

# ANNEXES

	<b>1</b>
1. ANNEX 1 - EVALUATION FRAMEWORK	2
2. ANNEX 2 - EXTENDED METHODOLOGY	5
3. ANNEX 3 - BIBLIOGRAPHY	11
4. ANNEX 4 - DATA COLLECTION TOOLS	15
5. ANNEX 5 - LIST OF KEY INFORMANTS	41
6. ANNEX 6 - INTENDED AUDIENCES: EVALUATION USERS AND USES	47
7. ANNEX 7 - ASSESSMENT OF UNICEF BRAZIL COUNTRY OFFICE RESPONSE TO THE COVID-19 PANDEMIC (2020-2021)	52
8. ANNEX 8 - DETAILED INTEGRATED BUDGET	79
9. ANNEX 9 - OUTCOME TARGET ACHIEVEMENT	80
10. ANNEX 10 - OUTPUT-LEVEL TARGET ACHIEVEMENT	87
11. ANNEX 11 - SEAL STAKEHOLDER DIFFERENCE ACCORDING TO SEAL CERTIFICATION STATUS	116
12. ANNEX 12 - SEAL STAKEHOLDER DIFFERENCE ACCORDING TO SUB-NATIONAL STRATEGY	118
13. ANNEX 13 - COUNTRY PROGRAMME COMPONENTS, OUTCOMES, STRATEGIES, STAKEHOLDERS AND CORRESPONDING SDGs	119
14. ANNEX 14 - GEOGRAPHICAL COVERAGE, TARGET POPULATIONS AND UNICEF OFFICES	120
15. ANNEX 15 - DATA ON INDIVIDUALS AT RISK OF VIOLENCE, POVERTY AND ILLITERACY IN BRAZIL	121
16. ANNEX 16 – ADAPTATION DUE TO CHANGES IN AGENDA AND PRIORITIES, SEAL AND PCU	122
17. ANNEX 17 - INFORMATION RELATED TO OUTPUT INDICATORS	124
18. ANNEX 18 - RECONSTRUCTED THEORY OF CHANGE	128
19. ANNEX 19 - PRIORITY AREAS, OUTCOMES AND STRATEGIES	134

## 1. ANNEX 1 - EVALUATION FRAMEWORK

The TOR for the evaluation listed a total of 6 evaluation questions organized under five OECD/DAC evaluation criteria. The inception phase of the evaluation helped to agree on a prioritization of these evaluation questions and to reorganize evaluation questions within an evaluation framework. In this evaluation framework, the overarching high-level evaluation questions to guide the evaluation were listed, whilst more specific questions included in the TORs, were used to develop indicators and areas for inquiry to be included in specific tools for data collection. The final evaluation framework included a final list of 32 Evaluation Questions (EQ). The evaluation questions are structured according to the following five OECD criteria: relevance, effectiveness, efficiency, coherence and sustainability<sup>1</sup>. See Table 1 below for the full evaluation framework showing evaluation criteria, questions and data collection methods.

**Table 1 - Evaluation framework (linking thematic areas, lines of enquiry, data collection methods)**

Dimensions of Analysis/ Thematic areas	Sub Questions/Lines of inquiry	Judgement Criteria	Indicators	Sources/Data collection methods
<b>Relevance - EQ1: To what extent was the country programme (CP) based on the country priorities (at national and sub-national levels), people's needs (especially most marginalised) and UNICEF's strengths (added value)?</b>				
<b>Alignment/engagement</b>	To what extent is there alignment of CP priorities, outcomes and cross-cutting themes to Government policies, strategies and plans Do Government policies, strategies and plans drive UNICEF's intervention strategies, plans and activities? To what extent is there UNICEF engagement at national and sub-national levels?	Evidence of assessment of beneficiary needs and programme alignment to these Evidence of knowledge of government priorities, policies and strategies and alignment of UNICEF programme priorities to these	#/type of needs assessments undertaken Extent to which needs assessment results were used #/type of stakeholders involved in the design and implementation process #/category of beneficiaries identified and definition of vulnerabilities	Document review Preliminary analysis of secondary data Interviews with key stakeholders and group interviews with beneficiaries Stakeholder and beneficiary survey
<b>Added Value</b>	Does the CP cover areas where UNICEF can add value (according to its strengths)?	Evidence of UNICEF monitoring for changes in context, needs, priorities and the programme evolving according to these changes	Extent to which UNICEF defines and plans CP according to its strengths and added value	
<b>Flexibility</b>	To what extent has the programme evolved and adapted because of changes in context, priorities, policies and beneficiary needs?			
<b>Targeting</b>	To what extent does the CP address the needs of the children, adolescents and young people, especially the most marginalized and their families to ensure that no one is left behind? To what extent are the most vulnerable thematic and geographical areas prioritised and targeted?			
<b>Evidence Base and Inclusiveness</b>	To what extent was CP design informed by evidence (to identify priorities, population groups and targets (especially most marginalised and their specific and differential needs, and geographical areas)			

<sup>1</sup> Better Criteria for Better Evaluation, Revised Evaluation Criteria Definitions and Principles for Use, OECD/DAC Network on Development Evaluation, December 2019.

	To what extent were stakeholders involved at the country programme design, planning and implementation stages (Involvement of government, other partners and target populations)?	Evidence of participation of stakeholders in the programme design and implementation processes Evidence of UNICEF design CP according areas where it can add value		
<b>Effectiveness - EQ2: To what extent did UNICEF deliver expected results and achieve its targets?</b>				
<b>Achievement of Results</b>	To what extent have planned outputs and targets have been achieved? Are there areas where UNICEF has under or over achieved? (sector, population, geography) Did UNICEF achieve any other results not planned for in CP? (COVID, Migration Crisis).	Evidence of results achieved according to planned targets and documentation of any over/underachievement	# of results fully achieved against the indicators and benchmarks	Review of monitoring data and reports Analysis of secondary data against benchmarks
<b>Contribution to Achievement of Results</b>	To what extent and how have UNICEF's two main intervention strategies, SEAL and PCU, contributed to achievement of outputs and outcomes? What was the effect of the capacity building activities (at national and sub-national levels on achievement of outputs and outcomes? (via SEAL, PCU and other relevant interventions) What other factors have contributed to the achievement/non-achievement of results, including other national and sub-national level strategies and activities?	Evidence of changes in partner capacity against baseline assessments Evidence that strategies employed contributed to results achieved	Extent to which capacity building activities have improved partner policies, strategies and practices #of partners reporting improved capacity	Interviews with stakeholders and beneficiaries Stakeholder and beneficiary survey
<b>Efficiency – EQ3: How can UNICEF better deliver results in the next CP? (Priorities, structure, budget prioritization).</b>				
<b>Timeliness / Costs</b>	To what extent were activities and outputs delivered within the intended timeframe? Were timelines sufficient to deliver activities and achieve results? How do actual costs compare to planned costs and have these evolved over the course of the CP? How cost efficient have the four components been? How flexible are budgets to cater for changing needs?	Evidence of measures taken to overcome delays Evidence of efficiency achieved and comparison across components	# of activities implemented as per workplan Cost per beneficiary across each component	Analysis of budget data Review of work plans and results framework Interviews with UNICEF, private

<p><b>Structures/ Resourcing/ Partnerships</b></p>	<p>To what extent is the current UNICEF structure and its resourcing adequate to deliver the results? To what extent is the private sector ready for non- restricted funding and its use to target the most urgent thematic and geographic areas as well as population groups? To what extent is the modality of working through implementing partners working to achieve results? Do they have adequate capacities and skills?</p>			<p>sector and other implementing partners</p>
<p><b>Sustainability – EQ4: To what extent are the achievements of the CP likely to be sustainable?</b></p>				
<p><b>Capacities/ Structures/ Ownership</b></p>	<p>What is the national, subnational government’s capacity (institutional, technical, financial, political etc.) to progressively take over services currently provided by UNICEF? Has capacity of government, implementing partners improved due to UNICEF interventions and can they continue providing services without UNICEF support? Are there any other factors that are likely to affect sustainability of processes and results? To what extent can UNICEF disengage from the support and divert its resources to target other priorities and needs (either within or outside Brazil)? How strong are national, subnational governments, partner and beneficiary ownership of the strategies, processes and results achieved?</p>	<p>Evidence of strategies for achieving sustainability embedded into programme design</p>	<p>Extent to which government has plans to take over UNICEF supported activities Amount of budget allocated by government against start of programme Views of stakeholders on extent to which UNICEF an disengage and refocus its resources onto other priorities Targets achieved against sustainability plan</p>	<p>Review of documents Interviews with key stakeholders</p>
<p><b>Coherence – EQ5: To what extent is there coherence across the CP, cross cutting areas and emergency response preparedness/response strategies</b></p>				
<p><b>Structures/ Synergies</b></p>	<p>To what extent does the downstream, and upstream of the country programme design and implementation coherently address inequalities, equity concerns, human rights and gender equality including policy and advocacy? To what extent does the Country Programme have a coherent capacity development strategy (focusing on individuals, institutions and the enabling environment)? To what extent are there synergies and coherence within UNICEF structures, at national and sub national levels as well as across teams? How can BCO ensure that its emergency preparedness and response programmes (e.g. Covid-19, Migration Crisis) are embedded coherently within its longer-term program in the next CPD? How can BCO transition from emergency response to development mode? To what extent are there cross-sectorial linkages at local level and between the local level with state and federal stakeholders?</p>	<p>Evidence of measures taken to achieve coherence across programme components and partners</p>	<p>#Meetings held to decide of roles and responsibilities to avoid duplication and achieve coherence</p>	<p>Review of documents Interviews with key stakeholders</p>

## 2. ANNEX 2 - EXTENDED METHODOLOGY

### **Qualitative Data Collection**

Key Informant Interviews (KIIs) were conducted with 49<sup>2</sup> high level stakeholders from UNICEF, government, implementing partners, civil society, UN agencies, and the private sector. The respondents were selected in collaboration with UNICEF during the inception phase. The sample makeup for high-level interviews is provided in Table 5 below and a detailed list is provided in the Annex 6. A series of semi-structured interview guides with a limited number of core questions and additional ‘prompting questions’ were created and tailored to each type of stakeholder. Each guide was adapted according to the type of stakeholder. The interview guides used can be found in Annex 5.

**Table 1 - Key informant interviews**

Stakeholder Type	Female	Male	Total
UNICEF LACRO	0	1	1
UNICEF Brazil CO	5	4	9
UNICEF field offices	4	2	6
Government	8	4	12
Implementing partners	5	1	6
Civil society	3	4	7
UN agencies	4	1	5
Private sector	1	2	3
<b>Total</b>	<b>30</b>	<b>19</b>	<b>49</b>

While recognising the limitations of the purposive sampling strategy used, attempts were made to gather views of all relevant stakeholders. The UNICEF country office coordinated with field offices to identify and suggest a list of municipalities and urban areas where the evaluation team could conduct data collection. The areas were purposely selected based on ‘best expertise’ available. This means those areas were selected with highly experienced and responsive Seal Coordinators or City Hall (PCU) focal points, and there was easy access to key stakeholders involved in the UNICEF supported initiatives.

To select Seal municipalities, municipalities with medium and large population sizes (187 of the 1,924 Seal municipalities) were excluded<sup>3</sup>. Four municipalities were selected from the list of eligible ones, two from each region (Amazon and Semiarid), and one certified and one not certified in each region. The selected municipalities had low, medium and high performance in the Seal social impact indicators. Due to lack of response, the Amazon municipalities had to be replaced by others with similar characteristics.

After selecting the municipalities and urban areas, the principle of snowball sampling was used, whereby the sample expanded based on referrals made by the interview respondents. With the help of Seal coordinators and PCU focal points, additional respondents were identified for interviews. At the subnational level, 19<sup>4</sup> KIIs were

<sup>2</sup> In the IR, 55 KIIs with high level stakeholders were proposed, however due to the context of the evaluation (second wave of COVID-19) and the difficulties in reaching some of the participants, the team managed to interview 49 key informants.

<sup>3</sup> Following IBGE's population size classification, small municipalities are those up to 50,000 inhabitants, medium ones above 50,000 to 100,000 inhabitants, and large ones with 100,000 inhabitants or more.

<sup>4</sup> In the IR, 26 KIIs with subnational level were proposed, however due to the context of the evaluation (second wave of COVID-19) and the difficulties in reaching the participants, 19 KIIs were conducted.

conducted to gather insights on the Seal and PCU initiatives. Table 6 below shows the sample made for interviews conducted at subnational level.

**Table 2 - Subnational level key-informant interviews**

Strategy	Municipality	Stakeholder	Female	Male
Seal	Nova Fátima (BA), Poção (PE), Bequimão (MA) and Envira (AM)	Articulador	0	4
		Representative of the Secretariat of Education	4	0
		Representative of the Secretariat of Health	2	2
		Representative of the Secretariat of Social Assistance	2	1
		Representative of the Secretariat of Culture	0	1
		Mayor	0	2
PCU	Rio de Janeiro (RJ) and São Paulo (SP)	PCU Focal point	1	0
<b>Total</b>			<b>9</b>	<b>10</b>

In addition to the KIs at subnational level, 13<sup>5</sup> focus group discussions (FGDs) were held with adult and adolescent stakeholders involved in the Seal and PCU strategies, including NUCA/JUVAs. In total, 65 individual interviews were conducted and 13 focus groups with participation from 31 people.

The FGDs with adolescents were planned to be conducted in each selected Seal municipality and PCU city, however, this was not possible in Nova Fátima (BA) due to lack of response. The evaluation team strictly adhered to the principles of 'do no harm' and worked around respondent availability. Efforts were made to select participants from different socio-economic backgrounds in order to capture patterns of homogeneity and divergent viewpoints. Between two and five individuals participated in each FGD and a pre-designed question guide was used to guide the discussions. The FGDs provided insights into a wide range of opinions, and the variations that exist in relation to specific issues and geographies. The FGDs are summarised in Table 7 below.

**Table 3 - Subnational level focus group discussions**

Strategy	Municipality	Stakeholders	Number of FGDs	Female	Male
Seal	Nova Fatima (BA)	Conselho Tutelar and CMDCA representatives	1	3	0
		Community Forum participants	1	3	0
	Poção (PE)	Adolescents	1	3	1
		Conselho Tutelar and CMDCA representatives	1	2	1
		Community Forum participants	1	2	0
	Bequimão (AM)	Adolescents	1	4	0
		Community Forum participants	1	1	0

<sup>5</sup> In the IR, 18 FGDs were proposed, however some of the participants were hard to reach even with support from UNICEF.

	Envira (MA)	Adolescents	1	4	0
PCU	São Paulo (SP)	Adolescents	1	2	0
		Intersectoral group representatives	1	3	0
	Rio de Janeiro (RJ)	Adolescents	1	2	1
		Intersectoral group representatives	2	2	0
<b>Total</b>			<b>13</b>	<b>30</b>	<b>3</b>

### Quantitative Data Collection

Quantitative data was used to supplement qualitative data at the subnational level. Although the sample size is small, the quantitative data contributed to a broader understanding of the stakeholders and adolescents' perspectives. Three remote surveys were conducted: two for municipal-level stakeholders (one for Seal stakeholders and one for PCU stakeholders) and one for adolescents who participated in the citizenship nucleus<sup>6</sup>. To reach people in the selected regions, the support of the UNICEF team was essential. The contact of the focal points of each region (Seal Articular and PCU Municipal focal point) was made available and through these contacts, the evaluation team could access the contact of other people involved in the programs and of the NUCA/JUVA adolescents.

The surveys were carried out online using KoboToolbox between January and February 2021. Overall, 286 responses were collected from the Seal survey, both from municipal-level stakeholders and NUCA/JUVA adolescents, from 11 states, 7 from the Semi-arid region and four in the Amazon. For the PCU survey, 48 responses were received from the 10 urban areas.

The sample **eligibility criteria for the 30 Seal municipalities** considered population size and attendance at the training cycle<sup>7</sup> as a proxy for engagement in the programme, as shown in Table 8 below. The selected sample of 30 municipalities followed the distribution according to their region, certification status, and performance in the social impact indicators (see Table 8, 9 and 10 below). We also used the priority list provided by UNICEF, selecting half of the municipalities from this list. Although there was no intention to be statistically representative in all subgroups due to the small size of the sample, the variety of characteristics guaranteed by the eligibility criteria enriched the analysis.

**Table 4 - Survey sample eligibility criteria**

CRITERIA	SAMPLE	
	Included	Not included
Population size	Small 1, Small 2	Medium, Large
	(1737 municipalities)	(187 municipalities)
Engagement in the programme	Present at 4th training cycle (1306 municipalities)	Not present at 4th training cycle (618 municipalities)

**Table 5 - Sample selection criteria in the Amazon territories**

	Universe	Percentage	Sample size
--	----------	------------	-------------

<sup>6</sup> Núcleos de Cidadania de Adolescentes (NUCA) in the Semi-arid region, and Juventude Unida pela Vida na Amazônia (JUVA) in the Amazon region.

<sup>7</sup> UNICEF provided the datasets for both the population size for each municipality and the attendance at the training cycle.

Social Impact performance	Not certified	Certified	Not certified	Certified	Not certified	Certified
Low (6 or less)	113	1	20%	1%	1	0
Medium (7)	245	38	44%	46%	1	3
High (8 or more)	204	43	36%	52%	1	3
<b>Total</b>	<b>562</b>	<b>82</b>	<b>100%</b>	<b>100%</b>	<b>3</b>	<b>6</b>

**Table 6 - Sample selection criteria in the Semiarid territories, number of municipalities**

Social Impact performance	Universe		Percentage		Sample size	
	Not certified	Certified	Not certified	Certified	Not certified	Certified
Low (6 or less)	52	0	10%	0%	1	0
Medium (7)	183	118	34%	35%	2	5
High (8 or more)	307	221	57%	65%	4	9
<b>Total</b>	<b>542</b>	<b>339</b>	<b>100%</b>	<b>100%</b>	<b>7</b>	<b>14</b>

The selected sample was discussed with UNICEF field staff to ensure that respondents would be available and could be mobilised. In case of unresponsiveness, the sample was increased within each quota location to ensure the total number reached the planned target of 300 respondents. The proposed samples and actual data collected are summarized in Table 11 below.

**Table 7 - Number of survey observations proposed and achieved**

Sample proposed					Data collected						
Strategy	Target response	Municipalities			Region	Total Responses				Municipalities	
PCU	14	7			PCU		Female	32	48	10	
						Male	16				
Seal Stakeholders	150	30	Amazon	9	Seal Stakeholders	Amazon	45	Female	103	145	9
						Semi-arid	97	Male	42		16
Adolescents NUCA/JUVA	120		Semi-arid	21	Adolescents NUCA/JUVA	Amazon	46	Female	75	144	9
						Semi-arid	98	Male	69		15
<b>Total</b>	<b>284</b>	<b>37</b>			<b>Total</b>	<b>337</b>				<b>35</b>	

In general, from PCU São Luis (MA) and Maceio (AL) were the two cities with the highest participation, respectively 10 and 9 respondents. From Seal, there was stronger engagement from the Semiarid compared to the Amazon for all stakeholders, including adolescents. Due to lack of responsiveness, four municipalities were substituted from the Amazon region in the sample. It is important to note that data collection occurred during a pandemic surge in the Amazon region, which might have affected their

responsiveness. A summary of the number of responses for the Seal stakeholder, adolescent and PCU stakeholder surveys can be found below.

**Table 8 - Survey responses for Seal stakeholders and adolescents**

Region/ State	Seal stakeholders				Adolescents		
	# of municipalities	# of respondents	% of respondents		# of municipalities	# of respondents	% of respondents
<b>Semiarid</b>	<b>18</b>	<b>98</b>	<b>69%</b>		<b>16</b>	<b>98</b>	<b>68%</b>
Alagoas	3	12	8%		4	13	9%
Bahia	3	18	13%		3	18	13%
Ceará	4	18	13%		2	21	15%
Pernambuco	1	4	3%		1	10	7%
Piauí	3	21	15%		3	22	15%
Rio Grande do Norte	2	16	11%		2	12	8%
Sergipe	2	9	6%		1	2	1%
<b>Amazon</b>	<b>9</b>	<b>45</b>	<b>31%</b>		<b>11</b>	<b>46</b>	<b>32%</b>
Acre	1	8	6%		2	6	4%
Amazonas	2	5	3%		2	13	9%
Maranhão	4	22	15%		5	18	13%
Pará	2	10	7%		2	9	6%
<b>Total</b>	<b>27</b>	<b>143</b>	<b>100%</b>		<b>27</b>	<b>144</b>	<b>100%</b>

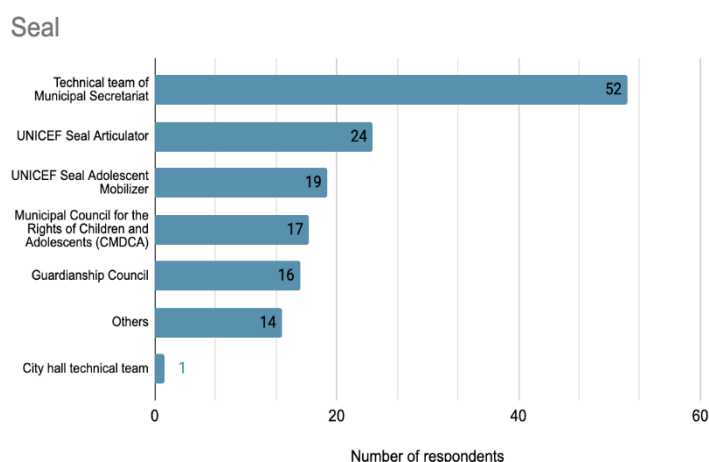
**Table 9 - PCU responses by urban centre**

Urban Centre	Number of responses	Percentage of respondents
Belém/PA	3	6%
Fortaleza/CE	2	4%
Maceió/AL	9	19%
Manaus/AM	4	8%
Recife/PE	4	8%
Rio de Janeiro/RJ	3	6%
Salvador/BA	5	10%
São Luís/MA	10	21%
São Paulo/SP	2	4%
Vitória/ES	6	13%
<b>Total</b>	<b>48</b>	<b>100%</b>

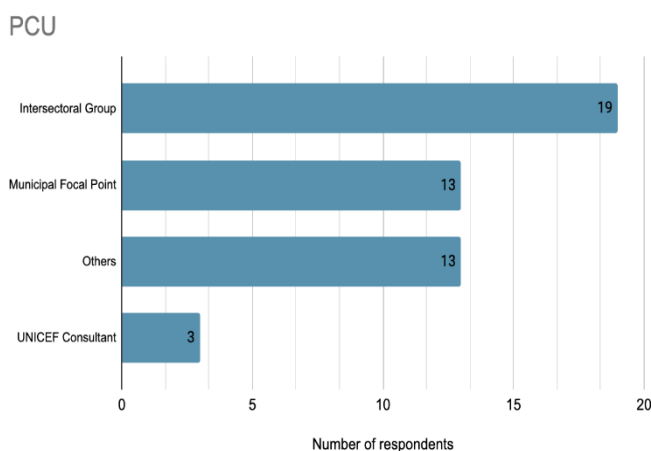
The surveys were administered to various different stakeholders, mostly from the government. One third (52 respondents) of the Seal stakeholders who responded to the survey were part of the technical team in a Municipal Secretariat, especially Social Assistance (23), Education (15) and Health (9). The other two third of Seal respondents

are articuladores, adolescents mobilizers, members of the Municipal Council for the Rights of Children and Adolescents (CMCDA) or the Guardianship Council. For the PCU survey, 40% of the 48 stakeholders who responded to the survey were part of the Intersectoral Group and 27% were municipal focal points. The detailed breakdown of Seal and PCU survey participant profiles is summarised in Figure 3 and Figure 4 respectively.

**Figure 1 - Seal stakeholder profile**

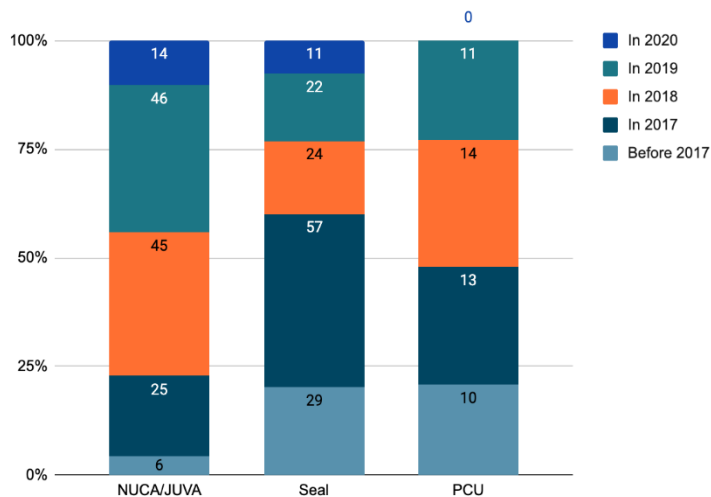


**Figure 2 - PCU stakeholder profile**



Most of the people involved in the Seal and PCU strategies were involved since the beginning of the CP or before (60% and 49% of the Seal and the PCU stakeholders, respectively). On the other hand, 67% of the adolescents started to participate in the nucleus between the years 2018 and 2019 (see Figure 5 below). This lag between the CP kick-off and the adolescents' involvement is to be expected since the municipalities need some time to organize the Nucleus and mobilize the youth. The adolescents are on average 16 years old, and half of them attended high school in 2020.

**Figure 3 - Year of first involvement with the strategy**



### 3. ANNEX 3- BIBLIOGRAPHY

Agência Senado. (2021). [Cortes orçamentários podem comprometer políticas públicas em 2021](#). 26/04/2021.

AgênciaBrasil (2020). Racism, violence still assail Brazilian children and teenagers.

Araújo, Thiago Santos de, Oliveira, Cristieli Sérgio de Menezes, Muniz, Pascoal Torres, Silva-Nunes, Mônica da, & Cardoso, Marly Augusto. (2016). Child undernutrition in one of the cities with greater nutritional risk in Brazil: population-based study in the Western Brazilian Amazon. *Revista Brasileira de Epidemiologia*, 19(3), 554-566.

Brazil (1988). Constitution of the Federative Republic of Brazil. Brasília/DF.

Brazil (1990). Statute of the Child and Adolescent (Law No. 8.069/1990). Brasília/DF.

Cruces, G.; Fields, G.; Jaume, D. and Viollaz, M. (2016), Growth, Employment and Poverty in Latin America, Oxford University Press, Oxford, United Kingdom.

Global Nutrition Report (2020). [Brazilian Nutrition Profile](#), accessed 20 October 2020.

IBGE (2017). [Trabalho infantil 2016](#), accessed 19 October 2020.

IBGE (2019) National Continuous Household Survey.

IBGE (2019) Research Directorate, Population Coordination and Social Indicators

IBGE (2019). [Educação 2019](#). accessed 19 October 2020.

IBOPE Inteligênte (2021). [Impactos Primários e Secundários da COVID-19 em Crianças e Adolescentes Relatório de análise 2ª Rodada](#). 21 de janeiro de 2021.

INESC (2020). [O Brasil com baixa imunidade Balanço do Orçamento Geral da União 2019](#). Brasília, april of 2020.

Information System of the National Immunization Program (SI-PNI), accessed 07/04/2021.

IPEA (2015). Atlas da vulnerabilidade social nos municípios brasileiros / editores: Marco Aurélio Costa, Bárbara Oliveira Marguti. – Brasília : IPEA. 77 p.

IPEA (2020). [Atlas da Violência 2020](#) (2020 Atlas of Violence), accessed 19 October 2020.

Martins, Ana Paula Bortoletto, Levy, Renata Bertazzi, Claro, Rafael Moreira, Moubarac, Jean Claude, & Monteiro, Carlos Augusto. (2013). Increased contribution of ultra-processed food products in the Brazilian diet (1987-2009). *Revista de Saúde Pública*, 47(4), 656-665.

[Ministry of Citizenship website](#), accessed on 07/04/2021.

OECD/DAC Network on Development Evaluation (2019) Better Criteria for Better Evaluation, Revised Evaluation Criteria Definitions and Principles for Use

Ouvidoria Nacional de Direitos Humanos (2019). Disque Direitos Humanos Relatório

Pereira, R. H. M., Braga, C. K. V., Serra, Bernardo, & Nadalin, V. (2019). [Desigualdades socioespaciais de acesso a oportunidades nas cidades brasileiras](#). Texto para Discussão Ipea, 2535. Instituto de Pesquisa Econômica Aplicada (Ipea).

Plan International Brasil (2019). Tirando o Véu. Estudo sobre casamento infantil no Brasil. São Paulo/SP.

Powell, Mary Ann; Taylor, Nicola; Fitzgerald, Robyn; Graham, Ann; Anderson, Donnah (2013). *Ethical Research Involving Children*, Innocenti Publications UNICEF Office of Research - Innocenti, Florence

Prates, I and Barbosa, R. J. (2020) The Impact of COVID-19 in Brazil: Labour Market and Social Protection Responses

The Lancet (2020). Preventing teenage pregnancies in Brazil. *Lancet* 2020; 395: 468.

United Nations (1989). Convention on the Rights of the Child, resolution of General Assembly 44/25.

UNEG (2008). United Nations Evaluation Group (UNEG) [Ethical Guidelines for Evaluation](#).

UNEG (2008a). United Nations Evaluation Group (UNEG) [Code of Conduct for Evaluation in the UN System](#).

UNEG (2011). United Nations Evaluation Group (UNEG) [Integrating Human Rights and Gender Equality in Evaluations](#).

UNICEF (2013). The UNICEF Strategic Plan, 2014-2017 Realizing the rights of every child, especially the most disadvantaged. 11/07/2013.

UNICEF (2015). ECA 25 anos: Avanços e desafios para a infância e a adolescência no Brasil. Brasília/DF.

UNICEF (2015a). [UNICEF Procedure For Ethical Standards In Research](#), Evaluation, Data Collection And Analysis.

UNICEF (2016). Brazil Strategy Note.

UNICEF (2016). Brazil: Country Programme Evaluation Annual Report 2016. UNICEF.

UNICEF (2016). [Country programme document](#). UNICEF.

UNICEF (2017). Brazil: Country Programme Evaluation Annual Report 2017. UNICEF.

UNICEF (2017). Country Management Plan for Brazil.

UNICEF (2017a). UNICEF-Adapted UNEG Evaluation Reports Standards.

UNICEF (2017). UNICEF Brazil Annual Management Plan 2017-2018.

UNICEF (2017). UNICEF Strategic Plan, 2018-2021. 16/08/2017.

UNICEF (2018). Brazil: Country Programme Evaluation Annual Report 2018. UNICEF.

UNICEF (2018). Brazil: Country Programme Evaluation Report 2018. UNICEF.

UNICEF (2018). Humanitarian Assistance for Children (HAC) Venezuela, LACRO, 2018.

UNICEF (2018). Monitoring Plan 2018.

UNICEF (2018). UNICEF Brazil Annual Management Plan 2018 review and lessons learned.

UNICEF (2018). Well being and multiple deprivations in childhood and adolescence in Brazil. UNICEF, Brasília/DF.

UNICEF (2019c). [A Profile of Child Marriage and Early Unions in Latin America and the Caribbean](#). accessed 19 October 2020.

UNICEF (2019). Brazil: Country Programme Evaluation Annual Report 2019. UNICEF.

UNICEF (2019). Highlights of Deputy Regional Director mission to Brazil to contribute to the Strategic Moment of Reflection, LACRO. March 2019.

UNICEF (2019). Humanitarian Assistance for Children (HAC) Venezuela, LACRO, 2019.

UNICEF (2019). Monitoring Plan 2019.

UNICEF (2019b). Reprovação, distorção idade-série e abandono escolar. Dados do Censo Escolar 2018 publicados no site da estratégia Trajetórias de Sucesso Escolar ([trajetoriaescolar.org.br](http://trajetoriaescolar.org.br)) do UNICEF e parceiros. UNICEF, Brasília/DF.

UNICEF (2019). UNICEF Brazil Annual Management Plan 2019.

UNICEF (2019a). 30 anos da convenção sobre os direitos da criança: Avanços e desafios para meninas e meninos no Brasil (30 years of the Convention on the Rights of the Child: Advances and challenges for girls and boys in Brazil). UNICEF, Brasília/DF.

UNICEF (2020). BCO COVID PLAN – SECOND SEMESTER. UNICEF: PowerPoint Presentation.

UNICEF (2020). Brazil: Country Programme Evaluation Annual Report 2020. UNICEF.

UNICEF (2020a). Brazil: Country Programme Evaluation Annual Report 2020 (draft). UNICEF.

UNICEF (2020). Brazil Report on the Evaluation of UNICEF's work for children in cities.

UNICEF (2020b). COVID-19: Protecting Children from Violence, Abuse, and Neglect in the Home.

UNICEF (2020). COVID Plan Results. Mid-Year Review. UNICEF: PowerPoint Presentation.

UNICEF COVID-19 PME Working Group (2020). COVID-19 Programme Monitoring and Analysis Framework. UNICEF.

UNICEF (2020). COVID-19 Programme Approach and Prioritization Guidance Note. UNICEF: Updated version, November 2020.

UNICEF (2020). Evaluation of the Trilateral South-South Cooperation programme between the government of Brazil and UNICEF (2013-2018). January 2020.

UNICEF (2020). "Evaluation of UNICEF Brazil Country Programme Interventions including strategies to improve children rights at the sub-national level". Terms of Reference

UNICEF (2020). Guidance Note on Programming Approaches and Priorities to Prevent, Mitigate and Address Immediate Health and Socio-economic Impacts of the COVID-19 Global Pandemic on Children. UNICEF.

UNICEF (2020). Humanitarian Assistance for Children (HAC) Novel coronavirus (COVID-2019) global response, March 2020.

UNICEF (2020). Humanitarian Assistance for Children (HAC) Venezuela, LACRO, 2020.

UNICEF (2020). Making Learning, Healthcare and Protection Environments safe for children living in Brazil's most vulnerable communities. UNICEF.

UNICEF (2020). RAM Assessments 2020 (COMPILED VERSION).

UNICEF (2020). Regional Director's Annual Letter, LACRO. 22/04/2020.

UNICEF Brazil (2020). Safe Opening of Schools. UNICEF.

UNICEF (2020). SitRep indicators from system.

UNICEF (2020). UNICEF Brazil Annual Management Plan 2020.

UNICEF (2020d). [UNICEF Data Hub COVID-19 and children](#). March 2020.

UNICEF (2020). 2020 End of Year Results Summary Extended Narrative. Brazil. UNICEF.

UNICEF (n.d.). Brazil Appeal. Humanitarian Action for Children. UNICEF website. [accessed on 30/04/2021].

UNICEF Brazil (n.d.). Hotspot meeting - UNICEF Brazil. UNICEF: PowerPoint Presentation.

UNICEF (2021). [Cenário da Exclusão Escolar no Brasil](#), Um alerta sobre os impactos da pandemia da COVID-19 na Educação.

UNICEF (2021). Humanitarian Situation Report Year-end 2020, LACRO. 01/03/2021.

UNICEF (2021). Humanitarian Situation Report No. 1, 1 Jan – 31 Mar 2021. 14/06/2021.

UNICEF (2021). Systematization of the Brazil Country Office's (BCO) response to COVID-19. UNICEF: PowerPoint Presentation.

UNICEF (2021). Valoración en tiempo real de la respuesta de UNICEF a COVID-19. Argentina.

Vakis, R.; Rigolini, J. and Lucchetti, L. (2015), Left Behind: Chronic Poverty in Latin America and the Caribbean, The World Bank, Washington D. C.

Vieira, Fabiola Sulpino. (2020). [Gasto federal com políticas sociais e os determinantes sociais da saúde: para onde caminhamos?](#). Saúde em Debate, 44(127), 947-961. Epub March 31, 2021.

World Bank (2020) COVID-19 in Brazil: Impacts and Policy Responses

World Bank (2021). COVID-19: Brazil Overview

World Bank, [World Development Indicators](#). (2018). Literacy rate, adult total (% of people ages 15 and above) - Brazil.

## 4. ANNEX 4- DATA COLLECTION TOOLS

**Table 1 - Semi-structured interview guide for implementing partners**

Interview information	Interviewer:	Interviewee:	Date:
Introduction	<p>[Introduce yourself]</p> <p>Thank you for agreeing to participate in the interview and making yourself available. This interview is part of the evaluation of UNICEF's Brazil country programme, in order to inform the next country programme. All questions asked are within the context of the UNICEF Brazil's country programme implemented during the 2017-2021 cycle.</p> <p>Data and information collected during this interview are strictly confidential and will be consolidated and analysed to inform the final report. In instances where personal quotes or reflections are used, interviewee names will be anonymised. If you do not want to or cannot answer a question, you can just say and we will skip the question. With your permission I will record this interview. Please say 'no', if you do not want to be recorded. Do you have any questions at this point, or can we start?</p>		
General information	<p>Please describe your role at [implementing partner]. How long have you been working in this capacity?</p> <p>Probe: Do you work at the national or sub-national level?</p> <p>Are you familiar with UNICEF's work?</p> <p>Could you please describe the activities implemented by UNICEF in your municipality?</p>		
<b>Relevance</b>			
Government alignment/engagement	<p>Do you think UNICEF's activities complemented the government's strategies and policies addressing the most marginalised children and adolescents?</p>		
Targeting	<p>Do you think that all project activities have addressed the needs of the most marginalised children, adolescents, and their families?</p> <p>Probe: Would you say that the most vulnerable thematic and geographical areas were prioritised and targeted?</p>		
Flexibility	<p>To what extent has UNICEF been able to adapt as a result of changes in context, priorities, policies and beneficiary needs?</p> <p>Did UNICEF adapt its strategies during the Covid-19 pandemic? Could you tell me a little about it?</p>		
Added Value	<p>In your opinion, does UNICEF's work add value in the areas in which its activities are implemented?</p> <p>Probe: Do you think that UNICEF should focus on other areas?</p>		
Evidence Base and Inclusiveness	<p>Were you involved in the design of the [Seal/PCU] activities? Do you know whether target communities or government bodies were involved during design and implementation?</p> <p>Probe: Was evidence used to identify priorities, needs and targets?</p>		
<b>Effectiveness</b>			
Achievement of Results	<p>Were planned targets systematically achieved on the projects you worked on?</p> <p>Probe: Is there any result that was not targeted at the beginning but was achieved? (Covid-19, migration crisis, etc)</p>		

Contribution to result achievement	What factors contributed to the achievement of targets?
<b>Efficiency</b>	
Timeliness / Costs	To what extent were activities delivered on schedule and on budget? Probe: Were there ever delays? How did planned costs compare to actual costs?
Structures/ Resourcing/ Partnerships	Do you think your organisation had all the required skills, commitment, structures and resources to deliver activities adequately? Probe: what are your main capacity building needs? To what extent was UNICEF responsive to your organisation's capacity building needs?
<b>Sustainability</b>	
Capacities/ Structures/ Ownership	Do you think your capacity has improved thanks to working with UNICEF on these projects? Do you think these improvements are sustainable? What factors do you think are likely to affect the sustainability of project results?
Emergency response and final comments	How has UNICEF approached the Covid-19 pandemic? Probe: Could you tell me a little about what changed in your work with UNICEF due to the pandemic? Do you think UNICEF could better support the activities in emergency situations in the future? How? Probe: Both Venezuela Migration crisis response and COVID-19 response What is your overall reflection on UNICEF programme performance during the 2017-2020 period? Would you like to add anything else?

**Table 2 - Semi-structured interview guide for members of government**

Interview information	Interviewer	Interviewee	Date
Introduction		<p>[Introduce yourself]</p> <p>Thank you for agreeing to participate in the interview and making yourself available. This interview is part of the evaluation of UNICEF's Brazil country programme, in order to inform the next country programme. All questions asked are within the context of the UNICEF Brazil's country programme implemented during the 2017-2021 cycle. Data and information collected during this interview are strictly confidential and will be consolidated and analysed to inform the final report. In instances where personal quotes or reflections are used, interviewee names will be anonymised.</p> <p>If you do not want to or cannot answer a question, you can just say and we will skip the question. With your permission I will record this interview. Please say 'no', if you do not want to be recorded.</p> <p>Do you have any questions at this point, or can we start?</p>	
General information		<p>Please describe your role at [government institution]. How long have you been working in this capacity?</p> <p>Probe: Do you work at the national or sub-national level?</p>	

	Are you familiar with UNICEF's work? What aspects of UNICEF's work have you been involved in?
<b>Relevance</b>	
Government alignment/ engagement	Which were the priorities, policies and strategies of the Brazilian government in the period between 2017-2020, especially those related to the most marginalised children, adolescents and young people? Do you think UNICEF's activities complemented the government's strategies and policies? Probe: To what extent did UNICEF engage with the national and sub national levels? Which government demands were not and should have been addressed?
Targeting	To what extent does UNICEF's work address the needs of the most marginalized children, adolescents and their families? Probe: Would you say that the most vulnerable thematic and geographical areas were prioritised and targeted?
Flexibility	To what extent has UNICEF been able to adapt as a result of changes in context, priorities, policies and beneficiary needs? Did UNICEF adapt its strategies during the Covid-19 pandemic? Could you tell me a little about it?
Added Value	In your opinion, does UNICEF's work add value in the areas in which its activities are implemented? Probe: Do you think that UNICEF should focus on other areas?
Evidence Base and Inclusiveness	In your opinion, was the design of the programme informed by evidence and the involvement of stakeholders? Did [government institution] participate in the design? Probe: Do you know if evidence was used to identify priorities, needs and targets?
<b>Effectiveness</b>	
Achievement of Results	Were planned targets systematically achieved on the projects you worked on? Probe: Is there any result that was not targeted at the beginning but was achieved? (Covid-19, migration crisis, etc)
Contribution to result achievement	What factors contributed to the achievement of targets?
<b>Efficiency</b>	
Timeliness / Costs	To what extent were activities delivered on schedule? Probe: Were there ever delays?
Structures/ Resourcing/ Partnerships	Do you think [government institution] had all the required skills, commitment, structures and resources to deliver UNICEF activities adequately? Probe: what are your main capacity building needs? To what extent was UNICEF responsive to your institution's capacity building needs? How much was your institution involved in decision-making across projects?
<b>Sustainability</b>	
Capacities/ Structures/ Ownership	Do you think your capacity has improved thanks to working with UNICEF on these projects? Do you think these improvements are sustainable? What factors do you think are likely to affect the sustainability of the results?

Emergency response and final comments	<p>How has UNICEF approached the Covid-19 pandemic?</p> <p>Probe: Could you tell me a little about what changed in your work with UNICEF due to the pandemic?</p> <p>Do you think UNICEF could better support the activities in emergency situations in the future? How?</p> <p>Probe: Venezuela Migration crisis response and COVID-19 response</p> <p>What is your overall reflection on UNICEF programme performance during the 2017-2020 period?</p> <p>Would you like to add anything else?</p>
---------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

**Table 3 - Semi-structured interview guide for UNICEF staff**

Interview information	Interviewer	Interviewee	Date
Introduction		<p>[Introduce yourself]</p> <p>Thank you for agreeing to participate in the interview and making yourself available.</p> <p>This interview is part of the evaluation of UNICEF’s Brazil country programme, in order to inform the next country programme. All questions asked are within the context of the UNICEF Brazil’s country programme implemented during the 2017-2021 cycle.</p> <p>Data and information collected during this interview are strictly confidential and will be consolidated and analysed to inform the final report. In instances where personal quotes or reflections are used, interviewee names will be anonymised.</p> <p>If you do not want to or cannot answer a question, you can just say and we will skip the question. With your permission I will record this interview. Please say ‘no’, if you do not want to be recorded.</p> <p>Do you have any questions at this point, or can we start?</p>	
General information		Please describe your role at UNICEF and what components of its country programme you work on. How long have you been working in this capacity?	
<b>Relevance</b>			
Government alignment/ engagement		<p>Do you think UNICEF programming complemented the government's strategies and policies?</p> <p>Probe: Did UNICEF priorities and strategies reflect the demands of the government at the national and sub-national (states and municipalities) levels?</p>	
Targeting		<p>To what extent did the country programme address the needs of the most marginalised children, adolescents and young people, and their families?</p> <p>Probe: Would you say that the most vulnerable thematic and geographical areas were prioritised and targeted?</p>	
Flexibility & Emergency Response		<p>To what extent has the programme evolved and adapted as a result of changes in context, priorities, policies and beneficiary needs?</p> <p>Did UNICEF adapt its strategies during the Covid-19 pandemic? Could you tell me a little about it?</p> <p>Do you think UNICEF could better support the activities in emergency situations in the future? How?</p> <p>Probe: Venezuela Migration crisis response and COVID-19 response</p>	

Added Value	In your opinion, does UNICEF's work add value in the areas in which its activities are implemented? Probe: Do you think that UNICEF programming could add more value if implemented in other areas?
Evidence Base and Inclusiveness	Was the design of the programme informed by evidence and the involvement of stakeholders? Probe: Which partners, government institutions and/or target populations were involved in the design or implementation of the programme? Was evidence used to identify priorities, needs and targets of the CP?
<b>Effectiveness</b>	
Achievement of Results	Were planned outputs and targets systematically achieved across all projects? What about for outputs not included in the CP (covid-19, migration crisis)? Probe: were achievements uniform across sectors, populations, geographical areas?
Contribution to Achievement of Results	What factors contributed to the achievement of results at national and sub-national level? Probe: did capacity building activities at national level impact the level of achievement? How have the Seal and PCU strategies contributed to achievement of outputs and outcomes?
<b>Efficiency</b>	
Timeliness / Costs	To what extent were activities and outputs delivered on schedule and on budget? Probe: Were there ever delays? How did planned costs compare to actual costs? Have budgets been adapted to changing needs?
Structures/ Resourcing/ Partnerships	To what extent is the current UNICEF structure and its resourcing adequate to deliver the results? Probe: Is the private sector ready for non- restricted funding used to target the most urgent areas and population groups? Do you think implementing partners have the right capacities and skills? Is it adequate to work through implementing partners in order to achieve results?
<b>Sustainability</b>	
Capacities/ Structures/ Ownership	Do you think the capacity of the government and implementing partners improved thanks to UNICEF interventions? (level of institutional, technical, financial, political capacities of government) Do you think the government could take over services currently provided by UNICEF? Are there other factors likely to affect the sustainability of processes and programme results?
<b>Coherence</b>	
Structures/ Synergies	Would you say that there are synergies and coherence within UNICEF structures, at national and sub national levels as well as across teams? Would you say that the Country Programme has a coherent capacity development strategy? Probe: focusing on individuals, institutions and the enabling environment Do you think the CP's balance between downstream and upstream activities was appropriate? How can the BCO ensure that its emergency response programme is embedded coherently within its longer-term programme in the next CPD? How do you think BCO can transition from emergency response to development?

**Table 4 - Semi-structured interview guide for external stakeholders (UN agencies, civil society and private sector)**

Interview information	Interviewer	Interviewee	Date
Introduction		<p>[Introduce yourself]</p> <p>Thank you for agreeing to participate in the interview and making yourself available. This interview is part of the evaluation of UNICEF's Brazil country programme, in order to inform the next country programme. All questions asked are within the context of the UNICEF Brazil's country programme implemented during the 2017-2021 cycle.</p> <p>Data and information collected during this interview are strictly confidential and will be consolidated and analysed to inform the final report. In instances where personal quotes or reflections are used, interviewee names will be anonymised.</p> <p>If you do not want to or cannot answer a question, you can just say and we will skip the question. With your permission I will record this interview. Please say 'no', if you do not want to be recorded. Do you have any questions at this point, or can we start?</p>	
General information		<p>Please describe your role at [institution]. How long have you been working in this capacity?</p> <p>Probe: Do you work at the national or sub-national level?</p> <p>Are you familiar with UNICEF's work? What aspects of UNICEF's work have you been involved in?</p>	
<b>Relevance</b>			
Government alignment		Do you think UNICEF's activities complemented the government's strategies and policies addressing marginalised children, adolescents and young people?	
Targeting		<p>Do you think that all project activities have addressed the needs of marginalised children, adolescents and their families?</p> <p>Probe: Would you say that UNICEF prioritised and targeted the most vulnerable thematic and geographical areas?</p>	
Flexibility		<p>To what extent has UNICEF been able to adapt as a result of changes in context, priorities, policies and beneficiary needs?</p> <p>Do you know if UNICEF adapted to the COVID-19 pandemic? Can you tell me a bit about that?</p>	
Added Value		In your opinion, does UNICEF's work add value in the areas in which its activities are implemented? Probe: Do you think that UNICEF should focus on other areas?	
Evidence Base and Inclusiveness		<p>Was your organisation involved in the design of the activities? Which activities? Were target communities or government bodies involved during design and implementation?</p> <p>Probe: Was evidence used to identify priorities, needs and targets?</p>	
<b>Efficiency</b>			
Resourcing/ Partnerships		Would you say that UNICEF had all the required skills, partners and resources to deliver activities adequately?	
<b>Sustainability</b>			

Capacities/ Structures/ Ownership	Do you think that the capacity of government and/or implementing partners improved due to UNICEF interventions? Do you think these improvements are sustainable? What factors do you think are likely to affect the sustainability of project results?
Emergency Response and final comments	Has your institution been involved in activities surrounding the Venezuela Migration Crisis? Do you think UNICEF could better support the activities in emergency situations in the future? How? Probe: Venezuela Migration crisis response and COVID-19 response What is your overall reflection on UNICEF programme performance during the 2017-2020 period? Would you like to add anything else?

**Table 5 - Semi-structured interview guide for COVID-19 evaluation**

*Thank you for taking the time to be interviewed about UNICEF Brazil Country Office's ongoing response to COVID-19. Your responses will be critical to understanding how BCO has adapted to better respond to the COVID-19 pandemic, programme implementation and reach, quality of our programme support, and identifying lessons for enhancing our work moving forward.*

*This interview should take aprox 30 minutes. Participation is voluntary. If you decide not to participate there will not be any negative consequences. If you decide to participate, you may stop at any time. You may also not respond to any question that you do not wish to answer.*

*By participating in this interview, you are giving your permission to use the information you are providing in this interview within the stipulations mentioned above.*

*The information collected through this questionnaire will be triangulated with additional data. They may include a survey and key informant interviews with key UNICEF stakeholders, a SWOT analysis, and desk review of existing data and evidence.*

*With your permission, this interview will be recorded for reference purposes. No mention will be made to your name or title in the report, but we may quote from your answers.*

*Do you agree to those terms?*

1. Where has UNICEF had a specific **value-added** in supporting national response plans when it comes to preventing, mitigating and responding to the impact of the COVID-19 pandemic?

*[Note to interviewer: This question was asked in the survey with closed-ended options.*

*This is the moment to have people develop their thoughts on how UNICEF added value to specific areas]*

2. Were UNICEF **advocacy actions** effective in adding value to the national response?

*[Note to interviewer: probe for back to school; importance of connectivity; make children visible as victims of the pandemic]*

3. How effective has been the country office's **coordination, collaboration and communication with Brazilian government**?

4. Where has UNICEF **not been able to respond appropriately** to pressing needs caused by COVID-19?

*[Note to interviewer: explore what factors prevented an adequate response]*

5. How well is the Country Office adapting to the needs of the population, including the **socio-economic impact** of the pandemic? How have these **needs been determined** in the country?

*[Note to interviewer: probe for target setting, required capacity, early insights on results achieved so far and where most value is added]*

6. What are the **early lessons** emerging from the implementation of the response, both in terms of challenges and successes?

*[Note to interviewer: probe for discernable trends that are applicable to different settings (i.e. urban/rural; low-resource/high-resource settings etc.)]*

7. Considering the needs, constraints and complexities of the pandemic in Brazil, **how effectively** is the BCO implementing the response to COVID-19 so far?

*[Note to interviewer: effectiveness is the ability of an intervention to produce an expected effect]*

8. Is there any topic we haven't covered that you would like to discuss?

Thank you for your contribution.

**Table 6 - Focus group discussion guide for families and adolescents**

Interview information	Interviewer	Participants:	Date:
Introduction	<p>[Introduce yourself]</p> <p>Thank you for agreeing to participate in the focal group and making yourself available.</p> <p>This focal group is part of the evaluation of UNICEF's Brazil country programme aiming to generate credible evidence for the level of achievement by UNICEF and its partners, in order to inform the next country programme. All questions asked are within the context of the UNICEF Brazil's country programme implemented during the 2017-2021 cycle.</p> <p>This discussion will take about one hour. Data and information collected during this interview are strictly confidential and will be consolidated and analysed to inform the final report. In instances where personal quotes or reflections are used, names will be anonymised. If you do not want to answer a question, you can just say and we will skip the question. With your permission I will record this discussion. Please say 'no', if you do not want to be recorded. Do you have any questions at this point, or can we start?</p>		
General information	Can everyone introduce yourselves to the group and talk a little about your participation in UNICEF activities?		
Relevance			
Government alignment/ engagement	<p>Are the activities that you participate aligned with your needs?</p> <p>Probe: Can you tell me how the activities implemented by UNICEF help you in your daily life?</p> <p>Which demands/difficulties do you find in your local community that could be better addressed by UNICEF?</p>		
Targeting	Do you think that UNICEF activities reach the people who most need it?		

Flexibility	Did your needs change over the course of the project? If so, did the programme adapt to your needs? Did UNICEF adapt its activities during the Covid-19 pandemic? Could you tell me a little about it?
Added Value	In your opinion, does UNICEF's work add value in the areas in which its activities are implemented? Probe: Do you think that UNICEF's work could add more value if implemented in other areas of your municipality?
Evidence Base Inclusiveness	Was your community involved in the designing/planning of UNICEF's activities? How?
<b>Effectiveness</b>	
Achievement of Results	How satisfied are you with UNICEF's interventions? Probe: what changed for you as a result of the interventions?
<b>Final Comments</b>	
	How do you think UNICEF interventions can be improved? How do you think UNICEF could better support you in emergency situations like Covid-19 in the future? Would you like to add anything else?

**Table 7 - Focus group discussion guide for participants of the NUCA/JUVA, community forums and councils**

Interview information	Interviewer	Participants:	Date:
Introduction	<p>[Introduce yourself]</p> <p>Thank you for agreeing to participate in the focal group and making yourself available.</p> <p>This focal group is part of the evaluation of UNICEF's Brazil country programme aiming to generate credible evidence for the level of achievement by UNICEF and its partners, in order to inform the next country programme. All questions asked are within the context of the UNICEF Brazil's country programme implemented during the 2017-2021 cycle. This discussion will take about one hour. Data and information collected during this interview are strictly confidential and will be consolidated and analysed to inform the final report. In instances where personal quotes or reflections are used, names will be anonymised.</p> <p>If you do not want to answer a question, you can just say and we will skip the question.</p> <p>With your permission I will record this discussion. Please say 'no', if you do not want to be recorded. Do you have any questions at this point, or can we start?</p>		
General information	What is the role of the [choose as suitable: Rights and Guardianship Councils; Adolescent Citizenship Nucleus (NUCA/JUVA); Community Forums; Municipal Council for the Rights of the Child and the Adolescent (CMDCA)]?		
<b>Relevance</b>			
Government alignment/	Do you think the UNICEF interventions you were involved in complemented the municipal government's interventions, strategies and policies?		

engagement	
Targeting	Do you think that these UNICEF interventions have been relevant to the needs of the local community? Probe: children and adolescents, especially the most marginalised, and their families
Flexibility	Did the context/priorities/beneficiary needs change over the course of the project? If so, did UNICEF respond to the changes? Did UNICEF adapt its strategies during the Covid-19 pandemic? Could you tell me a little about it?
Evidence Base Inclusiveness	Were you involved at any stage in the design or decision-making process for these interventions? Probe: How does the beneficiary selection process work?
Effectiveness	
Achievement of Results	How satisfied are beneficiaries with the UNICEF interventions you are involved in [adapt to respondent]?
Efficiency	
Structures/Resourcing/Partnerships	Do you think your municipality has the required skills, commitment, structures and resources to conduct these interventions? Probe: what are your main capacity needs? Did you receive training from UNICEF? To what extent was UNICEF responsive to your capacity building needs?
Sustainability	
	Do you think the interventions will have a long-term change in the community?
Final Comments	
	How do you think UNICEF interventions can be improved? How do you think UNICEF could better support the activities in emergency situations like COVID-19 in the future? Would you like to add anything else?

**Table 8 - Survey tool for Seal stakeholders**

Evaluation Question	Dimension of Analysis	Sub Questions	SEAL Stakeholders	Choices
<b>General information + Identification</b>		In which state did you work during the Seal UNICEF activities?		27 Brazilian States
		In which municipality did you work during the Seal UNICEF activities?		[Open question] Type the name of your municipality
		What is your role on the UNICEF Seal?		UNICEF Seal Articulator UNICEF Seal Adolescent Mobilizer Mayor City hall technical team Technical team of Municipal

				Secretariat <sup>1</sup> Municipal Council for the Rights of Children and Adolescents (CMDCA) Guardianship Council Others
			<sup>1</sup> Which Municipal Secretariat are you or were you part of during edition 2017-2020?	Secretary of Education Health's Secretary Secretariat of Social Assistance Human Rights Secretariat Sports Department Other
			When did you start acting in the activities of the UNICEF Seal?	In 2020 In 2019 In 2018 In 2017 Before 2017
<b>Relevance</b>	<b>Alignment/engagement</b>	To what extent is there alignment of CP priorities, outcomes and cross-cutting themes to Government policies, strategies and plans	In the past four years, what do you believe were the public policy priorities for children and adolescents in your municipality?	Reach children and adolescents excluded from public policies. Improve the quality of existing public policies. Prevent and tackle extreme forms of violence. Promote participation, especially for teenagers. Others <sup>2</sup> I don't know I don't want to respond
			<sup>2</sup> What were the other public policy priorities for children and adolescents in your municipality?	[Open question] Describe the other public policy priorities
			<sup>3</sup> In your opinion, were UNICEF's actions important to advance these priorities?	Rate it on a scale of 1 to 5, where 1 represents "Not at all important" and 5 represents "Extremely important".
			[rated 3 or more] <sup>3</sup> Why were UNICEF's actions important in advancing these priorities?	For assistance and technical support By directing actions through systemic results For the training of managers with training cycles Due to the need to create an intersectoral group Others
			Among the mandatory systemic results of the UNICEF Seal, which ones do you think have been a priority for your municipality in the past four years?	RS2: Active search, inclusion, and follow-up program for children and adolescents in the school implemented RS7: Actions to promote sexual and reproductive rights and prevention of STIs/AIDS aimed at

				<p>adolescents and young people implemented</p> <p>RS10: Early childhood is valued as a priority on the municipality's public policy agenda</p> <p>RS16: Multisectoral actions protection of adolescents' right to life and against violence implemented in the municipality</p> <p>RS17: Mechanisms for listening and participation of society (especially children and adolescents) in the elaboration and social control of institutionalized public policies</p> <p>I do not know how to answer</p>
		Do Government policies, strategies and plans drive UNICEF's intervention strategies, plans and activities?	In your opinion, what are the main reasons that led your municipality to join the program?	<p>Priority of the municipality for policies aimed at children and adolescents</p> <p>UNICEF reputation</p> <p>Training and technical assistance provided by UNICEF</p> <p>Program availability at no cost to the municipality</p> <p>Recognition of winning the UNICEF Seal</p> <p>Others<sup>1</sup></p> <p>I do not know how to answer</p>
			<sup>1</sup> What other reason did your municipality join the program?	[Open question]
			Do you believe that your organization had all the resources and guidelines necessary to carry out the program's activities properly? For what purpose were the monitored indicators used? To what extent do you believe that the diagnosis and monitoring of actions contributed to give visibility to existing inequalities?	<p>Yes, we had everything necessary</p> <p>No, there was a lack of financial resources</p> <p>No, there was a lack of human resources</p> <p>No, there was a lack of policy prioritization</p> <p>No, there was a lack of staff training</p> <p>I do not know how to answer</p>
			In your opinion, what were the possible effects of the lack of these resources or guidance needed to conduct the program in your municipality?	[Open question] Briefly describe these effects
	<b>Added Value</b>	Does the CP cover areas where UNICEF can add value	Considering UNICEF's experience, do you believe that the activities of the Seal could focus on other areas that are not currently within the scope of the program?	<p>Yes*</p> <p>No</p> <p>I do not know how to answer</p>

	(according to its strengths)?	*If you answered yes to the previous question, what other areas could the program address?	[Open question]
<b>Flexibility</b>	To what extent has the programme evolved and adapted as a result of changes in context, priorities, policies and beneficiary needs?	Has the municipality's agenda and priorities for children and adolescents changed between 2017 and 2020?	Yes No I do not know how to answer
		If you answered yes to the previous question, was the Seal adapted to these changes in agenda and priorities?	Yes No I do not know how to answer
		If you answered yes to the previous question, at what stages did the actions of the Seal adapt to these changes?	Monitoring and analysis of social indicators Action plan Training of managers and partners Community participation Alignment between systemic results and municipality priorities Others I do not know how to answer
<b>Targeting</b>	To what extent does the CP address the needs of the children, adolescents and young people, especially the most marginalized and their families to ensure that no one is left behind?	In your opinion, which group benefited the MOST from the program's actions?	Children and adolescents in vulnerable situations and excluded Children and adolescents in marginalized areas Children and adolescents in general Another group of children and adolescents I do not know how to answer
		Cite examples of how this group was benefited from the actions of the Seal program	[Open question]
		Do you believe that any group benefited LESS from the program's actions? Which?	Children and adolescents in vulnerable situations and excluded Children and adolescents in marginalized areas Children and adolescents in general Another group of children and adolescents I do not know how to answer
<b>Evidence Base and Inclusiveness</b>	To what extent was CP design informed by evidence (to identify priorities, population	In your opinion, were the program's monitoring indicators used to guide strategies and actions of the municipality and the program itself?	Rate on a scale of 1 to 5, where 1 represents "Not at all used" and 5 represents "Very used".
		or what purpose were the monitored indicators used?	For diagnosis of the situation of childhood and adolescence For the identification of priority

		groups and targets (especially most marginalised and their specific and differential needs, and geographical areas)		groups For the identification of priority regions To develop strategies to improve the situation of children and adolescents in the municipality (actions, programs, and or public policies) Others
			To what extent do you believe that the diagnosis and monitoring of actions contributed to give visibility to existing inequalities?	Evaluate on a scale of 1 to 5, where 1 represents "They did not contribute" and 5 represents "They were indispensable".
<b>Effectiveness</b>	<b>Achievement of Results</b>	To what extent have planned outputs and targets been achieved?	How do you evaluate your municipality's performance in achieving systemic results and social impact?	Rate on a scale of 1 to 5, where 1 represents "Unsatisfactory" and 5 represents "Excellent".
			Do you believe that your municipality should participate again in the UNICEF Seal program?	Yes No
			What reasons would you consider when deciding whether the municipality should participate in the UNICEF Seal again?	The program helps to identify problems The program contributes to the elaboration of an action plan The program has the potential to generate social impact Possibility to receive recognition from the UNICEF Seal I do not know how to answer Others*
			What other reasons would you consider when deciding whether the municipality should participate in the UNICEF Seal again?*	[Open question]
			In your opinion, how important was the municipality's participation in the UNICEF program to advance in guaranteeing the rights of children and adolescents?	Rate it on a scale of 1 to 5, where 1 represents "Not at all important" and 5 represents "Extremely important".
			Was the Intersectoral Commission for the Rights of Children and Adolescents created in your municipality?	Yes* No I do not know how to answer
			If you answered yes to the previous question, what do you believe were the main roles played by the Intersectoral Commission for the Rights of Children and Adolescents?	Plan the actions of the UNICEF Seal methodology Run systematic meetings Monitor the UNICEF Seal indicators Strengthen intersectoral work at

				<p>the municipal level The Commission did play a relevant role I do not know how to answer Others</p>
			<p>If the Intersectoral Commission for the Rights of Children and Adolescents was not created in your municipality, what are the reasons for not creating it?</p>	<p>It was assessed that it would not be necessary Lack of human resources Insufficient engagement of the actors Lack of financial resources Lack of articulation between the agencies Directing resources to other priorities Ignorance of the need to create this commission I do not know how to answer Others</p>
			<p>During the SEAL, was there any lack of support from UNICEF?</p>	<p>Yes No* I do not know how to answer</p>
		<p>Are there areas where UNICEF has under or over achieved? (sector, population, geography)</p>	<p>*If there was a need for the program that was not met by UNICEF, please describe the situation, need, or suggestions for improvements.</p>	<p>[Open question]</p>
			<p>In your opinion, did participation in the Seal Program have any negative effects?</p>	<p>Yes No* I do not know how to answer</p>
			<p>If you answered yes to the previous question, please describe the possible negative effects</p>	<p>[Open question]</p>
			<p>Through Seal, were additional activities adapted or carried out to respond to the needs brought about by the pandemic?</p>	<p>Yes* No I don't know how to answer</p>
		<p>Did UNICEF achieve any other results not planned for in CP? (COVID, Migration Crisis).</p>	<p>If there has been adaptation or additional activities carried out by the SEAL to respond to the needs brought by the pandemic, please describe these activities below. Were they effective?</p>	<p>[Open question]</p>
	<p><b>Contribution to Achievement of Results</b></p>	<p>To what extent and how have UNICEF's two main intervention</p>	<p>Do you think that the municipality's participation in the program has increased the capacity to implement policies for children and adolescents in an intersectoral way?</p>	<p>Yes* No I don't know how to answer</p>

		strategies, SEAL and PCU contributed to achievement of outputs and outcomes?	*If you answered yes to the previous question, give an example of an intersectoral policy implemented in your municipality	[Open question]
			Has there been a strengthening of CRAS (Reference Center for Social Assistance) and CREAS (Specialized Reference Center for Social Assistance) over the years of implementation of the program?	Yes No I don't know how to answer
			Was there collaboration between the NUCA/JUVA and the CMDCA? Was this collaboration relevant to promote youth engagement?	There was no articulation There was some articulation, but I don't think it was relevant There was some articulation, and I think it was partially relevant There was articulation and it was very relevant I do not know how to answer
		What was the effect of the capacity building activities (at national and sub-national levels on achievement of outputs and outcomes? (via SEAL PCU and other relevant interventions)	Have you participated in any training cycle (in person or online) carried out by UNICEF in recent years?	Yes, I participated in the classroom training cycle <sup>1</sup> Yes, I attended online training <sup>1</sup> Yes, I participated in training activities (in person or online) <sup>1</sup> I did not participate in UNICEF training processes <sup>2</sup>
			<sup>1</sup> To what extent do you believe that the training activities (in-person and online) contributed to training city managers in implementing the actions of the Seal?	Rate on a scale of 1 to 5, where 1 represents "Unsatisfactory" and 5 represents "
			<sup>2</sup> Why haven't you participated in the training cycle or some online training conducted by UNICEF in recent years?	There were no training activities (in person or online) I was not invited to the training activities I was unable to participate in training activities Another person from my team/department participated in the training activities representing us Others
			Would you like to participate in other UNICEF training activities?	Yes, I would like to participate in face-to-face training Yes, I would like to participate in online training I am not interested in participating in future UNICEF training activities

		What other factors have contributed to the achievement/no n achievement of results, including other national and sub-national level strategies and activities?	In your opinion, how did each program strategy below contribute to achieving the systemic results of the program?	Contributed a lot  Contributed a little Did not contribute I don't know how to answer / Not applicable  UNICEF Training UNICEF Technical Assistance Intersectoral Commission for the Rights of Children and Adolescents Municipal Coordinator of the UNICEF Seal Mobilizing Adolescents and Youth Adolescent Citizenship Nucleus (NUCA or JUVA) Community Forums and Intermediate Follow-up Meeting Campaigns engagement of the UNICEF Platform Growing Together
Sustainability	Capacities/ Structures/ Ownership	Has capacity of government, implementing partners improved due to UNICEF interventions and can they continue providing services without UNICEF support?	How much do you believe your municipality will be able to maintain the positive results achieved with the program?	Rate on a scale of 1 to 5, where 1 represents "Not at all likely" and 5 represents "Extremely likely".
			What factors can affect the sustainability of the project's results?	Pandemic Staff turnover Lack of membership of relevant bodies and institutions The municipality does not join the program in the next cycle Migration crisis Others*
			*What other factors can affect the sustainability of the project's results?	[Open question]
Final end		Is there anything else you would like to share about participating in the Seal or suggesting improvement?		[Open question]

**Table 9 - Survey tool for PCU stakeholders**

Evaluation Question	Dimensions of Analysis	Sub Questions	PCU Stakeholders	Choices
General information + Identification		In which municipality do you work/worked while participating in the UNICEF Urban Centers Platform?		Belém/PA Fortaleza/CE Maceió/AL Manaus/AM Recife/PE Rio de Janeiro/RJ Salvador/BA São Luís/MA São Paulo/SP
		Which organization are you linked to?		Mayor office Secretariat of Education Secretariat of Health

				Secretariat of Sport Secretariat of Social Assistance Secretariat of human rights Municipal Council for the Rights of Children and Adolescents (CMDCA) Guardianship Council Third sector/NGO Others
		What is your role in the UNICEF Urban Centers Platform?		Municipal Focal Point Intersectoral Group UNICEF Consultant Others
		Specify your role on the UNICEF Urban Centers Platform		[Open question]
		When have you started participating in the Urban Centers Platform activities?		In 2020 In 2019 In 2018 In 2017 Before 2017
<b>Relevance</b>	<b>Alignment/engagement</b>	To what extent is there alignment of CP priorities, outcomes and cross-cutting themes to Government policies, strategies and plans	In the past four years, what do you believe were the public policy priorities for children and adolescents in your municipality?	Promote early childhood rights. Facing school exclusion. Promote the sexual and reproductive rights of adolescents. Tackling teenage homicides. Others (manually specify)* I don't know I don't want to respond
			*Specify the other public policy priorities for children and adolescents in your municipality	[Open question] Describe the other public policy priorities
		Do Government policies, strategies and plans drive UNICEF's intervention strategies, plans and activities?	In your opinion, what are the main reasons that led your municipality to join the program?	Municipality's priority for policies aimed at children and adolescents UNICEF's reputation Training and technical assistance provided by UNICEF Availability of the program at no cost to the municipality Others (manually specify)* I do not know how to answer
			*For what other reason did your municipality join the program?	[Open question]
			Do you believe that your organization had all the resources and guidelines necessary to carry out the program's activities properly?	Yes, we had everything necessary No, there was a lack of financial resources No, there was a lack of human resources No, there was a lack of policy prioritization

				No, there was a lack of staff training I do not know how to answer
<b>Added Value</b>	Does the CP cover areas where UNICEF can add value (according to its strengths)?	Considering UNICEF's experience, do you believe that the activities of the PCU could focus on other areas not currently within the scope of the program?	Yes* No I do not know how to answer	
		*If you answered yes to the previous question, what other areas could the program address?	[Open question]	
<b>Flexibility</b>	To what extent has the programme evolved and adapted as a result of changes in context, priorities, policies and beneficiary needs?	Has the municipality's agenda and priorities for children and adolescents changed between 2017 and 2020?	Yes <sup>1</sup> No <sup>2</sup> I do not know how to answer	
		<sup>1</sup> If you answered yes to the previous question, was the PCU adapted to these changes in agenda and priorities?	Yes* No I do not know how to answer	
		*If you answered yes to the previous question, at what stages did the PCU's actions adapt to these changes?	There was no adaptation by UNICEF Setting priorities with strategic actors Collective Impact Construction Citizen participation of adolescents and citizen engagement Exchange of experiences between municipalities I do not know how to answer Others	
		<sup>2</sup> If you answered no to the previous question, what were the possible effects of the lack of adaptation of the PCU program with the municipality's priority agenda for children and adolescents?	[Open question]	
<b>Targeting</b>	To what extent does the CP address the needs of the children, adolescents and young people, especially the	In your opinion, which group benefited the MOST from the program's actions?	Children and adolescents in vulnerable situations and excluded Children and adolescents in marginalized areas Children and adolescents in general Another group of children and adolescents I do not know how to answer	
		Cite examples of how this group was benefited from	[Open question]	

		most marginalized and their families to ensure that no one is left behind?	the actions of the PCU program	
			Do you believe that any group benefited LESS from the program's actions? Which?	Children and adolescents in vulnerable situations and excluded Children and adolescents in marginalized areas Children and adolescents in general Another group of children and adolescents I do not know how to answer
	<b>Evidence Base and Inclusiveness</b>	To what extent was CP design informed by evidence (to identify priorities, population groups and targets (especially most marginalised and their specific and differential needs, and geographical areas)	In your opinion, were the program's monitoring indicators used to guide strategies and actions of the municipality and the program itself?	Rate on a scale of 1 to 5, where 1 represents "Not at all used" and 5 represents "Very used".
or what purpose were the monitored indicators used?			For diagnosis of the situation of childhood and adolescence For the identification of priority groups For the identification of priority regions To develop strategies to improve the situation of children and adolescents in the municipality (actions, programs, and or public policies) Others	
To what extent do you believe that the diagnosis and monitoring of actions contributed to give visibility to existing inequalities?			Evaluate on a scale of 1 to 5, where 1 represents "They did not contribute" and 5 represents "They were indispensable".	
<b>Effectiveness</b>	<b>Achievement of Results</b>	To what extent have planned outputs and targets been achieved?	How do you assess your municipality's performance in achieving the program's expected results?	Rate on a scale of 1 to 5, where 1 represents "Unsatisfactory" and 5 represents "Excellent".
			Do you believe that your municipality should participate in the PCU program again?	Yes No
			What reasons would you consider when deciding whether the municipality should participate in the UNICEF PCU again?	The program helps to identify problems The program contributes to the elaboration of an action plan The program has the potential to generate social impact I don't know how to answer Others (manually specify)
			What other reasons would you consider to decide whether the municipality	[Open question]

			should participate in the PCU again?*	
			In your opinion, how important was the municipality's participation in the UNICEF program to advance in guaranteeing the rights of children and adolescents?	Rate it on a scale of 1 to 5, where 1 represents "Not at all important" and 5 represents "Extremely important".
		Are there areas where UNICEF has under or over achieved? (sector, population, geography)	During the PCU, was there any lack of support from UNICEF?	Yes No* I do not know how to answer
			*If there was a need for the program that was not met by UNICEF, please describe the situation, need, or suggestions for improvements.	[Open question]
			Do you believe there were any negative effects of participating in PCU?	Yes No* I do not know how to answer
			*If you answered yes to the previous question, please describe the possible negative effects	[Open question]
			Did UNICEF achieve any other results not planned for in CP? (COVID, Migration Crisis).	Did the PCU carry out additional specific activities to respond to the needs brought about by the pandemic?
		*If there were adapted or additional activities carried out by the PCU to respond to the needs brought by the pandemic, please describe these activities below. Were they effective?		[Open question]
	<b>Contribution to Achievement of Results</b>	To what extent and how have UNICEF's two main intervention strategies, SEAL and PCU contributed to achievement of outputs	In your opinion, did the PCU program contribute to the implementation of policies for children and adolescents in an intersectoral way?	Yes* No I don't know how to answer
			*If you answered yes to the previous question, give an example of an intersectoral policy implemented in your municipality.	[Open question]

		and outcomes?		
		What was the effect of the capacity building activities (at national and sub-national levels on achievement of outputs and outcomes? (via SEAL PCU and other relevant interventions)	Have you participated in the Thematic Intersectoral Dialogues carried out by UNICEF in recent years?	Yes No*
	*Why haven't you participated in the Thematic Intersectoral Dialogues?		There were no Thematic Intersectoral Dialogues I had no knowledge of the Thematic Intersectoral Dialogues I had knowledge of the Thematic Intersectoral Dialogues, but I was not able to participate Another person from my team/department participated Other	
	How much do you believe that the realization of the Thematic Intersectoral Dialogues contributed to:		Contributed a lot  Contributed a little Did not contribute I don't know how to answer / Not applicable  Providing an in-depth analysis of the situation Planning of synergistic actions Exchange of experiences between the municipalities Production of knowledge for political impact Improvement and strengthening of interventions Monitoring and evaluation of implemented actions	
	What other factors have contributed to the achievement/ non achievement of results, including other national and sub-national level strategies and activities?	In your opinion, how did each strategy below contribute to the achievement of the program's results?	Contributed a lot  Contributed a little Did not contribute I don't know how to answer / Not applicable  Thematic Intersectoral Dialogues Setting priorities with strategic actors Monitoring and analyzing inequalities within municipalities Collective Impact Construction Citizen participation of adolescents and citizen engagement Exchange of experiences between the municipalities	
		How much do you believe that each strategy below contributed to promoting citizen participation by adolescents?	Contributed a lot  Contributed a little Did not contribute I don't know how to answer / Not applicable  Connect adolescent and youth leaders from the most vulnerable territories to collectives and formal and informal movements, in face-to-face meetings and virtual exchanges	

				<p>Strengthening unions and mobilizing adolescents to build pedagogical policies and school curricula</p> <p>Involvement of adolescents served in family and community services community and the services of execution of socio-educational measures of the open environment in planning activities and evaluation of the services themselves</p> <p>Insertion of adolescents in commissions and planning spaces linked to basic health units</p> <p>Build and strengthen mechanisms for adolescents to have a voice among managers, legislators, and others responsible for the construction, deliberation, and inspection of public policies</p>
<b>Sustainability</b>	<b>Capacities/ Structures/ Ownership</b>	Has capacity of government, implementing partners improved due to UNICEF interventions and can they continue providing services without UNICEF support?	How much do you believe your municipality will be able to maintain the positive results achieved with the program?	Rate on a scale of 1 to 5, where 1 represents "Not at all likely" and 5 represents "Extremely likely".
			What factors can affect the sustainability of PCU's results?	<p>Pandemic</p> <p>Staff turnover</p> <p>Lack of membership of relevant bodies and institutions</p> <p>The municipality does not join the program in the next cycle</p> <p>Migration crisis</p> <p>Others*</p>
			*What other factors can affect the sustainability of the project's results?	[Open question]
<b>Final end</b>			Is there anything else you would like to share about participating in the UNICEF PCU or suggesting improvements?	[Open question]

**Table 10 - Survey tool for NUCA/JUVA adolescents**

<b>Evaluation Question</b>	<b>Dimensions of Analysis</b>	<b>Sub Questions</b>	<b>Adolescent Citizenship Nucleus</b>	<b>Choices</b>
				27 Brazilian States

<b>General information + Identification</b>		In what state do you live or lived during NUCA / JUVA activities?		
		What municipality do you live in?		[Open question] Type the name of your municipality
		How old are you?		[Open question] Put only numbers
		When did you start acting in the NUCA/JUVA activities?		In 2020 In 2019 In 2018 In 2017 Before 2017
			Which Adolescent Citizenship Nucleus do you participate in?	NUCA JUVA
<b>Relevance</b>	<b>Alignment / engagement</b>	To what extent is there alignment of CP priorities, outcomes and cross-cutting themes to Government policies, strategies and plans	In your opinion, which of the challenges were the most interesting to do?	<p>CHALLENGE 1: Promote the right to safe and inclusive sport</p> <p>CHALLENGE 2: Promote healthy eating and prevent obesity</p> <p>CHALLENGE 3: Knowing and disseminating the Apprenticeship Law to create conciliar learning opportunities in employment with permanence in school</p> <p>CHALLENGE 4: Promote the right to digital inclusion and safe use of the internet</p> <p>CHALLENGE 5: Promote education for democratic citizenship - #Partiu Mudar</p> <p>CHALLENGE 6: Promoting school inclusion and the exchange of knowledge - Outside school you cannot</p> <p>CHALLENGE 7: Promote the right to sexual and reproductive health</p> <p>CHALLENGE 8: Promote practices to combat racism</p> <p>No challenge</p>
<b>Effectiveness</b>	<b>Achievement of Results</b>	To what extent have planned outputs and targets been achieved?	In addition to NUCA / JUVA, do you participate in other groups such as student unions, cultural groups, residents' associations, or other collectives?	Yes No
			Would you recommend NUCA/JUVA to other young people?	Yes* No I do not know how to answer

			*Why would you recommend NUCA/JUVA to other young people?	Opportunity to meet new people Opportunity to increase citizen participation To know public policy decision processes Another reason*
			*Please specify why else you would recommend NUCA / JUVA to other young people:	[Open question]
			Do you think the Nucleus helped to increase the citizen participation of young people in your community?	Yes <sup>1</sup> No
	<b>Contribution to Achievement of Results</b>	To what extent and how have UNICEF's two main intervention strategies, SEAL and PCU contributed to achievement of outputs and outcomes?	How do you evaluate the relationship between NUCA/JUVA and the CMDCA (Municipal Council for the Rights of Children and Adolescents)?	There is no relationship There is little interaction with the CMDCA There is a fruitful dialogue with the CMDCA NUCA / JUVA contributes to the decisions taken by the CMDCA I do not know how to answer
		What other factors have contributed to the achievement/non achievement of results, including other national and sub-national level strategies and activities?	<sup>1</sup> How do you believe the Nucleus helped to increase the citizen participation of young people in your community?	[Open question] Describes how NUCA / JUVA contributed to citizen participation by young people
			How do you evaluate the performance of the Adolescent and Youth Mobilizer for:	Very bad  Bad  Indifferent  Good  Very good  Nucleus formation Carrying out activities Achievement of the goals/challenges Articulation with other actors (CMDCA, Tutelar council, City Hall, secretariats) Communication within the group Organization of activities
<b>Implementation</b>	What grade did you attend school in 2020?	7th grade (elementary school) 8th grade (elementary school) 9th grade (elementary school) 1st year (High School) 2nd year (High School) 3rd year (High School) I finished high school Studying Higher Education (University/College) I didn't attend school in 2020		

	Where did you first hear about NUCA/JUVA?	At school In an association/institution (NGO, Cras, Creas, CMDCA etc.) By friends By social media Others
	How did you start joining NUCA/JUVA?	I was invited by Mobilizer I was invited by another member They needed one more person to compose the group Another way
	What was your motivation to join the nucleus?	It was the participation of friends that motivated me It was for the engagement of the cause (rights of the child and adolescent) It was the encouragement of my school It was organized by UNICEF It was through the encouragement of the association/group that I participate Other reasons*
	*Please specify, what was your main motivation for participating in the Nucleus:	[Open question]
	Did you participate in the digital platform U-Report Brasil?	Yes* No
	*Did you enjoy participating in the digital platform U-Report Brasil?	Rate it on a scale of 1 to 5, where 1 represents "They are against my participation" and 5 represents "They strongly support my participation".
	Would you recommend that other members participate in the NUCA/JUVA digital platform?	Yes No I do not know how to answer
	Why would you recommend the participation of other members on digital platforms?	because it is a way of expressing your opinion on different subjects Because it is a platform to help give a voice to young people and teenagers Because it is an interactive platform that addresses current issues for teenagers and young people Another reason*
	*Why else would you recommend NUCA / UNICEF digital platforms to other members?	[Open question]
	How do you evaluate the interaction with the other members of NUCA / JUVA?	Rate it on a scale of 1 to 5, where 1 represents "Very bad" and 5 represents "Very good".
	Does your family know about your participation in NUCA / JUVA?	Nobody in my family knows that I participate Some people in my family know that I participate

		Everyone in my immediate family knows that I participate
	How much does your family support your participation in the Nucleus?	My family supports and also participates in some activities of the Nucleus My family supports me but does not participate My family is not against or in favor of my participation My family doesn't support me My family is against my participation in the nucleus
	Describe the possible reasons why your family might not support your participation in the Adolescent Citizenship Center	[Open question]
	What challenges have been addressed at the Adolescent Citizenship Center in the past four years?	Yes No  I do not remember  CHALLENGE 1: Promote the right to safe and inclusive sport CHALLENGE 2: Promote healthy eating and prevent obesity CHALLENGE 3: Knowing and disseminating the Apprenticeship Law to create conciliar learning opportunities in employment with permanence in school CHALLENGE 4: Promote the right to digital inclusion and safe use of the internet CHALLENGE 5: Promote education for democratic citizenship - #Partiu Mudar CHALLENGE 6: Promoting school inclusion and the exchange of knowledge- Outside school you cannot CHALLENGE 7: Promote the right to sexual and reproductive health CHALLENGE 8: Promote practices to combat racism
	Was an event organized for NUCA / JUVA to present the results of the actions developed to public managers in your municipality?	Yes No I do not know how to answer
<b>Final</b>	Is there anything else you would like to share about participating in NUCA / JUVA or suggestions for improvement?	[Open question]

## 5. ANNEX 5 - LIST OF KEY INFORMANTS

**Table 1 - List of high-level key informant interviews**

Government
------------

Semi-arid Territory	Municipal	Prefeituras e secretarias da PCU	Geruza Felizardo Célio Veras	Secretaries and directors in PCU city halls
Amazon Territory	State	Secretaria de Estado Extraordinária de Articulação de Políticas Públicas do estado de MA	Marcos Pacheco	State Secretary for the Dialogue on Public Policy for the state of MA
Amazon Territory	Municipal	Departamento de Proteção Social Especial da SEMASC Manaus	Mirella Lauschner	Former Director of the Department for Social Protection of SEMASC Manaus
Amazon Territory	Municipal	Departamento de Proteção Social Especial da SEMASC Manaus	Ana Maria	Director of the Department for Social Protection of SEMASC Manaus
Health	Federal	Ministério da Saúde	Gerson Mendes Pereira	Director of the Department of Chronic Illnesses and Sexually Transmitted Infections
Southeast Territory	State	Assembleia Legislativa do Estado de São Paulo	Marina Helou	Member of State Legislative Assembly
Foreign Affairs	Federal	Ministério das Relações Exteriores - Agência Brasileira de Cooperação - ABC	Márcio Correa	General Coordinator, Technical Multilateral Cooperation
Foreign Affairs	Federal	Ministério das Relações Exteriores - Agência Brasileira de Cooperação - ABC	Cecilia Malaguti do Prado	Coordinator of Trilateral South-South Cooperation
SPM&E SSC	Federal	Ministério da Economia, Secretaria de Avaliação, Planejamento, Energia e Loteria	Aumara Bastos Feu	Sub-secretary of Direct Cost Evaluation
SPM&E SSC	Federal	Ministério da Economia, Instituto de Pesquisa Econômica Aplicada - IPEA	Enid Rocha Andrade Silva	Director of Studies and Social Research
Child protection	Federal	Congresso Nacional	Leandre Dal Ponte	Member of Federal Congress and President of the Parliamentary Front for Early Childhood
Private sector				
Samsung			Isabel Costa	Corporate Citizenship Manager
Claro			Flávio Rodrigues	Project Director

Johnson & Johnson		Ewerton Nunes	Global Community Impact Manager
Civil Society			
Communication	Coletivo Mosaico	Paulo Thadeu	President
Youth & Adolescent	Viração	Eliane Souza	Coordinator
Child Protection	Childhood	Itamar Goncalves	Advocacy Manager
Education	Fundação itaú Social	Angela Danneman	Superintendent
Health	IPREDE	Sulivan Mota	President
Emergency (Venezuelan Migrant Crisis)	ADRA	Gizele Marques	Emergency coordinator
Amazon Territory	PEABIRU	Claudio Mello	Technical Coordinator
Implementing partners			
Semiarid Territory	ASSERTE	Graça Lima	Executive Director for Implementing Partners
Southeast Territory	Plan International	Ana Lima	National Manager for Programmes and Advocacy
Education	Cidade Escola Aprendiz	Natacha Costa	Director
Child Protection	NECA – Associação dos Pesquisadores de Núcleos de Estudos e Pesquisas sobre a Criança eo Adolescente	Maria Angela Leal Rudge	Director
Youth & Adolescent	ASEC	Juliana Fleury	President
Education	UNDIME	Luiz Miguel	President
UN Agencies			
Office of the Resident Coordinator		Niky Fabiancic	Former Resident Coordinator
UN Women		Anastasia Divinskaya	Head
UNDP		Katyna Argueta	Representative

	UNFPA	Astrid Bant	Representative
	WHO	Socorro Gross Galiano	Representative
UNICEF staff			
UNICEF field offices	Rio de Janeiro	Luciana Phebo	Chief
UNICEF field offices	Belém	Anyoli Sanabria	Chief
UNICEF field offices	Recife	Dennis Larsen	Chief
UNICEF field offices	Fortaleza	Rui Aguilar	Chief
UNICEF field offices	Sao Luis	Ofelia Silva	Chief
UNICEF field offices	Manaus	Débora Nandja Madeira	Chief
UNICEF Brazil CO	SP M&E SSC	Liliana Chopitea	Chief
UNICEF Brazil CO	Communications	Michael Klaus	Chief
UNICEF Brazil CO	RMP	Regina Garbi	Marketing Specialist
UNICEF Brazil CO	Youth & Adolescent	Mário Volpi	Chief
UNICEF Brazil CO	Child Protection	Rosana Vega	Chief
UNICEF Brazil CO	Child Survival	Cristina Albuquerque	Chief
UNICEF Brazil CO	Learn	Ítalo Dutra	Chief Education
UNICEF Brazil CO	Emergency Response	Stephanie Schwarz	Emergency Manager
UNICEF Brazil CO	Operations	Nenad Radonjić	Deputy Representative
UNICEF LACRO	N/A	Youssef Abdel-Jelil	Deputy Regional Director

**Table 2 - List of subnational Key Informant Interviews**

Strategy	Region	Municipality	Name	Institution	Position
Seal	Amazon	Bequimão (MA)	Wanderson		Articulador
Seal	Amazon	Bequimão (MA)	Jainara das Graças Peixoto Monteiro	Secretaria de Educação	Supervisora Educacional
Seal	Amazon	Bequimão (MA)	Daniela Soares Rodrigues Amorim	Secretaria de Saúde	Coordenadora de Atenção à Saúde
Seal	Amazon	Bequimão (MA)	Rosimeire Dorneles Ferreira Gonçalves	Secretaria de A. Social	Assistente Social
Seal	Amazon	Bequimão (MA)	Rodrigo Martins	Secretaria da Cultura	Secretario de Cultura e Turismo
Seal	Semi arid	Nova Fátima (BA)	Mailson Xavier dos Santos		Articulador
Seal	Semi arid	Nova Fátima (BA)	Normaleide da Silva Oliveira	Secretaria de Educação	Secretária de Educação
Seal	Semi arid	Nova Fátima (BA)	Sara Cristina Rocha Medeiros	Secretaria de Saúde	Coordenadora de Atenção à Saúde
Seal	Semi arid	Nova Fátima (BA)	Ana Priscila Silva Pereira	Secretaria de A. Social	Secretária Assistência Social
Seal	Semi arid	Nova Fátima (BA)	José Adriano Santos Pereira	Prefeito	Prefeito do Município
Seal	Amazon	Envira(AM)	Jhonny Marques		Mobilizador
Seal	Amazon	Envira(AM)	Lindiane Mendes	Secretaria de Educação	Ex-Secretária de Educação
Seal	Amazon	Envira(AM)	José Lucimar Gomes	Secretaria de Saúde	Ex-Secretário de Saúde
Seal	Amazon	Envira(AM)	Walles Silva	Secretaria de A. Social	Ex-Secretário Assistência Social
Seal	Semi arid	Poçoão (PE)	Lindenberg Nóbrega De Vasconcelos Filho		Articulador
Seal	Semi arid	Poçoão (PE)	Dilma Elias Barbosa	Secretaria de Educação	Ex-Secretária de Educação
Seal	Semi arid	Poçoão (PE)	Genailson Batista	Secretaria de Saúde	Secretário de Saúde
PCU	Sout heast	Rio de Janeiro	Andreia Pucili		Focal Point PCU
PCU	Sout heast	Rio de Janeiro	Eliane de Lima Pereira	Rio de Janeiro State Public Ministry	Promoter of Justice

**Table 3 - List of subnational focus group discussions**

Strategy	Region	Municipality	Name	Institution
Seal	Amazon	Bequimão (MA)	Community Forums representatives	Geruza
Seal	Semi arid	Nova Fátima (BA)	Municipal Council for the Rights of the Child and the Adolescent (CMDCA) and Rights and Guardianship Councils (CT) representatives	Raquel de Oliveira Silva Lopes Maria de Fátima Moreira Lima

				Mauricelia Pereira de Oliveira
Seal	Semiari d	Nova Fátima (BA)	Community Forums representatives	Patricia Jesus da Silva Vanusa Ferreira Almirete Maia
Seal	Semiari d	Poção (PE)	NUCA/JUVA Participants	Ana
Seal	Semiari d	Poção (PE)	Municipal Council for the Rights of the Child and the Adolescent (CMDCA) and Rights and Guardianship Councils (CT) representatives	Maria de Lurdes Duarte Patriota de Freitas Patrícia Nunes dos Santos Alvaro Henrique
Seal	Semiari d	Poção (PE)	Community Forums representatives	Silvania Carla Correia Janaina Ricardo de Brito
Seal	Amazon	Envira (AM)	NUCA/JUVA Participants	Clivia, Manu, Marcis, Kailane
PCU	Southea st	São Paulo	PCU Adolescents and young people group	Beatriz, Rayane
PCU	Southea st	São Paulo	PCU intersectoral group	Taize, Ariane e Judith
PCU	Southea st	Rio de Janeiro	PCU intersectoral group	Melissa, Katia
PCU	Southea st	Rio de Janeiro	PCU Adolescents and young people	Vitória, João Lucas

## 6. ANNEX 6 - INTENDED AUDIENCES: EVALUATION USERS AND USES

**Table 1: Users and uses of the evaluation**

Category of Evaluation Users	Users	Ranking	Interest in / Expectations from the Evaluation	Support to / Engagement in the Evaluation	Expected Use of the Evaluation
Core Stakeholder	UNICEF Country Office Senior Management	Principal users	CPE to provide a credible evidence base and reflections on UNICEF's strategic relevance and performance, to support strategic and operational management decisions, in particular for the development of the new Country Programme.	involved in TOR development. Will review and comment on the draft Inception report. Will provide strategic insights and reflections on the country context and UNICEF strategies in Brazil. Will engage relevant country teams to support the evaluation. Will receive oral and written feedback from the evaluation team throughout the evaluation and will join the final learning workshop. Will facilitate the assimilation of the findings into the country strategy and operations, as well as more broadly within UNICEF	Use evidence and recommendations of the CPE to support strategic and operational management decisions, in particular for the development of the new Country Programme and the next round of sub-national level initiatives.
Internal Stakeholders	UNICEF staff in Country Office, UNICEF Territory Offices	Primary	CPE to provide a credible evidence base and reflections on UNICEF's operational relevance and performance, to support operational management decisions, in particular for programme design and implementation processes.	Systematic engagement, in particular through interviews and debriefings. Will be providing a large part of the information, or facilitating access to it, enabling access to and contact with relevant stakeholders.	Use evidence and recommendations of the CPE to support operational management decisions, in particular in relation to programme design and implementation processes.

	UNICEF Emergency Offices	Primary	CPE to provide an assessment of emergency response as it relates to the country programme. CPE provides lessons learned on technical intervention areas.	May participate in interviews and provide additional information on emergency response interventions.	Use lessons learned identified by the CPE to strengthen technical intervention and integration.
	UNICEF LACRO Other regional Offices	Secondary	CPE to provide lessons learned useful for the development of programming in similar contexts in other countries. CPE to provide insights on how to undertake assessments of large-scale country programme.	<p>Provide oversight to the evaluation process Involved in TOR development. Review drafts and provide guidance to the evaluation team. Review and approve all deliverables.</p> <p>Will review and comment on the draft Inception report. Will receive oral and written feedback from the evaluation team throughout the evaluation and will join the final learning workshop.</p> <p>Will share findings and lessons to other COs in the region as relevant. The Regional Evaluation Advisor will be kept informed all along the process to help engage regional staff and disseminate evaluation findings.</p>	Use evaluation results in the development of other programming in similar contexts. Use CPE as model as part of the development of SOPs for evaluations of country programmes in the region. Use evidence and recommendations of the CPE to adjust the support provided to the UNICEF Country Office and other Offices. Use lessons learned identified by the CPE to strengthen guidance on technical intervention areas.
	UNICEF Divisions/ technical units	Primary	CPE to generate lessons learned relevant to their areas of specialisation /mandates.	Will provide access to relevant information from within their specialised areas and act as respondents for interviews if relevant. Will receive and possibly comment on the draft evaluation report.	Use lessons learned identified by the CPE on strengthen guidance on strategic planning and technical intervention areas.

	UNICEF Executive Board	Secondary	CPE to provide an independent performance assessment of UNICEF in Brazil as a basis for accountability to donors and member states.	Will be informed about UNICEF strategy, role and performance in Brazil at the end of the process. The Board may ask for a presentation of the evaluation.	Help ensure that adjustments, good practices and general reporting are captured and accessed by donors and member states.
Affected Populations	Targeted population groups in need: children, adolescents, families; refugees and migrants.	Primary	Affected populations may potentially be strongly affected by changes in selection, targeting, effectiveness and efficiency of UNICEF interventions resulting from follow-up to CPE findings and recommendations.	Possible participation in survey. Potential audience for dissemination of findings.	Greater awareness of UNICEF mandate, strategic focus, targeting, cross-cutting aims etc. as well as UNICEF's strengths and weaknesses brought to light by the evaluation might lead to stronger engagement of affected populations in design, implementation and feed-back processes.
External Stakeholders	UN country teams, including: UNHCR, IOM.	Secondary	CPE to identify gaps/good practices in collaboration, coordination and synergies within the UN system, and its partners and provide recommendations for making improvements.	May participate in interviews and facilitate access to relevant information.	Use evidence and recommendations of the CPE to improve collaboration and coordination for emergency response amongst UN agencies in Brazil.

	Other International Organizations Clusters and Working Groups	Secondary	CPE to provide greater clarity on UNICEF's role and positioning in the wider emergency, development and humanitarian response. CPE to identify gaps/good practices in collaboration, coordination and synergies with other international organizations, as well as duplications in the assistance delivered by the other actors.	May participate in interviews. Will receive the public version of the evaluation report.	Use the CPE to understand gaps and disseminate good practices as regards collaboration, coordination and synergies between international humanitarian and development organizations, and to remove duplications in assistance.
	Donors, Private Sector	Secondary	CPE to inform on results achieved and efficient use of funds. The findings of the evaluation can contribute to private sector CSR strategies and involvement with UNICEF in the future for financial support.	May participate in interviews. Will receive the full evaluation report. Potential audience for dissemination of findings	Use of CPE evidence and recommendations to inform future funding and strategic decisions.
	Academic institutions, think tanks and learning networks including: CaLP, Sphere, HAP	Secondary	CPE findings to contribute to wider body of knowledge on humanitarian and development assistance under extremely challenging, fragile state conditions.	Will receive the final public version of the evaluation report.	Insights and lessons learned from the CPE may be used when conducting future evaluations and for future programming.

National Partners	Municipal government	Primary	CPE to provide insights on UNICEF coordination with the Government at municipal level, how it targets its interventions, and lessons learned from its humanitarian and development interventions.	Strong engagement. Will participate in interviews and may provide access to relevant information. Will participate in debriefings and join the final learning workshop. Will receive the final evaluation report.	Use of CPE evidence and recommendations to strengthen coordination of, and government support to, humanitarian and development assistance in areas of the country with vulnerable groups. The CPE is also expected to be used as an advocacy tool to possibly expand interventions and ownership.
	State and federal government; IBGE	Primary	CPE to provide insights on UNICEF coordination with the Government at state and federal levels, how it targets its interventions, and lessons learned from its humanitarian, emergency and development interventions.	May participate in interviews. Will receive the final evaluation report. Presentation may be designed summarising evaluation findings.	Use of CPE evidence and recommendations to strengthen coordination of, and government support to, humanitarian and development assistance in areas of the country with vulnerable groups. The CPE is also expected to be used as an advocacy tool to possibly expand interventions and ownership.
	Cooperating partners (UN agencies, foundations, NGOs, partners etc.)	Secondary	The evaluation is expected to enhance collaboration and synergies, helping to achieve greater coordination, integration, uptake, scale-up and sustainability of UNICEF supported activities.	Will participate in interviews. Representatives will participate in debriefings and be invited to join the final learning workshop. Will receive the final evaluation report.	Greater awareness of UNICEF's mandate, strategies, objectives, strengths and challenges may lead to increased coordination efforts and stronger partnerships.

## 7. ANNEX 7 – ASSESSMENT OF UNICEF BRAZIL COUNTRY OFFICE RESPONSE TO THE COVID-19 PANDEMIC (2020-2021)

### ACRONYMS

BCO	UNICEF Brazil Country Office
COVAX	COVID-19 Vaccines Global Access
COVID-19	Coronavirus disease 2019
CRAS	<i>Centro de Referência de Assistência Social</i>
CREAS	<i>Centro de Referência Especializada de Assistência Social</i>
CSO	Civil Society Organisation
ENEM	<i>Exame Nacional do Ensino Médio</i>
FUST	<i>Fundo de Universalização dos Serviços de Telecomunicações</i>
HDI	Human Development Index
IBGE	<i>Instituto Brasileiro de Geografia e Estatística</i>
ICU	Intensive Care Unit
IPC	Infection Prevention and Control
M&E	Monitoring and Evaluation
MPT	<i>Ministério Público do Trabalho</i>
NGO	Non-governmental Organisation
PAHO	Pan American Health Organization
PCU	<i>Plataforma Centros Urbanos</i>
PNAD	<i>Pesquisa Nacional por Amostra de Domicílios</i>
RCCE	Risk Communication and Community Engagement
SAB	Semi-Arid Territory
SAFE	Safe environments for children, adolescents and families
Seal	UNICEF Municipal Seal of Approval
SIM	Subscriber Identity Module
SUAS	<i>Sistema Único de Assistência Social</i>
SUS	<i>Sistema Único de Saúde</i>
SWOT	Strengths, Weaknesses, Opportunities and Threats
TAM	Amazon Territory
UBS	<i>Unidade Básica de Saúde</i>
UNDIME	<i>União Nacional dos Dirigentes Municipais de Educação</i>
UNICEF	United Nations Children’s Fund
WASH	Water, Sanitation and Hygiene
WHO	World Health Organisation

## 1. PURPOSE OF THE ASSESSMENT

This chapter provides an assessment of UNICEF Brazil's response to the COVID-19 pandemic since its outbreak in February 2020. It complements the Country Programme Evaluation and provides an in-depth assessment of ways that UNICEF adapted its operations in response to the crisis.

The findings are based on data gathered from review of documents, an internal staff survey (9), semi-structured stakeholder interviews (24) and a SWOT analysis workshop with UNICEF staff (29). The findings are organised into four sections, guided by the evaluation questions.

A summary of this chapter is provided in the main report.

## 2. ADAPTATION

### 2.1 HOW WELL IS THE BRAZIL COUNTRY OFFICE (BCO) ADAPTING TO THE NEEDS OF THE POPULATION, INCLUDING THE SOCIO-ECONOMIC IMPACT OF THE PANDEMIC? HOW HAVE THESE NEEDS BEEN DETERMINED?

The response to COVID-19 demanded adaptation and flexibility from UNICEF Brazil since the humanitarian response was not part of the initial Country Programme (CP). To ensure a quick response, the BCO adopted an evidence-based strategy using the hotspot approach. In the first stage of the response, between February and September of 2020, the BCO expanded the coverage of its programme to attend to the needs that emerged from COVID-19, focusing on the distribution of supplies. In the second stage of the response, from October 2020, the BCO focused on reducing the transmission of the disease, and ensuring the adaptation, safety and continuity of health care, education, protection, and social assistance services using Safe Environments for Children, Adolescents and Families (SAFE) and Water, Hygiene and Sanitation (WASH) as its main entry points. By leveraging on existing and new partnerships with civil society organisations, the private sector, and municipalities, UNICEF Brazil was able to expand its scope of activity to respond to the social impacts of the pandemic.

**The Brazil Country Office used an evidence-based approach to identify and respond to the needs of the affected population.** This enabled it to respond quickly using the existing sub-national mechanisms (especially the Seal and Platform for Urban Centres (PCU)) to deliver the required goods and services.

In 2020, BCO produced evidence-using hotspots<sup>8</sup>, to monitor the number of COVID-19 cases in the national territories, and the number of deaths in urban centres. These were disaggregated by race and colour<sup>9</sup>. UNICEF also undertook a contextual analysis<sup>10</sup> to understand the socio-economic situation in Brazil. UNICEF used existing monitoring, evaluation and contextual analysis data to understand the situation in relation to children and young people, within schools and urban areas. In addition, UNICEF also conducted studies to gather current, primary data, such as the two-round survey on the primary and secondary impacts of COVID-19 on children and adolescents<sup>11</sup>, the report on the analysis of the water, sanitation and hygiene produced in partnership with the World Bank and the Stockholm International Water Institute<sup>12</sup>, the analysis of the direct economic measures implemented by the Federal Government to respond to the COVID-19 crisis and indirect effects of federal economic policies on if/how they benefited children<sup>13</sup>, a joint report with Instituto Sou da Paz about the rape of children and adolescents, and an evaluation concerning child labour in São Paulo<sup>14</sup>. This is important evidence that can also inform future programmes.

**In the first phase of the COVID-19 response, between February and September 2020, UNICEF expanded its programme coverage and focused on the distribution of supplies<sup>15</sup>.** Initially, the most affected territory was the Southeast Region, however COVID-19 rapidly spread to the North and Northeast<sup>16</sup>, Brazil's most socioeconomically

---

<sup>8</sup> It is the analysis of socioeconomic and epidemiological data to define priority areas for action.

<sup>9</sup> Categories featured in the questionnaire.

<sup>10</sup> UNICEF Brazil (n.d.). *Hotspot meeting - UNICEF Brazil*. UNICEF: PowerPoint Presentation.

<sup>11</sup> UNICEF Brazil (2020) Primary and Secondary Impacts of Covid-19 on Children and Adolescents

<sup>12</sup> SIWI, UNICEF Brazil and World Bank (2020). O papel fundamental do saneamento e da promoção da higiene na resposta à Covid-19 no Brasil.

<sup>13</sup> In which 83% of registered cases occurred at home,

<sup>14</sup> UNICEF Brazil (2020). UNICEF alerta para aumento de incidência do trabalho infantil durante a pandemia em São Paulo.

<sup>15</sup> UNICEF (2021). *Systematization of the Brazil Country Office's (BCO) response to Covid-19*. UNICEF: PowerPoint Presentation.

<sup>16</sup> Rudi, Rocha. et al. (2021). Effect of socioeconomic inequalities and vulnerabilities on health-system preparedness and response to Covid-19 in Brazil: a comprehensive analysis. *Lancet Global Health*, v. 9 (6), pp.782-792

vulnerable territories, causing a collapse of the health system in many states<sup>17</sup>. In order to respond to this emergency, UNICEF identified 247 municipalities participating in the Seal and 85 neighbourhoods within state capitals that were characterised by socio-economic vulnerability and high levels of COVID-19 transmission. Thanks to the hotspot approach, UNICEF estimated that 4.7 million children and adolescents needed support.

**During the second phase of the response, starting in October 2020, the BCO focused on reducing further transmissions and supporting healthcare, education, protection and social assistance services.** For this purpose, UNICEF selected 150 Seal municipalities and 55 urban neighbourhoods from the PCU.

UNICEF started working in new programmatic areas, implementing Water, Sanitation and Hygiene (WASH) activities as a cross cutting intervention within education, social assistance and health, as suggested in the Safe Environments for Children, Adolescents and Families (SAFE) methodology. This was also a way to build upon the existing programmes within the PCU and Seal, and existing public policies.

SAFE focuses on safe environments for children, adolescents and families in schools, Health Care Centres, Centres for Social Assistance (CRAS) and Specialised Reference Centres for Social Assistance (CREAS). The strategy contributed to the prevention and control of COVID-19. As the programme adapted to the evolving COVID-19 situation, WASH activities gained more prominence (sinks, hand-washing posters, bottles of liquid soap, masks, gloves, etc.) as a way to promote the safe re-opening of schools. UNICEF continues to implement both WASH and SAFE strategies in 2021.

When asked about the most significant ways in which the BCO adapted its work during the pandemic, UNICEF staff reported that scaling up of programmes and distribution of supplies; the implementation of new or adaptation to existing programmes (humanitarian actions, WASH and SAFE); cross-sectoral programming; and the ability to coordinate with existing partners<sup>18</sup> were key activities. The SWOT workshop showed similar trends. This degree of flexibility in responding to the evolving operational context and needs of the population received a high average rating (8.8 out of ten) in the staff survey<sup>19</sup>.

**UNICEF demonstrated its ability to adapt and be flexible particularly during the distribution of food and hygiene kits,** considering emergency response activities were not included in the initial Country Programme in 2016. The BCO worked with existing partners from the Seal and PCU to deliver supplies and reach a larger number of affected people. The pre-existing partnerships between UNICEF Brazil and its local partners was a key factor that facilitated and contributed to the appropriate response to COVID-19. Further, by leveraging UNICEF's credibility, the BCO established new programmatic partnerships with implementers<sup>20</sup>: among the ten partners interviewed, four had begun their partnerships with UNICEF during the response to COVID-19 in the states of São Paulo, Maranhão e Amazonas.

**UNICEF's response involved using existing partnerships with civil society organisations and municipalities (via the Seal and PCU), as well as developing new relationships and communication channels with state governments.** By leveraging existing and new partnerships, UNICEF Brazil was able to increase the scope of its COVID-19 response activities. The BCO's ability to create new partnerships, including with private partners, was ranked as the strength with the highest likelihood of impact during the SWOT analysis<sup>21</sup>.

---

<sup>17</sup> Castro (2021). Covid-19. The Observatory points to the biggest health system collapse in the history of Brazil.

<sup>18</sup> Survey Systematization of the Brazil Country Office's (BCO) response to Covid-19. Question 12. Please select, from the following list, the most significant ways in which the Brazil Country Office adapted its work during the Covid-19 crisis.

<sup>19</sup> Question 5 from UNICEF staff survey: On a scale of 1 to 10 (where 1=low and 10=high), how do you rate the degree of adaptivity of the Country Office in responding to the evolving operating context and needs of the population?

<sup>20</sup> SWOT matrix for BCO response to Covid-19. See Appendix.

<sup>21</sup> With a score of nine out of a possible ten points.

Through these partnerships, UNICEF distributed hygiene kits (alcohol, absorbents, soap, etc.), infection prevention and control (IPC) items and food parcels. It also raised awareness through communicating key messages to children living in vulnerable communities, and disseminated information about health care and emergency aid provided by the federal government.

At the start of 2021, Brazil experienced increased COVID 19-related deaths and infection rates, as well as higher rates of unemployment and deprivation. As it adapted to the COVID 19 pandemic, the Brazil Country Office reinforced its partnerships with the private sector, which resulted in increased donations and funds. In 2020, UNICEF Brazil ranked sixth amongst the Country Offices that were able to raise the most funds over the course of the year. In addition to this, UNICEF was able to strengthen fundraising mechanisms through using digital platforms.

In the second phase of the response, although donations remained substantial, there was some reluctance from private donors to support actions with longer-term expected results such as SAFE and policy advocacy in general. Some partnerships were lost due to donor preference to invest in kits, at a time when UNICEF strategy focused on WASH and SAFE.

**Staff commitment, especially in the first phase, received praise from key informants.** Staff interviews described the “genuine commitment” and “very good teamwork mechanisms in place” during the emergency response. The COVID-19 response placed additional demands on the teams, often requiring them to work outside of their normal work hours, which is unlikely to be a sustainable model in the long term. Overall, there was a significant reorganisation of ways of working and routines. This collective effort positively disrupted the organisation’s regular hierarchical processes.

The BCO implemented a psychological counselling programme for its staff and provided them with a day off every three weeks. UNICEF also recruited new consultants to support the delivery of WASH activities.

Data from interviews, survey and SWOT showed that **the main internal barriers to the BCO’s ability to adapt to changing context were the staff’s limited experience of health emergency response; the lack of a contingency plan and the initial lack of WASH/IPC staff; and the initial lack of data and monitoring tools to identify emerging needs.**

## 3. IMPLEMENTATION

### 3.1. ADDED VALUE

#### 3.1.1. Were UNICEF Advocacy Actions Effective in Adding Value to the National Response?

Brazil's national response to the COVID-19 pandemic has been marked by poor coordination and leadership from the federal government. A 9.1% decline in GDP in 2020 and the associated fiscal adjustment measures taken in 2017-19 led to a reduction in social protection investments, affecting more than 30 social programmes<sup>22</sup>. In October 2021, 14.1 million people were unemployed<sup>23</sup> and this number is expected to increase to 14.5 in 2021.

In 2020, the Federal Government took steps to help alleviate the effects of COVID. This included:

- Increase in the Bolsa Familia conditional cash transfer for 1.22 million families (14.27 million families benefited in total);
- Emergency Aid for 677 million informal workers, low-income people and migrants; US\$ 170 (R\$ 600/month x 3) and US\$ 340 (R\$ 1,200/month x 3) for mothers responsible for supporting the family;
- Emergency occupation and income preservation scheme;
- Financial aid for states and municipalities through emergency transfers to state and municipal health funds, as well as the suspension of debt collection<sup>24</sup>.

However, in 2021, in light of budgetary constraints, the federal government reduced emergency aid to R\$ 375 for 5.098 million women heads of household receiving Bolsa Família; R\$ 250 for households with more than one person in the family (not covered by Bolsa Família), and R\$ 150 for 1.56 million people living alone. Because of the cuts, the total number of aid recipients is estimated to decrease to 45.6 million people, which is a reduction of 22.6 million<sup>25</sup>.

**The national response was not sufficient to mitigate the socio-economic impact of COVID-19 on the most vulnerable groups.** As a result, UNICEF focused much of its efforts on advocacy actions to add value to the national response.

**UNICEF deployed a far-reaching communication campaign on prevention measures**, related to Risk Communication and Community Engagement (RCCE). An estimated 1.8 billion people<sup>26</sup> were reached with messages on prevention and access to services. Relevant messages were transmitted via UNICEF's proprietary channels, as well as through media and influencers. The number of visits to the UNICEF Brazil website has tripled since the launch of the communication campaign. The messages were also communicated to migrant populations and translated in the Waraoao language for indigenous people from Venezuela. Communication materials for children and adolescents were also produced in partnership with the famous Brazilian cartoonist Maurício de Souza. In some cases, this material was used to assist learning, due to schools being closed during the pandemic.

UNICEF and partners also developed information brochures to facilitate access to government-led emergency aid and benefits for vulnerable groups. These brochures

<sup>22</sup> UNICEF Brazil (n.d.). *Hotspot meeting - UNICEF Brazil*. UNICEF: PowerPoint Presentation.

<sup>23</sup> "Número de desempregados chega a 14,1 milhões no trimestre até outubro", IBGE.

<sup>24</sup> UNICEF Brazil (n.d.). *Hotspot meeting - UNICEF Brazil*. UNICEF: PowerPoint Presentation.

<sup>25</sup> "Menos dinheiro para menos brasileiros: o que muda no novo auxílio emergencial". BBC Brasil.

<sup>26</sup> UNICEF Brazil, SitRep indicators. Sum of all people reached by individual RCCE messages. One person may be reached by multiple messages multiple times.

were widely distributed at the same time as hygiene kits. Jointly with other UN agencies, this material was translated in other languages to inform the migrant populations who were eligible for this financial support.

Local partners reported that peer-to-peer communication (i.e., messages in which an adolescent is the communicator and another adolescent is the audience), was a particularly successful strategy to increase acceptance, especially for topics related to mental health.

**Public advocacy, understood as the initiative to champion a cause within the public sphere, is a strategy the Country Office relied upon as part of its COVID-19 response.** This strategy allowed UNICEF to support the reopening of schools, school connectivity and social protection in the highest spheres of Brazilian society.

The BCO advocated for the reopening of schools early into the pandemic restrictions. In doing so, UNICEF Brazil lent credibility to the cause at a time when there was widespread resistance from parents, teachers and decision-makers on this issue. In the Northeast, the UNICEF local team had meetings with government representatives of at least half of the nine states and school reopening was an important topic during those meetings. In October 2020, when many municipalities decided to reopen businesses in different sectors, while schools remained closed, UNICEF Brazil used scientific evidence in support of the idea that schools should be the last to close, and the first to be reopen, presenting the relative costs and benefits.

**UNICEF worked closely with key education stakeholders, including the National Association of Municipal Education Departments (UNDIME) to disseminate messages, lessons learned and tools to support school reopening.** National guidelines on safe opening of schools were prepared and made available on the UNDIME website. An open online platform was designed to support the Departments of Education with a toolkit that could be used to self-assess the existing conditions and infrastructure. This enabled the department to prioritise activities and ensure schools were safe for children to return with access to soap, hygiene supplies and hand washing stations. In addition to helping school managers prioritise actions, the results of these self-assessments, which have not been published yet, were to inform the medium to long-term WASH needs in schools.

Still, teachers' unions largely resisted the advocacy campaign because they were not convinced that safe school environments could be guaranteed for children. **The effectiveness of UNICEF's advocacy efforts depended on their local partners and their willingness to act.**

To mitigate the social impact of closed schools, UNICEF Brazil updated the SAFE strategy and produced materials to improve preventive health practices among children in schools. UNICEF Brazil also created content tailored to adolescents, youths, teachers, local governments and partners to support distance learning.

**An important advocacy campaign focused on preparing schools for re-opening through support for broadband connectivity.** UNICEF brought together the five largest telecommunication companies in Brazil, Congress and the Ministry of Telecommunications to discuss evidence on the matter and find ways to fund internet infrastructure in schools. The effort focused on unlocking the Telecommunications Services Universalization Fund (FUST) to provide free broadband connections to students and the most vulnerable groups. The Brazilian Federal Senate approved a landmark bill to allocate USD 270 million from the FUST fund for this purpose. While the President initially vetoed the bill, it was overturned. UNICEF leadership leveraged its access to donors in the telecommunication sector and publicly advocated for the benefits of this bill by taking part in congressional hearings and adopting a strong media presence.

In Amazonas and Rio de Janeiro, civil society partners highlighted the importance of UNICEF support for school reopening by providing kits for the National High School Exam (ENEM kits), which included smartphones with data packages, masks and publications on safe return to schools, mental health and COVID prevention. Partner NGOs were responsible for identifying these vulnerable adolescents.

**UNICEF also advocated to make children, usually hidden victims of the pandemic, visible.** This campaign added value to the national response. For instance, the survey on the primary and secondary impacts of COVID-19 on children and adolescents carried out in two waves in July and October 2020 had national repercussions, placing on the public agenda issues affecting children and adolescents, such as the reduction of family income, increased food insecurity concerns and the concern for adolescent mental health, among others.

In the Amazon region, UNICEF advocated to keep the child support network active despite restrictions on movement. Personal protection equipment was distributed to guardianship councillors (*Conselheiros Tutelares*) so they could continue to assist children victims of violence. In the state of Ceará, located in the semi-arid region, Seal partners also worked with the social protection network to keep the institutions working.

## 3.2. EFFECTIVENESS

### 3.2.1 Considering the Needs, Constraints and Complexities of the Pandemic in Brazil, How Effectively is the BCO Implementing the Response to COVID-19?

**Beyond advocacy efforts as described in the previous section, UNICEF Brazil acted, in the short-term, to contain the spread of the virus and reduce the number of deaths** through the delivery of hygiene kits, the WASH and SAFE initiatives, social protection, support to the health sector and establishing and strengthening partnerships with the private sector, governments and civil society.

UNICEF staff and partners believe that the BCO has been targeting the most vulnerable and excluded populations in its response to COVID-19 and meeting their needs. The BCO's ability to establish and maintain partnerships with civil society partners and municipal governments was key to effectively reaching the most vulnerable communities and population, such as indigenous communities, Quilombolas, rural populations, and children and families living in conservation areas, slums and vulnerable urban territories.

**The prompt delivery of critical medical and WASH supplies** and improving Infection Prevention and Control (IPC) was cited, both in the survey and in the interviews, as having added significant value during the initial national response. The humanitarian response to families and children during the pandemic was considered effective, having reached 12 million people with critical supplies, together with leaflets on COVID-19 related information<sup>27</sup>. To reach the target population required a significant effort in terms of logistics. UNICEF played an essential role by helping partners to ensure that supplies were delivered to the target population and in good conditions, especially in the Amazon region, where UNICEF is particularly well-positioned to act both via its regional office in Manaus and as part of the joint UN support to the Brazilian government assisting Venezuelan refugees in the state of Roraima.

The health supplies donated to UNICEF, although limited considering the scale of the country, were relevant to respond to most of the emergency needs in the states and municipalities. Supply and distribution required close coordination and planning, between UNICEF teams, local NGOs and municipal and state governments. State and

---

<sup>27</sup> UNICEF Brazil (2021). RAM Country Programme Full Approved Report (Unpublished document)

municipal authorities were supported with deliveries of personal protective equipment (PPE) reaching 10.958 health workers within health facilities and communities and 80 oxygen concentrators were delivered to Manaus (Amazon) in the first phase of the response, following the collapse of the local health system.

BCO's ability to maintain support for civil society partners, municipal and state governments enabled it to reach the most vulnerable communities. This included delivery of supplies, as well as ensuring continuity of services (health for migrant children, support for distance/home-based learning and mental health, and training courses for health and social assistance professionals). Several local partners highlighted synergies between the emergency response, and the Seal and PCU strategies, as highlighted in the quote below from a civil society organisation member:

“(...) we have been doing strong work with teenagers for a long time. Come the pandemic, they were able to mobilise other teenagers in their spaces to do awareness and prevention work (...) And our focus is now to continue to do this moving forward, and of course also with public administrations supporting service continuity and safe return to schools. This advocacy work with the municipalities is also worth mentioning. It has been done for a long time, but since the pandemic it has been leveraged.”

Local partner organisations spoke favourably about UNICEF's technical coordination and logistics capacity to deliver supplies particularly in communities with the lowest Human Development Index (HDI). State and municipal governments found in UNICEF a partner with the capacity to mobilise resources, provide services and identify solutions relevant to their needs.

In the case of Manaus, the PPE received and provided to health professionals made a difference at a time when health service was under severe pressure. A public official stated: “we received thirty-five thousand pairs of gloves, and that was gold here, because nobody had it [at the time]”.

UNICEF field offices distributed critical WASH supplies in collaboration with communities, civil society, governmental and local organisations in large urban centres and capital cities of Semiarid territory (Recife, Salvador, Fortaleza), Amazon (Manaus, Belém, São Luis) and Southeast (São Paulo and Rio de Janeiro), as well as the border area with Venezuela where UNICEF was supporting migrant and refugee children. In Roraima, Amazonas, and Pará, UNICEF reached over 22,000 migrants and refugees (46% are children) with adequate WASH services.

In some locations, it was not possible to deliver hygiene kits and food supplies to all selected municipalities, such as in the state of Maranhão. However, coverage was still very high. Supplies were delivered to 14 out of the 20 selected municipalities in that state.

“There was a project that you had here, I think it was the third stage of these donations that came (...). At first, it was aimed at reaching 20 municipalities, but we were unable to reach 20 municipalities in the state. The municipalities were selected according to the lowest HDI with the secretary of state and the UNICEF articulation. But thanks to God we managed to get 14 municipalities (...)”

**The WASH and SAFE strategies** are crosscutting themes within the BCO COVID-19 response. They are considered crucial for the safe reopening of schools, and proper functioning of the national social protection network (SUAS) and the SUS.

For the safe reopening of schools, the second phase of the response provided support for infrastructure, such as hand washing sinks and hand sanitiser stations. Hygiene kits included masks, hand sanitisers, bleach, and detergent. Children's kits included oral hygiene items, fun soaps and information materials for children to learn to wash their hands in a playful way. CRAS, CREAS and health facilities were supported with individual protective equipment, along with communication and information

dissemination campaigns. The focus was on awareness raising and training of health, education and social assistance professionals in infection prevention protocols.

While the BCO's country programme did not integrate WASH activities, the precarious water supply situation in many schools highlighted the importance of working in these areas as a pre-requisite for reopening schools. In addition to hand washing sinks, there was occasional support for the implementation of alternate water supply systems in some schools in Amazonas.

**UNICEF was able to quickly identify, during the crisis, its added value for concrete and effective support to social protection services.** Brazil has a robust inter-federative social protection system and a well-focused national cash transfer program, benefiting mainly vulnerable families with children. Still, the COVID-19 pandemic and its adverse socio-economic effects revealed gaps in its capacity and flexibility to respond to humanitarian shocks and crises.

As social assistance is the main entry point for social protection at the municipal level, UNICEF strengthened its collaboration with the National Association of Social Assistance Departments (CONGEMAS). In addition to supply donations, training of social protection/assistance professionals was considered valuable and effective, as indicated by a government partner:

“Our staff received guidance from UNICEF, and they were able to pass this on. From the conversations with UNICEF, we had several virtual meetings, and we passed on this information, the protective measures, and the guidelines. So, in this educational format our joint work with UNICEF reached a lot of communities.”

In addition to the training, the production of support materials also proved effective to support the COVID-19 response. Based on a survey of more than 1.200 social workers, two practical guides were developed<sup>28</sup> to help social assistance services to adapt their services during the pandemic and in other types of emergencies. The material benefited social assistance services of almost all the municipalities of Brazil, through the network and social and communication channels.

In the second phase of the response, partnerships with civil society and the government will continue to support the ongoing activities, and some financial support will be provided directly to the families served by the CRAS and CREAS. The safe social protection equipment operation continues to provide vaccination, issuance of birth certificates in notaries and care for pregnant women in Basic Health Facilities (UBS) in the state of Ceará. In Belém, a civil society partner mentioned existing workshops to mobilise and engage young people to discuss mental health issues. Workshops with public professionals and attendance to adolescents committed with mental health were also mentioned in Ceará.

**UNICEF also supported the health sector as part of its COVID-19 response.** UNICEF supported maintaining local health services, such as prenatal, delivery and postnatal care, essential newborn care, immunisation, treatment of childhood illnesses and HIV care through community health workers and health facilities that reached 88 million people, according to the BCO COVID-19 monitoring framework indicators<sup>29</sup>. Support for vulnerable children and families was extended to communities across the country.

**The effectiveness of UNICEF Brazil's emergency response was largely due to the strength of existing partnerships with governments and civil society, as well as new partnerships.** For instance, the existing networks and partnerships with

---

<sup>28</sup> UNICEF (Unknown). Diretrizes e Orientações Gerais para a preparação dos Centros de Referência de Assistência Social/CRAS em contextos de Calamidades e Emergências. Caderno 2.

<sup>29</sup> UNICEF (2020). *SitRep indicators from system*.

municipalities and NGOs were crucial in providing emergency assistance to vulnerable and displaced populations in Manaus, Boa Vista, Rio de Janeiro, São Luís and Fortaleza during COVID-19 pandemic. In Belém, partner NGOs were key to identifying and selecting target communities for the distribution of supplies and the dissemination of health information for youth and indigenous people.

In Boa Vista, UNICEF sought to work within the existing national health services framework (SUS) to strengthen the Welcoming Operation (*Operação Acolhida*), which was part of a joint effort from the Brazilian Government with the support of the UN to welcome Venezuelan migrants. It is believed that UN's previous work on primary health care among refugees —providing immunisation, hygiene, and preventive care— boosted COVID-19 prevention measures, which resulted in only 4% of migrants living in shelters being infected in Boa Vista during the first phase of the response.

**Partnerships with the private sector** were cited as important elements that added value to the COVID response. The delivery of hygiene kits and food parcels, which reached 2.1 million vulnerable people, was made possible due to donations from corporate donors and the establishment of new partnerships. Donations for WASH supplies and personal protective equipment (PPE) exceeded the expectations. Large volume of resources (in cash and in kind) were donated. The private sector's confidence in UNICEF's brand and in its ability to serve children and their families, combined with its logistical capabilities, were crucial to mobilising these resources. UNICEF created 14 new COVID-19-related partnerships with private companies.

**During data collection, informants expressed diverging viewpoints about the effectiveness of emergency actions.** For some, the emergency response was prompt, considering existing vulnerabilities. For others, the scale of action was disproportionate to the scale of need and only a “drop in the ocean”. Others reported that UNICEF should continue to include emergency components in the years to come, given that the pandemic and its effects in Brazil have worsened over time.

At the time this assessment was carried out, the second phase of the COVID-19 response was being implemented, which made it difficult to accurately assess its effectiveness. According to some interviewees, the implementation of the second phase was not as fast as the previous one, which compromised fundraising. The SWOT analysis identified that among the internal weaknesses is the “difficulty making the initial transition from the previous programmatic agenda to new demands”. Regarding the first phase, although one of the weaknesses mentioned in the SWOT analysis was “barriers in internal processes for managing demands, acquisitions and deliveries”, the same analysis indicated “ability to adapt quickly to the new context”.

UNICEF staff also mentioned, in the interviews and in the SWOT analysis, that external challenges include lack of easily accessible funds during the second phase of the response. Reticence on the part of private donors to support actions with longer-term expected results, such as advocacy, and the delay in the beginning of the second phase were mentioned in the interviews as critical points requiring adaptation.

**In terms of the diversity of the targeted populations, the BCO was able to respond to the needs of indigenous communities, Quilombolas, rural populations, and children and families living in conservation areas, slums and vulnerable urban territories.**

UNICEF partners were asked to rate the extent to which the most vulnerable populations received support during the COVID-19 response on a scale from zero to ten. Individual scores were high, between eight and ten. In some municipalities, including Belém, local organisations helped identify vulnerable communities for the delivery of kits:

“(…) now in February we closed yet another deal for delivery of a baby hygiene kit, toothpaste, brush, soap and also masks (…). We were able to mobilise more

than 50 partners distribution partners (...) who also supported in identifying the population that was in need of this distribution.”

Despite targeting the most vulnerable children, it is difficult to say whether the programme included actions to mitigate the effects of the crisis among the poorest children. Partners also signalled a growing number of families facing unemployment and food insecurity. When asked about how critical UNICEF and its partners' support has been in meeting the needs of the most vulnerable, individual ratings were also high (all nine or ten). In Ceará, the distribution of SIM cards for online classes, domestic violence among children and adolescents and the attention to mentally ill children was highlighted as a targeted activity that was effective in reaching particularly vulnerable groups. The School Active Search was also mentioned as an important activity in Rio de Janeiro to reach vulnerable children.

As added value and effectiveness are interlinked concepts, the table below cross-references the main elements of the added value of the BCO COVID-19 response at the strategic level with those related to effectiveness.

**Table 1: Added value and effectiveness of the BCO COVID-19 response**

Level/Phase	Effectiveness/Results Achieved
<b>Phase 1 - Humanitarian Response</b>	
WASH and PPE	Delivery of hygiene kits (2,1 million people reached)
	Provision of Personal Protective Equipment (PPE) (1.735 health professionals)
<b>Phase 2 - WASH and SAFE</b>	
Risk Communication and Community Engagement (RCCE)	Messages on prevention (1,15 billion people) and access to services (11 million people)
	Visits to the UNICEF Brazil website has tripled
	Messages conveyed by the children themselves
Education	Re-opening school advocacy (the level of efficiency of the advocacy depended on the audience)
	Materials to improve preventive health practices among children in schools; content focused on adolescents, youth, teachers, governments and partners to support distance learning
	Kits for the National High School Exam (ENEM kits) - Amazonas and Rio de Janeiro. Included smartphones with data packages, masks and publications on safe return to schools, mental health and COVID prevention
	Advocacy effort for school connectivity
	Active search (Busca Ativa): 345.216 out-of-school children and adolescents identified
Infrastructure	(Occasional) Hand washing supplies and support for water supply systems in schools in Amazonas's school
Social Protection	CRAS and CREAS and health facilities supported with individual protective equipment, along with communication and information dissemination campaigns
	Training of social workers on infection prevention protocols
	Two practical guides developed for municipal social assistance services

Health	Training concerning continuity of vaccination, issuance of birth certificates in notaries and care for pregnant women in Basic Health (Ceará state) and mental health
Operational Level	
Logistics	UNICEF's technical coordination capacity in the logistics of distributions
Target population	UNICEF's technical capacity to reach target population
Target region	UNICEF's technical capacity to reach target vulnerable region

The SWOT table below summarises UNICEF upper management's perception of strengths and opportunities in terms of their feasibility and likelihood of positive impact.

**Table 2: Impact scores for strengths and opportunities - Effectiveness**

Score the STRENGTHS and OPPORTUNITIES in terms of their Feasibility and Positive Impact (0-10)		
Choices	Feasibility	Positive impact
New Partnerships (including Private Sector) (Fundraising)	9	9,1
Digital presence, greater reach, new ways of communicating (Communication)	8,5	8,5
Technical mobilization capacity (Logistics)	7,7	8,5
Capillarity in the country (target region)	9,1	8,4
WASH in Schools (Education)	6,7	8
Mental health (Health)	7,3	7,6
Performance at the community level (Communication with Programme Sections)	7,2	7,6
Logistics (reaching out to the most vulnerable) (Target population)	6,6	7,4
School reopening (Education)	6,8	7,3
Linkage between emergency response and development (Communication with Programme Sections)	7	7,1
Vaccination (Health)	6,4	6,8

### 3.3 PARTNERSHIPS

#### 3.3.1. How Effective Has Been the Country Office's Coordination, Collaboration and Communication With the Brazilian Governments?

At the national level, UNICEF worked with federal ministries and agencies by advocating for the reopening of schools, improved water and sanitation, continuing emergency assistance for families, promoting WASH initiatives in schools as well as internet connectivity. In addition, UNICEF brought forth evidence on the effects of COVID-19 on children and adolescents to parliamentary hearings, particularly related to the pros and cons of school reopening.

The federal government consistently downplayed the public health risks associated with COVID-19, which led to tensions with state governments and Congress and resulted in the appointment of four different Health Ministers in less than two years. Lockdowns and prevention measures have been applied sporadically by state governments, often against the will of the federal government. As a result, a COVID-19 response coordination mechanism at the federal level never fully materialised.

UNICEF Brazil's ability to mobilise different actors around a childhood and adolescence agenda in the context of COVID-19 included coordinating with the federal government, as will be detailed in this section. However, ideological polarisation posed a potential threat to UNICEF in terms of image and involuntary political involvement. Government inaction and/or active undermining was scored as the most likely threat (9.2 out of ten) to UNICEF's COVID-19 response and among the threats with the highest impact during the SWOT analysis.

For the school reopening initiative, communication with the Ministry of Education was more demanding. The Minister's position was that such matters should be decided at the subnational level, which resulted in UNICEF having to hold individual discussions with other relevant stakeholders.

As described in detail in a previous section, an important advocacy effort in support of school re-opening was the UNICEF-led move to improve internet connectivity.

Regarding water and sanitation, UNICEF initiated a dialogue with the Sanitation Secretariat of the Ministry of Regional Development. The Secretariat acknowledged that water supply in schools is an important issue; however, this understanding did not materialise into a concrete partnership. Efforts were also made to establish collaboration with the Ministry of Citizenship, with limited success.

A partnership with the Brazilian Institute of Geography and Statistics (IBGE), planned in the country programme, allowed the incorporation of questions on education into the COVID PNAD (National Household Sample Survey), carried out by IBGE. More recently, UNICEF offered support to the federal government with COVAX for supply of vaccines, coordinating with the Minister of Health, WHO and PAHO.

The CO Representative is also part of a Consultative Council of the Parliamentary Front for Basic Income, to make visible children and adolescents in the ongoing debate on the need for strengthening social protection programmes.

In parallel with actions and support at the national level, the BCO sought to leverage its existing relationships at the municipal and state levels mainly through the Seal and PCU programmes and Zone Offices. The Fortaleza, Maranhão and Recife offices were cited as very close to the municipalities and state governments. These states closely monitored the COVID-19 response and were open to discussions relating to school reopening. This was also the case in Rio de Janeiro, in relation to "Territórios Sociais" programme. This programme works with the most vulnerable groups in ten favelas and has contributed directly to the COVID-19 response.

The BCO also created a technical group to disseminate information related to its coordination, collaboration and communication with the Brazilian government. This group shared with Zone Offices information about its advocacy efforts and actions at the federal level. This enabled local offices to be aware of the high-level discussions and to maintain a coherent discourse at the state and municipal levels.

As a member of the Crisis Committee, UNICEF provided technical support to some states and municipalities such as the city of Rio de Janeiro. Some respondents reported that communication and collaboration could be further improved:

"(...) in other countries where governments (...), if they're used to working more with humanitarian assistance, in coordination with international agencies, they would be a little bit more prepared for that and open to that. But Brazil, as a mid-high-income country was not ready to count on any international organisation for coordinating and representing. But now I think it has happened, now, after one year and no response, it's not happening in some places such as Rio de Janeiro (...)."

### **3.4. QUALITY AND TIMELINESS OF THE RESPONSE**

#### **3.4.1. In What Ways Has UNICEF and its Partners Ensured That Implementation of the COVID-19 Response is Taking Place as Intended and is of Good Quality?**

The BCO conducted thorough and constant monitoring and assessment activities to ensure that the implementation went according to plan and that the activities were reaching vulnerable communities. UNICEF paid particular attention to logistical challenges, close coordination and communication with implementing partners, and capacity building of implementing partners according to needs.

**During the pandemic, the country office continued to implement and monitor its activities as planned and according to its standard operating procedures, which included using mechanisms for the distribution of supplies<sup>30</sup>.** Partners' perceptions during the interviews were that the implementation and delivery of supplies happened in accordance to UNICEF's plans and reached their target populations.<sup>31</sup>

**UNICEF monitored and verified the implementation and distribution of supplies through surveys, online meetings, visits, photos and videos.** In addition to regular monitoring, UNICEF also increased partner capacity through training. This helped to strengthen technical and implementation capacity of partners.

**In order to consistently reach the most vulnerable and excluded populations, UNICEF has been conducting<sup>32</sup> advocacy actions** with the government and/or other actors to address gaps in provision for certain groups. **UNICEF also increased coordination and data sharing across sectors/partners** to support the constant monitoring and assessment of the reach of the programme. **Making an innovative use of technologies, UNICEF also relied on social media and the hotspot approach** to ensure implementation is adequate.

**Partners interviewed reported that all donations received through UNICEF were of good quality and available in large quantities,** which allowed more families to benefit. Donations consisted mainly of food baskets, cleaning and personal hygiene products and items for prevention and protection against COVID-19 such as gel alcohol, gloves and IPC. UNICEF also distributed COVID-19 awareness, prevention and information materials alongside other supplies:

“Because for those who have [food], those who work and, thank God, they have their resources, they do not understand, they do not know the importance of what it is to receive food parcels like the ones UNICEF sent... Because they were food parcels very different from others that they received before on other occasions. [UNICEF food parcels had] more items, always quality items, the cleaning products too ... products for cleaning the whole house. It wasn't just bleach and towel paper, no; there were too many products, which, it was really possible to clean the house.”

To ensure quality of services and supplies UNICEF Country Office used constant monitoring, close coordination with IP, capacity building with different sectors such as health and social assistance, increasing capacity building of IP and relying on an existing network of partners with technical capacity<sup>33</sup>.

The logistics involved in delivery and distribution of supplies were critical to the success of COVID response, particularly for families in hard to reach areas. This was particularly noted by government partners. **UNICEF staff also met the needs of partners, helped**

---

<sup>30</sup> Question 17 and 18 from UNICEF staff survey: 17- Has the UNICEF Country Office verified that the standard UNICEF or IP monitoring and verification of implementation (e.g. field visits, third-party monitoring, etc.) has taken place as planned in the Covid-19 context?

18- Has the UNICEF Country Office verified that the standard UNICEF or IP mechanisms for ensuring distribution of supplies has taken place as planned in the Covid-19 context?

<sup>31</sup> Partner evaluations were based on a small, non-random sample of 13 interviewees and could not be triangulated with other sources, so conclusions cannot be generalised to the entire universe of UNICEF Brazil partners.

<sup>32</sup> Question 16 from UNICEF staff survey: What means has the Country Office used to ensure that it is targeting and reaching the most vulnerable and excluded populations, given increased access challenges?

<sup>33</sup> Question 19 from UNICEF staff survey: What means is the UNICEF Country Office using to ensure quality of services and supplies, even where substantially increased coverage has taken place?

**with logistics and ensured that supplies reached their destination in good condition:**

“And we distributed it [donations] to the autistic children, the families of the autistic children, the elderly... we went from house to house with our team, the UNICEF [team] even joined us on some visits to deliver the kits.”

**UNICEF’s efforts to obtain donations from private sector partners and the monitoring and support to partners in the field ensured effective implementation of COVID 19 emergency assistance.** Despite the restrictions placed by COVID-19, UNICEF acted quickly by liaising with local organisations, NGOs and donors to meet the basic needs of vulnerable families in time, by providing good quality products in large quantities.

### **3.4.2. How is the Quality of the Response to COVID-19 Being Affected by Remote Working Modes and the Generally Constrained Operating Environment?**

Staff working remotely have adapted quickly to the challenges of delivering the COVID-19 response and collaborative work with partners was not adversely affected.

**Remote working did not adversely affect COVID-19 response.** The good communication already in place between UNICEF and its partners facilitated an effective transition to remote working. New partners coming on-board during the pandemic were also satisfied with remote working modality. All surveyed partners showed satisfaction in working with UNICEF during the pandemic, reporting that communication and interaction with UNICEF staff was easy, they were accessible and provided the needed support.

**Partners were in general very satisfied with UNICEF support;** reporting that UNICEF staff were always available for support and advice:

“...there was always a lot of dialogue with the UNICEF team and I think it was very easy in that sense”

### **3.4.3. How Timely Has the UNICEF COVID-19 Response Been?**

UNICEF staff believe UNICEF Brazil emergency procedures had a timely and effective response to crises of COVID-19. Partners were in general satisfied with UNICEF staff support, which was prompt to respond to the COVID-19 crisis. Partners indicated that UNICEF offered support from the beginning of the pandemic with donations of food and hygiene supplies and met their needs for support with logistics to ensure that donations reached their destination in good condition.

**UNICEF staff reported that previous experience with the Venezuelan migrant crisis and its emergency procedures enabled them to provide a timelier and more effective response to the COVID-19 crisis. Timeliness was given an average score of 7.3 out of ten in the staff survey<sup>34</sup>.** Factors that helped explain the timeliness of the response based on UNICEF staff survey included capacity, resource mobilization and funding levels, negotiation with donors, flexibility in budgets/objectives, and UNICEF's Simplified Standard Operating Procedures for Corporate Emergency Activation procedure in Level 3 Emergencies.

**Partners were satisfied with UNICEF’s prompt response to the COVID-19 crisis.** Many reported that UNICEF offered support from the start of the pandemic with food and hygiene supplies. Some reported that without the help of UNICEF, it would be more difficult to find these supplies and support the most vulnerable population:

---

<sup>34</sup> Question 14 from UNICEF staff survey: What factors explain most the timeliness of the response?

“...the secretariats, they would not be able to help people and they would be unassisted. That is why, while opportune, I say that it is 10 and that more should come.”

**Factors that hindered the timeliness of the response were communication and coordination with the government.** The federal government was reluctant to acknowledge the need for an urgent response and prevention measures. Some respondents also reported capacity, and inadequate resource mobilisation and funding levels<sup>35</sup> as hindrances to timely implementation.

**Partners also reported that in 2021 UNICEF support has slowed down or stagnated.** Because of staff turnover following the municipal elections, the constant personal contact with government partners has decreased. Consequently, in many municipalities, activities have slowed down or stopped:

“So, we stopped in December, we demobilised it, we haven't restarted any mobilization this year yet [...] I can't evaluate it now because in fact I don't know if anything was done and what was done in those 3 months. We demobilised, we had a change of management of the city hall, new mayor, new secretary, so we are reordering all the work. So, we started the conversations again, GT research, the GT prevention. We will be restarting the work this month.

“...for 2021, as everything stopped, they [UNICEF] stopped too, we started talking again about these needs for the Community. I do not see myself in a condition to evaluate 2021.”

#### **3.4.4. How Easy is it for Partners to Contact UNICEF to Make Suggestions/Requests, to Complain, or to Provide Feedback?**

Partners praised UNICEF's openness to feedback and ability to address suggestions.

**At the beginning of the response to COVID-19, some partners reported that they were unsure to whom they should report within UNICEF,** as the workflow was new and new strategies and actions were being put in place. However, in the second half of 2020, the roles and responsibilities within UNICEF were better defined and communicated, improving the management of the response.

**All partners stated that the UNICEF team was always open to receiving suggestions, requests, complaints, and feedback,** especially when activities and actions could not be planned and discussed in conjunction with partners. An example given by a CSO partner is that they suggested adding food donations in addition to the donation of hygiene material, to which UNICEF readily responded.

**Partners affirmed that they never had any difficulty in accessing UNICEF staff.** They also reported that UNICEF staff always responded promptly to their questions.

“The channel is always open [to UNICEF staff]. There is WhatsApp, phone, email ... their answers are very fast.”

“Whenever I finish an action, a project, a programme, there is always someone who gets in touch to give some kind of feedback.”

#### **3.4.5. How is UNICEF Benefitting From Partner Feedback About its Approach and Operations?**

---

<sup>35</sup> Question 15 from UNICEF staff survey: What factors hindered most the timeliness of the response?

Interviews showed that partners who had prior relationships with UNICEF were consulted about UNICEF's approach and activities. However, partners coming on board after the onset of the pandemic were not consulted.

A partner explained that earlier this year (2021), UNICEF invited them to a meeting at the São Paulo office to jointly design future strategies.

“At the end of the workshops, UNICEF is always very concerned with seeing how we can improve, what we can progress from the lessons learned so that we can do better later.”

Partners also understand the monitoring and evaluation systems and their purpose:

“For example, we have just done a feedback survey on the participation of UNICEF in the homicide prevention committee. Every time a PCU cycle starts and ends we always have a seminar on lessons learned, on how we can improve later”

## 4. CHALLENGES

### 4.1 Where Has UNICEF Not Been Able to Respond Appropriately to Pressing Needs Caused by COVID-19? What Factors Prevented an Adequate Response?

**UNICEF experienced substantial challenges with regards to school reopening; water and sanitation; health and food supplies; children and their families' economic situations; advocacy, and fundraising.**

**School reopening** is an area where there are still challenges. This is due to resistance from teachers' unions, decision-makers at subnational level, and the worsening of the pandemic. The teachers' unions did not join UNICEF's school opening strategy in November 2020 and the materials prepared for the reopening have not yet been disseminated. Additionally, procurements of supplies were more focused on health rather than education. Purchases focus heavily on ICUs, masks, oxygen and intubation equipment. Most governments have not worked on preparing schools for reopening, prioritising instead response to what they believed to be more urgent needs. Municipal elections coincided with the school re-opening advocacy campaign, and most candidates avoided taking a strong stance on this issue. Moreover, as the health crisis worsened, some stakeholders, initially in favour of school reopening, reconsidered their position.

**As Brazil's situation worsens, there is again a need for SAFE, health and food supplies.** A need to "step back" and reassess could be in order, as stated by some respondents. However, there is no clear solution to the worsening economic and social situation facing children and their families.

**There are increased levels of poverty, unemployment, and most probably child labour.** It is unlikely that many children will return to school soon. The Brazilian health protection system does not seem to be structured to meet the needs of children. Additional questions that require consideration include support for social protection systems given the rising demand for child safety and social protection, youth unemployment, cash transfers for economically affected families.

### 4.2 What Are the New and Vulnerable Groups That UNICEF and Other Partners Should Consider Focusing on?

Vulnerable and minority populations will require increased support, low-income families will likely drop below the poverty threshold, homeless children and people living in precarious settlements will likely be more exposed to violence.

**Vulnerable populations:** the economic restrictions imposed by the pandemic, the lack of quality public services, the slow rate of vaccination and increased levels of poverty have increased the vulnerability of the riverside and indigenous populations in the Amazon region, and the Quilombola and Terreiro communities in the semi-arid region.

**Vulnerable families** face difficulties in accessing water, education, food and health services. Given the economic situation in Brazil and the high rate of unemployment and informal work among low-income families, many families found it difficult to support themselves financially. This affected their ability to purchase food and other essential items. Even though federal emergency aid through cash transfer returned, albeit at a lower value than in March 2020, families still struggle to fulfil their daily needs. UNICEF could support municipalities to map these families using the hotspot approach..

**Homeless children and precarious settlements:** There is an increase in poverty amongst families and a re-occurrence of cases of children living on the streets, including in urban centres. Partners consider this group to be one of the most vulnerable especially during the pandemic, as they are more exposed to violence. UNICEF could pay more attention to this group, working with local governments to assist affected families and children thereby ensuring their safety and well-being.

#### **4.3 What Are the Challenges That Will Require More Attention as a Result of COVID-19?**

Support to mass vaccination, improved internet access in remote areas, disseminating reliable information, advocating for greater public funding for social policy at the municipal level, fostering capacity improvement of public services, supporting food security actions, mental health and psychosocial support services and school re-opening

**Vaccination:** Partners believe that ensuring the COVID-19 vaccination of the population should be the main point of attention now considered the most vulnerable and the priority public. Without this, there is a risk of an even greater decline in economic situations and worsening social and health conditions in the country. UNICEF can support vaccine distributions, and advocate for the most vulnerable municipalities to receive doses in priority, especially municipalities with indigenous, Quilombola and riverside populations.

**Reliable information:** Fake news and inaccurate information about restrictions and protection measures need attention. The lack of coordination between governments and the inability to recognise fake news affects an individual's ability to make the right decisions. UNICEF can support this through its communication and awareness raising campaigns. It can also reinforce the importance of vaccination for children to safely return to school.

**Access to the internet:** Many municipalities in Brazil still have problems with internet access, especially in the Amazon and Semi-arid region. Remote activities are a challenge for these municipalities at many levels, from offering remote public services, to communicating with communities and with external partners to ask for emergency support. Improving access to the internet in these regions could help municipalities deliver better services and improve their communications with UNICEF field office staff. Besides better communication, internet access could also strengthen capacity building through training, especially for the most remote regions with poor transport infrastructure.

**Municipal funding and capacity building:** Small municipalities normally face financial difficulties to deliver social policies. In the context of this pandemic and the persistence of many constraints, coupled with budgetary restrictions due to declining revenues, municipalities are further constrained. UNICEF may assist small municipalities with evidence generation and by advocating with the legislative branch for social services for children and adolescents, and in doing so influence the allocation of federal funds for these municipalities. In addition, the ability to assess vulnerability levels accurately has

been compromised with the unexpected cancellation of the Brazilian census. As a result, municipalities will require innovative ways to measure and map vulnerable populations and their needs. UNICEF can support municipalities to identify these groups using existing tools, such as the School Active Search. Municipalities may also find it difficult work across sectors. Social policies and activities require intersectoral actions, especially in the long term. UNICEF can help strengthen and create intersectoral activities.

**Food security and nutrition:** The most vulnerable households are typically headed by informal workers who are most at risk as they are outside of the social protection system. The increase in food prices has led many families to a state of deprivation during the pandemic. As the labour market will take time to recover, such families will have difficulty staying above the poverty threshold and food insecurity is likely to increase.

**School reopening and remote learning:** Re-opening of schools will be a challenge given the lack of adequate preparation from municipalities. There is an increased likelihood of children dropping out of school and this is a cause of concern, especially in more vulnerable regions and for certain groups. Partners reported that during online classes there is frequent disruption due to access being open to the public.

**Mental health:** Mental health issues are a concern among partners. Hunger, unemployment and poverty are an ongoing issue with no perspective of a solution soon for many families and adolescents. Partners reported that it is necessary to provide spaces where people can express their emotions. For this reason, it is important to provide mental health and psychosocial support services. Partners also reported that similar support is required for social workers who are interacting with affected groups daily, often with high workloads and at increased risk of infection from COVID-19.

## 5. CONCLUSIONS

The BCO demonstrated its ability to effectively adapt to the COVID-19 crisis. Nonetheless, several stakeholders, including UNICEF staff, believe the programmes would be both more efficient and effective if UNICEF focused on fewer actions with greater potential for impact.

The pandemic overwhelms the capacity of governments, UN agencies and UNICEF. This should drive a reflection about prioritisation, vulnerabilities, and sustainability —until when, how, what partnerships and intervention modalities— in contexts of acute financial crisis, donor fatigue, UNICEF staff burnout and worsening needs.

A challenge the BCO will face looking ahead is how to reconcile emergency strategies and development programs. Having an emergency preparedness plan for the next CP is essential.

**The COVID-19 response has substantially increased UNICEF's scope** beyond the regular programme, adding emergency response and humanitarian activities to its realm of action. In doing so, the BCO started new programmes such as in the areas of WASH, SAFE, and mental health. Having experience with such programmes, UNICEF is now strategically positioned to provide support in these areas in the next programme cycle.

**The BCO demonstrated its ability to adapt effectively** to the COVID-19 crisis having added value to supply delivery, communication, WASH in schools, social assistance, public and general advocacy, and mental health, which can contribute to social policies.

Nonetheless, several stakeholders, including UNICEF staff, believe the programmes would be both more efficient and effective if **UNICEF focused on fewer actions** with greater impact potential, such as was demonstrated by BCO's advocacy work during the pandemic.

**The national emergency created by COVID-19 has put additional pressure on staff and increased their workloads.** Human resources are still insufficient in some existing strategic areas as well as in new areas such as WASH. The pandemic has increased the need for additional data collection and analysis, which creates new demands for the M&E team. This situation would require UNICEF to recruit more people to fill the resource gaps, which should help reduce the workloads of existing staff.

UNICEF Brazil's COVID-19 emergency response and coordination capacity were well developed. By July 2020, the response was already being implemented in partnership with the government and CSOs. **Key factors that contributed to it were existing Country Programme mechanisms (especially the Seal and PCU); preparation and willingness of the team to work beyond their regular assignments, such as fundraising and partnerships; reorganisation of internal workflows; and organised task forces and working groups.**

Other factors that contributed to the realisation of COVID-19 response objectives were **partnerships with civil society organisations, the private sector, and municipalities, both new and pre-existing.** UNICEF has strengthened its ties with local NGOs, municipalities and state governments. There was a rapprochement with NGOs, churches from different religions, and organisations that work on the peripheries, including in favelas and quilombos, and who reach the most vulnerable people.

**This partnership strengthening allowed UNICEF to reach the most vulnerable population** through its donations of health supplies, hygiene material and food as well as prevention campaigns. Moreover, this experience showed that UNICEF supported local partners to solve local problems but also had an impact at the national level, advocating successfully for legislative change that allowed the use of FUST funds for school connectivity.

**UNICEF's relationship with the private sector during the COVID-19 pandemic has expanded and deepened.** Nonetheless, aligning donor funds with programmatic priorities has required intensive convincing work on the part of BCO top leadership, and it is still not clear if mechanisms are in place to maintain private sector engagement during the next phases of the COVID-19 response or after the pandemic.

**One way to address this problem is to strategically align fundraising with public policy priorities.** For example, school connectivity is an urgent priority for municipalities with the potential to engage corporations in the telecommunication sector. If data show that students supported by connectivity kits have better school performance, there is a strong argument for turning these into permanent public policies.

**UNICEF has taken a leading role in the overall UN response to the pandemic.** UNICEF was able to step up and fill gaps due to lack of action by the federal government and poor UN system coordination. Relatively high-risk leadership decisions such as advocating for school reopening, against popular perception, and engaging with private sector partners, stand out in this respect.

## 6. APPENDIX

**Table 3: Consensus SWOT matrix for BCO response to COVID-19**

	<i>Helps</i>	<i>Hinders</i>
<i>Internal</i>	<b>Strengths</b>	<b>Weaknesses</b>
	UNICEF credibility, global action in emergency contexts with results and quality, presenting scientific evidence with reliable data (neutrality even in politicised and polarised contexts)	Difficulty making the initial transition from the previous programmatic agenda to new demands
	Capillarity in Brazil, with program strategy reaching several regions and thousands of municipalities, both digital and with physical presence in the territory	Lack of preparation and prior planning for humanitarian response
	Ability to mobilise different actors around a childhood and adolescence agenda in the context of COVID	Barriers in internal processes for managing demands, acquisitions and deliveries
	Expansion of the existing relationship with the private sector	Limited initial experience of UNICEF in responding to health emergencies
	Ability to quickly adapt to the new context	
<i>External</i>	<b>Opportunities</b>	<b>Threats</b>
	Logistical capacity to reach the most vulnerable	Denialism on the part of society towards COVID-19
	Forming partnerships with new programmatic implementers, donors	Ideological polarization, creating a potential risk to UNICEF in terms of image and involuntary political involvement
	Visibility of the results of the response to COVID and the organisation as a whole	Discontinuity and / or lack of external resources impacting actions
	Expand performance in WASH (schools, right to access to water), benefiting from UNICEF's experience in the area	Unpredictable duration and incidence of the pandemic, compromising planning
	Technical support at the local level filling government gaps	Lack of preparation of the health system to cope with the scale of the pandemic
	New way of communicating digitally, with greater reach	Poor coordination of the UN system in the country
	Increase the agility of decision-making processes	
	Consistency with global operations strengthens local operations	
	Specific actions in vaccination, mental health and back-to-school	

**Table 4: Impact scores for strengths and opportunities**

Score the FORCES and OPPORTUNITIES in terms of their Feasibility and Positive Impact (0-10)		
Choices	Feasibility	Positive impact
New Partnerships (including Private Sector)	9,0	9,1
Digital presence, greater reach, new ways of communicating	8,5	8,5

Technical mobilization capacity	7,7	8,5
Capillarity in the country	9,1	8,4
Organizational visibility	8,9	8,4
New decision-making process (more agile)	7,1	8,4
Results visibility	8,3	8,1
WASH in Schools	6,7	8,0
UNICEF credibility	9,3	7,9
Mental health	7,3	7,6
Performance at the community level	7,2	7,6
Logistics (reaching out to the most vulnerable)	6,6	7,4
School reopening	6,8	7,3
Linkage between emergency response and development	7,0	7,1
Vaccination	6,4	6,8
Coherence with global operations	6,1	6,6
UNICEF WASH expertise	5,2	6,5
Lack of guidance from the federal government	5,0	5,9
UNICEF limited experience with ER (initially)	6,5	5,8
	<i>Respondents n=14</i>	

**Table 5: Impact scores for weaknesses and threats**

<b>Score the WEAKNESSES and THREATS in terms of their Likelihood and Negative Impact</b>		
<b>Choices</b>	<b>Likelihood</b>	<b>Negative impact</b>
Discontinuity / lack of external resources impacting actions	5,8	9
Long-term and fluctuating pandemic incidence (unpredictability)	8,2	8,8
Lack of preparation of the health system to cope with the scale of the pandemic	8,75	8,5
Systematic negativism on the part of society	8	8,25
Governance / political context / president / "sabotage"	9,2	8
Ideological polarization / image risk / loss of focus (several fronts)	7,25	8
Difficulty in transition of agenda (several demands)	7	7,2
Barriers in internal processes for demand management, acquisitions	6,8	7,2
Internal coordination, guidance at all levels to avoid losses / errors	6,75	7
Difficulty coordinating at the national level to prioritise the use of resources	6,8	6,8
Lack of preparation / prior plan for humanitarian response	6,6	6,4
Lack of coordination of the UN System (UNCT)	8	5,8
UNICEF limited experience (at the 1st moment)	7	4,75
	<i>Respondents n=5</i>	

**Table 6: Organisations and sections interviewed, per category**

Category	Organisation / Section
UNICEF	UNICEF Brazil / Representation
	UNICEF Brazil / Coordination
	UNICEF Brazil / Operations
	UNICEF Brazil / SPM&E
	UNICEF Brazil / Recife
	UNICEF Brazil / Boa Vista
	UNICEF Brazil / Manaus
	UNICEF Brazil / WASH
	UNICEF Brazil / PFP
	UNICEF Brazil / Communication
	UNICEF Brazil / M&E
Corporate Partners	CGN Brasil
	Ministério Público do Trabalho
	Unilever
Implementing Partners SAB Territory	Associação para o Desenvolvimento dos Municípios do Estado do Ceará
	Secretaria Municipal da Restauração de Salvador
Implementing Partner Southeast Territory	Associação Santos Mártires
Local Government Partner Southeast Territory	Instituto Pereira Passos
Civil Society / TAM	Aldeias Infantis SOS
Government / TAM	Secretaria de Estado de Meio Ambiente do Amazonas
Implementing Partner / TAM	Instituto Peabiru
TAM	Centro Educacional e Social São José Operário
TAM	Secretaria de Estado de Igualdade Racial
TAM	Secretaria Municipal de Assistência Social de Paço do Lumiar

## LIST OF DOCUMENTS

1. UNICEF (2020). *2020 End of Year Results Summary Extended Narrative. Brazil*. UNICEF.
2. UNICEF (2020). *BCO COVID PLAN – SECOND SEMESTER*. UNICEF: PowerPoint Presentation.
3. UNICEF (2020). *COVID Plan Results. Mid-Year Review*. UNICEF: PowerPoint Presentation.
4. UNICEF (2020). *COVID-19 Programme Approach and Prioritization Guidance Note*. UNICEF: Updated version, November 2020.
5. UNICEF (2020). *Guidance Note on Programming Approaches and Priorities to Prevent, Mitigate and Address Immediate Health and Socio-economic Impacts of the COVID-19 Global Pandemic on Children*. UNICEF.
6. UNICEF (2020). *Making Learning, Healthcare and Protection Environments safe for children living in Brazil's most vulnerable communities*. UNICEF.
7. UNICEF (2021). *Systematization of the Brazil Country Office's (BCO) response to COVID-19*. UNICEF: PowerPoint Presentation.
8. UNICEF (2020). *SitRep indicators from system*.
9. UNICEF (n.d.). *Brazil Appeal. Humanitarian Action for Children*. UNICEF website. [accessed on 30/04/2021].
10. UNICEF Brazil (2020). *Safe Opening of Schools*. UNICEF.
11. UNICEF Brazil (n.d.). *Hotspot meeting - UNICEF Brazil*. UNICEF: PowerPoint Presentation.
12. UNICEF COVID-19 PME Working Group (2020). *COVID-19 Programme Monitoring and Analysis Framework*. UNICEF.
13. Unknown (2021). *VALORACIÓN EN TIEMPO REAL DE LA RESPUESTA DE UNICEF A COVID-19. ARGENTINA*.
14. Unknown (n.d.). *RAM Assessments 2020 (COMPILED VERSION)*.

## 8. ANNEX 8 - DETAILED INTEGRATED BUDGET

**Table 1 - Planned integrated budget and utilisation**

Programme Component	Fund	Planned	Total Utilisation	Utilisation Staff Costs	Utilisation Non Staff Costs	TOTAL Utilised (Staff + Non staff)	%
							Allocated/Planned
Enhanced policies for excluded children (13%)	RR	\$ 1,800,000.00	\$ 1,114,486.00	\$ 952,093.00	\$ 162,049.00	\$ 1,114,142.00	62%
	ORR	\$ 15,000,000.00	\$ 7,448,584.00	\$ 4,450,440.00	\$ 2,805,350.00	\$ 7,255,790.00	50%
	ORE	-	\$ 12,372,172.00	\$ 373,873.00	\$ 11,380,530.00	\$ 11,754,403.00	-
Quality social policies for vulnerable children (27%)	RR	\$ 445,000.00	\$ 2,342,692.00	\$ 152,221.00	\$ 1,543,560.00	\$ 1,695,781.00	526%
	ORR	\$ 34,000,000.00	\$ 21,970,784.00	\$ 8,748,824.00	\$ 10,943,685.00	\$ 19,692,509.00	65%
	ORE	-	\$ 1,272,685.00	\$ 601,174.00	\$ 635,650.00	\$ 1,236,824.00	-
Prevention of and response to extreme forms of violence (11%)	RR	\$ 1,800,000.00	\$ 1,231,592.00	\$ 864,684.00	\$ 316,906.00	\$ 1,181,590.00	68%
	ORR	\$ 13,000,000.00	\$ 5,813,360.00	\$ 4,236,249.00	\$ 1,518,547.00	\$ 5,754,796.00	45%
	ORE	-	\$ 547,945.00	\$ 183,648.00	\$ 334,362	\$ 518,010.00	0%
Engaged citizenry and participation (11%)	RR	\$ 450,000.00	\$ 223,313.00	\$ 71,933.00	\$ 147,776.00	\$ 219,709.00	50%
	ORR	\$ 14,000,000.00	\$ 6,941,280.00	\$ 4,802,848.00	\$ 1,876,464.00	\$ 6,679,312.00	50%
	ORE	-	\$ 394,224.00	\$ 238,162.00	\$ 102,833.00	\$ 340,995.00	-

Programme effectiveness (11%)	RR	-	\$ 498,471.00	\$ 46,389.00	\$ 393,980.00	\$ 440,369.00	-
	ORR	\$ 14,000,000.00	\$ 7,444,860.00	\$ 2,837,864.00	\$ 3,810,857.00	\$ 6,648,721.00	53%
	ORE	-	\$ 529,991.00	\$ 96,984.00	\$ 188,637.00	\$ 285,621.00	-
Migration Response	RR	-	\$ 65,541.00	-	\$ 65,541.00	\$ 65,541.00	-
	ORR	-	\$ 2,415,180.00	\$ 287,900.00	\$ 1,931,694.00	\$ 2,219,594.00	-
	ORE	-	\$ 10,674,373.00	\$ 1,614,183.00	\$ 8,844,946.00	\$ 10,459,129.00	-
<b>Total Programme Budget</b>	<b>ORR+ORE</b>	<b>\$ 94,495,000.00</b>	<b>\$ 83,301,533.00</b>	<b>\$ 30,559,469.00</b>	<b>\$ 47,003,367.00</b>	<b>\$ 77,562,836.00</b>	<b>88%</b>
Management (9%)	IB	11,419,880 <sup>36</sup>	\$ 2,119,109.00	\$ 53,360.00	\$ 1,861,989.00	\$ 1,915,349.00	-
Special Purpose (18%)	ORR/PFP	23,532,475 <sup>37</sup>	\$ 16,095,530.00	\$ 8,925,088.00	\$ 5,663,205.00	\$ 14,588,293.00	-
<b>Total non programme Budget</b>	<b>IB + ORR/PFP</b>	<b>IB+ORR/PFP</b>	<b>\$ 18,214,639.00</b>	<b>\$ 8,978,448.00</b>	<b>\$ 7,525,194.00</b>	<b>\$ 16,503,642.00</b>	<b>12%</b>
<b>Total Integrated Budget</b>		<b>129,447,355.00<sup>38</sup></b>	<b>101,516,172.00</b>	<b>39,537,917.00</b>	<b>54,528,561.00</b>	<b>94,066,478.00</b>	

Source: Source: Brazil CPD 2017-2021 (in thousands of USD)/Brazil Country Management Plan 2017-2021/UNICEF Planning Office

## 9. ANNEX 9 - OUTCOME TARGET ACHIEVEMENT

Table 1 - Target achievement per outcome indicator for Outcome 1

OUTCOME 1 (0540/A0/06/001)
----------------------------

<sup>36</sup> Source Management Plan

<sup>37</sup> Source Management plan

<sup>38</sup> Source Management plan

**By 2021, the most excluded boys and girls benefit from enhanced and inclusive public policies and services and actively participate in decision making processes.**

Indicator	2021 Target	Actual	% achieved
Percentage of children with registered births: Brazil	98%	94.69% (2020)	<b>97%</b>
Percentage of children with registered births: North Region	92%	87.06% (2020)	<b>95%</b>
Percentage of out-of-school children aged 4- 17	3%	6.5% (2015)	<b>46%</b>
Percentage of out-of-school children aged 4- 5	8%	7.1% (2019)	<b>100%</b>
Percentage of out-of-school children aged 11-14	1%	1.72% (2015)	<b>58%</b>
Percentage of out-of-school children aged 15-17	7%	10.8% (2019)	<b>65%</b>
Percentage of under-five indigenous children with low height for age: Brazil	26%	29.47% (2017)	<b>88%</b>

Percentage of under-five indigenous children with low height for age: Indigenous children in Yanomami	78%	NA	<b>NA</b>
Percentage of under-five indigenous children with low height for age: Indigenous children in Alto Rio Purus	60%	NA	<b>NA</b>

**Table 2 - Target achievement per outcome indicator for Outcome 2**

<b>OUTCOME 2 (0540/A0/06/002)</b>			
<b>By 2021 boys and girls have increased access to quality and responsive health, education and social protection programmes, and actively participate in the design, implementation and monitoring of these services.</b>			
<b>Indicator</b>	<b>2021 Target</b>	<b>Actual</b>	<b>% achieved</b>
Percentage of live births from women aged 10-14 years	9%	0.72% (2018)	<b>100%</b>

Percentage of HIV/AIDS cases in adolescents and youth aged 15-19 years in treatment	90%	NA	<b>NA</b>
Age-grade distortion rate (primary): Brazil	12%	10.5% (2019)	<b>100%</b>
Age-grade distortion rate (primary): North	19.5%	17.6% (2019)	<b>100%</b>
Age-grade distortion rate (primary): Northeast	16.9%	14.6% (2019)	<b>100%</b>
Age-grade distortion rate (primary): Center West	9.5%	8.3% (2019)	<b>100%</b>
Age-grade distortion rate (primary): Southeast	7.2%	6.7% (2019)	<b>100%</b>
Age-grade distortion rate (primary): South	7%	7.8% (2019)	<b>89.74%</b>
Age-grade distortion rate (lower secondary): Brazil	17%	26.2% (2019)	<b>64.88%</b>

Age-grade distortion rate (lower secondary): North	24.5%	39.9% (2019)	<b>62.66%</b>
Age-grade distortion rate (lower secondary): Northeast	23.4%	33.1% (2019)	<b>71%</b>
Age-grade distortion rate (lower secondary): Centre West	14%	22.9% (2019)	<b>61%</b>
Age-grade distortion rate (lower secondary): South East	11.2%	19.5% (2019)	<b>57%</b>
Age-grade distortion rate (lower secondary): South	13.7%	22.9% (2019)	<b>60%</b>
Percentage of children (0 – 17) who are overweight	28%	0-5: 7.76% 5-9: 10.07% adolescents: 18.17% <sup>39</sup> (2019)	<b>NA</b>

Source: UNICEF Monitoring Plan Update for 2020

<sup>39</sup> Also to note: adolescent obesity: 7.91%; adolescent extreme obesity: 1.79% (2019).

**Table 3 - Target achievement per outcome indicator for Outcome 3**

<b>OUTCOME 3 (0540/A0/06/003)</b>			
<b>By 2021, Brazil's child protection system strengthened in its capacity to prevent and respond to violence against children.</b>			
<b>Indicator</b>	<b>2021 Target</b>	<b>Actual</b>	<b>% achieved</b>
Number of adolescent homicides (15-19 years): Brazil	8300	9249 (2018)	<b>89,74%</b>
Number of adolescent homicides (15-19 years): Male	7800	8681 (2018)	<b>89,85%</b>
Number of adolescent homicides (15-19 years): Afro-descendants and Indigenous	6500	7517 (2018)	<b>86,47%</b>
Number of children in detention	11626	17811 (2017)	<b>65,27%</b>

Source: UNICEF Monitoring Plan Update, 2020

**Table 4 - Target achievement per outcome indicator for Outcome 4**

<b>OUTCOME 4 (0540/A0/06/004)</b>			
<b>By 2021, engaged citizens, including boys, girls and families, millennials, individual donors and private sector partners, are driving public action for the realization of children's rights.</b>			
<b>Indicator</b>	<b>2021 Target</b>	<b>Actual</b>	<b>% achieved</b>
Percentage of individuals who declare children's rights as one of the top five issues they would like to be involved in	50%	31% (2017)	<b>62%</b>
Number of relationships with businesses whose scope has been expanded to adopt a policy that include a programmatic solution or innovation that respect or support children's rights	10	2 (2017)	<b>20%</b>
Percentage of adolescents aged 16-17 years who have voter registration cards - Municipal elections	45%	15.01% (2020)	<b>33%</b>

Percentage of adolescents aged 16-17 years who have voter registration cards - Federal elections	40%	20.4% (2018)	<b>51%</b>
--------------------------------------------------------------------------------------------------	-----	--------------	------------

Source: UNICEF Monitoring Plan Update 2020/RAM report 2020

**Table 5 - Target achievement per outcome indicator for Outcome 881**

OUTCOME "CHILDREN ON THE MOVE" (0540/A0/06/881)						
Indicator	2019			2020		
	Target	Actual	% achieved	Target	Actual	% achieved
Total number of vulnerable migrant children and families reached through UNICEF supported action	54000	36093	<b>67%</b>	54000	41316	<b>77%</b>

## 10. ANNEX 10 - OUTPUT LEVEL TARGET ACHIEVEMENT

**Table 1 - Target achievement per output indicator per year for Outcome 1**

Output	Indicator	2017			2018			2019			2020		
		Target	Actual	% achieved	Target	Actual	% achieved	Target	Actual	% achieved	Target	Actual	% achieved
Improved evidence based policies to address the causes of exclusion of boys and girls	National evidence generated on relevant child focused social policy topics	3	3	<b>100%</b>	3	3	<b>100%</b>	1	4	<b>100%</b>	1	4	<b>100%</b>
	Number of UNICEF policy advocacy actions with the legislative related to priority results for children	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	4	18	<b>100%</b>	4	20	<b>100%</b>

Boys, girls and families from excluded populations with increased participation in institutional fora, knowledge and skills to demand their rights.	Percentage of most vulnerable municipalities participating in the Municipal Seal that organize two community forums including the participation of children, adolescents and families	60%	83%	<b>100%</b>	40%	78%	<b>100%</b>	25%	0%	<b>0%</b>	25%	42.5 %	<b>100%</b>
Specialized educational programmes for out of school boys and girls	Existence of a validated methodology and tools to work with families with children with Zika Congenital Syndrome and other deficiencies	Yes	Yes	<b>100%</b>	Yes	NA	<b>NA</b>	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>

	Lower secondary school-aged out of school children in the reporting year accessing formal or non-formal education with support of UNICEF	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	8000	3.979	<b>49,7%</b>	15000	1657 4	<b>100%</b>
	Number of children supported with distance/home-based learning	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	1.5 million	4008 996	<b>100%</b>
	Number of schools implementing safe school protocols	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	10000	0	<b>0%</b>

	School aged out of school children in the reporting year accessing formal or non-formal education with support of UNICEF	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	40000	15469	<b>39%</b>	80000	6152 7	<b>77%</b>
Specialised interventions on nutrition for indigenous under five children in priority DSEIs	Percentage of 14 priorities DSEIs reached by nutrition interventions for children under five years old	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	57%	71%	<b>100%</b>	57%	71%	<b>100%</b>

Work closely with network of corporate partners to source and deliver hygiene kits and targeted communication to vulnerable families in poor urban neighborhoods in Brazilian capital cities in response of the COVID-19 pandemic	Number of people reached with critical WASH supplies (including hygiene items) and services with UNICEF support	NA	NA	NA	NA	NA	NA	NA	NA	NA	2900000	2168173	75%
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------	----	----	----	----	----	----	----	----	----	---------	---------	-----

**Table 2 - Target achievement per output indicator per year for Outcome 2**

Output	Indicator	2017			2018			2019			2020		
		Target	Actual	% achieved	Target	Actual	% achieved	Target	Actual	% achieved	Target	Actual	% achieved

<p>Families, communities and civil society have increased knowledge on health practices, and government agencies and health professionals provide culturally, and age and gender responsive health services</p>	<p>Number of healthcare workers within health facilities and communities provided with PPE with UNICEF support</p>	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	2500	2437	<b>97%</b>
	<p>Number of healthcare facility staff and community health workers trained in Infection Prevention and Control (IPC) with UNICEF support</p>	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	50000	25360	<b>50.7%</b>

	Number of municipalities participating in the PCU that engage in actions for the prevention of obesity and promotion of sports and physical activity in schools	4	10	<b>100%</b>	10	8	<b>80%</b>	4	10	<b>100%</b>	5	6	<b>100%</b>
	Percentage of municipalities participating in the Municipal Seal implementing strategies and activities related to adolescents' health	60%	92.5 %	<b>100%</b>	10%	32%	<b>100%</b>	40%	32%	<b>80%</b>	45%	42%	<b>93%</b>

	Percentage of municipalities participating in the PCU implementing strategies and activities related to adolescents' health	NA	NA	<b>NA</b>	10%	100%	<b>100%</b>	30%	60%	<b>100%</b>	50%	100%	<b>100%</b>
	Number of cities participating in the PCU implementing the Youth Aware methodology to ensure HIV/AIDS testing and treatment services among adolescents/ Number of municipalities participating in the PCU implementing strategies to accelerate the response on	5	5	<b>100%</b>	7	7	<b>100%</b>	9	5	<b>56%</b>	10	9	<b>90%</b>

	HIV/AIDS among adolescents												
Girls and boys have increased permanence in the basic education system, based on intersectoral policies addressing diversity, including	Lower secondary teachers who received training with funding provided by UNICEF	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	1000	500	<b>50%</b>	3000	803	<b>26,8%</b>

contextualized education.	Percentage of municipalities participating in the Municipal Seal implementing Successful School Path strategy to address age-grade distortion	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	10%	16%	<b>100%</b>	10%	30%	<b>100%</b>
	Percentage of municipalities participating in the PCU implementing programmes to increase permanence and regular trajectory (age – grade correspondence) in the basic education	60%	No data	<b>NA</b>	25%	40%	<b>100%</b>	10%	90%	<b>100%</b>	10%	50%	<b>100%</b>

	Percentage of participating municipalities implementing programmes to increase permanence and regular trajectory (age – grade correspondence) in the basic education	60%	92.5 %	<b>100%</b>	25%	74%	<b>100%</b>	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>
--	----------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----	--------	-------------	-----	-----	-------------	----	----	-----------	----	----	-----------

Government at national and subnational levels has improved capacity to implement intersectoral policies for social protection with emphasis on the most vulnerable children.	Percentage of municipalities enrolled in the Municipal Seal choosing to adopt social protection programmes, services and/or benefits for the most vulnerable children	60%	85%	<b>100%</b>	80%	38%	<b>48%</b>	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>
	Percentage of eligible municipalities that participate in the UNICEF Municipal Seal	≥60%	85%	<b>100%</b>	≥60%	64%	<b>100%</b>	≥60%	46%	<b>77%</b>	≥60%	55%	<b>92%</b>

	Percentage of eligible capital cities that participate in Urban Centres Platform - PCU	≥60%	100%	<b>100%</b>	≥60%	100%	<b>100%</b>	≥60%	100%	<b>100%</b>	≥60%	100%	<b>100%</b>
	Number of cities participating in the PCU using disaggregated administrative data to monitor the situation of children and adolescents	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	10	10	<b>100%</b>	10	8	<b>80%</b>

	Percentage of the 1924 municipalities enrolled in UNICEF Seal initiative making use of data and evidence, produced by UNICEF, to achieve at least 1 of the 17 systemic results set by the initiative	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	30%	21%	<b>70%</b>	50%	43,5%	<b>87%</b>
	Existence of a GenU board and operational plan on Adolescent Skills and Entrepreneurs	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	Yes	Yes	<b>100%</b>

Families, communities, civil society, private sector and governments has adopted comprehensive actions and integrated policies to promote Early Childhood Development	Percentage of the 1924 municipalities participating in the UNICEF Seal with adequate vaccine coverage for MMR D1 ( $\geq 95\%$ )	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	49%	51,4%	<b>100%</b>	49,5%	52,8%	<b>100%</b>
	Number of cities participating in the PCU with adequate vaccine coverage for MMR D1 ( $\geq 95\%$ )	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	5	4	<b>80%</b>	7	2	<b>29%</b>

	Existence of an Integrated ECD Strategy and Programme Framework	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	1	1	<b>100%</b>	1	1	<b>100%</b>
	Percentage of the 1924 municipalities participating in the UNICEF Seal that registered self-evaluation activity of at least one early childhood education school using the Early Childhood Education Quality indicators	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	10%	60%	<b>100%</b>	40%	63%	<b>100%</b>

	Number of home visitors trained to work with vulnerable families In UNICEF Seal	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	500	1.898	<b>100%</b>	4.000	5.501	<b>100%</b>
	ECD Partnerships, including ECD Action Network established at national level to coordinate programme interventions and advocacy	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	1	1	<b>100%</b>	1	1	<b>100%</b>

	Percentage of municipalities participating in the Municipal Seal trained in the promotion of breastfeeding and healthy complementary food	60%	85%	<b>100%</b>	30%	23%	<b>77%</b>	40%	60%	<b>100%</b>	50%	60%	<b>100%</b>
--	-------------------------------------------------------------------------------------------------------------------------------------------	-----	-----	-------------	-----	-----	------------	-----	-----	-------------	-----	-----	-------------

**Table 3 - Target achievement per output indicator per year for Outcome 3**

Output	Indicator	2017			2018			2019			2020		
		Target	Actual	% achieved	Target	Actual	% achieved	Target	Actual	% achieved	Target	Actual	% achieved
Families, communities, civil society, private sector and governmental agents in prioritized states with increased	Percentage of municipalities participating in the Municipal Seal and PCU implementing awareness-raising initiatives against violence, racism	0%	0%	<b>100%</b>	10%	Seal: 32% PCU: 10%	<b>100%</b>	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>

knowledge on the impact of violence on the lives of children.	and discrimination												
	Number of people who engaged in UNICEF's actions online related to violence on the lives of children (per year)	150000	156646	<b>100%</b>	300000	No data	<b>NA</b>	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>
	Number of people who participate in social and behavior change communication interventions promoting elimination of VAC through UNICEF programmes	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	10000	116759	<b>100%</b>	15000	225576	<b>100%</b>
	Number of UNICEF supported research on the drivers of VAC	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	0	1	<b>100%</b>	1	5	<b>100%</b>

Gaps in the legal, political and institutional framework related to prevention, assistance and response to violence against children mapped and addressed.	A UNICEF national multi-sectoral framework on prevention and response to armed violence elaborated to guide UNICEF interventions in large urban settings	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	1	1	<b>100%</b>	1	1	<b>100%</b>
	Consistent data base systems on juvenile justice available, updated and allowing proper monitoring and accountability (AMP)	Recommendations presented and discussed in at least 2 regional meetings	Recommendations presented and discussed in at least 2 regional meetings	<b>100%</b>	Draft database aligned with international standards	No database drafted	<b>0%</b>	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>
	Existence of legislation, policies and protocols for children victims and/or witnesses of violence in line with international norms /Existence of	No	Yes	<b>100%</b>	Yes	Yes	<b>100%</b>	Yes	Yes	<b>100%</b>	Yes	Yes	<b>100%</b>

	procedures and services for children in contact with law that are applied and delivered in line with international norms												
Improved cross-sectoral coordination and public services, at national and subnational levels, to benefit child witnesses, victims and perpetrators.	Number of UNICEF personnel and partners that have completed training on GBV risk mitigation and referrals for survivors	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	50	127	<b>100%</b>
	Percentage of the 1924 municipalities participating in the Municipal Seal that reported non-custodial programmes to adolescents in conflict with the law	60%	92.5%	<b>100%</b>	NA	NA	<b>NA</b>	0%	1%	<b>100%</b>	10%	21%	<b>100%</b>
	Percentage of municipalities participating in the	NA	NA	<b>NA</b>	40%	Seal: 0%	<b>Seal: 0% PCU: 50%</b>	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>

Municipal Seal and PCU capacitated to develop integrated flows to attend adolescents in conflict with the law in non-custodial programmes						PCU: 20%							
Percentage of municipalities participating in the Municipal Seal implementing enhanced strategies for prevention and response to racism	NA	NA	<b>NA</b>	NA	NA	NA	<b>NA</b>	0%	9%	<b>100%</b>	10%	25%	<b>100%</b>
Number of cities participating in the PCU supported in evidence-based interventions for the prevention and response to Armed Violence in large urban settings	NA	NA	<b>NA</b>	NA	NA	NA	<b>NA</b>	3	5	<b>100%</b>	5	3	<b>60%</b>

**Table 4 - Target achievement per output indicator per year for Outcome 4**

Output	Indicator	2017			2018			2019			2020		
		Target	Actual	% achieved	Target	Actual	% achieved	Target	Actual	% achieved	Target	Actual	% achieved
Citizen engagement is increased to support the realization of boys' and girls' rights.	Number of people reached on COVID-19 through messaging on prevention and access to services	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	3000000	156514307	<b>100%</b>
	Number of people sharing their concerns and asking questions/ clarifications for available support services to address their needs through established feedback mechanisms	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	25000	23931	<b>96%</b>
	Number of online users reached by	65 million	69 million	<b>100%</b>	90 million	194600828	<b>100%</b>	115 million	265752650	<b>100%</b>	140 million	1234267189	<b>100%</b>

	UNICEF's digital actions												
	Number of people who engage in UNICEF's initiative's online and offline	2.000.000	2710000	<b>100%</b>	2500000	13536440	<b>100%</b>	3000000	6299547	<b>100%</b>	3500000	11188455	<b>100%</b>
	Number of UNICEF's news stories in the main broadcast TV channels	50	83	<b>100%</b>	50	129	<b>100%</b>	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>
	Number of individual supporters of UNICEF's online and offline initiatives	1300000	1334537	<b>100%</b>	1700000	2474584	<b>100%</b>	2100000	2885020	<b>100%</b>	2600000	2944376	<b>100%</b>
Increased non-financial contributions from individual donors, private and public sector partners for the realization of boys' and	Number of company policies and industry regulations influenced to be in line with CRB principles	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>	1	0	<b>0%</b>	1	1	<b>100%</b>

girls' rights.	Percentage of private sector partners engaged with UNICEF for the implementation of CRB-related initiatives in their operations	0%	0%	<b>100%</b>	0%	No data	<b>NA</b>	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>
Adolescents mobilized and with increased knowledge and opportunities to participate in public forums of	Percentage of municipalities participating in the PCU that have managed to connect Urban Adolescent Citizenship Groups	100%	90%	<b>90%</b>	50%	100%	<b>100%</b>	NA	NA	<b>NA</b>	NA	NA	<b>NA</b>

decision-making processes.	Percentage of municipalities participating in the municipal Seal that have created a NUCA (Adolescent Citizenship Group)	85%	85%	<b>100%</b>	50%	79.9%	<b>100%</b>	50%	80%	<b>100%</b>	50%	60%	<b>100%</b>
----------------------------	--------------------------------------------------------------------------------------------------------------------------	-----	-----	-------------	-----	-------	-------------	-----	-----	-------------	-----	-----	-------------

**Table 5 - Target achievement per output indicator per year for Outcome 881**

Output	Indicator	2019			2020		
		Target	Actual	% achieved	Target	Actual	% achieved
Health systems strengthened to identify and address nutrition issues and monitor nutrition trends.	Number of pregnant women who receive iron and folic acid supplementation	2000	661	<b>33%</b>	1500	2402	<b>100%</b>
	Children 6-59 months receiving micronutrients supplements	3000	3618	<b>100%</b>	3000	3617	<b>100%</b>

Boys and girls, adolescents and women on the move and in host communities equitably access essential health services with sustained coverage of high-impact preventive and curative interventions.	Number of boys and girls under five accessing at least the minimum set of vaccines according to the country standards	6000	3276	<b>55%</b>	13000	15436	<b>100%</b>
Women and children on the move have access to sustainable safe drinking water and adequate sanitation.	Number of people living in water safe communities in the reporting year only, as a result of UNICEF direct support	6000	7324	<b>100%</b>	22500	22672	<b>100%</b>
	UNICEF-targeted population provided with sanitation or hygiene kits or key hygiene items	22000	10158	<b>46%</b>	42600	19670	<b>46%</b>
	UNICEF-targeted population in humanitarian situations practicing appropriate hygiene behaviors	30000	26845	<b>89%</b>	92000	12903	<b>14%</b>

Children on the move are protected from violence, exploitation and abuse and are able to access services and exercise their rights.	Percentage of UNICEF-targeted girls and boys in humanitarian situations provided with psychosocial support, including access to child friendly spaces with intersectoral programming interventions	14000	27632	<b>100%</b>	24000	18247	<b>76%</b>
	Number of children without parental or family care provided with appropriate alternative care arrangements	NA	NA	<b>NA</b>	450	231	<b>51%</b>
Children on the move are supported to access education opportunities while enhancing capacity of schools in host communities.	UNICEF-targeted children in humanitarian situations accessing formal or non-formal basic education (including pre-primary schools/early childhood learning spaces)	11600	11542	<b>99.5%</b>	15000	18402	<b>100%</b>
Children and their families are consulted for the elaboration & monitoring of the project and have access to life saving information and protective practices on	Communication and community engagement platforms/ mechanisms supported by UNICEF meet quality standards across development priorities	Yes	NA	<b>NA</b>	Yes	NA	<b>NA</b>

<p>access and use of services. Adolescent migrants are engaged as peer educators. In order to reduce discrimination and xenophobia, the host community is made aware of the rights and needs of the migrant population.</p>	Multi-Level C4D intervention to promote non-discrimination of specific group/s meets quality standards	Yes	NA	<b>NA</b>	Yes	NA	<b>NA</b>
	Coverage of regional level multi-country or multi-sector evaluations	0	NA	<b>NA</b>	1	NA	<b>NA</b>
	People reached by mechanisms to voice their needs/concerns	5000	914	<b>18%</b>	27000	7478	<b>28%</b>
	People reached with key life-saving and behaviour change messages on xenophobia	10000	2874	<b>29%</b>	84000	190013	<b>100%</b>
	AAP Framework developed and implementation tracked	NA	NA	<b>NA</b>	Yes	NA	<b>NA</b>

## 11. ANNEX 11 - SEAL STAKEHOLDER DIFFERENCE ACCORDING TO SEAL CERTIFICATION STATUS

**Table 1 - Seal stakeholder differences according to their municipality's Seal certification status – noncertified (NC) vs certified (C)**

	Number of responses		Mean		Dif (NC-C)	Standard Error	p-value
	NC	C	NC	C			
Semi-arid (%)	29	113	0.862	0.637	0.225	0.078	0.02
Population size group	29	113	1.345	1.602	-0.257	0.159	0.108
Prioritized municipality (%)	29	113	0.655	0.292	0.363	0.098	0
Social Impact performance	29	113	1.103	1.602	-0.498	0.119	0
Evaluation of UNICEF relevance	29	113	3.966	4.726	-0.76	0.157	0
Priorities alignment	29	113	4.104	4.734	-0.631	0.133	0
Use of monitoring indicators	29	113	3.655	4.46	-0.805	0.17	0
Monitoring to address inequalities	29	106	3.69	4.481	-0.791	0.184	0
Perception of achievements results	29	113	3.655	4.567	-0.911	0.149	0
Probability of maintaining the results	29	106	3.897	4.434	-0.537	0.168	0.002
Number of years involved	29	113	3.655	3.46	0.195	0.251	0.438
Priorities changed (%)	23	97	0.565	0.856	-0.29	0.109	0.002
Inter-sectoral capacity improved (%)	15	76	0.733	0.921	-0.188	0.118	0.034
Pandemic activities (%)	18	74	0.389	0.757	-0.368	0.125	0.003
Suggest adding activities to program (%)	19	72	0.579	0.403	0.176	0.127	0.169
Intent to attend training (%)	29	113	0.793	0.77	0.023	0.085	0.790
Note: Results of two-sample test of proportions for the binary variables, and two-sample t test with equal variances for the Likert-scaled variables. Differences which p-value is 0.10 or lower might be considered statistically significant. See annex 5 for survey instruments.							

## 12. ANNEX 12 - SEAL STAKEHOLDER DIFFERENCE ACCORDING TO SUB-NATIONAL STRATEGY

**Table 26 - Stakeholder differences according to their municipality strategy – PCU vs Seal**

	Number of responses		Mean		Dif (PCU-Seal)	St. Err	p-value
	PCU	Seal	PCU	Seal			
Evaluation of UNICEF relevance	48	143	4.125	4.574	-0.449	0.143	0.002
Priorities alignment	48	143	4.417	4.609	-0.192	0.119	0.108
Use of monitoring indicators	48	143	4.042	4.301	-0.259	0.145	0.077
Monitoring to address inequalities	48	136	4.125	4.316	-0.191	0.157	0.224
Perception of achievements results	48	143	3.917	4.385	-0.468	0.137	0.001
Probability of maintaining the results	39	136	3.692	4.324	-0.631	0.157	0
Number of years involved	48	143	3.458	3.497	-0.038	0.195	0.845
Priorities changed (%)	41	121	0.708	0.801	-0.095	0.079	0.209
Inter-sectoral capacity improved (%)	43	92	0.884	0.892	-0.007	0.059	0.896
Pandemic activities (%)	44	93	0.682	0.688	-0.007	0.085	0.940

Suggest adding activities to program (%)	38	92	0.526	0.435	0.091	0.096	0.341
Intent to attend training (%)	48	143	0.854	0.776	0.078	0.062	0.246
Note: Results of two-sample test of proportions for the binary variables, and two-sample t test with equal variances for the Likert-scaled variables. Differences which p-value is 0.10 or lower might be considered statistically significant. See annex 5 for survey instruments.							

### 13. ANNEX 13 - COUNTRY PROGRAMME COMPONENTS, OUTCOMES, STRATEGIES, STAKEHOLDERS AND CORRESPONDING SDGS

Priority Areas	Long-term Vision (Outcomes)	Intervention Strategies	Sub-national Strategies	SDGs <sup>40</sup>	Key stakeholders
Component 1 - <b>Enhanced Policies for Excluded Children and Adolescents</b>	The most excluded boys and girls benefit from enhanced and inclusive public policies and services and actively participate in decision-making processes.	Evidence generation, policy dialogue and advocacy Capacity Development South-South Cooperation Integration and Cross- sectoral Linkages	UNICEF Municipal Seal (SELO)  Platform of Urban Centres (PCU)  UNICEF's School Active Search (SAS) strategy;  Successful School Pathways strategy;	1, 2, 3, 4, 5, 6, 8, 10, 16, 17.	Government actors (advocacy; use of evidence) Families, children and adolescents (fora participation) Teachers (training) Private sector (Partnerships)
Component 2 - <b>Quality Social Policies for Vulnerable Children and Adolescents</b>	Boys and girls have increased access to quality and responsive health, education and social	Capacity development Integration and Cross-sectoral Linkages Partnerships	Adolescent Citizenship Groups (NUCA); Youth Aware project; and	1, 2, 3, 4, 5, 10, 17.	Health workers (training) Government actors (training; use of evidence; advocacy) Teachers (training)

<sup>40</sup> Information from the Country programme document <<https://sites.unicef.org/about/execboard/files/2016-PL23-Brazil-CPD-ODS-EN.pdf>>

	protection programmes, and actively participate in the design, implementation and monitoring of these services		The Baby Week initiative.		Private sector (partnerships)
<b>Component 3 - Prevention and Response to Extreme forms of Violence</b>	Brazil's child protection system strengthened in its capacity to prevent and respond to violence against children	Evidence generation, policy dialogue and advocacy  Capacity Development  Integration and Cross-sectoral Linkages		5, 10, 16, 17	Government actors (advocacy; training; use of evidence) Civil society (advocacy) UNICEF personnel (training)
<b>Component 4 - Engaged Citizenry and Participation</b>	Engaged citizens, including boys, girls and families, millennials, individual donors and private sector partners, are driving public action for the realization of children's rights.	Evidence generation, policy dialogue and advocacy Partnerships Identification and promotion of innovation		16, 17	Civil society (advocacy) Private sector (non-financial contributions) Adolescents (fora participation)

Source: UNICEF's CP Management Plan (2017)

## 14. ANNEX 14 - GEOGRAPHICAL COVERAGE, TARGET POPULATIONS AND UNICEF OFFICES

Territory	States	Participating municipalities and urban areas	Target population (children in millions)	UNICEF offices
Amazon	Acre Amapá, Amazonas, Mato Grosso, Pará, Rondônia, Roraima, Tocantins and Maranhão	805	9	Manaus, Belém, São Luis and Boa vista
Semi-Arid	Alagoas, Bahia, Ceará, Paraíba, Pernambuco, Piauí, Rio Grande do Norte and Sergipe. It also includes remote municipalities in the States of Espírito Santo and Minas Gerais.	1509	12.5	Recife, Salvador and Fortaleza
Urban Centres	Rio de Janeiro, São Paulo, Belém, Manaus, São Luis, Fortaleza, Maceió, Salvador, Vitória, Recife and Boa Vista	10	8.6	Rio de Janeiro, São Paulo, Recife, Salvador, Fortaleza, Manaus, Belém and São Luis

Source: UNICEF's CP Management Plan (2017)

## 15. ANNEX 15 - DATA ON INDIVIDUALS AT RISK OF VIOLENCE, POVERTY AND ILLITERACY IN BRAZIL

**Table 1 - Individuals living below the poverty line (2018)**

	White	Black
> \$5.50 / day	0.15	0.33
> \$1.90 / day	0.04	0.09

Source: IBGE, Research Directorate, Population Coordination and Social Indicators.

**Table 2 - Homicide rate per 100,000 young people (2017)<sup>41</sup>**

	Total	Men	Women
White	43	63,5	5,2
Black	98,5	185	10,1

Source: IBGE, Research Directorate, Population Coordination and Social Indicators.

**Table 3 - Illiteracy rate (2018)**

	Total	Rural	Urban
White	4%	3%	11%
Black	9%	7%	21%

Source: IBGE, Research Directorate, Population Coordination and Social Indicators.

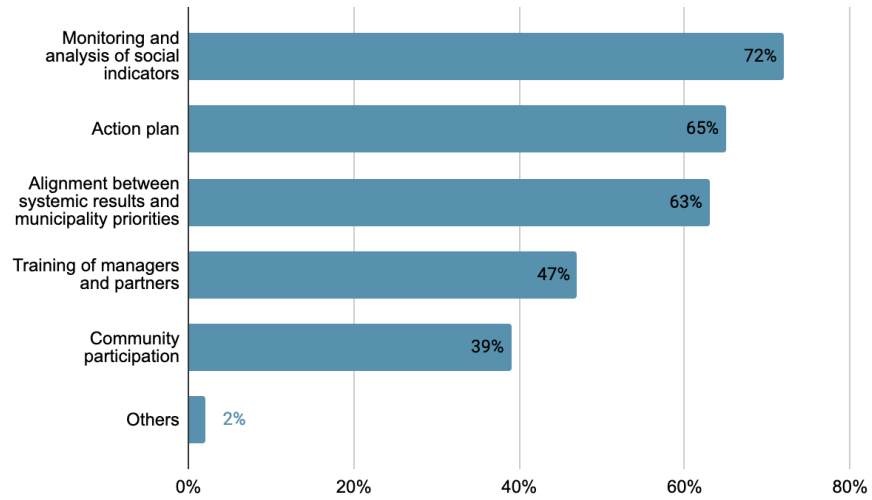
## 16. ANNEX 16 – ADAPTATION DUE TO CHANGES IN AGENDA AND PRIORITIES, SEAL AND PCU

**Figure 1: Seal adaptations due to changes in agenda priorities**

---

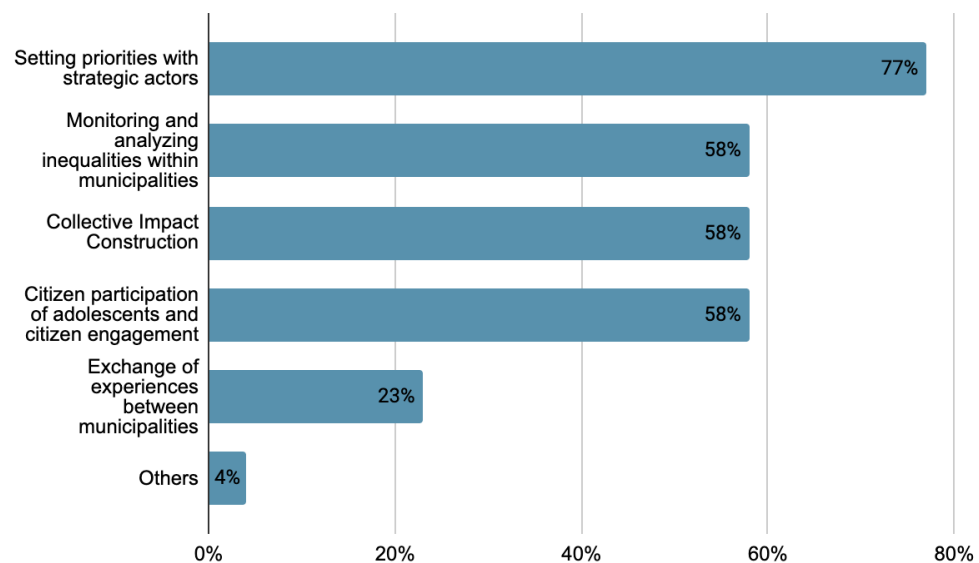
<sup>41</sup> People 15-29 years old.

## Seal



**Figure 2: PCU adaptations due to changes in agenda priorities**

## PCU



Source: Surveys with Seal stakeholders and PCU stakeholders.<sup>42</sup>

## 17. ANNEX 17 - INFORMATION RELATED TO OUTPUT INDICATORS

<sup>42</sup> Survey question: "Was the Seal/PCU adapted to these changes in agenda and priorities?"

**Table 1 -Information related to output indicators (targets, data, and achievements)**

Outputs for each outcome	No. of indicators for each output	No of indicators for which targets available	No of indicators for which data available to calculate achievement against target	No of indicators for which achievement is reported
<b>Outcome 1:Enhanced Policies for Excluded Children and Adolescents Enhanced policies for excluded children (5 outputs and 10 indicators)</b>				
1.1 Improved evidence based policies to address the causes of exclusion of boys and girls	2	1 (2017, 2018) 1 (2019, 2020)	1 (2017, 2018, 2019, 2020) 1 (2019, 2020)	1 (2017, 2018, 2019, 2020) 1 (2019 2020)
1.2 Boys, girls and families from excluded populations with increased participation in institutional fora, knowledge and skills to demand their rights.	1	1 (2017-2020)	1(2017-2020)	1
1.3 Specialized educational programmes for out of school boys and girls	5	1 (2017) 3 (2019 2020) 1 (2020)	3 (2019 2020) 1 (2017) 1 (2019)	1 (2017) 3 (2019 2020) 1 (2019)
1.4 Specialised interventions on nutrition for indigenous under five children in priority DSEIs	1	1 (2019 2020) <sup>43</sup>	1 (2019 2020)	1 (2019 2020)
1.5 Work closely with network of corporate partners to source and deliver hygiene kits and targeted communication to vulnerable families in poor urban neighbourhoods in Brazilian capital cities in response of the COVID-19 pandemic	1	1 (2020) <sup>44</sup>	1	1
<b>Outcome 2: Quality social policies for vulnerable children (5 outputs and 23 indicators)</b>				

<sup>43</sup> 2017 and 2018 N/A

<sup>44</sup> Only applies to 2020

2.1 Families, communities and civil society have increased knowledge on health practices, and government agencies and health professionals provide culturally, and age and gender responsive health services	6	2 (2020) 3(2017 2018 2019 2020) 1 (2018 2019 2020)	2 (2020) 3(2017 2018 2019 2020) 1 (2018 2019 2020)	2 (2020) 3(2017 2018 2019 2020) 1 (2018 2019 2020)
2.2 Girls and boys have increased permanence in the basic education system, based on intersectoral policies addressing diversity, including contextualized education.	4	2 (2019 2020) 1 (2017 2018 2019 2020) 1 (2017 2018) <sup>45</sup>	2 (2019 2020) 1(2018 2019 2020) 1 (2017 2018)	2 (2019 2020) 1(2018 2019 2020) <sup>46</sup> 1 (2017 2018)
2.3 Government at national and subnational levels has improved capacity to implement intersectoral policies for social protection with emphasis on the most vulnerable children.	6	1 (2017 2018) <sup>47</sup> 2 (2017 2018 2019 2020) 2 (2019 2020) <sup>48</sup> 1 (2020) <sup>49</sup>	1 (2017 2018) 2 (2017 2018 2019 2020) 2 (2019 2020) <sup>50</sup> 1 (2020)	1 (2017 2018) <sup>51</sup> 2 (2017 2018 2019 2020) 2 (2019 2020) <sup>52</sup> 1 (2020) <sup>53</sup>
2.4 Families, communities, civil society, private sector and governments has adopted comprehensive actions and integrated policies to promote	1	1 (2019 2020)	1 (2019 2020)	1 (2019 2020)
2.5 Early childhood development	6	5 (2019 2020) 1 (2017 2018 2019 2020)	5 (2019 2020) 1 (2017 2018 2019 2020)	5 (2019 2020) 1 (2017 2018 2019 2020)
<b>Outcome 3: Prevention of and response to extreme forms of violence (3 outputs and 12 indicators)</b>				
3.1 Families, communities, civil society, private sector and governmental agents in prioritized states with increased knowledge on the impact of violence on the lives of children.	4	2 (2019 2020) 1 (2017 2028) 1(2018)	2 (2019 2020) 1 (2017)	2 (2019 2020) 1 (2017 2018) 1(2017)

<sup>45</sup> 2019 2020 NA

<sup>46</sup> For 2017 achievement N/A

<sup>47</sup> 2019 2020 NA

<sup>48</sup> 2017 2018 NA

<sup>49</sup> 2017 2018 2019 NA

<sup>50</sup> 2017 2018 NA

<sup>51</sup> 2019 2020 NA

<sup>52</sup> 2017 2018 NA

<sup>53</sup> 2017 2018 2019 NA

3.2 Gaps in the legal, political and institutional framework related to prevention, assistance and response to violence against children mapped and addressed	3	1 (2019 2020) <sup>54</sup> 1 (2017 2018) <sup>55</sup> 1(2018 2019 2020)	1 (2019 2020) 1 (2017) 1( 2017 2018 2019 2020)	1 (2019 2020) 1 (2017) 1( 2017 2018 2019 2020)
3.3 Improved cross-sectoral coordination and public services, at national and subnational levels, to benefit child witnesses, victims and perpetrators.	5	1 (2020) <sup>56</sup> 1 (2017 2019 2020) <sup>57</sup> 1 (2018) <sup>58</sup> 1 (2020) 1 (2019 2020)	1 (2020) 1 (2017 2019 2020) 1 (2019 2020) 1 (2019 2020)	1 (2020) 1 (2017 2019 2020) 1 (2019 2020)
<b>Outcome 4: Engaged citizenry and participation (3 outputs and 10 indicators)</b>				
4.1 Citizen engagement is increased to support the realization of boys' and girls' rights	6	2(2020) <sup>59</sup> 3 (2017 2018 2019 2020) 1 (2017 2018) <sup>60</sup>	2(2020) <sup>61</sup> 3 (2017 2018 2019 2020) 1 (2017 2018) <sup>62</sup>	2(2020) <sup>63</sup> 3 (2017 2018 2019 2020) 1 (2017 2018) <sup>64</sup>
4.2 Increased non-financial contributions from individual donors, private and public sector partners	2	1 (2019 2020) <sup>65</sup>	1 (2019 2020)	1 (2019 2020) 1 (2017) <sup>66</sup>
4.3 Adolescents mobilized and with increased knowledge and opportunities to participate in public forums of decision-making processes	2	1 (2017 2018) <sup>67</sup> 1 (2017 2018 2019 2020)	1 (2017 2018) 1 (2017 2018 2019 2020)	1 (2017 2018) 1 (2017 2018 2019 2020)
<b>Outcome 881 : Venezuelan Migration Crisis (6 outputs and 15 indicators)</b>				
5.1 Health systems strengthened to identify and address nutrition issues and monitor nutrition trends.	2	2 (2019 2020) <sup>68</sup>	2 (2019 2020)	2 (2019 2020)

<sup>54</sup> 2017 2018 NA

<sup>55</sup> 2019 2020 NA

<sup>56</sup> 2017 2018 2019 NA

<sup>57</sup> 2018 NA

<sup>58</sup> 2017 2019 2020 NA

<sup>59</sup> 2017 2018 2019 NA

<sup>60</sup> 2019 2020 NA

<sup>61</sup> 2017 2018 2019 NA

<sup>62</sup> 2019 2020 NA

<sup>63</sup> 2017 2018 2019 NA

<sup>64</sup> 2019 2020 NA

<sup>65</sup> 2017 2018 NA

<sup>66</sup> 2019 2020 NA

<sup>67</sup> 2019 2020 NA

<sup>68</sup> Only for 2019 2020

5.2 Boys and girls, adolescents and women on the move and in host communities equitably access essential health services	1	1 (2019 2020) <sup>69</sup>	1 (2019 2020)	1 (2019 2020)
5.3 Women and children on the move have access to sustainable safe drinking water and adequate sanitation.	3	3 (2019 2020) <sup>70</sup>	3 (2019 2020)	3 (2019 2020)
5.4 Children on the move are protected from violence, exploitation and abuse and are able to access services and exercise their rights.	2	1 (2019 2020) 1 (2020) <sup>71</sup>	1 (2019 2020)	1 (2019 2020)
5.4 Children on the move are supported to access education opportunities while enhancing capacity of schools in host communities.	1	1 (2019 2020)	1 (2019 2020)	1 (2019 2020)
5.6 Children and their families are consulted for the elaboration & monitoring of the project and have access to life saving information and protective practices on access and use of services.	6	5 (2019 2020) 1 (2020)	2 (2019 2020) <sup>72</sup>	2 (2019 2020)
<b>Total</b>	<b>70</b>	<b>69</b>	<b>62</b>	<b>63</b>

Source: Analysis of data obtained from RAM and CO

## 18. ANNEX 18 - RECONSTRUCTED THEORY OF CHANGE

<sup>69</sup> Only for 2019 2020

<sup>70</sup> Only for 2019 2020

<sup>71</sup> 2019 NA

<sup>72</sup> 4 without data and achievements NA

Component	Bottlenecks	Inputs	Main strategies	Main activities	Outputs	Intermediary outcomes	Outcomes	Impact	
<b>1. Enhanced policies for excluded children</b> (a) prevalence of social norms, cultural practices, behaviors, and environments not conducive to good practices;(b) limited information on the part of duty-bearers;(c) low qualifications of social sector professionals, especially at subnational levels;(d) inadequate infrastructure; and(e) limited cross-sectoral coordination between social assistance, education, and health services.		Regular resources: 1,800,000 Other resources: 15,000,000 = Total of US\$ 16,800,000	UNICEF Munciple SEAL of Approval (SELO)  Platform of Urban Centres (PCU)  UNICEF's School Active Search (SAS) strategy;  Adolescent Citizenship Groups (NUCA);	<ul style="list-style-type: none"> <li>- Knowledge production and evidence generation</li> <li>- Establish strategic partnerships with public bodies</li> <li>- Close-door Advocacy</li> <li>- Technical assistance, guidelines, and orientation to local government</li> <li>- Development of an Agenda for children and adolescents through UNICEF Supported programmes</li> </ul>	1.1 KNOWLEDGE AND EVIDENCE-BASED SOCIAL POLICIES	Improved evidence-based policies to address the causes of exclusion of boys and girls	By 2021, the most excluded boys and girls benefit from enhanced and inclusive public policies and services and actively participate in decision making processes	<b>Reducing inequalities and promoting the rights of children and adolescents in large cities and municipalities in the Semi-Arid and Amazon regions of Brazil</b>	
				<ul style="list-style-type: none"> <li>- Support of capacity training and ongoing Technical Support</li> <li>- Community forums and activation of the Municipal council</li> <li>- NUCA/JUVA</li> <li>- Adolescent participation in face-to-face activities, workshops and forums</li> <li>- Engagement of public and civil society actors and adolescents in intersectoral thematic dialogues</li> </ul>	1.2 PARTICIPATION	Increased participation in institutional fora, knowledge, and skills to demand their rights of boys, girls, and families from excluded populations.			
				<ul style="list-style-type: none"> <li>- Public advocacy for the safe reopening of schools</li> <li>- Specialized educational programmes for out of school boys and girls (SAS strategy, SAS digital platform)</li> <li>- SAS Training</li> </ul>	1.3 SPECIALIZED PROGRAMMES (EDUCATION OOSC)	Developing specialized educational programmes for out of school boys and girls			
				<ul style="list-style-type: none"> <li>- Knowledge production and evidence generation about the nutritional situation of indigenous migrant populations living in shelters</li> <li>- Supporting the Ministry of Health (MoH) with the promotion of breastfeeding and healthy complementary food in prioritized DSEIs</li> <li>- Partnership with organization to adequate nutrition to the indigenous migrants</li> <li>- Supporting monitoring and evaluating of nutrition status of children living in indigenous shelters</li> </ul>	1.5 INDIGENOUS NUTRITION INTERVENTIONS	Developing specialised interventions on nutrition for indigenous under five children in priority DSEIs			
				<ul style="list-style-type: none"> <li>- Delivery WASH supplies with leaflets on COVID-19 related information</li> <li>- Use of communication strategies to disseminate information</li> <li>- Partnership with private sector, governments, CSOs to delivery donations (WASH, SAFE, Food supplies)</li> <li>- Public advocacy in favor of universal WASH access in Brazil</li> <li>- Technical support to implement WASH strategies</li> </ul>	1.6 WASH ACTIVITIES INCLUDING DISTRIBUTION OF CRITICAL WASH SUPPLIES_COVID - 19	Source and deliver hygiene kits and targeted communication to vulnerable families in poor urban neighborhoods in Brazilian capital cities in response to the COVID-19 Pandemic, by work closely with a network of corporate partners.			
				<b>Assumptions from activities to outputs</b>		<b>Assumptions from outputs to outcomes</b>			
				(a) Discriminatory practices hinder the provision of quality social services to children and are a key element leading to school dropout; (b) Children and adolescents most excluded from the various rights live in the Semi-Arid and Amazon regions of Brazil and in the peripheries of the large cities;(c) Working with local communities is based on their assets, culture and participation is possible and leads to creative new approaches that contribute to producing disaggregated information with specific groups of the population.					(a) Data and evidence generated by UNICEF is actively used by policymakers to design tailored policies and programmes that reach the most excluded, including affirmative actions and initiatives that ensure access to those still out of reach; (b) Social mobilization and advocacy activities activated by the programme leads to accountability between institutions and communities; (c) UNICEF continues to work with State and Municipal authorities to improve child outcomes through the UNICEF Municipal Seal Initiative and PCU.

Component	Bottlenecks	Inputs	Main strategies	Main activities	Outputs	Intermediary outcomes	Outcomes	Impact
<b>2. Quality social and health policies for vulnerable children</b>	(a) prevalence of social norms, cultural practices, behaviours and environments not conducive to good practices; (b) limited information on the part of duty-bearers; (c) low qualifications of social sector professionals, especially at subnational levels; (d) inadequate infrastructure; and (e) limited cross-sectoral coordination between social assistance, education and health services.	Regular resources: 445,000 Other resources: 34,000,000 = Total of US\$ 34,445,000	UNICEF Munciple SEAL of Approval (SELO)  Platform of Urban Centres (PCU)  UNICEF's School Active Search (SAS) strategy;  Adolescent Citizenship Groups (NUCA);	<ul style="list-style-type: none"> <li>- Direct Delivery of personal protective equipment during COVID-19</li> <li>- Close-door Advocacy on FOP labelling</li> <li>- public Advocacy, campaigns, and social mobilization on Mental Health and public Health issues.</li> <li>- Implementation of Baby week activities</li> <li>- Strengthen capacity building in municipalities on Implementation of Health services</li> <li>- Implementation Youth Aware strategies</li> </ul>	2.1 QUALIFIED HEALTH SERVICES	Increased knowledge on health practices and government agencies of families, communities and civil society and provided culturally and age and gender-responsive health services by health professionals	By 2021 boys and girls have increased access to quality and responsive health, education and social protection programmes, and actively participate in the design, implementation and monitoring of these services.	<b>Reducing inequalities and promoting the rights of children and adolescents in large cities and municipalities in the Semi-Arid and</b>
				<ul style="list-style-type: none"> <li>- Strengthen the capacity building of Municipal and state education policy makers</li> <li>- Development of the Successful School Pathways (SSP) strategy</li> <li>- Strengthen the capacity of the School community to identify cases of violence and prevent School dropouts</li> <li>- training on the School Active Search (SAS) strategy to Municipal managers.</li> </ul>	2.2 EDUCATION FOR ALL	Increased permanence in the basic education system of girls and boys, based on intersectoral policies addressing diversity.		
				<ul style="list-style-type: none"> <li>- Engage civil society, private sector partners and UN agencies to develop a Humanitarian action to deliver hygiene goods and Support the most vulnerable families affected by the pandemic.</li> <li>- Provided capacity building to governments, civil society, and adolescents to improve public services mainly in the areas of education, health, and protection.</li> <li>- Supported municipalities through UNICEF Seal and cities through Urban Center Platform (PCU) initiatives.</li> </ul>	2.3 INTERSECTORAL POLICIES	Improved capacity to implement intersectoral policies for social protection with emphasis on the most vulnerable children of government at national and subnational levels.		
				<ul style="list-style-type: none"> <li>- Advocacy to continuation public services for early childhood during pandemic.</li> <li>- Implementation of Baby week activities</li> <li>- Support scale up the Happy Child Programme (HCP).</li> <li>- Joint SDG Fund Programme (JP)</li> </ul>	2.4 INTEGRATED POLICIES FOR ECD	Adopted of comprehensive actions and integrated policies to promote Early Childhood Development by families, communities, civil society, the private sector, and governments.		
				<b>Assumptions from activities to outputs</b>				
(a) Discriminatory practices hinder the provision of quality social services to children and are a key element leading to school dropout; (b) The dissemination of knowledge on healthy practices and humanization of health services within communities creates a demand for such services; (c) Only about half of the municipal schools achieved or surpassed the established learning goal (based on Basic Education Development Index - IDEB)				(a) Models adapted to the local context strengthen the national and subnational capacities; (b) Intersectoral policies for protection address specific needs of the most vulnerable populations in an integral manner, including girls; (c) Municipal Governments (e.g. Recife, Salvador, São Paulo, Manaus, and Belém) set a process to identify girls' empowerment as a local public policy priority in line with UNICEF work on life skills development for adolescents.				

### 3. Prevention of and response to extreme forms of violence

Component	Bottlenecks	Inputs	Main strategies	Main activities	Outputs	Intermediary outcomes	Outcomes	Impact
	(a) social norms and cultural practices leading to the acceptance of violence, racism and discrimination; (b) gaps in or inadequacy of policies and legislation in preventing violence, supporting victims and investigating rights violations; (c) insufficient or ineffective violence notification, prevention and response systems, including existing difficulties to implement intersectoral policies.	Regular resources: 1,800,000 Other resources: 13,000,000 = Total of US\$ 14,800,000	UNICEF Munciple SEAL of Approval (SELO) Platform of Urban Centres (PCU) UNICEF's School Active Search (SAS) strategy; Adolescent Citizenship Groups (NUCA); Framework on armed violence	<ul style="list-style-type: none"> <li>- Awareness-raising initiatives on prevention and response to violence against children (VAC)</li> <li>- Created and disseminated audiovisual and printed materials on prevention and response to violence against children (VAC)</li> <li>- Promoted the rights of children and adolescents and mobilized families, communities, and the State to assume responsibility in their protection from violence.</li> <li>- Positioned in the public agenda the important child protection issues.</li> </ul>	3.1 INCREASED KNOWLEDGE ON VIOLENCE	Increased knowledge on the impact of violence on the lives of children among families, communities, civil society, private sector, and government agents in prioritized states.	By 2021, Brazil's child protection system strengthened in its capacity to prevent and respond to violence against children.	Reducing inequalities and promoting the rights of children and adolescents in large cities and municipalities in the Semi-Arid and
			<ul style="list-style-type: none"> <li>- Contribute with an online course on the protective hearing of victims of VAC.</li> <li>- Identify challenges to the continuation of child protection services during the pandemic.</li> <li>- Identify gaps on the political and institutional framework related to the prevention and response to violence against children.</li> <li>- Provide technical assistance to federal government body and municipalities to enhance child protection system.</li> <li>- Continued contributions to the National Pact on the Implementation of Law 13431/2017.</li> </ul>	3.2 STRENGTHENED LEGAL AND POLICY FRAMEWORK	Mapping and addressing gaps in the legal, political and institutional framework related to the prevention, assistance, and response to violence against children.			
			<ul style="list-style-type: none"> <li>- Supported capacity-building for SEAL municipalities and PCU</li> <li>- Strengthen protection services</li> <li>- Cross-sectoral interventions on School inclusion, prevention and response to sexual violence, prevention of Adolescents' Homicides and combatting racism, sexism and religious intolerance</li> <li>- Technical assistance, convening, Advocacy for Implementation of pilot initiative about armed violence.</li> <li>- Continue Supporting Committees on the prevention of Adolescents' Homicides.</li> </ul>	3.3 IMPROVED QUALITY AND MANAGEMENT OF CHILD PROTECTION SERVICES	Improved cross-sectoral coordination and public services, at national and subnational levels, to benefit child witnesses, victims and perpetrators.			
				<b>Assumptions from activities to outputs</b>	<b>Assumptions from outputs to outcomes</b>			
				(a) Legislators will conduct necessary political reform to reduce homicides; (b) The number of homicides of adolescents is increasing rapidly and demand action since a significant number of victims are out of school;(d) The inter-sectoral committees to prevent Homicides in Adolescents remain fully operational enabling sharing of good practices and strategies;	(a) It is possible to observe and measure a change in social norms and cultural practices in view of the gaps identified under Brazil's Rights Guarantee System; (b) There is enough political support to ensure that the current legislation and policy reform gets in line with the Convention on the Rights of the Child, Convention on the Elimination of all Forms of Discrimination against Women and other global commitments.			

Component	Bottlenecks	Inputs	Main strategies	Main activities	Outputs	Intermediary outcomes	Outcomes	Impact
4. Engaged Citizenry and Participation	(a) the indifference of segments of Brazilian society towards the plight of the most vulnerable and excluded children; (b) insufficient information and misperceptions by segments of society on the reality faced by the most vulnerable children, including violations of their rights; (c) limited scope for private sector social investment related to children's rights; (d) perceived lack of compatibility between the private sector and the work of UNICEF; (e) inadequacy of participation channels for children; and (f) a low level of familiarization of rights-holders with ways to contribute effectively to public debates.	Regular resources: 450,000 Other resources: 14,000,000 = Total of US\$ 14,450,000	UNICEF Munciple SEAL of Approval (SELO)  Platform of Urban Centres (PCU)  UNICEF's School Active Search (SAS) strategy;  Adolescent Citizenship Groups (NUCA);	- Provide opportunities for public engagement. - Support strategies for adolescents participating in the Adolescents Citizenship Groups. - Use of digital channels to (social media, radio, TV, pod cast and more) to reach and involve a wide segment of the public.	4.1 ENGAGED CITIZENS	Increased citizen engagement to support the realization of boys' and girls' rights.	By 2021, engaged citizens, including boys, girls and families, millennials, individual donors and private sector partners, are driving public action for the realization of children's rights	Reducing inequalities and promoting the rights of children and adolescents in large cities and municipalities in the Semi-Arid and Amazon regions of Brazil
				- Supported campaign and public Advocacy for the introduction of front-of-pack labelling. - Assessment of the Awareness and Implementation of children's rights among retailers.	4.2 NON FINANCIAL CONTRIBUTIONS	Increased non-financial contributions from individual donors, private and public sector partners for the realization of boys' and girls' rights.		
				- Engaged adolescents through Nuca/Juca activities - Established Youth Council - Engaged and mobilized youth through innovative strategies (e.g. lives, focus group, online messages, courses, online tools).	4.3 ENGAGED ADOLESCENTS	Adolescents mobilized and with increased knowledge and opportunities to participate in public forums of decision-making processes.		
				Assumptions from activities to outputs		Assumptions from outputs to outcomes		
				(a) UNICEF continues to invest in its staff wellbeing and working conditions and of local partners as well; (b) The top tier national television media is one of the ways to achieve communication with target groups; (c) Continuous support from within UNICEF globally to invest in "engaging citizens"; (d) UNICEF continues to find areas of common interest with the Government by building relationships with key Ministries pursuing child rights goals through behind-the-scene engagement.		(a) The banking crisis will not be too severe to fundamentally affect UNICEF's ability to raise sufficient resources by engaging with strategic partnerships with major companies; (b) The political and economic crisis will not nullify people's attention to UNICEF's messages and support to human rights; (c) Increase use of internet in the country has a multiplier effect in terms of outreach.		
5. Programme Effectiveness	(a) Lack of visibility of the problems involving children and adolescents in the media; (b) Need develop monitoring and evaluation tools to meet quality programming standards in achieving results for children.	Regular resources: 14,000,000 = Total of US\$ 14,000,000		- Strengthen programme planning and coordination mechanisms to improve effectiveness. - Incorporate three Emergency Response Team (ERT) assignments for WASH, PSEA and AAP. - Developed tools to strengthen resource mobilization efforts.	5.1 PROGRAMME COORDINATION	UNICEF utilizes guidance, tools and resources to effectively design and manage programmes.	Country programme is efficiently designed, coordinated, managed and supported to meet quality programming standards in achieving results for children	
				- Adapted communication strategy to support Brazil - Generated massive media coverage on critical children's issues. - Public advocacy focused on positioning children as the hidden victims	5.2 EXTERNAL RELATIONS	Promoting and protecting children's rights through Public policy and partnerships with media and other key influencers.		
				- Evidence-generation and technical-support to government partners in monitoring, evaluation and research.	5.3 PROGRAMME MONITORING AND EVALUATION	UNICEF utilizes guidance, tools, and resources to effectively influence the design, implementation, monitoring, evaluation, and dissemination of development policies and programmes that promote, guarantee and impact children's rights.		
				- Strengthen partnership with Trilateral South-South Cooperation (TSSC). - Provided continuous technical support for TSSC	5.4 SOUTH-SOUTH COOPERATION	Increased number of countries engaged with Brazil and UNICEF in South-South cooperation initiatives to improve the situation of children in their country and in Brazil		
				Assumptions from activities to outputs		Assumptions from outputs to outcomes		
				(a) UNICEF can increase the reach of communication and dissemination of information to its target population through influencers; (b) UNICEF has the capacity to develop new monitoring and evaluation tools; (c) UNICEF Brazil has an important role in south-south cooperation		(a) UNICEF has a good reputation in the production of knowledge and tools for monitoring and evaluating; (b) The political and economic crisis will not nullify people's attention to UNICEF's messages and support to human rights; (c) Increase use of internet in the country has a multiplier effect in terms of outreach		

Component	Bottlenecks	Inputs	Main strategies	Main activities	Outputs	Intermediary outcomes	Outcomes	Impact					
<b>6. Migration Response</b>	(a) influx of migrants are in the poor and remote region of Brazil; (b) limited information on the part of duty-bearers; (c) low qualifications of social sector professionals, especially at subnational levels; (d) inadequate infrastructure; and (e) limited cross-sectoral coordination between social assistance, education and health services.	Regular resources: Other resources: = Total of US\$		- Facilitated the access of iron and folic acid supplementation to pregnant and lactating women in shelters - Provided Infant and Young Child Feeding (IYCF) counseling and training to caregivers of young children - Provided nutritional care and surveillance services for the shelters in the states of Roraima, Amazonas, and Pará - Provided nutrition supplementation to prevent stunting and wasting	6.1 NUTRITION	Health systems strengthened to identify and address nutrition issues and monitor nutrition trends	Ensure access to public services for children and families on the move.	<b>Reducing inequalities and promoting the rights of children and adolescents in large cities and municipalities in the Semi-Arid and Amazon regions of Brazil</b>					
				- Supported consultations and health care package activities to children and adolescents, pregnant and lactating women living in official shelters located in Roraima, Pacaraima, Manaus and Belém. - Supported health monitors conducting activities to monitor vaccination coverage status inside shelters. - Supported active community-based surveillance of COVID-19 inside shelters - Supported the development of courses on immunization and cold rooms management for local health professionals - Supported the provision of Personal Protective Equipment (PPE) - Supported the hiring of two nurses, eight nursing technicians, and 1 pharmacist to support the field hospital set in Boa Vista for COVID-19 patient care	6.2 HEALTH	Access essential health services with sustained coverage of high-impact preventive and curative interventions to boys and girls, adolescents and women on the move, and in host communities equitable.							
				- Provided adequate WASH services to migrants and refugees - Adapted ongoing emergency response and implemented life-saving programmatic changes.	6.3 WATER, SANITATION AND HYGIENE	Access to safe and sustainable drinking water and adequate sanitation for women and children in transit.							
				- Facilitated family reunifications in Pacaraima, Boa Vista, and Manaus - Continued and expanded child protection programme to Venezuelan children and adolescents in Roraima, Amazonas, and Pará.	6.4 CHILD PROTECTION	Protection of children on the move against violence, exploitation and abuse and have access to services and exercise their rights.							
				- Provided non-formal education services in Super Panas' spaces the cities of Boa Vista, Pacaraima, Manaus and Belém - Support the "Active School Search" methodology to reach Venezuelan children and adolescents out-of-school.	6.5 EDUCATION	Supported the access to education opportunities while enhancing the capacity of schools in host communities to children on the move.							
				- Provided life-saving information and promoted healthy behaviors - Supported the Seal of Approval partners in the Amazon region to develop inclusive local policies for refugees and migrants. - Used digital tools for engagement and monitoring to establish two-way communication with the most vulnerable refugees and migrants, including those living outside shelters.	6.6 CROSS-SECTORAL SUPPORT	Development of collaborative actions with children and families on the move. Adolescents' engagement Actions to raise awareness of the rights and needs of people on the move.							
				<b>Assumptions from activities to outputs</b>					<b>Assumptions from outputs to outcomes</b>				
				(a) The municipalities that receive the migratory flow do not have the technical and structural capacity to serve migrant people; (b) The municipalities that receive the migratory flow do not know the needs of people in the move; (c) UNICEF has the capacity to support humanitarian assistance.					(a) UNICEF is well-positioned in the territories receiving influx of migrants; (b) There is political support and will to meet the demands of the migration crisis; (c) There is political support and political will to meet the demands of the migration crisis along with UNICEF's actions;				

## 19. ANNEX 19. PRIORITY AREAS, OUTCOMES AND STRATEGIES

Priority Areas	Long-term Vision (Outcomes)	Intervention Strategies	Sub-national Strategies
<b>Component 1 - Enhanced Policies for Excluded Children and Adolescents</b>	The most excluded boys and girls benefit from enhanced and inclusive public policies and services and actively participate in decision-making processes.	Evidence generation, policy dialogue and advocacy  Capacity Development  South-South Cooperation  Integration and Cross- sectoral Linkages	UNICEF Municipal SEAL (SELO) <sup>36</sup>  Platform of Urban Centres (PCU) <sup>37</sup> UNICEF's School Active Search (SAS) strategy; Successful School Pathways strategy; Adolescent Citizenship Groups (NUCA); Youth Aware project; and The Baby Week initiative.
<b>Component 2 - Quality Social Policies for Vulnerable Children and Adolescents</b>	Boys and girls have increased access to quality and responsive health, education and social protection programmes, and actively participate in the design, implementation and monitoring of these services	Capacity development  Integration and Cross-sectoral Linkages  Partnerships  Identification and promotion of innovation  Evidence generation, policy dialogue, advocacy and communication	
<b>Component 3 - Prevention and Response to Extreme forms of Violence</b>	Brazil's child protection system strengthened in its capacity to prevent and respond to violence against children	Evidence generation, policy dialogue and advocacy  Capacity Development  Integration and Cross-sectoral Linkages	
<b>Component 4 - Engaged Citizenry and Participation</b>	Engaged citizens, including boys, girls and families, millennials, individual donors and private sector partners, are	Evidence generation, policy dialogue and advocacy  Partnerships	

	driving public action for the realization of children's rights.	Identification and promotion of innovation	
--	-----------------------------------------------------------------	--------------------------------------------	--