradhan Mantri Matru Vandana Yojana (PMMVY)) in three states: Maharashtra, Bihar and Assam, which indicated improved implementation over time with mothers getting cash transfers at regular intervals.

- **Cash transfers for girl child well-being**: In Jharkhand, the Mukhyamantri Sukanya Yojana, a comprehensive social protection scheme launched with universal coverage for all girls under 18 years of age with age-appropriate components. In Bihar, concurrent monitoring of an inter-departmental girl child cash transfer programme strengthened its implementation. The Kanya Sumangala Yojana (Girl Well-being Scheme) was launched in Uttar Pradesh with $16.7 million budget and 0.3 million children enrolled in the scheme. Adding cash ‘plus’ age-appropriate complementary services for girls explored for cash transfers in Bihar and West Bengal.

- **Analysis of social protection programmes**: Key social protection programmes in Tamil Nadu analysed to examine their potential to deliver cash transfers in emergency settings. Urban social protection systems reviewed in Bhopal, Kolkata and Mumbai. Vulnerability assessments of social protection systems in Jharkhand and Odisha have been undertaken to understand the policy and programmatic gaps in coverage of vulnerable populations and for advocacy for increased investments for children.

- **Civil Registration**: In Bihar, technical assistance provided for monitoring and analysis of the civil registration data and facilitated in improving the overall birth registration by more than ten percentage points on an average. Similar support extended in Chhattisgarh, Rajasthan, Jharkhand and Uttar Pradesh. In Jharkhand, the capacity building of registrars led to improved reporting. In Rajasthan, the media used to raise awareness on birth registration and digital portals developed. While linking of Aadhaar with birth registration undertaken in selected municipalities of Uttar Pradesh has led to an improved rate of registration.

- **Capacity development for child protection**: UNICEF supported the development of the capacity of national and state government institutions, community groups, and caregivers to address gaps and disparities in child protection. It focussed on building protection against online violence and abuse, providing psychological support to children going through traumas and strengthening the child protection services. For more information, refer to the figure:
Capacity Development for Child Protection

UNICEF aims to protect children from every kind of violence, exploitation and abuse. It believes that every child deserves to lead a happy and safe life.

Capacity Building of:

- 15,000 child protection service providers in 17 states, 350,500 children benefitted
- 10,000 CHILDLINE functionaries on advocacy and counselling; 2 million calls received, support services for 172,430 children in distress

15 CHILDLINE resource persons trained and empanelled as Master Trainers in 10 states under NISHTHA programme

Strengthened skills of primary psychosocial service providers at the district level

Response to Online violence and abuse

- 349 law enforcement officers trained as Master trainers in 8 states
- Skill building of 30,122 children in 110 schools as peer educators on online safety education in Uttar Pradesh

Skill building of 48,998 key functionaries to ensure standards of care for 250,908 girls and boys in child-care institutions in 10 states

Out of these 250,908 girls and boys:
- Individual care plans prepared for 31,500 and 5,784 girls and boys in Karnataka and Uttar Pradesh respectively
- 33,189 children in distress and trauma are getting psychosocial support

Development of framework for calculating optimal costs for implementation of Child protection programme in Uttar Pradesh & Bihar

UNICEF brought together Government, CSOs and other stakeholders to influence the policy dialogue in strengthening the workforce for child protection

- Salary structure of CPS functionaries revised in Bihar
- Development of service manuals in many states
- Six states strengthened models of restorative justice for the children in conflict with the law, 12,285 children benefitted
• **Information management on child protection:** In 8 states, UNICEF facilitated data analysis to improve monitoring and oversight of child protection structures at the state and district level by the Juvenile Justice Committees. The pendancy of cases with Child Welfare Committees and Juvenile Justice Boards reduced by 20% between 2018 and 2019 in 14 states.

• **Promoting Psychosocial Services (PSS):** To strengthen healing and recovery services for children, UNICEF partnered with the National Institute of Mental Health and Neuro-Sciences (NIMHANS) for capacity gap assessment in the states of Uttar Pradesh, Jharkhand, Bihar and Union Territories of Jammu, Kashmir and Ladakh. It advocated for a programme for the capacity building of 8,000 psychosocial service providers at the state and district level over three years using e-learning platforms. An inter-sectoral collaboration between hospitals and 51 CCIs resulted in the improvement of mental health and psychosocial care services for 3,552 children in Uttar Pradesh.

• **Family-based alternative care:** Across 15 states, UNICEF supported innovative models on family-based alternative care and deinstitutionalisation. The Secretariat for India – Alternative Care Network – was established and a web-enabled knowledge sharing platform is being developed to share best practices in alternative care. A study on youth leaving care was completed in four states, resulting in the identification of gaps in aftercare and challenges of care leavers. To facilitate the cross-fertilisation, learning events were organised for 10 states, of which six have initiated work on their road maps on family-based alternative care for children. UNICEF has played a vital role in promoting care reform, strengthening prevention services and improving care services with the national and state governments. Foster care and sponsorship programmes covering 100,780 girls and boys rolled out in eight states in 2019.

  In **Maharashtra**, a reduction of children in institutions to less than 20,000 compared to 80,000 in 2016, and 10,000 children were supported through kinship care.

  In **Rajasthan**, the government allocated an additional $20 million under the foster care scheme.

  In **Odisha**, all 30 districts have operationalised preventive services, and 727 children from vulnerable families were linked with social protection schemes.

### 3. Support capacity development of Urban Local Bodies for Sustainable and Inclusive Urbanisation

• **Socially smart city initiative:** In Bhubaneswar, based on the success of the UNFPA Pilot Programme in 8 slums, the Socially Smart City Initiative was scaled up to cover 100 slums. A similar initiative was started in partnership with Patna Municipal Corporation.

• **Sustainable cities initiative:** In 2019, UNIDO and UN-Habitat started the sustainable city project including inclusive and sustainable city planning and introduction of low carbon technologies for waste, wastewater and water management in Bhopal, Guntur, Jaipur, Mysore and Vijayawada, in collaboration with the Ministry of Housing and Urban Affairs (MoHUA) and the respective municipal corporations.

### 4. Support to Census 2021

• **Census 2021:** UNFPA is developing E-Learning modules for the enumerators and supervisors to support their capacity building and UNDP is converting the instruction manuals into digital manuals. UN Women has incorporated gender aspects in the training programme.
Transforming Bhubaneswar and Patna into Socially Smart Cities

A socially smart city is one which is economically strong and provides better living opportunities to its people. With this aim, the Government of India rolled out the Socially Smart City Initiative, to boost economic growth and improve quality of life of urban population by enabling local development and harnessing technology.

The programme has been initiated in Bhubaneswar and Patna in partnership with UNFPA and has contributed in bringing positive outcomes.

Bhubaneswar

After witnessing the successful pilot of the programme in 8 big slums of Bhubaneswar, Socially Smart City Initiative project was expanded to 100 slums. The programme has gained recognition for its contribution to SDG-5 (addressing issues of gender equality and violence). The project received Sandvik India Gender Award for outstanding contribution in the Government projects category at a national level competition organised on 27th July 2019 in Pune.

Furthermore, with the aim to connect the youth from the city, a “Skill Mela” was organised in collaboration with skill development agencies including implementing partner agencies. 170 youths participated in various skill development programmes. 284 youths are now enrolled in different trades of skill development programmes, such as welding, nursing, beauty and wellness, tailoring, and mobile repairing under the programme.

Patna

With the aim of transforming Patna into a socially smart and sensitive city, the Patna Municipal Corporation started Socially Smart City Initiative in partnership with UNFPA. The project’s main focus is on issues like, transforming lives of sanitation workers by addressing health hazards and work safety issues, instilling transformational leadership and access to amenities and services in slum areas to change the lives of women and children belonging to the sanitation worker community.

The highlights of the project are:
Under the initiative taken, 613 workers have been trained till now. To create awareness on gender based violence (GBV) and prevent GBV and child marriages in slum areas 18 adolescent groups were created. Reproductive health and family planning are the most neglected issues among women workers. For this, 20 health workers reached out to 1,161 women sanitation workers and explained them the importance of reproductive health and family planning.
Centre for public policy and good governance:
A roadmap for Sustainable Growth in Uttarakhand

A sustainable future is not imagined, it is built and Sustainable Development Goals are the building blocks for it.

The SDGs call for renewed efforts to make institutions transparent and accountable and to support participatory decision-making. For effective implementation of the 2030 Agenda, mobilising and equipping public institutions is of utmost importance. Government and the other involved organisations and agencies have to work in coordination and transparency to achieve the goals as planned.

The Sustainable Development Goals Coordination Centres (SDGCCs) are set up to conceptualise and implement initiatives that help in achieving the SDGs in states. SDGCCs are built on five pillars which include awareness and capacity building of stakeholders around SDG vision, integrate planning and implementation, localise SDGs, mobilise resources and partners to meet unprecedented need and the monitoring and evaluation of the progress. In India, the SDGCCs are established in five states, Haryana, Uttarakhand, Nagaland, Punjab and Karnataka.

One such SDGCC was established in Uttarakhand to recognise bottlenecks of the state’s growth approach and develop a roadmap for holistic and sustainable development, the Centre for Public Policy and Good Governance (CPPGG). Uttarakhand has been making progress over the years. The Sustainable Development Goals are an opportunity for the state to amplify this growth. To achieve the SDGs, the State Government has developed its vision document and requisite implementation strategies. The state is famous among the tourists for its hilly areas and beautiful environment.

The Government has recognised tourism, horticulture, medicinal and aromatic plants and small hydropower as potential growth drivers while IT and MSME have been recognised as enabling sectors. The state has come forward with policies to promote business-friendly environment, while to effectively implement the SDGs the state requires developing sectoral policies, bringing new capacities, identifying synergies, building partnerships and engaging in participatory decision-making.

Built with technical support from UNDP, CPPGG functions as a Think Tank/Services/Solution Provider to accelerate sustainable growth of Uttarakhand in governance and policy reforms. The centre is equipped with specialists engaged in providing policy and planning level support to various state departments on areas of livelihoods, climate change, training and capacity building, Management Information System (MIS), Monitoring and Evaluation (M and E) and disaster preparedness.

The focus of the centre is on reviewing policies, making recommendations to boost state’s economic growth, promoting sustainable technology-based solutions, strengthening data ecosystem of key departments and enhancing literacy. Similarly, emphasis is also laid on effective localisation and integration of SDGs at all levels of governmental planning and the centres serve as a hub for knowledge management.
Outcome 2: "By 2022, there is improved and more equitable access to, and utilisation of quality, affordable health, water and sanitation services."
Key Results on Health, Water and Sanitation

1. Provide Strategic Support for Priority Communicable Diseases targeted for Elimination/Control

- **Antimicrobial Resistance (AMR):** The Ministry of Health and Family Welfare (MoHFW) launched the National Action Plan on AMR in 2017 with the support of WHO. Following the launch, Kerala and Madhya Pradesh are developing their state action plans on AMR. With WHO support, the stakeholders from all sectors have jointly developed a One Health approach to manage AMR. It supported strengthening and standardisation of AMR surveillance networks in Maharashtra and Kerala.

- **Tuberculosis Control Programme:** WHO has supported the MoHFW in TB elimination efforts through its network of 70 TB consultants based across states and UTs. Rapid progress was made in reporting TB cases in 2019 with WHO support. Similar support was extended to the National TB Elimination Programme (NTEP) in adoption of newer evidence based guidelines for management of drug resistant TB. In November 2019, WHO also facilitated a Joint Monitoring Mission (JMM) of India’s Revised National TB Control Programme (RNTCP). It has now expanded its support to NTEP with 140 consultants. A policy framework for Latent TB infection (LTBI) is being finalised and models of care will be piloted.

- **Kala-azar:** WHO teams in four Kala-azar endemic states (Bihar, Uttar Pradesh, Jharkhand and West Bengal) have supported in the capacity building of state and district officials on the key components of Kala-azar elimination such as active case search, indoor residual spraying, diagnosis and case management. WHO undertook the first of its kind independent assessment of the Kala-azar Elimination Programme. The assessment noted a substantial improvement in programme implementation and identified last-mile challenges for elimination.

- **Leprosy:** WHO supported the National Leprosy Eradication Programme in planning, coordination, monitoring, supervision and capacity building in Bihar, Chhattisgarh, Jharkhand, Madhya Pradesh, Maharashtra, Odisha, Uttar Pradesh and West Bengal.

- **Lymphatic filariasis:** WHO team in eight high burden states (Bihar, Chhattisgarh, Uttar Pradesh, Madhya Pradesh, Jharkhand, Maharashtra, Odisha and West Bengal) supported the Directorate of National Vector Borne Disease Control Programme (NVBDCP) in an effort to eliminate Lymphatic Filariasis as a public health problem. The successful implementation of Mass Drug Administration in 135 of the 142 endemic districts in eight states was supported by WHO. Support was also provided in piloting of the new drug regimen IDA (Ivermectin, DEC and Albendazole) in four districts and further rolling out in 20 more districts.

- **Viral Hepatitis:** The MoHFW released the National Action Plan to Combat Viral Hepatitis in India with WHO support. Guidelines on the management of hepatitis B, and the web-based Monitoring and Evaluation portal for viral hepatitis diagnosis and management were also developed and released with WHO technical support.

- **Viral Research Diagnostic Labs:** Ten Viral Research Diagnostic Laboratories (VRDLs), laboratory network catered by DHR/ICMR, have been extensively trained in bio-safety and bio-security practices. As a preventive strategy for any public health emergency, Standard Operating Procedures (SOPs) and plans are in place to avail the services of these ten geographically widespread VRDLs. Through FAO support, capacities of 21 ICAR veterinary labs were strengthened on AMR surveillance and SOPs on antimicrobial susceptibility test finalised.

- **Rapid Response:** The MoHFW conducted five sub-national Ebola virus disease workshops with WHO support to train state Rapid Response Team (RRT) members, airport and port health officials, clinicians and administrators.

- **HIV/AIDS:** The UN Joint Team on AIDS (UNJTA) composed of UNICEF, UNDP, UNFPA, WHO, World Bank, ILO, UNODC, and UNESCO, works collectively under the UNAIDS leadership, at national level and in Gujarat, where it has focussed its assistance (2 million USD during 2018 and 2019) in support of the National HIV Strategic Plan 2017-2024, in partnership with NACO, SACS, civil society and networks of PLHIV and key populations (KP). Many innovative interventions undertaken in Gujarat State paved the way for national replications in other States.
Key results at national level

- The care and treatment division of NACO has been supported by WHO. SAATHI has finalised the training curriculum for blended clinical training of doctors in coordination with NACO. Validation of newer technology/methodology for HIV testing using CBNAAT (Cartridge Based Nucleic Acid Amplification Test) has been accomplished through National AIDS Research Institute (NARI).

- With UNICEF in lead, progress was registered in 2019, in the 95-95-95 EMTCT (Elimination of mother-to-child transmission of HIV and syphilis) targets. 97 per cent of mothers were registered for Antenatal Care (ANC), of which 78 per cent were tested for HIV (increased from 68 per cent in 2018). 66 per cent of the estimated HIV positive pregnant women received antiretroviral therapy. 65.7 per cent of primary health centres in the country provide HIV testing services, and community HIV testing is being established at Village Health, Sanitation and Nutrition Days (VHNSDs).

- With the assistance of UNICEF/UNAIDS/WHO, the results of 19 states sub-national validation of EMTCT 2020 exercises were published and disseminated to advise future programming. UNJTA advocated for the adoption of the district gap analysis, strengthening, and certification strategy to be implemented across the 15 high HIV burden states. Under the leadership of UNICEF, jointly with the UNJTA, a National Adolescent HIV consultation resulted in a joint response plan to address the critical barriers drafted with NACO, MoHFW, Department of Education, NCERT, states representative, partner agencies and CSO.

- With UNAIDS’ support, 160 Master Trainers (MTs) were trained to offer nationwide differentiated viral load testing.

- NACO is developing one national community monitoring tool with the UNAIDS Secretariat, based on successful models such as: a) WhatsApp networks developed by Civil Society Organisations, People Living with HIV (PLHIV) and other communities such Persons Who Inject Drugs (PWIDs), Female Sex Workers (FSWs) to ensure that stocks outs in HIV drugs and commodities are reported directly to NACO for prompt actions and immediate corrections; b) India’s Community Monitoring Systems, including the scorecard and other real-time monitoring systems set up by CSO, NGOs and other health programmes. HIV prevention: UNAIDS/WHO supported the final analysis of the data and the publication of the report on two pilot studies on pre-exposure prophylaxis (PrEP) among female sex workers (FSW).

- With World Bank support, the implementation of differentiated service packages for targeted interventions has covered 88% female sex workers (FSW), 73% men who have sex with men (MSM), 88% persons who inject drugs (PWID) and 61% transgenders as of September 2019.

- The WHO has supported research by NARI on the methodology of Key Populations Size Estimation (KPSE) in the virtual space and on the use of ACASI for self-reporting at the Integrated Counselling and Testing Centre (ICTC) through the National Institute of Cholera and Enteric Diseases (NICED) in Kolkata. In the same vein, UNAIDS supported experience sharing from Vietnam regarding the web based Respondent Driven Sampling and key population size estimation (KPSE).

- Key populations: With the support of UNDP, 22 States/UTs drafted HIV-Act rules to uphold the rights of people living with and affected by HIV, which were submitted to other line-departments for their inputs and vetting.

- UNRCO, UNAIDS, UNDP, and NITI Aayog have facilitated the dialogue with KPs and PLHIV on the “Leaving No One Behind” agenda, contributing to India’s Voluntary National Review to the UN on the SDGs progress.

- With UNDP and UNAIDS in the lead, the community partners developed a 5 years road map on advocacy priorities for LGBTTI persons. It also facilitated a white paper on three areas of cooperation between the UN and national/state level human rights mechanisms. UNDP supported India’s first LGBTI health research symposium.

- With WHO/UNAIDS in lead, the learnings from HIV and the interests of the communities have been brought to reflect on the UHC agenda, with input of PLHIV, women rights advocates and KPs in a national consultation.

- A National consultation with Police Training academies in the context of drug use and HIV was organised by NACO/UNAIDS/UNODC and the Bureau of Police Research and Development and Narcotics Control.
• Under UNAIDS Secretariat and WHO lead, a road map for Strategic Information systems strengthening was agreed, and key documents to support this roadmap were disseminated including “Newer methods of HIV surveillance and Estimations 2016-2018” and the “White paper for Key Populations size estimates”. Key steps towards a more modern and sustainable surveillance system were undertaken including more disaggregated epidemic estimations and projections, newer and more sustainable methods for surveillance, such as BSS lite, expanded HIV Sentinel Surveillance (HSS) in ANC and in prisons, and standardised programmatic mapping and size estimates for key populations; information systems are being integrated into a patient-centric one. Joint Implementation Review Missions were undertaken to strengthen the analysis of strategic information for decision making, in particular in the North East states which have seen a resurgence of the HIV epidemic.

• Under Fast-Track cities initiative, Mumbai developed a situation and response analysis, an advocacy document, and a plan of action. Similar processes were undertaken in Delhi: an HIV/AIDS situation and response analysis was conducted in 2018, and a City Action Plan was developed in 2019 with the support of the UNAIDS Secretariat.

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**Key results in Gujarat**

The UN Joint team took major measures to diagnose HIV in the state; health care workers were trained to integrate reproductive health services with HIV services. UN supported in the capacity building of health service providers and also sex workers which resulted in the registration of Community Based Organisations. Initiative was taken to address the discrimination and stigma related to HIV. Programmes were developed with the aim to create awareness in schools regarding HIV/AIDS prevention. For more information, refer to the figure:
Key results in Gujarat

WHO

01 Development of efficient models
- Development of e-module for ART to train health care workers
- Use of programme data to improve antiretroviral treatment outcomes
- Development of HIV differentiated care models
- Geo-Mapping of newly diagnosed HIV cases to identify high HIV burden geographies for targeted interventions and Operational research

UNICEF

02 Elimination of Mother-to-Child Transmission of HIV
- Scale-up of intervention in high HIV burden districts
- Increasing antenatal care in high HIV burden districts
- Data verification and validation
- Promoting prevention education and ART among children
- Improved access to HIV services by Adolescents

UNFPA

03 Capacity building of workforce
- Support to capacity building of health service providers to integrate reproductive health services with HIV services
- 972 service providers trained in 6 districts of Gujarat
- Capacity building of sex workers in 3 districts (Vadodara, Bhanwagar and Rajkot), resulted in the registration of Community Based Organisations (CBOs) in 2 districts
- In Vadodara, a CBO applied for targeted intervention

UNDP

04 Addressing the stigmas
- Roll-out of the HIV Act and rules to uphold the right of people living with and affected by HIV
- Establishment and functioning of Transgender Welfare Board
- Promotion of LGBTQI rights
- Address stigma and discrimination in society at large

UNESCO

05 Contributed to the roll-out of the School Health Programme
- 136 teachers from upper primary and secondary schools were trained in 33 districts
- Feedback from the pilot was shared with NCERT, and incorporated in final manual
- The manual will be used to train teachers from all the 1.5 million schools in the country

ILO

06 Creating awareness at workplace
- Implementation and promotion of VCT@work
- Address discrimination in the workplace including health care setting and other institutions depending on the Labour Ministry
- Access to information and HIV services by formal and informal workers in diamond and hospitality industry

UNODC

07 Improved service delivery
- Increased HIV/Tuberculosis/Hepatitis services delivery in prisons and other closed settings
- Strengthened harm reduction, and skill building in Opium Substitute Therapy (OST) delivery among health care and community workers

UNAIDS

08 Adapting new policies
- Focused on Advocacy, Coordination, Resource and Community Mobilisation, Planning, Monitoring, Strategic Information and Reporting
- Adopted new policies such as Pre-Exposure Prophylaxis, Self-testing and Integrated service delivery
2. Strengthen Comprehensive Primary Health Care towards integrated service provision

- **India Hypertension Control Initiative** - The key achievements of the WHO supported project includes:
  - Adoption of state-specific hypertension treatment protocols.
  - Registration and treatment of more than half million patients.
  - Networking with more than 1,000 government health facilities in 25 districts.
  - Improved drug logistics supply system.
  - Decentralised drug delivery through health and wellness centres (HWCs), health sub-centres and information systems.
  - Significantly increased proportion of hypertensive patients under control.

- **Tobacco control** - WHO supported the MoHFW in tobacco control activities such as:
  - Advocacy with influencers and evidence generation.
  - Setting up of tobacco testing laboratories.

- Development of operational and counselling guidelines for Tobacco Cessation Centres set up by the MoHFW in over 95% of the dental colleges of the country that will support government to provide affordable and accessible cessation services to 267 million tobacco users.

- **Legal Development Programme (LDP) and Road Safety Journalism Fellowship Programme (RSJFP):**
  - WHO India conducted programmes in collaboration with the Ministry of Road Transport and Highways and other partners to strengthen the capacity of legal professionals and journalists to advocate for better road safety policies.
  - LDP is advocating with selected states for the implementation of the new Act and framing of appropriate rules at the central and state levels.
  - RSJFP third-cohort contributed to improved coverage and quality of reporting on road crash injuries and fatalities, as well as in addressing structural and policy issues.

- **Public Health Surveillance:**
  - WHO’s National Polio Surveillance Project has now been rebranded as National Public Health Surveillance Project (NPSP), which now continues to support high-priority initiatives, such as Mission Indradhanush (MI), Intensified Mission Indradhanush (IMI), Measles and Rubella (MR) elimination campaigns among other public health initiatives of Government of India.
  - WHO along with partners, facilitated cascaded training of programme managers and health workers on head count surveys to identify missed children and micro planning.
  - WHO has been supporting the Government of India with preparedness assessment, monitoring and feedback mechanisms with more than 32,000 sessions and 135,000 children monitored during the activity.

- **Towards universalisation of health care:**
  WHO provided technical support to the MoHFW and National Health Agency on the two complementary components of Ayushman Bharat – PMJAY the world’s largest health insurance scheme that provides free health coverage to the bottom 40 per cent of the poor and Health and Wellness Centres that bring primary health care closer to people.

- **Research and evidence for universal health coverage:**
  WHO India coordinated and completed several activities on evidence generation, synthesis and dissemination for advancing universal health coverage (UHC) in India. The studies on PMJAY include ‘Enabling beneficiaries to access hospital care’, ‘Examining Claims Processes: Trust and Insurance Mode’ and ‘Improving hospital-based processes for effective implementation’. One of the PMJAY studies was adjudged best study by a high-level jury. Besides, on request of National Health Authority (NHA), WHO Country Office (WCO) completed detailed equity analysis of health expenditure data from 71st round of national sample survey organisation for the year 2013-14.

- **Adolescent health:**
  WHO adopted three of the ‘most left behind’ districts Siddharth Nagar (UP), Haridwar (Uttarakhand) and Gumla (Jharkhand) to strengthen the implementation of an adolescent health programme in the country by training. In 2020, one more district (Palghar) in Maharashtra has been adopted by WHO.
3. Contribute to improvement in care through the life course - Strengthening Continuum of Care including in Aspirational Districts

- Maternal and newborn health programme support focussed on sustaining progress towards universal coverage of essential maternal and newborn health services. Support also focussed on district and facility level mentoring at 50 UNICEF supported aspirational/high priority districts in 23 states and 14 UNFPA supported Aspirational Districts across 4 states.

- WHO supported the MoHFW in several initiatives for achieving safe motherhood with aim towards zero preventable maternal deaths by 2022. To further improve the country reporting and response towards maternal death, it supported the development of a software for improving maternal death reporting and real time monitoring of maternal deaths reporting and reviews. Further support was provided for compiling a best practices compendium on Quality Equity and Dignity (QED) learnings from the country. The MoHFW was also supported for completing a partner's mapping to develop a national resource pool for QED projects currently implemented in the country.

- WHO led the development of National Midwifery guidelines and facilitated consensus building on options for certification, regulation and career progression for midwifery practitioners in India. Support was also provided for initiation of training of the first batch of midwifery tutors. It initiated an in-depth multi-centric competency assessment, including the barriers and facilitators of midwifery care providers and tutors for provision of quality midwifery services in India.

- Technical support was provided by UNCT for developing the National technical guidelines on iron folic acid supplementation which was released by the Prime Minister as part of the Anaemia Free India campaign.

- WHO supported a rapid assessment of implementation and preparedness for large scale Early Childhood Development (ECD) programmes at national level. It also supported data analysis and feedback for Birth Defects Surveillance for improving newborn care.

- UNICEF supported the rollout of the LaQshya programme (Labour room Quality improvement Initiative) in 607 high case load facilities in 41 aspirational and 104 additional top priority districts across 23 states through technical assistance for facility-level quality assessment and improvement planning. It developed a web-based monitoring tool for LaQshya monitoring in 24 districts of Uttar Pradesh and piloted capacity building initiative on respectful maternity care.

- Evidence based care in medical education: UNFPA conducted capacity building workshops in 10 medical colleges, covering 207 medical facilities to strengthen evidence and rights based SRH care and teaching in medical colleges.

- Quality and access of maternal care: UNFPA facilitated quality review meetings in all 33 districts of Rajasthan and provided support to ensure operationalisation of delivery points in 3 districts, which led to 81% of the identified delivery points providing services. The MoHFW was supported to develop guidelines on Basic Emergency Obstetric services and operational guidelines for Health and Wellness Centres.

- WHO supported the documentation of best practices in post pregnancy family planning programme and its further expansion in order to promote state learning exchange for improving adoption of modern contraceptive methods.

- Home-based newborn and young child care programmes, including gender-responsive guidelines on care, rest and nutritional support was successfully initiated in all supported districts. 61,197 newborn (41 per cent females) received care at the Special New-Born Care Units (SNCLUs) in 2019; an increase of 28,960 compared to 2018 with a 10 per cent decline in mortality rate. The proportion of community referrals to SNCLUs increased to 11.1 per cent (10.7 per cent female) of total admitted newborn in 2019. Community and facility follow up of SNCL discharged newborns also showed a steady increase in 2019, reaching 26.9 per cent (26.5 per cent female) and 17.8% (17.1 per cent female) of all discharged.
UNICEF supported the development of training module and rolling-out of Mother and Child Protection (MCP) card and allowing 82 per cent of aspirational-districts distributing the cards to pregnant women. It also supported the roll-out of training on the Home-Based-Young-Child care (HBYC) programme, which proposes five additional home visits by the community health-workers beyond the first six weeks of life until 15 months. In 93 Aspirational Districts, 15 per cent of ASHAs were trained on HBYC.

In line with Ayushman Bharat, UNICEF developed and rolled out its Primary Healthcare roadmap that focusses on 41 Aspirational Districts in 17 states of the country. It is supporting the operationalisation of HWCs and has collaborated with other development agencies in training for a new cadre of community health officers (CHOs). UNFPA supported health department to streamline Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCHA) interventions in 11 aspirational districts in Rajasthan and Odisha.

Special New-born Care Units (SNCUs): UNICEF supported the analysis of SNCU online data. Detailed analysis of the SNCU online software data has shown steady improvement in various indicators like the use of antibiotics has gone down from 52% to 47%, and total scheduled follow-up has gone up from 21% to 23%. UNICEF worked with AIIMS-New Delhi and regional, medical colleges, centres of excellence, and the Neonatology Forum of India (NNF), the Indian Academy of Pediatrics (IAP), the Federation of Obstetric and Gynaecological Societies of India (FOGSI), and the Nationwide Quality of Care Network (NQOCN), to strengthen the mentoring of SNCUs through paediatricians, obstetricians, nurses for quality improvement, including using SNCU MIS data for action. Centres of Excellence for Kangaroo Mother Care have been established in 19/23 supported states, and KMC units are being scaled up across SNCUs at district hospitals. Home-based newborn and young child care programmes, including gender-responsive guidelines on the care and nutritional support, was successfully initiated in all supported districts. 1,061,197 newborn (41% females) received care at the SNCUs in 2019; an increase of 28,960 compared to 2018 with a 10% decline in mortality rate. The proportion of community referrals to SNCUs increased marginally from 11% in 2018 to 11.1% (10.7% female) of total admitted newborn in 2019. Community and facility follow-up of SNCU discharged newborns also showed a steady increase in 2019, reaching 26.9% and 17.8% of all discharged.

UNFPA supported the MoHFW for quality assurance in the roll-out of new contraceptives in 3 states (Rajasthan, Madhya Pradesh, and Odisha). Providers, programme managers and ASHAs were oriented across 20 districts on new contraceptives. Technical support was provided to improve the access and quality of family planning services in 14 priority / aspirational districts of 3 states. UNFPA continued to implement an intervention with chemists in 5 districts in 5 states by training and supporting 3,500 chemists to ensure the availability of contraceptives through the private sector. To mainstream youth friendliness in public health facilities, UNFPA built capacities of 32 service providers (doctors and nurses) in Chhatarpur district of Madhya Pradesh and provided technical support to the Government of Madhya Pradesh to develop a roadmap for family planning.

WHO Country Office for India, together with the MoHFW, started the SAMARTH initiative in July 2019. SAMARTH, focused in 50 of the Aspirational Districts, stands for Sustain-Accelerate-Mainstream Access to Reproductive Health Through Health-systems.

UNFPA provided technical support to improve the access and quality to Integrated Sexual and Reproductive Health (SRH) services focussing on family planning and maternal health in priority districts in 3 states. 28% of health facilities in 6 UNFPA priority districts are providing integrated SRH services (5 reversible contraceptives, safe abortions, 24x7 delivery services and Sexually Transmitted Infections (STI) services. It also facilitated the training of doctors in safe abortion services in Rajasthan. The Government of Rajasthan developed the service delivery guidelines for providers for common conditions that lead to hysterectomy with the support of UNFPA.

UNICEF's technical support has resulted in the development and roll-out of ANMOL Version 4 'Auxiliary Nurse Midwives Online' with improved features that lead to improving data reporting and monitoring systems. More than 24,000 tablets were provided (through GAVI) for the ANN's of Aspirational districts to accelerate ANMOL implementation across the country. The system was rolled out in 11 states, Andhra Pradesh, Telangana, Madhya Pradesh, Odisha, Chhattisgarh, Himachal Pradesh, Uttar Pradesh, Haryana, Karnataka, Chandigarh and Maharashtra with 131,498 ANM registered for use. UNICEF is supporting capacity building and refinement and upgradation of the application.
- **Social and Behavioural Change Communication (SBCC) for RMNCHA**: UNICEF engaged with national and state government health missions and its partners in planning and implementation of costed SBCC RMNCHA strategies and plans in 23 UNICEF programming states.

- **Adolescent Health**: WHO India highlighted the need to compile all adolescent data information and prepare a report on the status of adolescents in India to support the Ministry’s efforts to strengthen the monitoring and evaluation framework, address the data gaps and to synthesise available evidence to describe the current situation of adolescents. The concept of lab districts to strengthen adolescent health programming in India was developed by WHO and endorsed by the MoHFW and is being implemented in 10 districts.

- **Immunisation**: Immunisation is one of the key interventions to protect children against life threatening conditions, which are preventable. To achieve universal health coverage, Government of India in consultation with partners developed a comprehensive multi-year plan (CMYP) for 2018-2023 to guide Universal Immunisation Programme in the country.

- The success of the first four phases of Mission Indradhanush led the launch of Gram Swaraj Abhiyan and later Extended Gram Swaraj Abhiyan (EGSA) with technical support from WHO, UNICEF and partners. 33.9 million children and 8.7 million pregnant women were vaccinated during various rounds of Mission Indradhanush. Coverage Evaluation Survey (CES) conducted in 191 IMI districts indicates average 18.5% increase in full immunisation coverage (FTC) as compared to NFHS-4.

- WHO and UNICEF along with the development partners have supported the implementation of Mission Indradhanush. It has galvanised routine immunisation; however, the country is still far from reaching the Global Vaccine Action Plan (GVAP) goal of achieving full immunisation coverage of more than 90 percent. Support from WHO and UNICEF was provided for capacity building of government medical officers.

- WHO and UNICEF have supported the introduction of new vaccines such as Hib-containing pentavalent vaccine; IPV and Rotavirus vaccine have been introduced across the country. WHO and UNICEF have rolled out Pneumococcal Conjugate Vaccine (PCV) in Bihar, Haryana, Himachal Pradesh, Madhya Pradesh, Rajasthan and Uttar Pradesh. 50 percent birth cohort will be protected through PCV vaccine by Q-1 of 2020. As state initiatives, Human Papillomavirus Vaccine (HPV) against cervical cancer has been introduced in Sikkim and Typhoid Conjugate Vaccine (TCV) in Navi Mumbai Municipal Corporation.

- For strengthening the health systems, laboratory supported surveillance systems for diphtheria, pertussis and neonatal tetanus have been established in twelve states with support from WHO. A VPD laboratory network, comprising of seven laboratories across the country has been established. Phase-wise expansion is planned over the next 2-3 years.

- In alignment with ‘Roadmap for achieving and sustaining 90% Full Immunisation’, UNICEF supported in designing a special immunisation drive IMI-2.0 in 381 low performing districts to reach the unreached children and is supporting field-level implementation, demand generation, and activity monitoring.

- UNICEF supported 13 states in the development of tribal immunisation strategy and undertook a Tribal Immunisation-Needs-Assessment to understand the bottlenecks and challenges among the tribal populations. It also conducted the Coverage Evaluation Survey for providing insights on the status of various public health programmes, including immunisation. Also, states were supported in generating local data for local action using the Supportive-Supervision for Immunisation application and allowed to supervise more than 150,000 immunisation sessions.

- To address vaccine hesitancy challenges, WHO has supported Adverse Effects Following Immunisation (AEFI) causality assessment workshops in 36 States/Union Territories.

- India is committed to eliminate Measles and Rubella/Congenital Rubella Syndrome (CRS) by 2023 in line with regional goal. In alignment with this goal, India has rapidly accelerated efforts to intensify both Measles-Rubella (MR) immunisation and surveillance across the country. India, with support from WHO and UNICEF, developed a Measles Rubella strategic document to guide interventions in a phased manner. Two dose schedules of Measles vaccines have been replaced nationwide by rubella containing MR vaccine.
• World’s largest vaccination campaigns, against measles and rubella, through the wide age-range MR vaccination campaign completed in thirty-four states. WHO and UNICEF supported planning, capacity-building, cold-chain management, monitoring, and supervision of MR vaccination campaign against measles and rubella. More than 324 million children have been vaccinated with MR vaccine in these five states by the end of 2019. With support from WHO, laboratory-supported case-based MR surveillance has been established across the country. To further enhance the sensitivity, fever rash surveillance initiated in three states (Karnataka, Odisha and Madhya Pradesh). Sentinel-site CRS surveillance established at five locations in India for burden estimation by Indian Council of Medical Research (ICMR).

• India has established the Indian Expert Advisory group for Measles and Rubella (IEAG-MR) along with the National Veriﬁcation Committee (NVC). WHO has provided technical support for conducting meetings to review the progress and guide actions.

• UNICEF provided technical assistance in institutionalising the two apex centres for immunisation supply-chain management. More than 180 technicians were trained for repair and maintenance of cold-chain equipment. UNICEF supported six states in conducting their Effective-Vaccine-Management-Assessment on planning, training of assessors and ground assessment, followed by development and implementation of Improvement-Plan.

• In the framework of Polio-transition, with UNICEF advocacy and technical assistance, Social Mobilisation Network became primarily funded by the Government (70%) and expanded scope to RMNCHA.

• UNICEF supported ‘Intensiﬁed-Diarrhoea-Control-Fortnight’ for the sixth successive year with USD 9.9 million leveraged from the Government. It also supported planning, development of operational guidelines and supportive-supervision checklists and toolkit for capacity-building. The campaign launch against Pneumonia to address the peak season and the training of 118 State-Master-trainers on Pneumonia management was also supported by UNICEF.

• Social and Behavioural Change Communication for Immunisation: SBCC cells led the development of costing district communication plans and reached a level of 62% (107/172) district plans, there are still challenges in measuring the effectiveness of those plans to achieve and coverage of interventions. Significant progress was made towards the implementation of the BRIDGE programme. Against a target of 60% per cent MTs in 2019, 23 states and UTs have a pool of 7,760 MTs (96.91 per cent) trained with UNICEF’s support. While the low progress was observed, of the total 36 states, 21 states (17 UNICEF supported states and four non-UNICEF states) have managed to train 46.50 per cent (1,069,397) frontline workers on IPC skills with funding from the Health Ministry.

• UNICEF provided technical support to the Clean and Green health facility initiative of the MoHFW in Chhattisgarh and Gujarat States and development of suitable designs (including model designs for restructuring labour rooms) for all levels of facilities providing Maternal, Newborn and Child Health (MNCH) services. Subnational validation of the Elimination of Mother to Child transmission of HIV (EMTCT) including an assessment on gender and human rights was supported in 19 States. 78% of all pregnant mothers received HIV testing and 66% estimated HIV positive mothers were linked with ART therapy.

4. Support Government and Partners for the delivery of Safe Drinking Water and Safely Managed Sanitation services

Clean water, basic toilets and good hygiene practices are essential for the survival and development of people. In the year 2019, under Swachh Bharat Mission millions of people received household toilets for the first time in UNICEF supported districts. With the support of UNICEF significant campaigns were rolled out in villages. Training was provided to trainers on sanitation and water services. The emphasis was also laid on equity and gender mainstreaming at scale in sanitation programming. For more information, refer to the figure:
UNICEF works with Governments and partners to ensure that every person in India has access to clean water, basic toilets and practices good hygiene behaviours.

**Swachh Bharat Mission (SBM) 2019**

- Developed content of the SBM G phase II covering Open Defecation Free (ODF)-Sustainability and ODF+ (FSM, SLWM) programmes
- Budgetary allocation of more than $19 billion for rural sanitation by 2024
- Over 18 million people received access to household toilets
- 35,000 Gram Panchayats targeted to be oriented on child-friendly sanitation, 31,807 GPs oriented by 2019
- Developed and implemented SBCC plans for ODF achievement in 48 districts in 15 states
- Accelerated IEC expenditure in 29 districts in 7 states utilising more than 80% of IEC funds

**Access to safe drinking water and sanitation services**

**Gram Panchayats and Swachh Gaon**

- Extension of the SBM into a phase II up to December 2024
- Generated robust evidence leading to a further budgetary allocation of more than $19 billion for rural sanitation
- Large scale capacity development campaign to reach all 250,000 GPs of India
- Hands-on support in 14 states and 53 districts, for the roll-out and monitoring of Open Defecation Elimination Plans (ODEP)
- Retrofitting of poorly built toilets
- Provision of toilets to all - leaving no one behind
- Developed and implemented the Swachh and Sujalgaon campaign, targeting over 750,000 Gram panchayat (GP) functionaries
- Developed all training material and plans
- Trained 2,650 state master trainers on sanitation and water services

**Gender Mainstreaming**

- Engaged with women collectives (SHG) at the panchayat level in Chhattisgarh
- Advocated with the Jharkhand government, to approve incentives pattern for 29,000 Jal-sahiyas (Women Swachhagrahi)
- 330 master trainers (200 male and 130 female) were trained on WASH services in Tribal Areas in Andhra Pradesh
- These master trainers will further train 60,000 grassroots functionaries from tribal villages
• **Post Disaster WASH needs:** In response to the severe floods which affected Kerala in 2018, UNICEF provided technical support to the Kerala Suchitiwa Mission and Local Self Government Department (LSGD), including the construction of two faecal sludge treatment plants and associated training, developing business models and operational guidelines for their Operation and Maintenance (O and M). Identification and piloting of appropriate toilet technologies for flood risk areas are ongoing.

• **Jal Jeevan Mission (JJM) and Jal Shakti Abhiyan (JSA):** UNICEF supported the development of the JJM guidelines, capacity development initiatives reaching all 250,000 GPs of India and the roll-out of a first of its kind water conservation and environmental sustainability campaign the Jal Shakti Abhiyan (JSA). This contributed to reaching 420,000 additional people with access to safe drinking water and 65,182,205 people through JSA in 257 water-stressed districts. The proportion of the population using a primary drinking water supply had a target of 90% in 2019, it has reached 89%, as per the government MIS. UNICEF has supported in the design of the programme through being part of JJM task force, developing operational guidelines ensuring that the components of safely managed water services are incorporated, with a specific focus on women participation for example, 50% members of village water and sanitation committee (VWSC)/paani samiti/ water user group should be women, who have been mandated to collect water user fee from the households. It also supported the design and roll-out of JSA (water conservation/management campaign) and the Swajal initiative, precursor to JJM. UNICEF leveraged $558 million from government, development partners and CSRs, technical support-developing guidelines, capacity building and monitoring tools for Swajal, JSA and JJM. $200 million was leveraged at states through pilots, evidence generation and technical support for scale up by governments, convening partnerships with DPs and CSR. UNICEF supported development of capacity building packages for JSA, Swajal and NRDWP, focussing on source sustainability, water safety, and planning. State offices extended this support to 15 states and 50 districts.

• **Integrated Water Management:** UNICEF contributed to the strengthening of integrated water management. For instance, Bihar has amalgamated JJM and JSA under the banner of CM flagship Jal Jeevan Hariyali programme; Odisha has implemented Basudha targeting community-managed water safety and developed a dedicated state policy. In the context of the JSA, UNICEF supported campaign and cross-learning through existing documentation, notably in Madhya Pradesh, Telangana and Tamil Nadu, and supported innovative approaches such as Gujarat’s water budgeting module rolled out in schools and Maharashtra’s risk-informed water management guidance. As a result, an estimated 65,182,205 people were reached through the outreach activities across the country, also leading to the construction/rehabilitation of 30 million facilities.

• **Water quality monitoring:** UNICEF supported the Ministry for the revision of the Uniform Drinking Water Protocol on water quality monitoring and surveillance, including a ranking system for water quality laboratories at the state and district levels. This contributed to improving performances of 2,298 water quality laboratories at various levels to promote more effective water safety planning and ensure that data communities can take preventive action against water contamination issues.

• **WASH in Schools and Health Care Facilities (HCF):** With UNICEF support, key achievements include: (1) significant fund leveraging in states for WASH in Schools resulting in 69,192 schools provided with WASH package; (2) scaling-up capacity development for WASH in HCFs led to 53% achievement in terms of WASH functionality and infection prevention and control parameters at delivery points in UNICEF supported HPDs; (3) development of child-friendly WASH in Anganwadi guidelines with advocacy and communication framework, is under progress; (4) technical assistance for Menstrual Hygiene Management programming across 10 States led to the provision of MHM friendly WASH facilities and counselling services in 14,416 schools.

• **School WASH Programming:** To support School WASH Programming, in partnership with Unilever, UNICEF supported the identification of 85,000 most vulnerable schools and developed a harmonised, comprehensive training package, prioritising handwashing with soap and O and M of WASH facilities. Under this partnership, UNICEF support for policy advocacy in states contributed to significant resources leveraged for School WASH from state governments and corporates. In Assam, INR 375 million were allocated for safe drinking water and INR 1.7 million for the functionality of girls’ toilets. In Madhya Pradesh, INR 534 million were allocated for new gender-separated toilets and INR 1 billion for O and M. UNICEF contributed to foster innovation for supporting school WASH programming; for instance, Gujarat, UP and Bihar started benchmarking of WASH in all Govt. schools; in Telangana, two persons per school have been recruited for cleaning of WASH facilities across all rural schools; in Gujarat, UP and Jharkhand, online monitoring apps are being used for WinS monitoring and capacity development. For MHM programming, UNICEF supported coordination platforms through inter-ministerial and inter-state dialogues with the participation of 12 States and four nodal ministries. On this basis, UNICEF supported the development and launch of State level MHM strategy in Bihar, Madhya Pradesh, West Bengal and Chhattisgarh.
• **WASH in Health Care Facilities**: At the operational level, Andhra Pradesh, Gujarat, Jharkhand are implementing State costed MHM action plan through interdepartmental convergence. With regards to WASH in Health care facilities, as a part of the government’s labour room strengthening initiative -LaQsya, UNICEF focussed its technical assistance on capacity development at the national level and in 12 states focusing on infection prevention and control. The MoHFW was further supported in development of innovative plans and guidelines for clean and green HCFs (WASH in HCF environmental sustainability) and model costed action plans for labour rooms incorporating WASH. Andhra Pradesh and Telangana initiated online monitoring of WinHCF to inform senior-level officials on a real-time basis. WinHCF resource persons were trained in Odisha (150), Bihar (152), Chhattisgarh (230), MP (388 males and 362 females) and Rajasthan (462) to develop and roll-out facility improvement plans. In MP INR 35.6 million have been leveraged from the health department for WinHCF.

• **WASH in Anganwadi Centres (AWCs)**: Programming on WASH in AWCs included support in development and implementation of district costed action plans in more than 20 districts across the country, besides capacity development support across most states. In Maharashtra advocacy by UNICEF led to the inclusion of child-friendly WASH packages in the ongoing tendering.

• **Convergent planning**: Convergent planning with health (NHM), nutrition (Integrated Child Development Services (ICDS), POSHAN), education flagships and state schemes in Andhra Pradesh, Assam, Bihar, Chhattisgarh, Gujarat, Odisha and Maharashtra integrated WASH messages amplifying outreach. Plans were effectively implemented at a national level and states of Bihar, Chhattisgarh, Gujarat, Madhya Pradesh, Uttar Pradesh, West Bengal, Telangana and Tamil Nadu. Kerala Suchitwa Mission supported the development of WASH messages post-disaster across the state.

• **Social and Behavioural Change Communication (SBCC)**: SBCC components integrated within Sujal and Swachh Gaon training package of Ministry of Jal Shakti (MoJS). Skilled Master Trainers in State and District Management Units created and engaged using IEC. About 12 per cent of master trainers and 25 per cent of motivators trained in Madhya Pradesh and Rajasthan were women. PRIs, Swachhagrihis, Nigriy Sankirtan Committees, women SHGs and youth with enhanced capacities on WASH formed the social capital to engage with communities, promote and monitor ODF sustainability.

• **Advocacy**: UNICEF’s advocacy contributed to State directives on incentivising trainers and motivators using IEC funds in Assam, Chhattisgarh, Jharkhand, Gujarat, Maharashtra, Madhya Pradesh, Odisha, and Tamil Nadu. MoJS’s Swachhata hi Sewa, Swachh Shakti, Jal Shakti Abhiyan, Swachhata Mahotsav campaigns supported by UNICEF strengthened the SWM Jan Andolan. Behaviour Change Communication (BCC) strategies developed by UNICEF for SBM was documented for scaleup, replication and released by the Hon’ble President of India.

5. Generate quality data for decision making and improved programme support

• **Integrated Health Information Platform (IHIP)**: IHIP provides a single operating picture of India’s health data and information, including public health surveillance for 33 major outbreak-prone diseases. Over 275,000 user accounts have been provided to the MoHFW, covering over 200,000 health facilities. By December 2019, over 4.6 million case-based patient records have been documented in the platform.

• **Electronic Vaccine Intelligence Network (eVIN)**: UNDP introduced eVIN that has successfully digitised the vaccine and cold chain supply system. During the year 2019, implementation of eVIN reached 27 states, 645 districts with a scale up plan to the entire country by 2020. eVIN is a disruptive innovation to improve India’s immunisation coverage through efficient distribution and timely availability of vaccines to all children across government health centres thus reaching out to the world’s largest birth cohort of 27 million children each year.

• **Health Management Information System (HMIS)**: The HMIS Online Portal connects over 220,000 health facilities in sharing over 475 health indicators through this portal. This digital initiative under NHM was launched in Chandigarh, Karnataka, Punjab, Tripura and Uttar Pradesh with technical support from WCO. A sharper focus on patient safety and improving quality of health services: India was selected as one of the four countries globally to implement Global Patient Safety Collaborative to strengthen government leadership, capacity building and research capacity.
Reducing the distance between Health Care Centres and People

“I used to spend nearly Rs. 500 every month on medicines. Now, I don't spend any money on medicines, since I get medicines free from Magurgoan Sub Centre- Health and Wellness Centre.”

Majoni Bora, a 63-years-old diabetic is a resident of Magurgoan village in Nagaon district Assam. Manjoni had been suffering from high blood pressure for years which makes medication a crucial part of her daily life. A lifelong dependency on medicines and the burden of medical bills made matters worse for Manjoni. This is when she met Uma Devi, the Community Health Officer (CHO) of Magurgoan Sub Centre-Health and Wellness Centre (SC-HWC). She counselled Manjoni on how to manage both blood pressure (BP) and diabetes through lifestyle changes and by taking medicines regularly. Since then Manjoni has been following the advice given to her and has been visiting the SC-HWC to get her BP and random blood sugar checked. Her monthly medicines are also refilled by the SC-HWC.

Assam has very high burden of maternal and infant mortality rates coupled with increasing burden of non-communicable diseases. The state has 312 million population (census 2011) and also has seven Aspirational Districts out of total 33 districts of state, Nagaon being one of them.

“I used to spend nearly Rs.500 every month on medicines. Now I don't spend any more money on medicines, since I get medicines free from Magurgoan Sub Centre-Health and Wellness Centre,” said Ms. Bora. She even mentioned that health services are being rendered very close to her door-step, which has given her a new lease of life. She now creates awareness among community members to get their check up at the Magurgoan Sub Centre- Health and Wellness Centre.

Since 2019, WHO India is supporting the Government of Assam in strengthening the health system and to ensure successful roll-out of Comprehensive Primary Health Care (CPHC) through functionalisation of Health and Wellness Centre (HWC). Under the initiative, access to routine health services has improved through decentralisation of the services at the Health and Wellness Centres (HWCs).

This has led to a significant improvement in regular patient follow-ups at HWCs and patient compliance with their medications.
Trained foot-soldiers of India's healthcare system stir up a silent revolution

“Back then, there were a lot of home deliveries. After years of efforts, the numbers of institutional deliveries have gone up. Now women seek us out whenever they have any problem and ask us when their health check-up is due.”

Neelam Devi, a mother of four including a new born, was four months pregnant but was completely unaware of it. She came to know about it when Sulakshana Devi, an ASHA visited her for a check-up. ASHA or Accredited Social Health Activist form part of the triple A’s – including Anganwadi Workers (AWW) and Auxiliary Nurse Midwives (ANM) – that receive capacity building through UNICEF- IKEA partnership. These health workers work with communities at the grassroots level, particularly in the rural setting. Their role is crucial in giving the health indices an upward swing.

Sulakshana Devi advised Neelam to visit the health camp under the Pradhan Mantri Surakshit Matritya Abhiyan (PMSMA) that offers free of cost medical care to pregnant women. An ultrasound revealed that Neelam’s baby was in a breach position (abnormal positioning of foetus in uterus), which was a high-risk pregnancy case. Sulakshana Devi gave Neelam Iron and Calcium tablets after the fifth month and recommended her to turning on one side while getting up from the bed because of the foetal position. Neelam was also guided about nutritious diet and hygiene for the safe and healthy arrival of the baby.

Similarly, Jameela Khatun, an ASHA and AWW gave health mantras to Manisha Devi of Beltoi, a mother to seven-month old baby boy, Ravi Kishan. Manisha learned that it is important to wash hands with soap. She used to wash hands with ash, as many people in villages do.

Manisha and her mother-in-law and sister-in-law would listen to the ASHA or the AWW whenever they would come for home visit. ASHA have told them about the importance of proper diet, correct posture during breastfeeding and proper hygiene practices.

Just like Manisha, Tabassum, a 20-year-old of the Alampur village gives credit to the ASHA and the AWW for helping her through her pregnancy comfortably and delivering a healthy baby.

Tabassum, on Village Health and Nutrition Day (VHND) that is held on a designated date every month, learnt that she has to breastfeed the baby for the first six months and intake nutritious food for her and baby’s good health. In every VHND, AWWs, ANMs and ASHAs offer health services which include mental health, child health, nutrition, sanitation and family planning.

Neelam, Manisha and Tabassum, all three of them are strangers to one another but a common thread holds them together- the positive role of the ANM, ASHA and AWW in their lives. Sulakshana Devi, who started working as an ASHA in 2012, said, “Back then, there were a lot of home deliveries. After years of efforts, the numbers of institutional deliveries have gone up. Now women seek us out whenever they have any problem and ask us when their health check-up is due. They are more aware of health and hygiene.”
Outcome 3: "By 2022, more children, young people, and adults, especially those from vulnerable groups, enjoy access to quality learning for all levels of education."
Key Results in Education and Employability

1. Contribute to improve the quality of education

- Out of School Children:
  - Approximately 540,000 out-of-school children (287,000 boys and 253,000 girls) have been mainstreamed in schools.
  - Specialised training programmes in eight states (Uttar Pradesh, Bihar, Rajasthan, Madhya Pradesh, West Bengal, Assam, Chhattisgarh and Jharkhand) were conducted on the specific barriers faced by girls and boys in partnership with the Department of Education.
  - In UP, capacity building support for improved identification led to 10 times more out-of-school children identified in 2019 compared with 2018 and approximately 96 per cent of children being mainstreamed.
  - In UP, Bihar and West Bengal, support has been provided to digitise data on out-of-school children towards better monitoring and follow up. In Chhattisgarh, a mobile application for real-time monitoring was piloted in one district, resulted in a 3 per cent increase in student attendance over three months.
  - Officials from education departments were trained on SBCC with a gender lens in Assam, Bihar, Odisha, Uttar Pradesh and West Bengal to improve regular attendance and girl’s education.
  - In UP, broadcast of SMC Radio (Jan Pahal Radio) sustained and evaluated, leading to leveraging of USD 10,142,857 for community mobilisation related interventions for 2019-20, 66% more than the previous year.

- Education Management Information System: At the national level, the UN continued to provide technical support in strengthening the Education Management Information System (EMIS)/Unified District Information System (UDISE) for improved quality, coverage and use of data and evidence, in education planning. Technical inputs were provided to the Ministry of Human Resource Development (MHRD) in the finalisation of the new UDISE plus Data Capturing Format (DCF).

- Performance Grading Index: The Ministry of Human Resource Development was provided support to prepare evidence-based education sector plans and interventions for 2019-20 based on indicator status from PGI for all 36 states and UTs in the country. Technical support was extended to eight State Governments in the proposal of ‘Samagra Shiksha’ plans. Supported NCERT in the revision of the data visualisation tool by including grade 10 learning data to support states in proposing and advocating for appropriate interventions in state plans.

- Inclusive Education: The UN continued its support for enabling an effective coordination mechanism nationally to promote inclusive education. Additional extra-budgetary resources were raised, and a national report titled ‘N for Nose - State of the Education Report for India 2019: Children with Disabilities’ developed. The national launch of the study led the national and state-level interest to promote the need for inclusive education within mainstream educational systems in India.

- Early Childhood Education (ECE):
  - Technical support at the national and state level has led to positive developments in the implementation of the Early Childhood Education programme across 14 states. At the national level development of an e-learning course (21 modules) on themes related to ECE has been completed and is available for use.
  - Tools for assessing the quality of ECE programme and school readiness levels of children are standardised and available to use for measuring and monitoring the quality of the ECE programmes and progress of children towards attaining school readiness.
  - Training resources for master trainers, quality assessment tools, and child assessment cards have been developed.
  - State capacity was built through training 8,000 (60% women) of members from state and district resource group to enhance the professional development of 539,000 AWW to implement ECE programme in 256 districts in 9 states, targeting 7.2 million children.
  - In 33 focus districts across 14 states, 30% of Anganwadi centres are implementing ECE programme while in 5 states, Andhra Pradesh, Jharkhand, Karnataka, Madhya Pradesh, and Telangana, processes to set up model centres/demonstration sites have been initiated.
  - In Bihar, Chhattisgarh, Gujarat and Uttar Pradesh, state and district leadership of ICDS were trained including for establishing model centres to improve understanding on ECE.
  - Digital monitoring tools are being used to improve programme monitoring and to strengthen supportive supervision in Assam, Bihar, Gujarat, Maharashtra, Rajasthan, Uttar Pradesh and West Bengal, which includes providing onsite support to AWW. Efforts to strengthen the quality of ECE programme include the use of child assessment cards and implementation of Early Childhood Care and Education (ECCE) Day guidelines were supported.
• **Responsive parenting:** Furthermore, in Anganwadi Centres (AWCs) in Maharashtra and Rajasthan, 5,000 AWWs (all female) are counselling 100,000 parents to adopt responsive parenting practices to support the learning of children at home. Through the capacity building of AWWs and onsite support during counselling sessions, AWWs have successfully encouraged parents to implement learning activities using materials available at home.

• **Education for Sustainable Development:** Quality, gender-responsive pre-service and ongoing professional development training were strengthened through face-to-face workshops and online trainings using ICTs in partnership with NCERT and MGIEP. Thus, several teachers, school heads and principals, educators and policymakers, learned to integrate Education for Sustainable Development (ESD), in national policies, curricula and teacher education and student assessments at all levels.

• **Teacher Education:** Technical assistance was provided to 16 states to train education institutions on various aspects especially in curriculum reviews, capacity development of teacher educators, mentoring, academic leadership and ICT led supportive supervision to improve foundational and grade-appropriate learning skills. The capacity of 10,313 teacher educators and educational leaders (30% female) enhanced to deliver child-centred pedagogy and to improve equitable learning outcomes. Technical support was provided to NCERT in use of National Achievement Survey data for the mega teacher professional development (NISHTHA) initiated by MHRD to train 4.2 million teachers and school leaders (nearly 60% female).

• **Learning Assessments:** Continued technical support was provided to 15 states in enhancing systemic capacity to design and implement high quality large-scale and school-based learning assessments. The capacity of around 900 (35% female) teacher educators, curriculum and assessment experts enhanced in development of state assessment roadmaps, designing assessment programmes with appropriate quality standards, development of high-quality competency-based assessment instruments and item banks to promote 21st-century skills and grade-appropriate learning.

### 2. Support Institutionalisation of lifeskills and career guidance

• **Bullying and gender-based violence:** 60,000 government schools in Tamil Nadu are directed to be more inclusive and prevent any bullying and harassment of students based on sexual orientation and gender identity. IEC materials and training tools developed for teachers and students on prevention of School-Related Gender-Based Violence developed in collaboration with NCERT, and disseminated in 38,000 schools in Gujarat, reaching out to 3.85 million students.

• **Life Skills and Adolescence Education:** The UN led the design, implementation and institutionalisation of large scale, system-owned adolescence education (AE)/ life skills education (LSE) initiatives that are contextualised versions of comprehensive sexuality education.

  o With UNFPA’s support, adolescence education has been institutionalised in the three national school systems/boards, including all the 661 Jawahar Navodaya Vidyalayas (JNVs), 1,222 Kendriya Vidyalayas (KVs) as a stand-alone subject and integrated into select scholastic subjects at the secondary level in the National Open School.
  
  o Life skills framework developed by UNICEF was used in state adolescent empowerment programmes, reaching to more than 200,000 adolescents (51 per cent girls) across 13 states. Life skills content and supportive pedagogy was developed for 5 million teachers in 10 states to use with adolescents in-school and out-of-school. UNICEF convened collaboration amongst academic institutions, Department of Education and CSOs on life skills capacity building. Five states (Assam, Jharkhand, MP, Rajasthan and UP) initiated measurement of life skills for elementary students and Assam for out-of-school adolescents to move from input approach to the measurement of impact.

• **Life skills for Adolescents from marginalised communities:** UNFPA worked through approximately 12,500 educational institutions for adolescents from a more disadvantaged background, including tribal, rural, poor and enrolled in Islamic religious schools. These include 9,228 secondary and senior secondary schools affiliated to the Madhya Pradesh State Education Board in the entire state, 1,000 tribal residential schools across all the 30 districts in Odisha, 373 madrasas (Islamic Religious Schools) across two districts in Bihar. Contextualised programme design; strategic partnerships and advocacy have motivated the government to commit financial resources of US$ 3 million, to UNFPA, to upscale the intervention to reach all the 2,572 Madrasas in the entire state.
• **Health and well-being of adolescents:**
  - In collaboration with NCERT, UNFPA invested in the development of resource materials for the Comprehensive School Health Programme (a joint programme between the Ministries of Health and Education) for the Ayushman Bharat Initiative of the Government of India.
  - Development of an e-course for wellness Ambassadors (teachers) has also been initiated.
  - Partnerships strengthened with State Council of Educational Research and Training (SCERTs), Gujarat State AIDS Control Society (GSACS) and Tamil Nadu State AIDS Control Society (TANSACS) for implementation of the School Health programme in Tamil Nadu and Gujarat.
  - In the tribal residential schools in Odisha, UNFPA has facilitated effective convergence with the National Adolescent Health (RKS) and National Child Health (RBSK) programmes of the MoHFW to provide services to adolescents that include health screening, anaemia detection and management, assisted by 220 ANMs who are assigned to these schools.
  - In collaboration with NCERT and SCERTs, continued technical support of UNESCO was provided to state School Education Department of Tamil Nadu and Gujarat for building the capacity of nodal teachers to roll out school health programme under Ayushman Bharat. Teachers’ training manual on health and well-being translated into Tamil and Gujarati. In Gujarat, the orientation of District Education Officers and DIET principals undertaken from all 33 districts. UNESCO contributed to the implementation of the School Health Programme in Gujarat as part of the Unified Budget, Results and Accountability Framework (UBRAF).
  - In January 2019, UNESCO, in collaboration with NCERT, piloted the School Health Programme teachers training among 130 teachers from upper primary and secondary schools in 33 districts of Gujarat. The feedback from the above initiative was shared with NCERT and will be used to train teachers from all the 1.5 million schools in the country.
  - In June 2019, an Agreement of Cooperation was signed between UNESCO and the Department of School Education, Tamil Nadu. Key activities entail the development of school health curricula and imparting knowledge through health and wellness ambassadors in classrooms. Through successful advocacy, and as a measure of success and high level of commitment, the School Education Department, Government of Tamil Nadu earmarked 2.3 million USD to roll-out the School Health Programme. This is a significant achievement for UNESCO to strengthen work on CSE in a southern state of India.

• **Career guidance and employability:** Career portal launched by UNICEF in five states to assist 10.26 million secondary school students (58 per cent girls) in making informed educational and occupational choices. UNFPA has supported 133 industrial training institutes in Madhya Pradesh benefitting 10,300 young people (3,200 girls and 7,100 boys) to integrate life skills to enhance the employability of young people.

• **School Management Committees (SMCs):** SMC training was supported to strengthen community participation in school management across all states. In Gujarat, UNICEF advocacy resulted in state agreement on incremental and continuous learning modules for SMCs. In Assam, MP, Rajasthan and Bihar, comprehensive packages developed on responsibilities and roles of SMCs in monitoring and supervision of school activities, tracking learning outcomes and enhancing community interface.
Dream beyond the barriers of disabilities

“My disabled child’s life has changed. He goes to school daily and is happy. The children in the school no longer make fun of him, in fact a few help him to do work and are ready to sit with him.”

Ketu, a child with cerebral palsy, belongs to village Pachkhora in Asoha cluster in Chitrakoot district. His father is a farmer and mother does household chores. Ketu has four sisters and recently he lost his only brother in the family. His father is the sole breadwinner and earns Rs. 24,000 annually, with which he looks after his family.

A survey was conducted in the year 2019 by the Christian Blind Mission (CBM)-Prajayatna to identify children with disabilities using the State Council of Educational Research and Training checklist. It was then that the team came to know about Ketu and his disability. Along with Ketu, two more children with disabilities were identified in the village. These two children were attending the school but Ketu wasn’t. His parents were reluctant to send him to school.

The mother said, “Something is wrong with our son from birth itself, he cannot speak at all, drools continuously and has a problem in walking and in the past one year he has been suffering from fits too.” It took number of visits and discussion for the facilitator to convince Ketu’s parents to send him to school.

Now the parents are happy to see the changes in their child. The father said, “My disabled child’s life has changed. Imagine he goes to school daily and is happy. The children in the school no longer make fun of him, in fact a few help him to do work and are ready to sit with him. His behaviour has improved and he wants to go to school, while at the beginning we had to force him.”

The parents also shared, “there are so many things that helped my son and us too. The repeated visits by Sir (CBM-Prajayatna facilitator) played a crucial role in us finally agreeing to enrol him. Our certification and medical camps, the tricycle given to us to bring him to school, and the teacher’s help has greatly supported us to jointly decide what to do for him. Now even the attitude of the other children has changed towards him. He has made friends in the school and some children help him in doing things in class”.
Bihar Madrasa

“Like most people, I also had the firm belief that education for girls means only religious education, as the girls have to become homemakers. My perspective changed after the training where we learnt that the first instruction from Allah to mankind was not prayer or fasting but “Iqra” meaning to read.”

Muhammad Israil Aftab is the Principal at Madrasa Miftahul Uloom in a remote village in Katihar district where most of the students are underprivileged female students. These girls had been receiving religious education under strict rules of seclusion so far. Bringing in change, this is one of the Madrasas that has initiated a gender transformative Life Skills Education Programme called Taleem-I Naubaalighan, which is the result of a partnership between UNFPA, the Bihar State Madrasa Education Board and the Department of Education, Government of Bihar.

The programme is being implemented across 373 middle level Madrasas in the districts of Purnia and Katihar. As of now 37,000 adolescents and over 1,000 teachers have benefitted from the program. The focus of the programme is on issues such as health and well-being, active and responsible citizenship, gender etc. The modules produced are a unique blend of contemporary issues facing adolescents that are contextualised within the framework of the Quran and the Hadith.

Aftab is not only helping the girls to excel in academics but also in sports. A sports programme was organised for girls on the International Day of Girl Child in October where the girls played sports like football and cricket. “This was not easy as there was a lot of resentment. However, we were able to pacify the parents, many of whom came to watch the sports and after watching the events as well as the joy it gave to their daughters, sports has become a regular feature in our Madrasa”, said Aftab.

The programme will now be scaled up across Bihar from 2020.
Early learning at Anganwadi

“I was initially apprehensive about sending him to the Anganwadi centre,” says Johnson’s mother, Vinita Devi.

Johnson, a child with disabilities, had often become centre of uncalled attention and people wouldn’t allow their children to play with him because they saw him as a different one. But Johnson turned into a happy and confident boy when he started attending Anganwadi. Vinita Devi was hesitant as she knew that the cold stares of people would follow his son even in the Anganwadi.

Johnson’s mother knew Sunaina, the Anganwadi worker, as her three children had earlier attended the same Anganwadi centre. For the first two-three months Vinita accompanied Johnson to the centre. He used to cry in the very beginning but his everyday visit to the centre made him become friend with other kids. He started interacting with others and also participated in the activities that the teacher taught and now he enjoys his time at the centre.

Johnson’s case required inclusion and overall development, which are essential components of the Early Childhood Care and Education (ECCE) curriculum that has been introduced in Anganwadi centres. ECCE, developed with the help of UNICEF, and supported by the IKEA Foundation, aims to develop a child’s emotional, social, and physical needs for a firm, wide-ranging foundation and attaining full potential for lifelong well-being.

“It is a scientifically proven fact that 90 per cent of a child’s brain development takes place by the time he or she is six years of age,” said Shweta Sahay, ECCE in-charge under Integrated Child Development Services (ICDS), Bihar. India has 150 million children in this age group. In 2013 the government formed a policy on ECCE and in 2015 ECCE developed a theme-based curriculum which in addition encourages learning abilities, development of fine motor skills, cognitive ability and language.

Anupriya, a five-year-old girl who cannot see also attends the same centre that Johnson does. “Anupriya is slower than others because she cannot see, but she is learning a lot. She sings with the others and listens to stories. As a mother, I am delighted”, says Anupriya’s mother. The mother has witnessed how the centre has developed. Earlier, when her elder daughter used to attend the same centre, she would sing songs, have lunch and come back home but now there are so many different activities for the children to indulge in.

Sunaina Devi, the Anganwadi worker of the centre that Johnson and Anupriya attend, has played a major role in motivating parents to send their children to the centre. She feels that the introduction of the new curriculum has widened the scope of her work and she feels supported and motivated.

Kalawati Devi, another Anganwadi worker in a different centre attended the four days training on the ECCE curriculum. She said, “In the training, we had to let go of all our inhibitions and pretend to be children ourselves. So we sat like them, had our nails checked for hygiene and did all kinds of activities like hopping over swinging ropes, painting, walking on crooked lines, and creating clay toys, which we would then implement in the centre. For four days, we became children.”Kalawati explained that the training made her understand the logic behind each activity. Playing with pebbles helps develop motor skills while problem solving and cognitive skills are developed by making puzzles. The curriculum now is theme based, with associated activities.

“Of the 12 themes, we have inculcated three in the curriculum; booklets have been distributed on these themes, and Anganwadi workers have been trained. We are now working on four other themes,” said Rama Shankar Prasad Daftuar, the director of ICDS.

At both the centres there has been an increase in the attendance. Johnson now walks to the centre every morning. “I now tell other mothers to send their children to the Anganwadi centre too,” says his happy mother.
Outcome 4: "By 2022, all children enjoy essential nutrition services and rural smallholders, and other vulnerable groups have improved livelihoods and greater access to a nutritionally adequate food basket."
Key Results in Nutrition and Food Security

1. Contribute to improve Nutritional Status with a focus on children and women

- **POSHAN Abhiyaan**: Twelve states implemented POSHAN Abhiyaan, and 14 states created nutrition coordination committees with support from UNICEF. UN supported development of Convergence Action Plans (CAPs) to improve the delivery of services with full coverage, continuity, intensity and quality. Twelve out of 14 states completed CAPs, including annual targets and monitoring frameworks. UN exceeded the 2019 target with support for quarterly meetings in 335 districts by 3rd Quarter 2019.

- **Jan Andolan**: The POSHAN Abhiyaan initiated the Jan Andolan (Social Movement) to scale up and synergise social and behaviour change programming for nutrition. UNICEF developed Jan Andolan dashboard was used by 36 States and Union Territories. The State Communication for Development (C4D) programmes provided support to the Department of Women and Child Development (DWCD) and the Department of Health and Family Welfare (DHFW) to prepare costed IEC plans for Jan Andolan activities. Poshan campaigns (fortnight and month), Anemia Mukt Bharat and Mothers Absolute Affection (Promotion of breast feeding and complementary feeding). Eleven States completed their evidence-based SBCC strategies on improved foods and feeding, five states on community-based management of SAM and 11 states on maternal and adolescent nutrition. These costed plans were implemented in 242 districts on Infant and Young Child Feeding (IYCF), 120 districts on Community-based Management of Acute Malnutrition (CMAM) and 286 districts on Anemia Mukt Bharat. Technical assistance was also provided to NITI Aayog and NIRD in finalising, pre-testing, organising core group meetings and national ToT on training-cum-communication package on POSHAN Abhiyaan for Panchayat members.

- **Aspirational Districts**: UNICEF and WFP supported a total of 140 Aspirational and Priority districts with a mandated intensification of efforts to reduce malnutrition.

- **Mother’s Absolute Affection Programme**: The UN has worked significantly to develop interventions on infant and young child feeding (IYCF). In UNICEF supported states, 415 districts implemented the Mothers Absolute Affection (MAA) programme of MohFW with close to 2,000 health facilities. WHO along with UNICEF adopted the Global Baby-Friendly Hospital Initiative (BFHI) implementation guidance into a tool for assessment and accreditation of health facilities under the MAA Programme. WHO and UNICEF, for the breast feeding prompt, completed piloting of the revised training curriculum of BFHI in India, which was released during the World Breast Feeding Week in August 2020.

- **Take-Home Ration**: At the request of NITI Aayog and in partnership with the Public Health Foundation of India, WFP completed a countrywide review of the Take-Home Ration (THR) distributed in each state under the ICDS to children between 6-36 months of age and pregnant/lactating women. The findings from the review are supporting the government in developing policy guidelines for appropriate foods to be distributed to young children through the ICDS.

- **Severe Acute Malnutrition**: UNICEF supported the Centres of Excellence to scale-up services for the management of children with Severe Acute Malnutrition at community level in ten states (Madhya Pradesh, Bihar, Rajasthan, West Bengal, Odisha, Chhattisgarh, Jharkhand, Gujarat, Telangana and Maharashtra). It also facilitated the development and operationalisation of protocols for management of children under six months with SAM, structured stimulation and play therapy, maternal nutrition and care for children with SAM with a medical complication in paediatric wards. These were promoted in 10 selected Nutrition Rehabilitation Centres (NRCs) across the country and in selected State Centres of Excellence. UN facilitated the development of specialised protocols for mid-level managers at district and block level for community based management of children with Severe Acute Malnutrition.

- **Adolescent Nutrition**: India’s adolescent nutrition programme has four critical interventions – weekly iron and folic acid supplementation (WIFS), deworming, bi-annual check-ups and nutrition health education. These services are delivered through Anemia Mukt Bharat (AMB) programme. UNICEF supported the development of the operational guidelines for Anemia Mukt Bharat whereas WHO supported revision of the technical guidelines of iron-folic acid supplementation under this programme in 2018.

- **Addressing Dietary Risk Factors for NCDs**: WHO has successfully advocated with FSSAI to:
  a) restrict marketing of foods and non-alcoholic beverages to children,
  b) reduce the trans-fat content in oils and food products from 5% to 2%,
  c) implement fiscal measures such as imposing higher taxes on sugar-sweetened beverages (SSBs) and foods high in fat, sugar and salt (HFSS), and
  d) developing a cafeteria policy for educational institutions and restricting marketing of unhealthy foods to children.
• **Maternal Nutrition:** India's maternal nutrition services (micronutrient supplementation, deworming, gestational weight gain monitoring and counselling, balanced energy protein supplementation and screening and 'extra care' for at-nutritional risk) are primarily delivered through the MoHFW Antenatal Care platforms. WHO has been supporting six states with wet/spot feeding programmes delivered at Anganwadi Centre, instead of take-home rations. Coverage of maternal spot feeding programme for pregnant women in six states (Andhra Pradesh, Chhattisgarh, Gujarat, Karnataka, Telangana and West Bengal) for 21 days or more increased from 3.4m to 3.7m. Chhattisgarh and Gujarat conducted a process evaluation of the spot feeding programme, and Telangana initiated an online tracking system of monitoring gestational month-wise weight gain as well as counselling. Several states (Bihar, Madhya Pradesh, Rajasthan and Telangana) started piloting of visiting dieticians providing nutrition counselling at high caseload facilities. The Swabhimaan girls and women's groups -nutrition impact evaluation is ongoing in blocks in three states (Bihar, Odisha and Chhattisgarh).

• **Food Safety:** WHO in collaboration with FAO and UNRCO celebrated the first World Food Safety Day on 7 June 2019. A social media campaign developed on the theme "Food Safety, everyone's business" including infographics, call-to-action short key messages and video messages from heads of agencies which ran for a week reached almost 200,000 people and several top influencers from government and UN agencies engaged with the posts. The #WorldFoodSafetyDay hashtag earned over 6 million impressions globally, with India as the leading contributor. WHO also launched a 3-year multi-country FAO/WHO Codex Trust Fund for strengthening the institutional and human capacity of national codex structures for effective implementation of Codex standards in India, Nepal and Bhutan. It also developed national capacity in these three countries to undertake a risk assessment for chemical contaminants in foods and created a pool of in-country experts on chemical risk assessment.

• **Fortification of rice:** In 2019, WFP was successful in making a case for mainstreaming fortified rice in government safety nets, which resulted in the development of a Centre Sector Scheme (CSS) for distribution of fortified rice in the public distribution adequately resourced by the Government with a budgetary allocation of INR 1.74 billion. WFP supported both the formulation of the scheme as well as its operational guidelines for the States. The Ministries of Women and Child Development and Human Resource Development responsible for the Integrated Child Development Services scheme and mid-day meal scheme also issued guidelines to the States for the incorporation of fortified rice. WFP continued its efforts to implement the demonstration project on rice fortification through mid-day meals in Varanasi district, Uttar Pradesh and ICDS in Kannur, Kerala.

• **Fortification of Take-Home Rations (THR):** The WFP pilot on fortification of THRs and use of social and behaviour change communication for improving infant and young child feeding practices reached 400,000 children in Kerala in 2019. WFP supported the capacity building of 600 staff from women's self-help groups and also developed Terms of Reference, Standard Operating Procedures for production, storage, laboratory testing and reporting. About 1300 metric tonnes of Fortified Nutri-mix was produced and distributed monthly through 33,115 maternal child health nutrition centres from May to December.

• **Nutrition sensitive agriculture:** FAO is working with the National Institute of Rural Development and Panchayati Raj (NIRDPR), Hyderabad to enhance capacities of professionals (policymakers, nutrition educators and agricultural extension agents) to integrate Nutrition-Sensitive Agriculture in their ongoing work. Also, FAO, in partnership with the National Institute of Nutrition (NIN) is piloting the ENACT (Education for Effective Nutrition in Action) programme in selected academic institutions of India.

• **Data and Public Distribution System:**
  a) WFP supported data analytics and the creation of dashboards for six states to analyse and facilitate decisions and strategies for improved efficiency.
  b) WFP's work on the national portability of the Targeted Public Distribution System (TPDS) was recognised by the Government's Integrated Management of Public Distribution System (IMPDS) as this will allow beneficiaries to access to rations from anywhere in the country no matter where they are registered.
  c) With WFP's support, the Government managed to reduce the transactional error rate of bank transfers from 2 per cent to 0.2 per cent in its pilot Direct Benefit Transfer, a cash-based transfer of food subsidy under TPDS.
  d) Shop operators in the TPDS supply chain in seven states to guide the revision in government policies.
  e) With WFP's support, a Global Positioning System (GPS) tracking of vehicles transporting food grains developed to reduce leakages during transportation and save on transportation costs.
  f) WFP also developed the content for an Integrated Voice Response System (IVRS) for the state government's toll-free hotline, targeting beneficiaries of the TPDS for awareness and grievance redressal.
Selected State level highlights:

- **Odisha:** In collaboration with the State Government, WFP assessed the procurement and supply chain system of TPDS and used advanced analytics for optimisation of the supply chain that could lead to a potential saving of 28 per cent of transportation costs. Based on the recommendations, the Government is updating its supply chain and paddy procurement systems.

- **Uttarakhand:** A new partnership was established to support the national and state governments in areas of supply chain and warehouse management with the Food Corporation of India.

- **Uttar Pradesh:** With technical support from WFP, the state government completed the end-to-end computerisation for improved efficiency of the TPDS. All the 80,000 fair price shops (FPS) in the state are now automated and use biometric authentication.

**Food and Nutrition Security Analysis:**

a) The Food and Nutrition Security Analysis, India, 2019 was recognised as a comprehensive baseline tool for monitoring the food and nutrition security situation in India.

b) WFP partnered with the Government of Odisha to institutionalise food and nutrition security analysis.

c) WFP also entered into a strategic and technical partnership with the Development Monitoring and Evaluation Office (DMEO) of NITI Aayog to focus on national capacity strengthening around evaluation, especially in the areas of food and nutrition security.

d) WFP conducted an assessment of central assistance margins paid for intra-state transportation, handling and Fair Price Shop dealers.

**Evidence generation:** FAO completed the study of key production, processing and consumption hubs for millets in the identified districts in the states of Karnataka, Maharashtra and Odisha.

**Krishi Sakhis:** FAO supported the National Rural Livelihood Mission of the Ministry of Rural Development to produce improved and standardised curriculum for the training of Krishi Sakhis across livelihood sectors. CRP assessment and certification protocol for women Community Resource Person were also developed.

**South-South Cooperation:** To support global knowledge exchange and support a series of cross-country study visits, facilitated by WFP between the Government of India and neighbouring countries: A delegation of government officials from Bangladesh visited India's Mid-Day Meal Scheme to learn and possibly adopt the scheme in Bangladesh. Delegations of government officials from Sri Lanka and Bhutan visited the Food Safety and Standards Authority of India to exchange knowledge on fortification. Also, a team of senior Government of India counterparts and delegates visited Costa Rica for high-level stakeholder meetings to understand legislation for mandatory multi-commodity food fortification.

2. **Strengthen data and evidence on the nutritional status of children**

- **Comprehensive National Nutrition Survey:** To better understand nutrition in 0-19-year-olds, the MoHFW with UN agencies conducted the Comprehensive National Nutrition Survey (CNNS), covering 112,316 children and adolescents across 30 states/UT. The CNNS provides data to identify the causes of anaemia in India and help inform policies on iron/folate supplementation, vitamin A supplementation, salt iodisation, food fortification and other options to address micronutrient deficiencies. The survey results will also help to inform programming on overweight and obesity and the prevention of non-communicable diseases (NCDs). The CNNS Adolescent Thematic Report released on 31st October by the MoHFW in partnership with Ministry of Women and Child Development (MWCD), NITI Aayog and the UNRC. On 8 November, the MoHFW released CNNS findings in UN/GoI Dialogue and initiated policy research groups to inform GOI policy and programming.
CNNS- The largest Micronutrient Survey

“Though challenges remain, India has progressed significantly. The percentage of children stunted under five years of age has reduced from 38.4% in 2015-16 to 34.7% in 2016-18.”

The Ministry of Health and Family Welfare (MoHFW) along with numerous organisations and individuals come together and put their best efforts to successfully conduct Comprehensive National Nutrition Survey (CNNS) across the country. The survey helps the government to collect the nutritional status of Indian children from 0-19 years of age. CNNS, the largest micronutrient survey ever implemented globally, is the first ever nationally representative nutrition survey of children and adolescents in India.

The aim of the CNNS is to estimate the prevalence of malnutrition among children and adolescents and to identify the key factors associated with the nutrition transition in India. The main objective is to collect nationally representative data on the nutritional status of pre-schoolers (0-4 years), school-age children (5-9 years) and adolescents (10-19 years).

The MoHFW with UNICEF agencies conducted the CNNS which covered 112,316 children and adolescents in 30 states/Union Territories. India has made concerted efforts towards addressing the challenges of malnutrition, including anaemia, among children and adolescents.

Though challenges remain, India has progressed significantly. The percentage of children stunted under five years of age has reduced from 38.4% in 2015-16 to 34.7% in 2016-18. Robust measures have led to the percentage of children under five years, who had wasting, low weight-for-height, decreased from 21.0% in 2015-16 to 17.3% in 2016-18.

The MoHFW on 31st October released the CNNS Adolescent Thematic Report in partnership with the Ministry of Women and Child Development, NITI Aayog and UNRC. On 8 November, the MoHFW released CNNS findings in the United Nations/Government of India (GoI) Dialogue and initiated policy research groups to inform GOI policy and programming.
Digitisation of Food Supply Chain in Uttar Pradesh

WFP has helped the Government to identify and reduce leakages during transportation and save on transportation costs by supporting a GPS tracking of vehicles transporting food grains.

“Famines are caused not by shortages of food, but by inadequate access to food.” notes Amartya Sen in one of his essays, ‘Poverty and Famine: An Essay on Entitlement and Deprivation.’

India is home to one of the largest population in the world. But for years, the poor and marginalised population in India has faced challenges in the access of nutritious food especially due to social, administrative and economic barriers.

To address this problem, the World Food Programme (WFP) in 2019 supported the state government of Uttar Pradesh to streamline Targeted Public Distribution System (TPDS) through digitisation so that no one sleeps hungry and ensured long term food security.

Under the programme, the use of biometric authentication was adapted by all 80,000 FPS in the state. The government received support from WFP to identify and reduce leakages during transportation and save on transportation costs by supporting a GPS tracking of vehicles transporting food grains. Furthermore, the content for an Integrated Voice Response (IVR) system for the state government’s toll-free hotline, targeting TPDS beneficiaries for awareness and grievance redressal, was also developed by WFP.

Adding more to the work done by WFP in Uttar Pradesh, a proof-of-concept assessment of IT enabled teaching and learning for cooks-cum-helpers of mid-day-meal (MDM) in five schools each in the districts of Varanasi (Uttar Pradesh) and Dhenkanal (Odisha) was also completed. This project also gained recognition by the WFP Innovation Accelerator (Munich, Germany) and participated in the innovation boot camp.
PRIORITIZED AREA: CLIMATE, ENERGY AND RESILIENCE

Participating agencies:
UNDP, UNFPA, UNICEF, UNWOMEN,
UNESCO, UN-HABITAT, UNIDO,
UNEP, WHO, FAO, WFP, UNHCR,

Convenor:
UNDP

Total expenditure (in USD):
34.5 million

Outcomes: “By 2022, environmental and natural resource management (NRM) is strengthened, and communities have increased access to clean energy and are more resilient to climate change and disaster risks.”
Key Results in Climate Change, Disaster and Resilience

1. Enhanced Implementation of Climate Change and Disaster Risk Reduction Programme

- **Risk informed Programming and Resilience Building:** UN in partnership with the Ministry of Home Affairs, NDMC and various state governments aims to build the capacities at national and subnational levels to integrate disaster risk reduction concerns and climate change adaptation measures in developmental activities across 14 states (Andhra Pradesh, Bihar, Uttar Pradesh, West Bengal, Assam, Chhattisgarh, Maharashtra, Telangana, Karnataka, Gujarat, Madhya Pradesh and Kerala).

- In 2019, UNDP developed the City Disaster Plan for Vishakapatnam. The HRVA (Hazard Risk and Vulnerability Assessment) of Navi Mumbai was also conducted. In six States (Odisha, Maharashtra, Himachal Pradesh, Meghalaya, Andhra Pradesh and Kerala) training on climate change adaptation, disaster risk management and psychosocial preparedness were organised for communities and government officials.

- **Vulnerability assessment:** UNDP supported Vulnerability Assessment study of Water Sector in Madhya Pradesh was awarded first prize by the Ministry of Jal Shakti, in national level competition. The learnings from the UNDPs Glacial Lake Outburst Flood (GLOF) risk reduction work in Sikkim was further shared with NDMA to facilitate the development of the national guideline on GLOF. Jharkhand and Madhya Pradesh were supported to revise their respective State Action Plan on Climate Change. 11 state-level Child Risk Impact Analysis (CRIA) reports were completed.

- **Disaster Risk Reduction (DRR) Roadmaps:** Development and implementation of long term DRR roadmaps continue to be supported by UNICEF in the states of Andhra Pradesh, Assam, Bihar and Odisha. Risk Informing Gram Panchayat Development Plan with engagement in over 460 gram panchayats across nine states has provided experience on developing and implementing integrated Gram Panchayat Development Plans (GPDPs) to roll-out nexus thinking, through leadership by empowered women for child-friendly programming. In Bihar, 26 departments reported the application of the DRR roadmap priorities. Comprehensive School Safety and Security programme are implemented in 1,600 plus school in 9 states. Three thousand four hundred plus villages in Bihar and West Bengal were supported to develop costed DRR plans in coordination with PRI system.

- **Strengthen disaster response and recovery through Social Behaviour Change Communication (SBCC) and systems for Accountability to Affected Population:** In 2019, to further support the Government of Kerala’s recovery efforts and to ensure accountability to the affected population, a detailed feedback mechanism was rolled out by UNICEF through the Kudambashree system in the flood-affected districts. UNICEF supported the Government of Chhattisgarh in organising SBCC training in Health, Nutrition and WASH sectors in Left-Wing Extremism (LWE) affected district of Narayanpur, Chhattisgarh.

- **Kerala Floods:** During the recovery phase, UN-supported the state government in:
  a) strengthening the Shelter Facilitation centres,
  b) developing appropriate Housing Designs for the marginalised communities,
  c) conducting training workshops on technical retrofitting of buildings,
  d) rolling out a Community Disaster Risk Management Programme,
  e) mainstreaming Disaster Risk Management across departments and,
  f) carrying out Hospital Safety programmes and strengthen women led enterprises.

- **Cyclone Fani:** Post Cyclone Fani, the United Nations at the request of the Government of Odisha, provided support for immediate response and post-disaster needs assessment. As a quick response to the disaster, UNFPA, SPHERE India and Oxfam India provided 15,000 dignity kits to help fulfil the immediate clothing and hygiene needs of girls and women in cyclone-affected areas. UNFPA provided support on monitoring of RMNCH+A services in Puri district to ensure that all women and girls of reproductive age get access to required assistance. Technical support was provided to the Department of Women and Child Development in monitoring the service delivery of the Anganwadi Centres (Rural Child Care centres) for children, pregnant women and lactating mothers in remote blocks of the Puri district. Psychosocial counselling support extended in the affected areas through capacity building programmes and deployment of 300 volunteers. UNICEF mobilised One Million USD to support multi-sectoral response post-cyclone FANI in the state of Odisha. 1 million children were reached through various interventions, ensured operational condition of 2 million handpumps; and 200 local electricians arranged for piped water supply and immediate maintenance; 3,883 Hygiene Kits were provided in the affected areas including two GPs for counselling of girls and women on MHH. Back to school campaign reached 8,945 children through Anganwadi in Bag and 32,588 children through School in Bag kits and psychosocial support activities through 70 child-friendly spaces (CFS) covering 120 villages.
2. Support to National and State Governments for operationalisation of the NCAP

- **The Health Burden of Air Pollution:** WHO took key steps to move towards cleaner air. These include -(a) launch of the "BreatheLife" campaign to encourage and support cities to meet WHO’s air quality guidelines. Bangalore, Nagpur, Dehradun and Bhubaneswar pledged their commitments to the campaign. (b) Clean Air Plans were made for improving air quality and promoting awareness among people on the health impacts of air pollution. c) UNDP commissioned baseline studies for Amritsar and Gurugram, to assess the current situation about air pollution and the existing policy frameworks.

- **Acute Respiratory Infection Surveillance:** WHO supported the Acute Respiratory Infection (ARI) surveillance started by the National Centre for Disease Control by providing technical inputs for data collection, case definition and more. The UN is also working with the IHIP team to add ARI and other pollution-related diseases for real-time surveillance.

- **Information Dissemination:** To facilitate a joint UN response to the National Clean Air Programme, UNDP led a UN interagency scoping mission on air pollution with a proposed plan of action for implementation. UNDP organised an Innovation Challenge "Solution for Air Pollution".

- **Knowledge exchange:** FAO has been engaging with multiple stakeholders in the state of Punjab and Haryana as well as the central government developed a shared understanding of which technologies/practices can reduce the open burning of rice straw in the two states. Based on the discussion and at the request of the Ministry of Agriculture and Farmers' Welfare (MoAFW), FAO has also prepared a technical note on how to develop a value chain of crop residues for ex-situ to complement ongoing efforts to manage residues in-situ.

- **Supporting development and implementation of city-level clean air action plan:** UNEP worked with Clean Air Asia to support the Government of Uttar Pradesh to develop the Air Action Plan for Agra and is currently working for successful implementation of this plan. It has also initiated a project with IIT Kanpur for identification of industrial emission sources contributing to Air Pollution in Agra.

3. Enhance capacities and implementation of solutions for sustainable management of waste and chemicals

- **Hydrofluorocarbons Phase-Out Management Plan (HPMP):** UNDP extended high priority to the HPMP Stage II implementation. As a result, MoAs were signed with 160 foam enterprises for phase-out of HCFC141b by January 1, 2020, a blowing agent in foaming sector having significant ozone-depleting potential and 4 RAC firms to phase down HCFC 22. So far, through HPMP Stage I and II, phased out 341.77 and 289.3 ODP tonnes respectively from the country, which is a significant share in achieving accelerated national targets under the Montreal Protocol.

- **Persistent Organic Pollutants (POPs):** UNIDO continued its support towards the achievement of the objectives of the Stockholm Convention. Eight hundred samples of transformers oil were tested as well as Polychlorinated Biphenyls (PCBs) inventory for 600 MT was updated. Under the medical waste project, UNIDO supported Ministry of Environment, Forests and Climate Change (MoEFC) for two amendments to the Bio-Medical Waste Management (Amendment) Rules, 2018 and 2019. To end dependence on DDT for control of vector-borne diseases, such as Malaria, UNIDO worked with Indian knowledge institutions to develop alternatives which are being commercialised by HIL India including Long-lasting Insecticidal Nets and neem and Bt based bio and botanical pesticides.

- **Plastic Waste and Marine Litter:** In 2019, UNDP safely processed around 33,000 MTs of plastic waste with more than 4,045 waste pickers, majority of them were women integrated into the mainstream. Also, UNDP is working with the Central Pollution Control Board (CPCB) and the Ministry of Environment, Forests and Climate Change (MoEFC) to strengthen the guidelines of Extended Producer’s Responsibility (EPR) under the Plastic Waste Management Rules, 2016 and further amended in 2018. The objective is to work on the uniform implementation of EPR across the country. UNDP has also made recommendations in the domain of developing a robust systems approach for traceability of waste collection, which will eventually increase transparency across the value chain. Furthermore, it has entered into partnership with more than 35 municipal corporations in the cities of operations to mainstream the waste management sector.
4. Contribute to improved land management through community-based sustainable practices

- **State Biodiversity Strategy**: UNDP supported the state of Uttarakhand and Maharashtra in developing the State Biodiversity Strategy and Action Plans in alignment with the SDGs. The initiative has been scaled up in 7 other states - Uttar Pradesh, Chhattisgarh, Madhya Pradesh, Sikkim, Himachal Pradesh and Union Territories of Ladakh, Jammu and Kashmir.

- **FAO**: through its technical cooperation programme, reviewed National and project state policy and regulatory frameworks for strengthening the agricultural and allied sector contributions to India’s National Biodiversity Action Plan (NBAP), 2008 and the National Biodiversity Targets (NBTs) at the national level for the States of Mizoram, Kerala and Punjab. Biodiversity curricula with relevant modules were developed in English as well as regional languages in these states.

- **Sixth National Report to Convention on Biological Diversity**: UNDP supported the Ministry of Environment, Forest and Climate Change in development of the Sixth National Report of India. India was among the first five countries to submit this report. It also supported the MoEFCC in preparation of the Biodiversity Finance Plan.

- **Nagoya Protocol**: Towards the effective implementation of Nagoya Protocol on Access and Benefit Sharing, UNDP trained 15 Master trainers in the area of Access and Benefit Sharing. New partnerships have been also established with Indian Council of Forestry Research and Education and ICAR-National Academy of Agricultural Research Management to train 70 Scientists, including women in the area of Access and Benefit Sharing (including policy and regulation).

- **Water restructuring**: FAO, through its technical assistance to the Department of Agriculture on the World Bank funded Uttar Pradesh Water Sector Restructuring Project Phase-II (UPWSRP-II), developed capacities of 60 Master Trainers and 175 Farmer Water School Facilitators for improved on-farm crop water management (through knowledge and skill development) among smallholder farmers. Additionally, FAO has been providing support to implement more than 2,000 Farmer Water Schools.

- **Agroecology**: FAO provided technical support to the Government of Andhra Pradesh in scaling up agro-ecology through Community Managed Natural Farming. Over 120 Natural Farming Fellows were trained on FAO’s Farmer Field School (FFS) methodology that promotes principles of agro-ecology in all 13 districts of the state, in over 3,000 villages affecting nearly 585,000 farmers directly. Over 60,000 farmers have adopted several innovative techniques such as pre-monsoon dry sowing and 365 days green cover just in the first season. Additionally, FAO is documenting pro-poor livelihood models in the country and preparing a go-to-market strategy for organic production clusters.

- **Climate-resilient upland farming**: FAO India is providing technical assistance to the IFAD funded "Fostering Climate Resilient Upland Farming Systems in the Northeast (FOCUS)" project, since April 2019. It targets smallholder farmer whose livelihoods depend on rain-fed agriculture and shifting cultivation system, locally known as jhum. Under this initiative, 47 male and 31 female Master Trainers in Mizoram and 70 male and 23 female Master Trainers in Nagaland were trained through four trainings in each of the State.

- **Green-Agriculture**: The Ministry of Agriculture and Farmers' Welfare has signed the Government Cooperation Programme Agreement with FAO to initiate implementation of the Global Environment Facility funded Green-Ag: Transforming Indian agriculture for global environmental benefits and the conservation of critical biodiversity and forest landscapes project. The project is being implemented in the five states of Madhya Pradesh, Mizoram, Odisha, Rajasthan and Uttarakhand.

- The Ministry of Environment, Forest and Climate Change along with UNDP and with support from Global Environment Facility has been working in high range mountain ecosystems in the Himalayas and the Western Ghats to promote high-value farming through traditional and organic agriculture, and medicinal plants’ cultivation in fallow and degraded areas to combat land degradation and ensure food and income security.

- **Landscape-level management strategy for resilient livelihoods**: UNDP has developed site-specific landscape management strategies in three states and one Union Territory (Himachal Pradesh, Ladakh, Sikkim and Uttarakhand) for the conservation of globally and nationally significant species and their habitats in high altitude Himalayan regions while sustaining livelihoods of local communities.

- **FAO**: in partnership with the National Rainfed Area Authority, is developing sustainable and resilient livelihood models suited for the specific project areas in Odisha, Rajasthan and Maharashtra.

- **Illegal wildlife trade**: In support of the UNEP's global campaign, 'Wild for Life', UNEP India Office led the creation of an award-winning awareness campaign titled “Not all Animals Migrate by Choice!” for Wildlife Crime Control Bureau of India (WCCB). It was supported by the Airports Authority of India and is running at 22 airports across the country.
Mainstreaming agricultural biodiversity conservation and utilisation in the agricultural sector to ensure ecosystem services and reduce vulnerability: UNEP through the implementation of the Global Environment Facility (GEF) project planned over 2016-2022, executed by Indian Council of Agricultural Research and Biodiversity International Office for South Asia provides support to mainstream the conservation and use of agro-biodiversity for resilience agriculture and sustainable production. The project aims to improve livelihood and access and benefit-sharing capacity of farmer communities across four agro-eco region of India—Western Himalayas, North-eastern region and the Eastern Himalayas, Western arid/Semi-arid region, and the Central tribal region. The project supports mainstreaming several tested community-based participatory approaches which support the maintenance of existing crop diversity, as well as the introduction and deployment of appropriate new materials of 12 crops.

5. Promote clean technologies for energy efficiency and increase energy access of vulnerable communities through the removal of technical and financial barriers

- Detailed Project Reports (DPRs) for Renewable Energy: UNDP in partnership with the MoEFCC, with support from GEF, is working towards reducing greenhouse gas emissions through the implementation of renewable energy and energy efficiency solutions at the state level. UNDP developed 50 bankable DPRs for RE enterprises, developed for supporting entrepreneurs towards availing loans from financial institutions in Jharkhand.

- Micro, Small and Medium Enterprises (MSMEs): UNIDO has been leading the energy efficiency initiatives with the MSMEs. In 2019, UNIDO achieved 10,478 MTe energy saving and reduced 59,531 tco2 greenhouse gases (GHGs). It also expanded its energy efficiency projects to 33 MSME clusters, funded 17 innovations and developed 245 detailed projects and 301 case studies. UNIDO demonstrated two pilots on concentrating solar thermal (CST) technologies. It also contracted India Renewal Energy Development Agency (IREDA) for operating financial mechanisms for organic waste to energy projects. One hundred twenty energy audits of SMEs and RT technology packages were implemented in Jharkhand. It also launched 12th Energy Management Cell in Sikkim.

- Solar energy and livelihoods: UNDP supported four women SHGs in Jharkhand for solarisation of their food processing units, which resulted in the doubling of their production capacity and income. UNDP also developed a scaling-up plan with Jharkhand state livelihood promotion society currently to mainstream solarisation across all livelihood sectors. UN Women partnered with Madhya Pradesh Ujra Vikas Nigam Limited, on a co-financed pilot, to bring decentralised renewable energy to women-run and managed institutions such as Anganwadi centres that were not connected with the grid. The pilot enabled access to clean energy for 63 centres that opened up avenues for lighting, cooking and mobile charging facilities thereby increasing the attendance of the kids and converting the centres into safe spaces that could be utilised for women’s livelihood and community-based activities in the evening hours. The pilot also developed a cadre of trained women Anganwadi workers in the management and maintenance of installed solar systems. The pilot enabled the Department of Women and Child Development to sanction USD 2 million under Poshan Abhiyan and to install solar systems in 2,500 remote Anganwadi centres that do not have the provision of electricity. UN Women also initiated a pilot on employing new age clean solar dehydration technology and created necessary backwards and forward linkages in enabling 60 small and marginal women farmers dry and sell agricultural products as entrepreneurs in Jalgaon and Rayagada districts of Maharashtra and Odisha.

- District Energy in Cities Initiative: UNEP-led District Energy In Cities Initiative supports some of the first successful tenders for district cooling systems in 2 pilot cities (Amaravati and Rajkot) and is supporting two other pilots with advanced-stage projects (Hyderabad Pharmacity and Thane) as well as several private sector projects and Energy Efficiency Services Limited.

- Electric mobility in Uttar Pradesh and Maharashtra: UNEP is working with the Government of UP to support the promotion of e-mobility in the State. UNEP, in partnership with Energy Efficiency Services Limited (EESL) and PriceWaterhouseCoopers (PWC), to assess -
  a) Charging Infrastructure for Noida and along the Yamuna Expressway
  b) Requirement for Grid impact and distribution capacity upgradation
  c) Potential business models for charging facilities, drawing on international experience and
  d) Requirement of overall policy support.
  Additionally, UNEP also developed the EV strategy for Maharashtra.

- Partnership for Action on Green Economy (PAGE): PAGE is a multi-year multi-UN agency led global initiative, which works at three outcome levels targeting policy level changes; sectoral and thematic reforms; and individual and institutional capacity building for transformation. A stocktaking study was undertaken to provide an assessment of the green economy landscape, issues, and priorities for India, supported by a series of regional and national consultation workshops.

- Sustainable Public Procurement: Prioritisation Study for Sustainable Public Procurement undertaken for the Department of Expenditure, Ministry of Finance.
Cleaning pollution with Safai Saathi

"Safai Saathis are central in the fight against climate change. 1000 kg of waste that is recycled by Safai Saathis saves 17 trees from falling. I am pleased to be helping the environment and being a role model for women in similar conditions like me", says Sushila Sable.

At the age of 10, Sushila Sable along with her mother moved to Mumbai with a hope of building a new and better life. But India’s financial capital, in no time, pushed them into poverty and they ended up becoming waste pickers to meet their needs.

While Sushila continued to work as an informal waste picker, after a period of twenty years she came across the volunteers of a local NGO, Stree Mukti Sanghatana. They educated waste pickers like her on the importance of segregating waste before selling it - waste when segregated in the right categories fetches better returns. Sushila knew she had met the right people.

After this, she along with other women waste pickers started a self-help group and saved enough money to start a dry waste collection centre. That is how she got a new identity as an environmentalist. Waste segregation didn't only increase her income but also had a positive environmental impact.

In India, only 15-20 per cent waste is managed properly while mixed waste is typically found compiled in landfills or open dumps. Some of it is burnt, adding harmful particulate matter in the air, while the rest rots in landfills, releasing methane gas and adding to the greenhouse effect.

Waste pickers play a pivotal role in the collection of the waste, segregating and recycling it; thereby ensuring that the air we breathe is cleaner. PRITVHI, a project started by UNDP, in partnership with Hindustan Coca-Cola Beverages for developing sustainable plastic management practices work with 30,000 waste pickers, most of whom are women, to manage 85,000 metric tonnes of plastic waste, while improving the socio-economic conditions of these waste pickers. PRITVHI’s goal is to reduce over 60,000 metric tonnes of carbon emissions, through the plastic collection with Safai Saathis like Sushila who are the backbone of this initiative.

Today, Sushila is the elected president of the Indian Waste Picker Society and represented India at the UN Framework for Climate Change in Copenhagen 2009, Beijing 2010, Durban 2011, and Rio 2012, where she spoke on the critical role the waste pickers play in combating climate change.
The Kerala recovery

“The post disaster recovery plan by UN agencies in Kerala was not only life saving but also helped in improving the dignity of the affected population.”

Who doesn’t remember the horrific sight of the floods which hit Kerala from 1 June to 18 August 2018? There was a massive loss of life, property and livelihoods. A total of 1,259 villages across 14 districts were affected by the floods and consequent landslides. More than 5.4 million people were affected, nearly 1.4 million displaced and 433 lost their lives.

The disaster resulted in catastrophic damage to infrastructure, housing, agriculture, livestock, fisheries and environment. Houses were completely damaged beyond repair and needed to be rebuilt, the pipelines were severely damaged, and 481 Primary Health Centres (PHCs) as well as 137 Community Health Centres (CHCs) became completely useless. The lives of people in Kerala almost stopped for a while and the vulnerable and the most marginalised sections of the society were most adversely impacted.

United Nations agencies came together to support the Government of Kerala in providing time-critical lifesaving services to the flood affected people. Several projects were taken up by UN agencies to bring Kerala back to normal. Some of the interventions are detailed below.

In the wake of the disaster, the wells, which are the primary source of water, especially for the tribal community, were flooded and contaminated with run-off soil, animal carcasses and septic tank spills. This problem needed a quick response as many people were facing water scarcity. So, UNICEF along with a local NGO, Wayanad Social Service Society (WSSS), rehabilitated 25 spring-based water resources and ten community wells to ensure safely managed water supply which benefitted 210 affected families in Wayanad.

Floods left many people homeless and hopeless. Houses were damaged severely beyond repair and needed to be rebuilt. The shelter project implemented by UNDP presented a good example of how to use the LNOB principle in a post-disaster context. Under the project, selection of target beneficiaries prioritised the ‘most vulnerable’ - elderly, disabled, single women led households and people suffering with terminal ailments and chronic diseases—and provided handholding support in rebuilding their shelters. Lakshmi Kutti Amma, an 80-years old cancer patient lost her entire house and belongings to the deluge. But she got the much needed help under the shelter project implemented by UNDP. Her house was reconstructed with disaster-resilient features.

Similarly, there was huge loss in livestock and poultry in the state. The Food and Agriculture Organisation (FAO) collaborated with the Department of Animal Husbandry and Dairying, Government of Kerala and Brahmagiri Development Society (an NGO) and trained 152 government officials and 300 volunteers from community based organisations on zoonotic disease surveillance, who in turn aided the affected farmers on carcass disposal, cattle shed disinfection, and other sanitary measures. Various inputs such as vitamin and mineral mixtures, mastitis kits, sprayers with disinfectants, gloves, gum boots, etc. were distributed to the affected farmers.
### PRIORITY AREA:
**SKILLING, ENTREPRENEURSHIP AND JOB CREATION**

**Convenor:**
ILO

**Participating agencies:**
UNESCAP, ILO, UNIDO, UNESCO, UNDP,
UNFPA, UNICEF, UNWOMEN, IOM, UNHABITAT

**Total expenditure**
(in USD):
11.6 million

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Outcome 6: “By 2022, people vulnerable to social, economic and environmental exclusion, have increased opportunities for productive employment through decent jobs and entrepreneurship.”
Key Results in Skilling, Entrepreneurship and Job Creation

1. Conduct evidence-based policy research on employment and related issues

- **Female Labour Force Participation Rate**: UN agencies collaborated with NITI Aayog to prepare a policy paper on the declining female labour force participation in India.

- **Research**: 4 knowledge products on value chains (agriculture, handloom and handicraft products, bamboo), report on export strategy and resource handbook on schemes related to the three sectors and exports were launched. Link for the four knowledge products:
  a) **Act East**: Giving North-East a Leading Edge - https://msme-ne.in/assets/images/knowledge-portal/1_LookEast_2_Print.pdf
  b) **Value Chain Studies**: http://msme-ne.in/assets/images/knowledge-portal/2_Value%20chain%20reports_2_print.pdf
  c) **Unlocking Export Potential in NER**: https://msme-ne.in/assets/images/knowledge-portal/3_Export_Potential_2_Print_June_18.pdf
  d) **Bamboo Value Chain Study**: https://msme-ne.in/administrator/uploads/knowledge_data/74_Export_Potential_2_Print_19June_A.pdf

- **Women in Business and Management in India** – This snapshot was created based on the findings of Women in Business and Management: A global survey of enterprises - https://www.ilo.org/asia/publications/issue-briefs/WCMS_703337/lang--en/index.htm

- Through ILO’s programme on Fair Recruitment and Decent Work for Women Migrant Workers, a lessons learnt document was developed: https://www.ilo.org/newdelhi/whatwedo/publications/WCMS_600474/lang--en/index.html

- A working paper on ‘**A review of the consequences of the Indian minimum wage on Indian wages and employment**’ was developed: https://www.ilo.org/newdelhi/whatwedo/publications/WCMS_717971/lang--en/index.htm


2. Promote employment and livelihoods generation

- **Increasing competitiveness of Micro, Small and Medium Enterprises (MSME):** UNDP and GIZ partnered to strengthen 2 MSME clusters - Electronics City Industries Association (ECILIA) and Karnataka Small Scale Industries Association (KASSIA) on End-to-End Model of Apprenticeship Promotion through Quality Career Guidance in Karnataka. Through ILO SCORE, more than 150 MSMEs in the supply chain of apparel, automobile, and essential products were provided training on productivity improvement. Further, MSME officials in MSME Development Institutes and Technology Development Centres (TDCs), equipped to deliver a locally adapted version of SCORE short course curriculum under Entrepreneurship Skill Development Programme (ESDP).

- **Enhancing Productivity:** A value chain diagnostic to evolve an integrated strategy to improve productivity and competitiveness in Rajasthan’s natural stone industry in alignment with international standards was conducted. UNIDO started UDAY PRIDE (UNIDO DHI ACMA YOJANA-Professionalism Responsibility and Innovation in Driving Excellence) to improve productivity and innovation in the automotive components industry. Benefiting 85 tier 2 and 3 suppliers through advisory support and counselling. UNIDO with the support of DPIIT provided technical support for the bicycle and bicycle parts industry in Ludhiana and started a productivity project for the pulp and paper sector.

- **Entrepreneurship development:** ILO in partnership with the Ministry of Micro, Small and Medium Enterprises is using SIYB entrepreneurship development curriculum for training in 228 clusters. Technical support was also provided to the roll-out and quality monitoring of Entrepreneurial Skill Development Scheme pan-India (22 clusters). ILO is also investing in capacity building of various stakeholders through the sharing of global best practices on an apprenticeship in G20 countries, career counselling frameworks, and skill recognition of informal sector workers for the transition to the formal sector. ILO raised awareness among farmers on the Central Government sponsored social protection scheme, Pradhan Mantri Fasal Bima Yojana (PMFBY) to cope with crop loss due to adverse climate conditions.

**With the State government of Kerala**

- More than 400 youths, of which 70% of women were supported to start a business.
- 125 green businesses established to contribute to Kerala rebuilding initiatives.
- Capacity building of 36,590 women in micro-enterprise development led to 19,956 women starting an enterprise.
- 34,092 trained and 57,721 women supported in the agricultural and artisanal value chain.
- Further, Post-disaster Livelihood Recovery and Rehabilitation in Kerala have led to:
  - Employment aspects getting mainstreamed during the Rebuilding Process in Policy Discourse, including work around data.
  - The setting of entrepreneurship models such as applying SIYB training for scaling-up and replication in affected areas to facilitate the economic revival.
  - Imparted Skills Training in selected trades for economic integration of affected households.
  - Better Working Conditions and OSH practices applied in Small Construction Sites in the State.
  - Improve resilience on the issue of Labour Migration (both international and internal).

**With the State governments of Assam and Mizoram**

- Entrepreneurs participated in the capacity building programme.
- 11 entrepreneurs from handloom and handicraft participated in the North East MSME on SC/ST entrepreneurs on 22-23 Nov 2019 at Guwahati, Assam.
- 221 entrepreneurs and Farmer Producer Organisation (FPO) members across 4 clusters each in Assam and Mizoram were provided entrepreneurship training to develop feasible and bankable business ideas to scale up an existing business.
- Technical advice provided by ILO to Kerala government under Kerala Rebuilding initiative on green business development based on training needs assessment done in collaboration with the industries department and Coir Board.
With the State government of Andhra Pradesh

- Enabled APSSDC and APCRDA to train more than 700 youths (primarily tribal women) to start a business.

- **Livelihood promotion among refugees** is one of the critical areas where refugees create added value for the host economies. Entrepreneurs from the refugee community participated in trainings on entrepreneurship development market linkages and financial support in kind. UNHCR partners formed ten community-based production groups in Mewat, Jaipur, Hyderabad, and Delhi of Rohingyas and Afghan refugee women, reaching out to 511 refugees, mainly women, through its livelihoods programming. Two hundred eighty-five refugees provided with EDP and vocational training, 140 refugees were provided with placement opportunities, while 220 refugees were counselled and registered for placements. Two implementing partners were engaged in implementing a micro-grant programme benefitting 45 individuals. Fifty-one Afghan refugee women (working with three Local Social Enterprises) were linked to MADE51, the UNHCR global initiative promoting artisan refugees.

- **Increased opportunities for young people**: UNICEF launched a partnership platform called Yuwaah, Generation Unlimited in India, which included government, multi-laterals, private sector, CSO’s and young people and was endorsed by the Prime Minister. The objective of the platform aligns to the global agenda of ensuring that by 2030 all young people (age 10-24 years) are learning, training or working. A large part of the focus for Yuwaah is to build better linkages between the aspirations of young people to learning and working opportunities. UNICEF is incubating this platform in India and globally. The objectives of Yuwaah are 3-fold:
  - Enable pathways to economic aspirations for 100 million young people - with a particular focus on entrepreneurship, apprenticeship and hyper-local solutions for jobs and skills.
  - Enhance skills for 200 million young people - with a particular focus on 21st century skills including entrepreneurial mindset curriculum, skills for out of school children and career guidance.
  - Engage 300 million young people as change-makers – focussing on enabling young people through challenges, volunteering and also creating a social credit system for change-making actions.

- **Increased opportunities for Women**:

  **UN Women Second Chance Education and Vocational Training (SCE)** have established 12 district level Women Empowerment Hubs (WEHs) across four states. UNWOMEN mobilised 4,038 women, out of which 602 women have been enrolled for skills training. The primary trades have been nursing, home nursing, retail assistant, general duty assistant, sewing machine operator, tally, data entry and beauty parlour etc. Some of these women and girls have also opted for hyperlocal trades like petrol pump management, providing housekeeping services in a local hotel, service provider in government flagship programmes etc. 244 completed training, and 48 women have already been placed across the four programmes states as home nurses, sewing machine operators and retail sales assistants.

  UNWOMEN mobilised 5,769 farmers out of which 4,233 participated in rabi and summer agriculture. These farmers were helped to take up improved practices for both food crops and cash crops. The primary food crops were wheat and maize, and the cash crops were tomato, chilli, brinjal, radish, green pea etc. 59 women have started their enterprises related to agricultural inputs, spice production, stitching and mushroom cultivation.

- The ILO, and SCOPE (Standing Conference for Public Enterprises) developed a 'Network of Champions' to work towards addressing bottlenecks and creating a conducive environment in PEs, allowing increased participation of women employees in the senior management roles. The top eight public enterprises, which employ more than 50,000 employees, shortlisted 12 candidates to be part of this network.

- **Women’s unpaid work**: UNDP in partnership with Meraki Foundation piloted a solution enabling 300 women from low-income communities in urban slums of Delhi for entrepreneurship and work opportunities in care work, thereby reducing the burden of unpaid caregiving for them. Thirteen women or ‘care-preneurs’ have started their enterprises. One hundred thirteen mothers of children who engage with these care-preneurs have been offered jobs and have an opportunity to be part of the workforce. The next steps in this project are focussed around, bringing men and boys into the conversation around gender equality and improved social norms.
3. Promote International Standards for decent jobs

- **Home-based workers:** ILO is strengthening the capacity of 5 workers organisations and three industry associations to improve Occupational Safety and Health (OSH) and wage determination approaches in home-based enterprises in the metal and garment sector. It is also supporting the joint action to enable them to organise and collectively bargain with corporates/brands for better payments, besides engaging with policymakers for a National Policy for Home-Based workers in line with Convention 177.

- **Wage:** Technical advice on Wage Code and Minimum wages was provided to the government.

- **Migration:** National Advisory Committee established with members from ILO social partners, experts from academia and CSOs to prepare draft policy messages on internal labour migration. National and state-level consultations with Unions and CSOs for implementation of Global Compact for Migration (an Intergovernmental negotiated agreement) were also organised.

- **Policy support:** ILO supported the National Policy framework on TB-HIV and the world of work by the Ministry of Labour and Employment. Also, workers and employers’ organisations in India have imparted information on legal preparation needed for India’s adoption of Protocol 29 on forced labour. The national consultation was also held with women trade union representatives on ILO Convention 190 on violence and harassment to prioritise actions to address this challenge.

- **Child labour:** Labour departments of Bihar, Chhattisgarh and Uttar Pradesh were provided technical assistance to initiate the process to design complete convergence-based benefits package for child labour and their families.

- **Responsible Business guidelines:** UNDP, UN Women, ILO, and UNICEF India supported the Ministry of Corporate Affairs, with inputs on the National Voluntary Guidelines on Economic, Social and Environmental Responsibilities of Business. The National Guidelines on Responsible Business Conduct were launched in 2019, based on training needs assessment done in collaboration with the industries department and Coir Board.
The success story of the Golden Group

“Even going to the fields to collect vegetables alone was not allowed by our husbands, now we travel to begum bazaar to buy material for our bangle business and are encouraged by our husbands to do so. This has been a big change in our lives.”

From inside the bangle and accessories’ shop, across the window, a group of ten women in their burqas stare at the window display. They seem to be curious, look intently at the designs and motifs of bangles, jhumars, necklaces and earrings on display. These women are here on a market exposure trip, a part of their training in bangle making. These 10 women are called the Golden Group, a collective comprising of women from the Rohingya refugee camp located at Decent Shelters, Salala, Hyderabad. The collective has been formed by Save the Children (STC) to enable women to learn marketable skills so they can earn their livelihood and help their families in a new land far away from home. The bangle making training programme started in 2017. Since then the group has come a long way and now run a profitable business of making and selling bangles, jhumars, potli bags, necklace, wall hangings and embroidered pillow covers and napkins.

When the group was formed, Zainab, a 23-year-old, was elected as the group leader by the members. These women, who had hardly stepped out of their homes, were doubtful of their abilities to build a business. The idea of being independent was alien to them. But the Salala Settlement Camp (STC) staff refused to give up on them and after protracted persuasion managed the difficult task of forming the group.

As the members were illiterate, they were given literary classes on alphabets, numbers and basic arithmetic operations. Soon after that, the members who only knew their native language, started to pick up the local language, Hindi, from their trainers. Breaking the language barrier was crucial for the group to make their place in the market. The training on bangle making was started by STC with classroom sessions followed by field visits to bangle markets at Lad Bazaar, Begum Bazaar and Goshamahall. The members not only acquired bangle-making skills but also skills to create new designs, study market trends and negotiate with buyers and suppliers. Post training, the group was also provided a grant by STC to buy inputs to start the business.

The group understands that they will have to match the market trends if their business is to succeed. For this the women have started to use YouTube to get inspiration for new designs. Some creative members amongst the group also come up with unique designs on their own. The results of this effort shows in good sale and repeat orders.

Now when the women have started to participate in supporting the family economically, there has been a marked shift in their status in the household. Zainab the group leader of the Golden Group remarked “even going to the fields to collect vegetables alone was not allowed by our husbands, now we travel to begum bazaar to buy material for our bangle business and are encouraged by our husbands to do so. This has been a big change in our lives”. Their children now go to the nearby Telangana School which costs up to Rs. 14,000 per year in fees.

The Golden Group does not limit itself to making sales and earning profits, it also extends its supports towards betterment of the community. The group helps to mobilise the women in the settlement for the monthly meetings where information on health, hygiene and other entitlements are provided. The monthly meetings at Bangle Centre helped develop a consensus amongst the community to approach the settlement officials with a request for assured water supply which lead to a borewell being sunk at the settlement.

The success of the Golden Group has had a demonstrative effect and many more women in the community wish to replicate the Golden Group success.
Kavita's Kuttoos Chapati

"I had initiated my business without any systematic planning. This training has equipped me with simple tools for planning, implementation and monitoring of my business." says Kavita.

Women's contribution often goes unnoticed or neglected in most economic development indicators. The International Labour Organisation's (ILO) Start and Improve your Own Business (SIYB) programme aims to break this trend. The programme has offered opportunity for women, especially home makers to convert their talent to entrepreneurial skills.

Stuck in business failures, family enterprise and increasing debts, a 39 year old mother in Kerala, Kavita started the business of making Chapati (a type of Indian bread). When she approached the State Industries Department, she was advised to undertake SIYB training on food processing to better understand the nuances of business management.

Kavita, who had enrolled in SIYB training in August 2018, says, "The training helped us to reflect upon mistakes made by me in the past. I had initiated my business without any systematic planning. This training has equipped me with simple tools for planning, implementation and monitoring of my business."

After the completion of the training, Kavita developed a business plan based on her learning. She undertook all the important aspects such as understanding her customer base, product demand and market competition, unique value added by her business, and risk assessments, among others.

Once her draft was completed, it was reviewed by a team of ILO SIYB trainers of the state department and then submitted to the bank for loan requisition. The bank was impressed by Kavita’s innovation in producing and delivering fresh chapatis to customers. She received a startup capital of Rs 10 Lakh (1 million) for her proposal.

With the amount received, Kavita invested in machinery purchase and expanded her unit at Changanassery In Kottayam. The business, Kuttoos Chapati, now gives employment to three full time employees and her net average income ranges between 20 to 25 thousand rupees.

The SIYB training gave Kavita the confidence and opportunity to start this venture. Her financial crisis has now come to an end.
Strengthening the Indian bicycle industry

The bicycle industry in India faces several challenges and immense competition. To overcome the challenges and for better performance, there is a need to build awareness and knowledge on latest technologies, institutional facilities for the product design and upgrade technical and entrepreneurial skills of the manufacturers.

With the thought of providing better technical and management support to bicycle manufacturers, UNIDO has implemented a project titled ‘Development and Adoption of Appropriate Technologies for Enhancing Productivity in the Indian Bicycle and Bicycle Parts Sector’ with the support of the Department for Promotion of Industry and Internal Trade (DPIIT), Government of India. The project aims to strengthen the capacity and capability of the nodal technical institution, the Research and Development Centre for Bicycle and Sewing Machine (RDCBSM), as well as two industry associations, the All India Cycle Manufacturers’ Association (AICMA) and the United Cycle Parts Manufacturers Association (UCPMA). The project used technical workshops, international study tours, fellowship training programmes and hands-on training programme.

1. Technical Skills Development Programmes in the area of electric bicycles (E-bikes)

As the e-bike segment is in the nascent stages in India, a two-week fellowship training programme was conducted for RDCBSM personnel as well as selected industry representatives in cooperation with the Light Electric Vehicle Association (LEVA), U.S.A. The participants received in-depth knowledge on different types of e-bikes and drive systems, classification of e-bikes, the main components of different e-bike systems and design consideration, and implication deriving. Once the fellowship was completed, the 14 participants were certified as ‘LEVA instructors’, enabling them to deliver training programmes in the area of E-bikes to Indian bicycle manufacturers.

2. Skills development programme for ‘Entrepreneurial Competencies’ in Indian bicycle industry

In order to facilitate the growth and export competitiveness of the industry, it was considered important for Indian manufacturers of bicycle and components, especially the small and medium enterprises to not just build their technical competency, but also enhance their business development and entrepreneurship skills. With this aim, UNIDO and UNCTAD jointly conducted a workshop on ‘Entrepreneurial competencies for the Indian bicycle industry.’ The workshop was based on UNCTAD’s flagship technical assistance programme – ‘Empretec’ and introduced a behavioural approach to entrepreneurship, and focussed on aspects such as business behaviours, decision-making as well as habit-formation. After the workshop was completed, 19 participants were certified in this initiative.
Outcome 7: “By 2022, women, children and young people have improved access to equal opportunities, and an enabling environment, to advance their social, economic and political rights.”
Key Results in Gender Equality and Youth Empowerment

Support capacity development initiatives to promote the empowerment of women and youth

- **Gender - responsive costed State Plans of Action:** UNICEF supported six state governments (Assam, Gujarat, Madhya Pradesh, Odisha, Tamil Nadu and Uttar Pradesh) – to develop gender-responsive costed State Plan of Action. It strengthened multi-sectoral coordination mechanisms to promote convergence for Adolescent Empowerment (AE) and Ending Child Marriage (ECM). These initiatives were translated into actions through leveraging USD 1,233,079 from government resources (Assam, Rajasthan and Gujarat). Further, 1,696,681 community functionaries and allied workforce (1,060,754 women and 635,917 men) in 13 states (Uttar Pradesh, Bihar, Madhya Pradesh, West Bengal, Rajasthan, Assam, Chhattisgarh, Jharkhand, Odisha, Gujarat, Tamil Nadu, Maharashtra and Andhra Pradesh) benefitted from capacity development initiatives. In Chhattisgarh and Uttar Pradesh district, line department functionaries were equipped with skills to use the Tarunya – a gender-responsive SBCC (Social and Behaviour Change Communication) package aimed at family and communities to end child marriage and promote adolescent empowerment.

- **Political Empowerment of Women:** UN Women worked with State governments of Andhra Pradesh, Odisha, Karnataka, Rajasthan and Telangana to develop training modules for elected representatives, functionaries and other stakeholders for the development of gender-responsive GPDPs. It developed a Gender Friendly Panchayat virtual tool with the technical cooperation of NIRD and PR. UNWOMEN, in collaboration with Ministry of Panchayati Raj (MoPR) and NIRD, organised National Conclave of Elected Women Representatives (EWRs) to provide them with a platform for peer deliberation and exchange ideas for an empowered ecosystem to participate in political processes and decision making.

- **Women’s economic empowerment:** WFP collaborated with Mission Shakti of Government of Odisha to build capacities of women smallholder farmers and women’s self-help groups in improving market linkages to enhance their incomes and food security.

- **Gender budgeting:** UN Women supported the Ministry of Labour and Employment (MoLE) and Ministry of Skill Development and Entrepreneurship (MSDE) to reactivate their Gender Budget Cells (GBC) that enabled both the ministries to finalise their Gender Budget Annual Action Plan from 2018 to 21. Support was also provided to MWCD to revise the National Gender Budget to ensure that the Ministries/Departments report the expenditure from the previous year. Government of Karnataka and UNWOMEN developed a detailed gender audit toolkit:

- **Safe City Methodology was adopted in rural settings:** UN Women has piloted the Safe Cities and Safe Public spaces global methodology in Delhi, Bhopal, Mumbai, Kochi and Jaipur. This methodology was adapted to make rural agrarian supply chains safe and equal for women and girls. Also, it is currently implementing a programme to prevent and respond to all forms of violence against women and girls (VAWG) in selected tea plantations and out-growers in the extended supply chain in Udalguri, Assam through alliances with Tea producer companies (11 leading producer partners), communities, government bodies and local organisations. The programme has reached out to 15,000 participants directly and 300,000 indirectly. The interventions and lessons learned have informed the development of a Global Women’s Safety Framework and a Guidebook for Implementation of the Framework for Producer Partner to support its implementation in the Tea estates. The initiative has also enabled leadership of women, especially survivors of violence, through community-based women’s groups called Jugnu Clubs, as well as the establishment of a Legal Aid clinic for aggrieved women and girls experiencing domestic violence (DV)/intimate partner violence (IPV) or any other form of violence. The programme has also developed an early prevention programme for elementary school children in the tea estates.
• **Child Marriage:** UNFPA, UNICEF and UN Women jointly developed the theory of change on ending child marriage for phase 2 of the global programme on ending child marriage. UNICEF and UNFPA supported foundational research and advocacy products on ending child marriage and empowering adolescent girls. These included:

  Ending Child Marriage in India - Drivers and Strategies
  Addressing Harmful Practices in India - Programme Framework and Strategies (UNFPA, 2019)

  Additionally, data from Census and NFHS IV were analysed to advocate with selected state governments (Uttar Pradesh, Bihar, Madhya Pradesh, West Bengal, Rajasthan, Assam, Chhattisgarh, Jharkhand, Odisha, Gujarat, Tamil Nadu, Maharashtra) for developing action plans on ending child marriage, and for other policies and schemes relevant for well-being of adolescent girls and boys, such as cash transfers and schemes related to menstrual hygiene. UNFPA and UNICEF supported:
  o The Governments of Rajasthan and Odisha in rolling out the state action plan on ending child marriage through capacity building of officials of the Department of Women and Child Development. In Rajasthan, an entitlement initiative for empowering adolescent girls, Naubat Baja, was launched on the eve of International Girl Child Day on 6th March 2019. 150,730 calls had been received, and messages had been transmitted at the time of reporting.
  o In Jharkhand, about 113,880 children (65,937 girls and 47,943 boys) were reached to generate awareness on the harms of child marriage in the four districts (Latehar, Giridih, Palamu and Godda).

• **Gender Biased Sex Selection:** To support effective implementation of the Pre-Conception Pre-Natal Diagnostic Techniques Act and Beti Bachao Beti Padhao (BBBP) programme:
  o UNFPA collaborated with MoHFW to support capacity building of 379 nodal officers and appropriate authorities in Health Departments from five states (Uttar Pradesh, Uttarakhand, West Bengal, Gujarat and Tamil Nadu).
  o UNFPA supported the implementation of BBBP in the state of Rajasthan through capacity building of officials from 33 districts on addressing the underlying factors for adverse sex ratios. A pilot demonstration on women and girls friendly panchayats was adopted for scale-up by the government of Rajasthan.
  o UNFPA synthesised evidence and produced a policy brief on balancing sex ratios, with recommendations for strengthening the effectiveness of the Beti Bachao Beti Padhao (BBBP) programme.
  o UNICEF supported MWCD in developing communication guidelines and an MIS for the BBBP programme.

• **Empowering adolescent girls and boys:** UNFPA is a key technical partner for design, implementation and refinements in the Rashtriya Kishor Swasthya Karyakram (RKS) programme based on the learnings from on-ground implementation. UNICEF and UNFPA in 2019 created strong linkages with national and state flagship programmes for adolescent girls and boys through the development of communication guideline and SBCC package, capacity building package and monitoring systems. This mobilised investment for adolescents from the government and partners resulted in:
  o 12 state governments increased commitment to improving adolescents’ well-being,
  o enhanced capacity/skills of key stakeholders to promote/deliver quality services and prevention programmes, and
  o community structures have the capacity/skills to engage adolescents, parents and community influencers.

• UNICEF supported the Visakhapatnam adolescent programme and ensured that adolescent protection and empowerment is strongly integrated into the WCD department. Overall, 225,000 adolescent girls and 175,000 boys are empowered directly as a part of Visakhapatnam programme in 22 mandals of the district from 2016 to 2019. To create an enabling environment for adolescents, 867 CPCs were strengthened. Youth volunteeringism was promoted and leveraged for prevention of child marriage and violence efforts, reaching 18,309 community members (11,376 females, 6,933 males) and 13,281 adolescents (7,387 girls, 5,894 boys); at the same time linking 917 young people (449 girls and 468 boys) from disadvantaged backgrounds with vocational training and employment opportunities.

• UNFPA in the states of Madhya Pradesh and Rajasthan reached 163,913 adolescents through Adolescent Friendly Health Clinics that provide youth-friendly services. During the year 459,469 youth volunteers in the group of 15-29 years were mobilised primarily from the rural areas to support the implementation of government programmes in the areas of health, sanitation, education, child protection, water conservation among others. 5 Youth Resource Centres at the district levels were supported where a total number of 93 capacity development activities were
**Life Skills Education:** UNFPA, UNESCO and UNICEF have supported the design, implementation and institutionalisation of Adolescence Education (AE) / Life Skills Education (LSE) initiatives to reach 7.4 million adolescents and young people across nine school systems.
- UNFPA reached 1.3 million girls with targeted interventions focusing on life-skills and SRH information and services.
- UNFPA has made a breakthrough in Bihar by initiating the Adolescence Education Programme in Madrasas (Islamic faith-based organisations) in selected geographies. The government committed financial resources of USD 3 million to upscale the intervention to reach all the 2,572 Madrasas in the entire state.
- In Odisha, UNFPA trained 217 girls and 224 boys on leadership attributes and life skills from 3 conflict-affected districts. These young people further organised 600 community awareness programmes and 90 social action projects. 279,165 young people were reached under the state government’s Biju Yuva Vahini, a youth volunteering and leadership programme, where UNFPA extends technical assistance.
- In Madhya Pradesh, 350 adolescents (278 girls and 72 boys) from different settings were trained in agriculture and livelihood skills and are currently either self-employed or working with local firms.
- In West Bengal, 80,000 adolescents in and out of school were directly covered in 5 districts (Purulia, Malda, South 24 Parganas, Kolkata, Jalpaiguri). In comparison, 26,916 adolescents participated in social mobilisation activities that included rallies, Kishor Kishori Mela, mid-media activities.
- In Haryana, UNICEF reached 10,000 adolescent girls and boys through 100 schools, where 200 teachers and principals were trained to transact play-based curricula on harmful gender norms. The results of the pilot showed that boys and fathers’ attitudes towards gender equality improved by 40% and girls and mothers’ attitudes improved by 10-25%.
- UNICEF supported 120 youth-led organisations to form 1 national and 6 state youth collectives, to enhance adolescents’ participation skills and to support districts in establishing platforms for interface with adolescents.

**Anti-Trafficking:** UNODC conducted five multi-stakeholder consultations covering all States and UTs, on the latest ground situation of trends and patterns on trafficking in persons and the vulnerability push and pull factors. Sensitisation training with police academies, anti-human trafficking units (AHTUs), and other police officials including about 350 officials (police and Sashastra Seema Bal personnel and judicial officers) were conducted. UNODC also convened a multi-stakeholder consultation on existing anti-trafficking laws and policies and provided detailed suggestions to the Ministry of Home Affairs and the Ministry of Women and Children Development on strengthening the Trafficking in Persons (TIP) legislation. It convened Anti-TIP Platform with participation from UNWOMEN, under which 120 experts from various sectors in India came together to discuss various priority topics to prevent and respond to TIP.

**Youth - Education for Justice, Peace and SDGs:** UNODC provided technical mentorship and knowledge support to Model UNs, engaging with schools and Universities to promote an understanding of peace, human rights, the rule of law and crime prevention among students and working with school-led/student-led clubs/forums to ideate and promote effective solutions on issues about SDG 16. E4J initiatives reached 120 secondary level educators, 50 tertiary level academics, over 70 schools in 6 Indian states/Union Territories, and E4J tools were shared with over 6,000 students and educators across India and Bhutan, of which approximately 45% were women and girls.

**Volunteering:** UNV mobilised 459,469 youth volunteers in the age group 15-29 years to participate in volunteering activities to support the implementation of government programmes. 5 UNV supported youth resource centres at the district level wherein a total number of 93 capacity development activities focused on financial literacy, digital literacy, career counselling, youth leadership. Training and awareness around government schemes were conducted benefitting 4,247 young women and men from rural areas. UNICEF’s partnerships with National Service Scheme (NSS) and Nehru Yuva Kendra Sangathan (NYKS) facilitated 300,000 youth volunteers in four states – Chhattisgarh, West Bengal, Madhya Pradesh and Uttar Pradesh – to engage with community members, girls and boys to raise awareness on end violence against children (EVAC) and child marriage.
In Chhattisgarh, more than 6,000 NSS volunteers reached out to more than 600,000 people across 345 villages with messages of ending violence against children.

In Gujarat, a "Youth Collective" was established with 12 organisations covering five high priority districts of Banaskantha, Sabarkantha, Surat, Kutch and Narmada, where 11 female and 14 male collective members were trained through 'Jagrik' toolkit. Jagrik toolkit is an interactive game developed by community. The Youth Collective to encourage active citizenship and is played in pairs over five weeks through self-reflection and social tasks.

In Uttar Pradesh, UNICEF along with DWCD and Police raised awareness of 5 million girls and 1 million boys on EVAC and reporting mechanisms.

In Kashmir, 19,000 children affected by conflict were supported to improve emotional and social well-being and to increase exposure to educational opportunities and community youth-led activities.

- **Youth Employability:** UNDP supported the revamping of the government employment exchange centres to become Youth Employability Service centres; wherein youth are matched with appropriate skill/ job opportunities in 3 states (Haryana, Maharashtra and Karnataka) under Project Disha. UNDP released the 2019 Skills India Report with Wheebox.


UNDP launched the India chapter of the Youth Co: Lab initiative that has provided data science and entrepreneurial skills to over 200 young participants so far.

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**Looking ahead to strengthen programming in 2020 further**

- In the context of SDGs, there is a need to follow a comprehensive and integrated approach. Collaborative efforts across the priority areas are required to address confounding factors and to develop and engage, joint work needs to be undertaken to improve access of the vulnerable population groups to quality service delivery.

- While focussing on improving the delivery of services through Government systems is of paramount importance, it needs to be combined with increasing community awareness for increased demand for services. Multi-stakeholder partnerships are important components of providing technical assistance to address the factors driving exclusion. CSO partnerships are especially important in terms of the value add for conceptualising, implementing, demonstrating and ensuring quality assurance of development initiatives.

- Evidence-based research aimed at informing policy decision-making on emerging challenges and assessing the impact of existing interventions is important and can support in much-needed course policy corrections.

- There is a need to build on the normative – operative linkages to be able to bring about significant changes and to address structural barriers to reach the furthest behind first.
Advocating child rights

“My cousin’s plight struck a deep cord in me. I knew my sister did not have to go through the same traumatic experience as Revathi. I gathered courage to stand up and speak for myself and my sister.”

Kowsalya, a 19-year-old, lost her parents when she was young. Since then she has been living with her parental uncle and aunt. Her uncle and aunt already have five children but they accepted Kowsalya and her siblings in their family whole heartedly. She is pursuing her 1st year Economics in Government Arts and Science College, Tondiarpet, Chennai.

Kowsalya’s aunt is the bread winner of the family; the burden is on her shoulders as her uncle is an alcoholic. After her school hours Kowsalya helps her aunt to manage the food stall that she has opened in front of her house to earn and support the family. Kowsalya says that she will support her aunt as she has done everything for her and her siblings.

Kowsalya is a bold person and doesn’t hesitate to stand up for her rights. She also attends meetings of an NGO in her area, Arunodhayaa Centre for Street and Working Children, working towards elimination of child labour in all forms along with their protection against all forms of abuses and violence.

Kowsalya’s family because of their financially weak situation wanted Kowsalya’s sister, Sangeeta to get married when she was just 16 years old. Kowsalya being aware of the consequences of child marriage was against this decision. “My cousin’s plight struck a deep cord in me. I knew my sister did not have to go through the same traumatic experience as Revathi. I gathered courage to stand up and speak for myself and my sister. I was scared that the same thing would also happen to me soon after. I reasoned and argued to my aunt and uncle explaining why it was wrong to get married young. The girl is still a child and is physically at risk if she becomes pregnant early. The risk of complications in pregnancy or childbirth is higher. Moreover the young girl has no control over many decisions in her life and is very vulnerable to domestic violence. Such girls drop out of school after marriage.” Her firm stand on the decision made her family postpone the marriage. Sangeeta dropped out of school after her eighth grade and learnt tailoring. She got married at 21 and also supports her aunt’s stall.

Kowsalya, a girl who is well aware of child rights, along with her other friends protected a young girl getting married. She and her friends first tried to make the girl’s parents understand by giving reasons for not getting their daughter married at such a young age but when they noticed no change in the parent’s attitude they threatened to call the police and child helpline. Raising voice for child rights has made Kowsalya a household name in her community. Whenever there is an issue related to child rights, peers and community know whom they can turn to.

Kowsalya shares another instance - “I came to know that a 15-year-old girl got married to a boy in my area and came to live in my neighbourhood. I spoke to the girl and found out that she had been pressured into the marriage while she wanted to study. With the help of Arunodaya, we went to the police and got the marriage annulled.”

“Advocating as part of a group is far more effective than working individually. When we voice as a group, people tend to take our issues more seriously, this is one such instance. Children’s Sangam (club) has got a lot of recognition this way.” Kowsalya said.

Kowsalya has earned recognition and respect in her area because of her work. As a volunteer with Arunodaya she works on other issues as well. One such issue is of water scarcity in Chennai. Residents have to hunt for water tankers, pay bribes and wait for hours even at night to collect some water. Many young girls had to drop out of school for collection of water from tankers which can come at any time. Kowsalya and her friends went to the Tamil Nadu Slum Clearance Board in their area and filed a petition requesting them to change water supply timing and streamline the timing of the water tankers to a particular time in evening, which will enable girls to attend school and colleges. Authorities took the issue seriously and changed the timings.

Kowsalya, who has full support of her uncle and aunt irrespective of their given situation, aspires to be a lawyer. “I will get married only if I want to and find the right guy. No man can reign in my freedom. I want to be able to work and make my own choices,” says a brave and bold Kowsalya.
The Children of Sunshine

A green energy solution in Madhya Pradesh is encouraging young children to attend schools and also empowering India's Anganwadi workers to become active contributors to India's renewable energy vision.

It is not unknown that India's Anganwadi system is the world's largest community-based programme to holistically address health, nutrition and educational needs of children and future mothers. But even after being the largest programme, the bottlenecks in service delivery and community outreach pose a challenge in its proper implementation. Many Anganwadi centres are deprived of basic facilities such as electricity which stops young children from attending the centres.

"My children say that it's very hot in Anganwadi and refuse to go there. They say they sweat a lot," says Rukhsana Ayub, a mother and resident of Burhanpur.

India faces huge energy paucity and the only answer to this problem is solar power. Madhya Pradesh is India's sixth largest contributor of solar energy. If electricity is supplied in the Anganwadi centres in the state, it would open new doors of possibilities for both children and women. It would reduce drop-out rates, boost women's productive use of sustainable energy, and increase women's participation and leadership in gender-responsive energy policy making.

"If we get devices like computers which run on electricity in our Anganwadi it will be beneficial for our children who come from poor backgrounds. They will get an opportunity to learn something new and modern," says Roopa Singh, a resident of Burhanpur.

Electrifying all Anganwadi centres in the state comes with its own set of challenges such as lack of infrastructure and limited resources. Therefore, to address this challenge, UN Women and Madhya Pradesh Urja Vikas Nigam Ltd., Government of Madhya Pradesh partnered to power 63 Anganwadi centres in the two districts of Burhanpur and Alirajpur with solar energy.

The smart Anganwadi Project enables off-grid energy access at the centres for improved working. These solar-powered centres with lighting, cooling and mobile charging facilities hosts a wide range of basic services and activities, including creating safe spaces to enhance women's livelihood opportunities and community based activities in the evening hours.

Now when electricity has reached the centres, there has been an increase in the attendance. The young and bright minds can now learn, play and have nutritious food in a happy and pleasant environment. It is not only the children who are enjoying the changes but also the Anganwadi workers. They are now using digital learning aids to educate children and helping them to understand the lessons better.

"My son never used to go to Anganwadi before. He constantly complained saying that it's very hot there and asked me to take him back home. After the fan started working, my son now enjoys being in Anganwadi. He doesn't want to go home," says Rupali Sachin, a resident of Burhanpur.

Anganwadi are not just safe places for children but for women too. Women can access education, build skills and find opportunities that can empower them. The project has proved beneficial for even the Anganwadi workers; they now work comfortably at their respective centres and have experienced an improvement in their productivity. "We depend on mobile phones to do a lot of work. After we got electricity here, we are able to charge our mobiles now. Sometimes, even if our work extends till late evening or night, we are not afraid to be here as there is power," says Bharti Pawar, an Anganwadi Supervisor in Burhanpur.

The women were also given training in the operation and maintenance of solar units. They were trained how to clean the solar panels and how to check whether a bulb is working or not and if not then how it can be replaced. The project demonstrates that leveraging renewable energy can indeed pave the way for transforming simple Anganwadis to 'Smart Anganwadis' that deliver high-quality services.
Building community with Youth Volunteers

“Indian youth have learned to address the developmental gaps and develop their skills to work as professionals which directly impacts in nation building in India, which has the world's largest population of young people.” – Ankit Jaiswal, a national UN Volunteer Management Associate serving with UNDP under the ‘Strengthening NYKS and NSS’ project

The Nehru Yuva Kendra Sangathan (NYKS) and the National Service Scheme (NSS) are among the world's largest youth volunteering schemes. They aim to instil a strong sense of civic engagement in youth and provide them with opportunities to develop their skills and personality.

United Nations Volunteers works with Government of India to strengthen these schemes through 29 national UN Volunteer District Youth Coordinators deployed in all the states of the country. They facilitate greater youth participation and voice in sustainable development programmes. Various activities have been designed on both national and district level to engage youth at large and provide them relevant information addressing local challenges.

How the Youth Volunteers are contributing to sustainable development in different states?

- **Reviving 150 ponds in just 60 days in Ernakulam**
  The ponds are a vital water resource for the community in Ernakulam district of Kerala. From 3,000 ponds in 1980s to only 600-700 ponds in 2016, the ponds have been dying a slow death. To revitalise ponds, the District Collector started a project 'Entekulam Ernakulam' under the government's Haritha Kerala (Green Kerala) Mission. This initiative was led by Toney Thomas, a national UN Youth Volunteer District Coordinator along with a team of volunteers, as part of the NYK Ernakulam Initiative. Toney was awarded by Hon'ble Chief Minister of Kerala Shri Pinarayi Vijayan for his work on volunteer mobilisation for a project by district administration called '100 ponds in 50 days'. He and his team of volunteers not just cleaned the ponds but also created awareness about preserving the ponds in the state.

- **Defying the norm to educate girls in Uttarakhand**
  Shiv Semalty, a national UN volunteer, has been working towards challenging traditional norms and bringing change in the lives of youth living in Uttarakashi. He introduced the youth to the digital world in the area by setting up a computer training centre. Initially, the centre was frequented only by men, as there was no facility for women. But after a lot of women expressed their interest, Shiv ensured that a female teacher was recruited. Soon enough, women students started enrolling in the computer centre. Furthermore, Shiv also initiated stitching classes in the centre supporting women to build their skills. Today, as part of NYKS's initiatives, over 200 young women are a part of these initiatives, making them self-sufficient and economically independent.

- **Creating jobs for Persons with Disabilities in Tikamgarh, Madhya Pradesh**
  Gyanendra Vishwakarma, a national UN Youth Volunteer District Coordinator, initiated a special skill upgradation training programme in two-wheeler repairing for 20 Persons with Disability (PwD) for a period of two months with the help of Rural Self Employment Training Institute, Tikamgarh. Out of the 20 participants, one has been hired by Bajaj Motors workshop and another has secured a government loan to start his own motorcycle repair shop in his village.
PARTNERING WITH THE PRIVATE SECTOR

The UN system in India is a reliable partner of the private sector to further sustainable development in India. It recognises and appreciates the role that businesses can play towards the achievement of Agenda 2030. Key results of our collective work with the private sector include:

Nutrition

- **Support to Poshan Abhiyaan**: UNICEF launched a multi-stakeholder platform called IMPAct4Nutrition(I4N) that brings together diverse companies who are interested in revolutionising the nutritional status of the country. 50 companies have pledged their support by late 2019 to:
  - Utilise their assets and business processes for nutrition, for e.g. their distribution network and customer outreach.
  - Utilise their CSR spends towards promoting behaviour change and supportive norms for nutrition within their existing ecosystem.
  - Engage employees for effective messaging on nutrition and family-friendly policies at the workplace, which includes nutrition interventions.

- **Promoting fortification**: WFP collaborated with General Mills Foundation and Jubilant Bhartia Foundation for the fortification of wheat flour and rice served in Mid-Day Meals across 1,600 schools for improved nutrition of 300,000 children aged 6 to 14 years in Varanasi district in Uttar Pradesh. It has also worked with the private sector on building their capacities for becoming fortified rice kernel (FRK) suppliers towards increasing the FRK production base in the country.

- **Strengthening supply chains**: In Odisha, WFP, along with Ericsson, have demonstrated supply chain optimisation for TPDS to save the government 32 per cent of transportation costs. The Government of Odisha is now rolling this out across its supply chain and paddy procurement systems. Ericsson’s endeavours as part of this partnership have received multiple awards including the ‘Corporate Social Responsibility (CSR) Project of the Year’ as well as the 2019 Golden Peacock CSR Award.

- **Supporting Anemia Mukt Bharat**: UNFPA collaborated with the Azim Premji Philanthropic Initiative and the Department of SC and ST Development, Government of Odisha for improving health, nutrition and well-being of 90,000 adolescents studying in 395 residential schools. During 2019, 77,500 adolescents (girls and boys) were tested for anaemia deficiency and are receiving treatment in line with the T3 (test, treat and talk) model of Anemia Mukt Bharat. Three thousand students were also trained as Peer Educators in tribal residential schools.

- **UNFPA also partnered with the Sun Foundation for the flagship programmes of Amrutha Hastham in Andhra Pradesh and Mathrupoorna in Karnataka that resulted in an increased number of pregnant women receiving benefits, 0.27 million in AP and 0.32 million in Karnataka.**

Health

- **REC Foundation of Rural Electrification Corporation Limited and UNFPA India collaborated across multiple programmes in the areas of adolescent and reproductive health across eight states, with focus on awareness-raising and capacity-building initiatives, especially for the marginalised populations.**

- **UNFPA India collaborated with the USHA International Limited and reached out to 450,000 girls and women undergoing training in 21,000 tailoring schools to impart information on life skills, sexual and reproductive health and rights.**
Waste Management and Sanitation

- The Plastic Waste Management Programme of UNDP, in partnership with the state municipal corporations and corporates such as Hindustan Coca-Cola Beverages, Hindustan Unilever and HDFC Bank, attempts to enhance sustainable waste management practices by deploying a socio-technical model (segregation and collection) to improve the use of resources. Additionally, the programme placed ‘Safai Sathis’ (waste pickers from the informal sector) at the centre of this process and contributed to the improvement of their socio-economic well-being. In 2019, the project was operational in 25 cities, impacting more than 3,000 waste pickers and the cumulative plastic collection was 30,335 MTs.

- UNICEF has partnered with the Unilever brand Domestos to strengthen the capacity of the government on the national sanitation campaign. The programme is a part of Unilever’s Sustainable Living Plan, and in 2019, 8.97 million beneficiaries got sanitation coverage in 27 of the most backward districts of India.

- Tide Turners Plastic Challenge: A UNEP led global initiative was launched in June 2019, engaging youth across the country to address the issue of plastic pollution in India. Partnerships (with 16 entities), and other partners resulted in engagement with over 48,854 young people through activities like awareness, nationwide clean-up drives, campaigns and conversation with businesses.

Securing Livelihoods

- UNDP and the Larsen and Toubro Public Charitable Trust Project have collaborated on Project Uddyam - Integrated Skills Development Project. This project brings together the government, private sector, the UN, and the community for an area-based intervention (in Talasari, Maharashtra) to develop it as a model convergence block with 100 per cent families accessing at least one government scheme and increasing the income of project beneficiaries through farm and non-farm interventions (revival of Warli Art).

- UNDP Project PROSPER (Producers in Organised Supply Chain Enterprise) with HSBC, aims at improving the livelihoods of artisans and producers of natural fibres in India by strengthening the capabilities of social entrepreneurs who will act as intermediaries between the large buyers and small producers. The project has benefitted 25 entrepreneurs and 900 producers.

- IKEA Foundation, UNDP and the India Development Foundation through DISHA project aims to improve the lives of one million underprivileged women in India, by enabling them to acquire marketable skills and become employable.

- ILO, in partnership with Amazon and Inditex, has promoted decent work in supply chains.

Women’s Empowerment and Gender Equality

UNICEF and the SUN Foundation collaborated in Tamil Nadu to scale up the Early Child Marriage programme with the government to mainstream and strengthen gender and rights-based mechanisms under ongoing government programmes. The current rate of decline in child marriages in Tamil Nadu is meagre, and at this rate, it may take 20-25 years for the total elimination of child marriage in the state. In 2019, the programme reached more than 0.35 million adolescent girls and boys who now have the knowledge, skills and support of community members to take action on adolescent empowerment and ending child marriage.

UNICEF has been working with the Ethical Tea Partnership (a consortium of tea companies) since 2014, to address the issues of child protection and girls’ empowerment in tea communities in Assam. Currently, this programme is operational in six districts, and is Scaling up the child protection model and expanding the focus to address a broader range of issues including health, nutrition, education, water and sanitation (WASH) and business practice change. Significant progress has been made to inform policies and systems at all levels of government and industry to strengthen child protection measures and to ensure that these changes are sustainable and scalable. The programme has reached out to more than 250,000 beneficiaries living in 206 tea gardens.
Creating Platforms and Mechanisms to leverage the strength of the Private Sector

India SDG Trust

The India SDG Trust was incorporated in late 2018 and received mandatory 80-G and 12AA certifications to facilitate CSR funds from Indian corporates and individuals towards the SDGs, while also enabling tracking and monitoring of CSR spends against the Goals. The UN continues to support the initiative by providing technical expertise to the Trust and helping steer these conversations with the corporates.

SDG Finance Facility

In March 2019, the Vice Chairman of NITI Aayog and the UNDP Administrator, with the support of the Swiss Agency for Development and Cooperation jointly launched the SDG Finance Facility, a multi-stakeholder platform on innovative financial instruments such as Municipal Bonds, Pay for Success- Impact Bonds, SDG Bonds and SDG aligned ETFs. Some of the key highlights of the work done by the facility include:

- Seven states and 15+ municipalities engaged with the platform to understand green bond issuance processes and shared insights on the support they require for municipal financing.
- Engaged with the Ministry of Corporate Affairs and 40+ corporates from across the country to evangelise the pay-for-success model, identify critical bottlenecks and make recommendations.
- Worked with the Impact Investors Council, Asha Impact and KPMG to facilitate roundtables on the Social Stock Exchange and shared suggestions with the Securities and Exchange Board of India.

The SDG Finance Facility is also building an investor map for India, a dynamic tool containing a range of market-specific investment opportunities for SDG-aligned capital deployment.

United Nations-NITI Aayog Investor Consortium for Women Entrepreneurs

The consortium aims to address the growing gender gap in investments made by venture capitalists. It brings together key ecosystem stakeholders, including venture capitalists and impact investors to work with women entrepreneurs on the funding of start-ups, job creation, financial inclusion and overall capacity building.

In 2019, the consortium received around 300 applications from women entrepreneurs (via the NITI Aayog WEP database), from across the country. The first investor pitching session was organised, where 34 women entrepreneurs got a chance to pitch to leading investors.

SDG Impact

SDG Impact, a UNDP flagship initiative aims to provide investors, businesses with unified standards, tools, and services required to authenticate contributions to advance the SDGs. In-depth sector consultations were hosted to solicit feedback on 18 standards for private equity funds and 21 standards for the use of proceeds bonds that have been specifically designed to assist investors in aligning their capital with development goals.

Engagement with young budding entrepreneurs

To expand the dialogue on the SDGs and business responsibility, UN in India had appointed Manasi Tata, Executive Director and CEO, Kirloskar Systems Limited, as the first Young Business Champion for the SDGs. To help young innovators and budding entrepreneurs build a deeper understanding of how they can catalyse action for the SDGs, a team from the UN and Manasi Tata engaged with an enthusiastic audience of 200+ youth from Karnataka, Andhra Pradesh, Telangana, Maharashtra, Uttar Pradesh and Punjab, at the annual Yuva Summit organised by the Deshpande Foundation in Hubballi, Karnataka.
COMMUNICATING AS ONE

The UN Country Team in India, through the UN Communications Group (an inter-agency group of Communication Officers), has made ‘communicating as one’ one of its goals, to strengthen inter-agency cooperation, ensure consistency of messaging, and increase the profile and transparency of United Nations activities in India.

In the age of digital-first communication, joint communication is driven by four strategic approaches:

1. Be the leading voice on issues and solutions.
2. Encourage people to care by building an emotive connection.
3. Inspire audiences to feel the possibility and mobilise action.
4. Mobile, multimedia and multilingual.

In 2019, the UN in India implemented the global joint communications branding, including for publications, campaigns, infographics and presentations. The UNIC and UN in India social media platforms and websites were merged as well, bringing together all the UN India related information on a single, user-friendly platform. Last year, on the day India joined the UN, the UN in India launched its official Instagram account, showcasing the long-standing partnership between the UN and the government of India.

The UN Inter-Agency Library transitioned from a hard copy to a digital library to increase access to UN publications for people who are not physically located in Delhi. The digital library has over 3,000 publications and is updated regularly.

The One UN Approach has also allowed for more effective outreach in 2019. The integrated communications team, together with the UN Communications Group, led multiple wide-reaching, strategic, and high-profile communications campaigns to support key national priorities and address key development challenges, including:

- Outreach to approximately 75,000 unique visitors per month through our integrated website and social media channels.
- Supporting the government of India’s #BeatAirPollution campaign through effective social media and on-ground outreach, this led to over 88 million impressions globally with close to 41 million from India alone.
- Developing communications strategy and advocacy and outreach toolkit for the Government of India’s Office of the Registrar General to support India’s Census 2021. UNICEF India is in the lead with support from UNDP, UNFPA and UN Women.
- Worked closely with UNCCD to design and execute UNCCD’s COP14 online and offline campaign held in India in September 2019. #UNCCDCOP14 generated 205 million impressions globally. UN in India channels generated 2.2 million impressions alone. The integrated communications unit also supported the government of India in designing the India Pavilion.
- Created a unique hashtag for the visit of Deputy Secretary-General of the UN, Amina J Mohamed to India, #DSGLive, which monitored the digital impact of her engagements and was viewed almost 100 million times across Facebook and Twitter. Social media posts with the hashtag reached over 33 million unique accounts across both platforms.
- Advocacy and outreach on issues of women’s empowerment and gender equality reached out to 1.25 million people through social media and print media outreach. For instance, one of our leading campaigns since 2016, Women Transforming India, in partnership with NITI Aayog, which aims to celebrate exceptional women entrepreneurs in India and connect them with opportunities, has already received over 5,000 entries and recognised almost 50 women changemakers.
- Ensuring visibility in leading traditional and online media through drafting and placing op-eds, press releases, organising press conferences and publication launches and more. For instance, the integrated team has placed over 12 op-eds in leading newspapers and online portals. The team also organised a series of interviews for UNAIDS regional director with one of India’s leading broadcasters, Rajya Sabha TV and newspaper Hindustan Times.
- Promoting campaigns around thematic priorities and international days, such as World Food Day, World Cities Day, World Refugees Day and more.
The Operations Management Team (OMT) in India under the leadership of UNICEF (Chair) and UNFPA (Vice-Chair) along with its Working Groups aims to increase the agility of UN in India’s business operations and to enable deeper forms of collaboration and integration such as policy harmonisation and capacity consolidation. The highlights of the achievements of these service lines are captured and presented below.

**Common Administration and Travel**

The objective of the general administration and travel working group is to develop and implement plans on general administrative matters including facilities management, logistical support and travel-related issues. The overall achievement of the working group is highlighted under the following heads:

**Common Premises – UN House:**
The UN House in India has heritage significance and was inaugurated on 1st Oct 2018 by UN Secretary-General, Mr. Antonio Guterres. The UN House initiative is a significant milestone for the UN reform at the country office as it co-locates 15 UN entities to operate under one roof for enhanced efficiency, effectiveness as well as reducing operational costs. It is a response to the sustainability agenda.

The UN House has achieved the highest level of India’s Green Building Rating System for designing and constructing the country’s greenest, energy-efficient, and high performing buildings and interior spaces. Some of the benefits include reduction of operational costs, effective use of shared resources, enhanced security and unified presence at the national capital region, healthy and comfortable office with limited impact on the natural environment.

- **Accessibility Compliances:** The UN House has achieved major compliances with the “accessibility norms and standards”. UN premises are fully accessible for people with disabilities, including accessible shared spaces, offices, restrooms, and ramps for access to buildings.

- **Common Travel LTA:** UN in India formulated a common long-term arrangement with a single company to efficiently deliver the travel management services (both domestic and international) to UN agencies in India.

- **Formulation of DSA Rates:** Conducted the International Civil Service Commission (ICSC) Daily Subsistence Allowance (DSA) survey in India to streamline the prevailing discrepancies in the standard and special DSA rate for multiple states and to ensure that per-diem rates are neither over nor understated, thereby enabling travellers to cover their travel expenses adequately.

- **Air Pollution Study:** UN agencies in India undertook a special study on air-pollution to characterise the personal exposures to PM2.5 amongst employees to estimate daily average and annual average PM exposures and to profile the significant environments contributing to PM exposures.

**Common Finance**

Finance Working Group (FWG) facilitated and implemented changes as required in the existing common financial practices, across the UN System, as a result of new tax reforms (GST) implementation in India. FWG is also working on harmonising common banking services in addition to analysis of corporate and Forex card services offered by various banks. UNICEF, UNDP and UNFPA have jointly put in place the Harmonised Approach to Cash Transfers (HACT) framework for transferring cash to government and non-governmental implementing partners, irrespective of whether these partners work with one or multiple United Nation agencies. The objective is to support a closer alignment of development aid with national priorities and to strengthen national capacities for management and accountability, with the ultimate aim of gradually shifting to national systems.
Common Human Resources

The HR Working Groups focused on training and capacity development activities:
- Joint common training/workshops, mainstreaming diversity and inclusion issues in the recruitment process.
- Scaling up of training to cover broader issues of harassment, abuse of authority and sexual exploitation.
- A sensitisation workshop was also undertaken on a medical insurance plan for all staff and retirees.

Common Information and Communications Technology (ICT)

The ICT Working Group established common ICT services LTAs for Help Desk Support Services, Multi-Function Printing Services, Access Control Services, and Internet Services.

Common Procurement

The Procurement Working Group (PWG) utilised a common platform for sharing information and developments related to procurement in India. PWG was also instrumental in organising Certificate in Procurement Supply (CIPS) Level 2 and 3 professional certifications in Procurement and Supply Chain.

Work of the Operations Management Group (OMT) has laid the foundation to manage the resources and assets responsibly in the interest of the environment.
# ANNEX 1:
List of UN agencies in India

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<tr>
<th>Name of the Agency</th>
<th>Head of the Agency</th>
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<tr>
<td>UN Resident Coordinator</td>
<td>Ms. Renata Lok-Dessallien</td>
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<td>APTT-ESCAP</td>
<td>Ms. Michiko Enomoto</td>
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<td>FAO</td>
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<td>UNODC</td>
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