



Integrated SGBV, HP & SRHR Programming

WCA Spotlight Initiative Readiness Paper

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UNFPA Internal Working Paper

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August 2018

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Rationale for the Spotlight Readiness Assessment for UNFPA

The United Nations Population Fund's West and Central Africa Regional Office (UNFPA WCARO) has five years of rich experience in piloting multi-country and regional flagship programmes, projects and initiatives. We currently oversee the implementation of five inter-agency, multi-country and regional programmes, each covering a number of countries in the region. Lessons learned from these experiences will be invaluable in effectively implementing the Spotlight Initiative.

The Spotlight Initiative (SI) is a UN blueprint for working together and operationalizing the Common Chapter. Launched in September 2017 and scheduled to begin at the end of 2018, it will further expand UNFPA WCARO's portfolio by up to six programmes.

UNFPA WCARO's skills and knowledge base have grown enormously from managing our large portfolio of regional programmes. As such, we bring the following comparative advantages in: 1) Leveraging our effective management of integrated regional programmes through a strong institutional framework. 2) High-level technical expertise in UNFPA core competencies available at regional and country levels. 3) Operational capacities that minimize implementation delays. 4) Established solid modes of engagements in advocacy, capacity building, communication, knowledge management and service delivery. 5) Efficient and strategic partnerships with a broad range of stakeholders (for example, UN sister agencies, governments, civil society organizations (CSOs), regional economic commissions/regional entities, networks of young people, faith-based organizations (FBOs), private sector, First Ladies and other partners) to be leveraged as an enabling factor to scale up effective interventions.

This 'readiness paper' highlights UNFPA's added value and distinctive competencies which will contribute to the coordination and implementation of the SI objectives, as well as effectively reaching out to beneficiaries. The paper takes an integrated and inclusive approach aiming

to show: a) UNFPA's comparative advantage – specifically how UNFPA's leadership will contribute to meeting the initiative's overall goals and objectives; b) the linkages between SI and existing UNFPA regional programmes; and c) ongoing activities that confirm UNFPA's readiness to begin immediate implementation of the initiative.

UNFPA WCARO is looking forward to sharing the expertise of its programme, technical and operation teams, backed up by a pool of high-level consultants in the areas of sexual and reproductive health and rights (SRHR), sexual and gender-based violence (SGBV), gender and organizational development, to support the design and formulation of the initiative at country and regional level. In terms of initiative implementation, the Regional Office will establish a coordination team to strengthen its management and monitoring and evaluation capacities. This mechanism, coupled with the Executive Director's strategic guidance, will be a powerful reporting tool not just at the regional level but also at country level as country offices will be expected to use the same approach. Such a coordination mechanism is expected to provide appreciable added value for resource mobilization.

“UNFPA WCARO takes the Spotlight Initiative very seriously and considers it a topmost priority for the region. We are convinced of our readiness to take all the necessary actions to have the optimal outcome and impact foreseen for this Initiative. We welcome the EU's support to this region, which is the most left behind region of the world. We will proactively take the steps needed to ensure that we, the development actors, do not delay programme results but instead build new programmes using our vast experience from existing interventions for effectiveness, synergies, innovation and value for money. As we move forward, we will capture programming implications and promote lessons learned in the international development community of policy makers and practitioners”

Mabingue Ngom
Regional Director
UNFPA WCARO

1 The Spotlight Initiative Summary

The Spotlight Initiative is a global partnership to eliminate all forms of violence against women and girls. It was launched in September 2017 by the United Nations (UN) Secretary-General and the European Union (EU) High Representative and Vice President (HRVP). It is a visible political and financial investment from the EU with an initial contribution of Euro 500 million, with other donors and partners being invited to join the initiative to broaden the reach and scope. The modality for the initiative will be a UN fund, administered by the Multi-Partner Trust Fund Office, and overseen by the Executive Office of the Secretary-General.

The SI provides a unique and unprecedented opportunity to demonstrate that a significant, concerted and comprehensive investment in gender equality can make a transformative difference in the lives of women and girls, as well as contribute to the achievement of all the SDGs. Building on the existing inter-agency initiatives, it has the catalytic potential to serve as a blueprint for multi-stakeholder partnerships in line with the ongoing UN reforms.

The focus areas for the Africa programme are SGBV, harmful practices (HP) (female genital mutilation (FGM) and child marriage) and SRHR. While there have been efforts to address and eliminate SGBV and HPs, and improve access to and the exercising of SRHRs in sub-Saharan Africa, progress remains slow and uneven and approaches have been fragmented.

It is increasingly clear that the cessation of all forms of SGBV and HPs is intrinsically connected to deep changes in gender and socio-cultural norms. These include those related to women's sexuality and reproduction, aided by improved access to SRH information and services, and to comprehensive sexuality education (SCE). The SI will leverage existing initiatives and partnerships including the continental-wide partnership with the African Union (AU) on the achievement of Agenda 2063 and in line with AU frameworks and protocols such as the gender strategy, the Maputo Protocol, CARMMA and the roadmap for the demographic dividend.

With an overall goal that all women and girls live free from violence and harmful practices, the initiative will be operationalized at two levels:

- a) At the country level covering eight countries: Liberia, Mali, Niger, Nigeria, Malawi, Mozambique, Uganda and Zimbabwe; and
- b) At the regional level, advocating for what an investment in gender equality can achieve, serving as a bridge between global and country levels—leveraging the unique knowledge of the countries in the region and regional specificities and dynamics.

The initiative is not expected to compete with UN entities and other initiatives. Rather, UN partners are expected to leverage the initiative to advocate for what an investment in gender equality can achieve and the need, therefore, for donors to continue, and scale up funding, on gender equality and SRHR across the UN system. The three UN agencies core to the initiative are: UNDP, UNFPA and UN Women. However, the initiative is expected to take an inclusive approach and include other UN agencies, CSOs and other partners at the country and regional levels in the implementation. So far, a total of Euro 250 million will be invested in Africa.

The regional component of the SI for Africa aims to: a) support and enhance a regional approach to eliminating SGBV, HP (with a focus on child marriage and FGM) and promoting SRHR; and b) serve as a bridge between the global and the country levels. While the focus of the regional component is clearly articulated in the Africa Investment Plan, UN agencies and other stakeholders involved have an opportunity to further optimize what this initiative brings. The architecture of the SI can strengthen the coherence and cohesion of UN interventions at regional and country level. It is a model of partnerships between – and beyond – UN agencies that will serve to harmonize existing efforts and build on best practices in the region. The regional component will also include partnerships with regional and continental bodies, such as the AU, that cannot be done at country level but can serve to enhance and complement country level work.

Overall goal

All women and girls live free from violence and harmful practices.

Impact statement

All women and girls, particularly the most vulnerable, live free from all forms of violence and harmful practices because of prevention strategies and strengthened multi-sectoral and partnership-based responses.

The Spotlight Initiative revolves around six pillars to contribute to six outcomes, as shown in the table below.

Six pillars to contribute to six outcomes	
Pillar 1: Laws and Policy	Pillar 4: Essential services
Pillar 2: Institutions	Pillar 5: Quality, disaggregated, comparable data
Pillar 3: Prevention of Violence	Pillar 6: Women's movement and civil society
Six outcomes	
Outcome 1 Legislation and Policies	Legislative and policy frameworks on SGBV, HP, and SRHR, are in place.
Outcome 2 Institutional strengthening	National, sub-national systems, and community -based institutions are enabled to plan, fund, coordinate and deliver multi-sectoral programmes that prevent and respond to SGBV, HP and SRHR, in cooperation with the EU Delegation.
Outcome 3 Prevention of violence	Gender equitable social norms, attitudes and behaviours are promoted at national, community and individual levels to prevent SGBV and HP, and promote SRHR.
Outcome 4 Available, accessible and acceptable, quality services	Services, including SRH services, are available, accessible, acceptable, and of quality for victims and survivors of SGBV/HP to help them overcome crisis and have long-term recovery .
Outcome 5 Quality and reliable data	Quality, disaggregated and regionally/globally comparable data (in line with international standards) on different forms of GBV/HP which are collected, properly analysed, and effectively used to inform laws, policies and programmes.
Outcome 6 Supporting civil society organizations, including community- based organizations, and women's movements	Supporting civil society organizations, including community-based organizations, and women's movements

2 Background

Since 2013, UNFPA WCARO has expanded its portfolio of regional programmes and initiatives. It currently oversees the implementation of five inter-agency, multi-country and regional programmes, each covering a number of selected countries within the region. With the Spotlight Initiative (SI), scheduled to begin at the end of 2018, WCARO's portfolio will increase to six regional programmes. Its existing wide range of regional initiatives and programmes has already enhanced UNFPA WCARO's knowledge, skills and comparative advantage in: 1) effective management of integrated regional programmes; 2) leading and co-leading regional programmes in partnership with key stakeholders (other UN agencies, governments, CSOs, regional economic commissions and regional entities, networks of young people, FBOs; private sector and other partners); and 3) leveraging strengths of a broad range of partners; and, 4) harmonizing efforts to enable strengthening and scaling up of effective interventions.

To build on these years of knowledge and expertise, and to contribute to the SI as well as to future initiatives, UNFPA WCARO has produced this 'readiness paper' as part of the process of organizational self-assessment, knowledge sharing and learning on integrated regional programmes. Although this paper focuses on the SI, it is also meant as an instrument to complement existing and emerging initiatives.

The paper takes an integrated and inclusive approach. It aims to show how: a) UNFPA's comparative advantage - specifically UNFPA's leadership - will contribute to meeting the SI's overall goals and objectives; b) there are already linkages between the initiative and existing UNFPA regional programmes; and c) ongoing activities mean UNFPA is in a position to begin immediate implementation of the initiative.

The primary purpose of this paper is to highlight how UNFPA WCARO is fit-for-purpose to implement regional programmes and initiatives and to provide guidance to UNFPA HQ and its country offices. It can

also serve as an instrument for resource mobilization, by complementing identified gaps and communicating the results of on-going programmes. Finally, its integrated and inclusive approach can serve as a useful reference guide to other agencies and partners engaged in inter-agency and regional programmes.

The paper includes:

- A comprehensive theory of change (ToC)
- A matrix depicting the linkage between current UNFPA WCARO regional programmes/partnerships and the SI
- Potential organizational arrangement model
- A capacity assessment at both regional and country levels.

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3 The Country-Level Component

At the country-level the initiative is coordinated by the respective UN Resident Coordinators covering the eight countries mentioned (Liberia, Mali, Niger, Nigeria, Malawi, Mozambique, Uganda and Zimbabwe).

4 The Regional Component

There are two primary guiding documents for the development of the Regional Plan – the Regional Investment Plan for Africa and the Guidance Note for development of the Africa Regional Programme. Structured around two streams, the regional component aims to support and enhance a regional approach to eliminating SGBV and HP, and promoting SRHR. The regional level serves as a bridge between the global and the country levels. Specific roles of the regional component are highlighted in the Regional Investment Plan for Africa.

The regional component will consist of two interconnected funding streams:

► **Stream I**

(Euro 10 million) supports an overall regional response to addressing SGBV, HP and SRHR that extends beyond borders and requires regional engagement. It focuses on pillars 1, 5, and 6 of the SI dealing respectively with legislation and policies, quality and reliable data, and supporting civil society organizations, including community-based organizations and women’s movements.

► **Stream II**

(Euro 20 million) supports the two existing Joint Programmes on eliminating FGM and child marriage. This support addresses programmatic gaps, up-scaling, innovation, and other regionally-oriented catalytic work identified as needs under the two Joint Programmes.

The latest version of the Regional Investment Plan for Africa indicates that “the regional component will be overseen and guided by the multi-stakeholder Regional Steering Committee and will include civil society representatives who have been nominated by the Regional Civil Society Reference Group”. The UN agencies involved agreed that UNFPA will be the lead agency for the regional programme in Africa.

5 **The Theory of Change (ToC)** Africa Region Spotlight Initiative

This chapter endorses the causal-effect analysis proposed in the SI document on root causes of SGBV, HP and SRHR as well as high level proposed strategies. In this theory of change (ToC), UNFPA WCARO is proposing a set of customized and strengthened strategies in the sub-Saharan Africa context, drawing on its decades-long experience of work in the region.

6 **Enhancing Adequate and Effective Guidance for Spotlight ToC**

To enhance adequate and effective guidance on responding to the SI, UNFPA WCARO has adapted the Spotlight Global ToC to the region’s context and is proposing an Africa Spotlight Regional ToC as outlined below. This proposed Africa Regional ToC is informed by UNFPA’s vast experience in designing and implementing similar regional programmes, particularly in West and Central Africa where these issues are most prevalent.

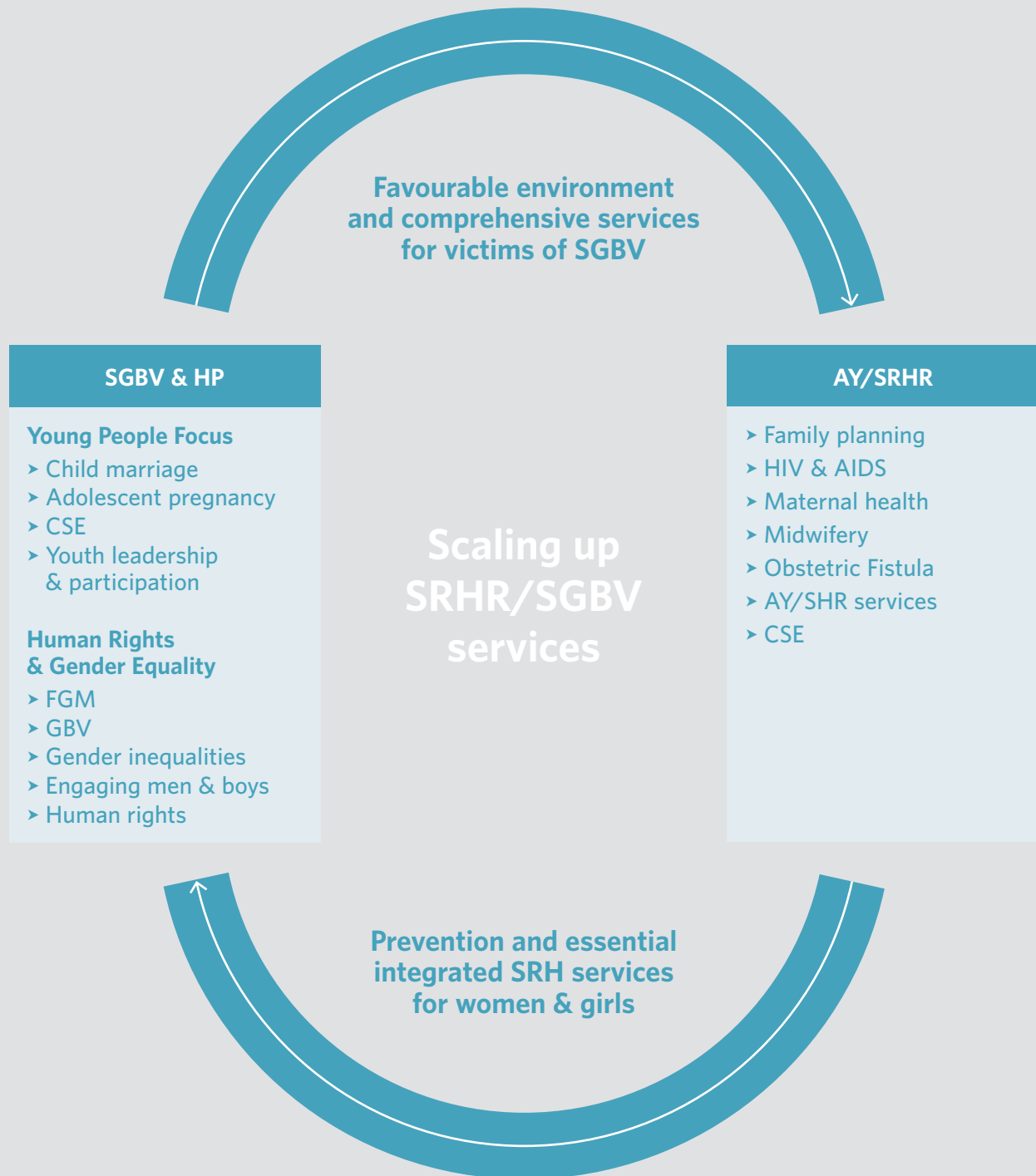
This contextualized ToC aims to ensure that all forms of violence against women and girls and their SRH needs and rights, are addressed in an integrated manner whereby all women and girls, particularly those who are the most left behind, benefit from the initiative.

To this end, there is a need to have in place adequate legislation and policies on SGBV, HP and SRHR; strengthen gender responsive institutions; promote interventions to support prevention of SGBV, including through SRHR interventions; ensure women's and girls' access to essential services including health, education and protection services; support continental institutions such as the AU in continental work on SGBV, HP and SRHR; empower women's movements and CSOs; and ensure data systems are strengthened so that comparable and reliable data are available to inform evidence-based programming and policy. This proposed ToC for the Africa SI puts significant emphasis on integrated approaches to working on multi-country and multi-partner programmes to optimize positive changes.

Vlad Vanderkelen - Ministry of Foreign Affairs - Belgium



Programmatic linkages between SGBV - HP - SRHR



WHERE?

In development settings including health services, schools and communities with support of religious and traditional leaders as well as women and youth networks

7 Spotlight Initiative

Proposed Regional (WCAR & ESAR) Strategies

Outcomes 1, 5 and 6 are included in the regional programme and suggested strategies are applicable for regional initiative programmes. Strategies under outcomes 3, 4 and 5 are proposed high-impact strategies to inform country programme development for the eight African countries (Liberia, Malawi, Mali, Mozambique, Niger, Nigeria, Uganda and Zimbabwe). Strategies are not proposed for outcome 2 as this specific outcome is currently not eligible in Africa.

Spotlight Regional Proposed Programme strategies	
<p>Outcome 1 Legislation and Policies</p>	<p>WCA Output 1.1 Regional policy makers implement current frameworks to address SGBV/HP; influence national law and policy making processes and strengthen national and regional accountability (regional policy makers include AU, SADC, EAC, ECOWAS, ICGLR, IGAD, Pan-African Parliament, African Parliamentary Forum, UEMOA)</p> <p>Key Proposed Strategies</p> <ul style="list-style-type: none"> ➤ Support the implementation of key continental frameworks such as the AU Gender Strategy, the Maputo Plan of Action, the Roadmap on the Demographic Dividend, and the African Youth Charter. ➤ Thorough analysis of legal and policy frameworks on all issues around SGBV, FGM, child marriage, SRHR at regional level and all Spotlight countries to scan existing laws for gaps in the protection of girls and women, and their enforcement; ➤ Strengthen the AU and WCAR regional bodies (ECOWAS; UEMOA, ECCAS, CEMAC etc) to better prevent and address SGBV, HP and improve availability of quality SRHR services; ➤ Joint advocacy with regional bodies (ECOWAS; ECCAS; SADEC; AU) on the development of new, and/or revision of existing, laws and policies as well as the development and implementation of costed national action plans; ➤ Support the development of model laws on SGBV, HP and SRHR in selected countries; ➤ Support regional bodies (ECOWAS; ECCAS; SADEC; AU) in the next phase of the campaign to end child marriage and in the development and implementation of accountability and monitoring mechanisms for member states;

- ▶ Collect and compile judicial decisions on FGM, child marriage, SRHR and SGBV to support justice professionals (including judges, lawyers, prosecutors and probation officers) in using legal mechanisms (such as national laws as well as regional treaties and convention) that prohibit FGM, child marriage and SGBV
- ▶ Harmonize and scale up regional initiatives and efforts to strengthen policy dialogue and implementation of comprehensive sexuality education programmes – both in and out of school – linked to availability and up-take of quality AYSRH services
- ▶ Support periodic, inclusive and quality reporting of country-level progress by member states on various internationally legal engagements including the Universal Periodic Review
- ▶ Support will be provided to countries for gender mainstreaming in policies, programme design, implementation and follow up.

UNFPA Regional Comparative Advantage

UNFPA and UN Women, together with other UN Agencies, have successfully engaged with regional and continental bodies including through the development of the SADC Child Marriage Model Law, the SADC Regional Strategy on Women, Peace & Security 2018-2022, and the ongoing work to develop a SADC GBV Strategy. These engagements have proved to yield lasting results in-country, including the domestication of the Model Marriage Law in several countries. In West and Central Africa, UNFPA, UNICEF and several CSO partners brought together high-level representatives from governments, regional bodies, donor communities as well as First Ladies, religious leaders and young people in the first-ever High Level Meeting on Child Marriage in West and Central Africa in 2017 which led to a call to action to end child marriage in the region. UNFPA, UNICEF and CSOs also supported ECOWAS to develop an ECOWAS regional framework on child protection in 2017 that included a strong focus on child marriage. UNFPA also contributed to the development of the AU Gender Strategy (2018-2023), the AU Roadmap on the Demographic Dividend, and the development and implementation of the Maputo Plan of Action.

In 2015, UNFPA, UNESCO and other partners brought together representatives from ministries of education and ministries of health from selected countries to strengthen capacities and encourage policy dialogue on commitments to comprehensive sexuality education (CSE). In 2018-2019, these partners are building on national and regional momentum on CSE to garner a ministerial commitment from selected countries in the region.

<p>Outcome 2 Institutional strengthening</p>	<p>Not applicable at regional level</p>
<p>Outcome 3 Prevention of violence</p>	<p>Not applicable at regional level Country Programmes only</p> <p>Key Proposed Strategies</p> <p>Analysis of root causes/ risk factors and mapping of interventions to take to scale</p> <ul style="list-style-type: none"> ▶ Map existing interventions to end HPs and to improve SRHR of women and girls, and identify evidence-based and effective models that can be taken to scale (for example, safe spaces under the UNFPA-UNICEF Global Programme on Child Marriage and the SWEDD Programme). ▶ Conduct research on best practices on SRH services for young people, particularly girls, as well as CSE that can reduce and respond to violence. ▶ Conduct surveys, desk reviews, formative research or other data collection exercises to analyse the specific risk in terms of adverse gender norms as well as explore men and boys' engagement in addressing SGBV.

Changing discriminatory attitudes, norms and practices that perpetuate SGBV

- Scale up effective programmes and intervention models in areas of education, health and protection that have proven to be effective in reducing and responding to violence.
- Support and engage in strategic partnerships with youth organizations, traditional and religious leaders, womens organizations, men fora, private sector, CBOs and FBOs to advocate and promote changes to social and gender norms that lead to SGBV.
- Support and spearhead the integration of appropriate interventions in existing educational and economic women and girls' empowerment programmes to help enable a transformation of inequitable social norms, including women's SRHR, while engaging men and boys.
- Support innovative and evidence-based mass media communications (engaging men, women, girls, boys, CSO including traditional, community, traditional and religious leaders, FBOs and CBOs) that challenge attitudes and behaviours, harmful social norms and gender stereotyping.
- Support the design and implementation of promising interventions that have been piloted in Africa and recently evaluated, showing very positive results on the reduction of violence at community level that includes the Sasa![1] methodology (developed by Raising Voices), Stepping Stones[2] and others.
- Scan the region for existing winning strategies aimed at (i) empowering youth, particularly girls, in and out-of-school, that promote gender equality; (ii) enabling the access of services particularly for hard-to-reach women and girls in rural communities, urban spaces as well as specific groups of women and girls with disabilities, women and girls living with HIV and others facing marginalization; with the aim to replicate them in other places.
- Strengthen and scale up the husbands and future husbands clubs trialled in SWEDD countries in the Sahel, to enable men and boys at the community level to adopt more equitable gender behaviours and become agents of change for the promotion of positive masculinity.

Women and girls' empowerment strategies

- Support and promote CSE to address school and community related GBV as a way to strengthen women and girls' self-esteem and courage.
- Enable access and exercise of SRHR including family planning, and access to CSE which centers on discussions around gender norms and power dynamics.
- Development of formal and informal educational curricula that build life skills and promote women's human rights, gender equality, respectful relationships and peaceful resolution of conflicts.
- Strengthen and scale up safe spaces clubs (school-based or community-based), established by the SWEDD project in the Sahel, to serve as a platform for the delivery of health and life skills to girls.

Policy/Coordination

- Support the establishment/strengthening of multi-sectoral strategies and structures on prevention, including participatory coordination mechanisms, appropriate resources and monitoring mechanisms

UNFPA Comparative Advantage

UNFPA has had a long history of work in preventing violence against women and girls. It currently is the lead agency for the prevention of GBV in humanitarian contexts. UNFPA has initiated one-stop GBV response centres and worked with health and education systems to reduce violence through tailored services for women and girls, as well as CSE that has proven to change harmful gender norms and reduce GBV, including in schools.

UNFPA co-leads several inter-agency and regional initiatives that also aim at strengthening holistic and multi-sectoral responses to prevent violence. UNFPA works with several partners including the AU, RECs, heads of states, governments, young people (especially young girls), religious and traditional leaders, civil society, private sector and the media, to build collaborative partnerships to prevent violence.

Outcome 4 Available, accessible, and acceptable, quality services

Country Programmes only

Key Proposed Strategies

Adapt global standards and guidance for essential services at the country/local level and integrate in service delivery

- Enhance capacities of national health decisions makers to stimulate effective human rights protection systems to advance gender equality, empower women and girls to effectively exercise their sexual and reproductive rights.
- Scan national laws and policies to ensure they are guided by the principles of a human rights-based and survivor-centered approach and ensure offender accountability.
- Ensure that the Essential Services Package takes into account the needs and rights of marginalized women and girls, adapting services as needed, particularly for women and girls with disabilities, indigenous women and girls, migrant women and girls, women and girls living with HIV, women and girls, including adolescent girls, living in poverty.
- Support national institutions to provide coordinated and integrated services to victims of SGBV, HP and a comprehensive package of SRH services including shelter when needed.
- Support the scale up of effective SRH services and models for women and girls, including family planning, SRH and maternal health services.
- Support the development/revision of national/sector plans and policies on ending SGBV or relevant sector specific plans across countries that include the implementation of the guidance and tools for the provision of essential services.
- Support the development/revision of national guidance and tools on the provision of quality services, including coordination and accountability mechanisms, in accordance with global standards and guidance.
- Ensure SGBV services are integrated within SRH services.

Provide coordinated, multi-sectoral and quality essential services for SGBV survivors in line with quality standards and tools in selected countries

- Conduct a service readiness assessment to capture the quality/quantity of existing services and develop a service quality/quantity service strengthening plan.
- Advocate for increased access to quality, coordinated, multi-sectoral essential services.
- Support the establishment of structures for local and national coordination and governance.

- ▶ Support the development of standards regarding coordinated responses, accountability, recording and reporting of data, information systems, monitoring and evaluation, risk management and sharing good practices/lessons learned.
- ▶ Support the development of nationally adapted, translated guidance and tools on essential services, ensuring that SRH services, education and quality information are accessible to all women and girls, and tools and methods of preventing, mitigating, detecting and responding to violence are integrated.
- ▶ Support access and availability of shelter to victims of violence, including the most marginalized.

Strengthen capacity of service providers

- ▶ Strengthen capacity of service providers (for example, healthcare professionals, including those providing SRH services, to detect/assess, treat, and refer women and girls who are facing violence, as well as justice service providers and social workers) in accordance with global guidance and tools.
- ▶ Support the development of standards for training service providers, based on good practices in each sector and on coordination, including partnering with women's organizations.
- ▶ Sensitize service providers to the different needs and issues of women and girls facing intersecting forms of discrimination. Support the establishment of specific training and protocols for the groups facing intersecting forms of discrimination.
- ▶ Strengthen capacities of national health force and health systems to deliver quality and integrated SRHR information and services, in particular for young women and girls, and facilitate early diagnosis and treatment of RH illnesses (including breast and cervical cancer).

Advocate for increased access to quality, coordinated, multi-sectoral essential services

- ▶ Promote awareness-raising among governments/NGOs, including women's organizations, service providers and other stakeholders at the global, regional and country levels and support for the availability of global and nationally adapted guidance and tools for essential services. Advocate for expanded access to services and working with multiple partners at global, regional and national levels.
- ▶ Support the creation (or update existing) knowledge platforms for tools and resources developed on essential services to assist practitioners in the provision of quality essential services for survivors of violence.
- ▶ Initiate North-South cooperation and prioritize South-South and triangular cooperation for cross-fertilization of innovation, practice and learning.

UNFPA Comparative Advantage

UNFPA works to ensure SRHR remains at the very center of development. When SRH needs are not met, individuals are deprived of the right to make crucial choices about their own bodies and futures, with a cascading impact on their family's welfare and future generations. Because it is women who bear children, and also often bear the responsibility for nurturing them, SRHR issues cannot be separated from gender equality. Cumulatively, the denial of these rights exacerbates poverty and gender inequality.

UNFPA plays a key role in addressing GBV through its programmes on SRH. Health services are among the first places survivors of abuse seek assistance. As the lead UN agency working on SRHR, UNFPA has critical opportunities to reach affected women and girls. Additionally, most women – even in remote areas – are likely to seek family planning or maternal health services at least once in their lifetimes, making health care a critical entry point for violence-related information and assistance.

UNFPA-supported health programmes provide information about women's and girls' rights, including their right to live free of abuse. These programmes also provide essential medical supplies, such as rape kits, to assist survivors, and support psychosocial and legal counselling. In Rwanda, for example, UNFPA is working with other UN agencies in "one-stop centres" to address the diverse physical, emotional and social needs of survivors.

Outcome 5
Quality and reliable
data

Country Programmes

Key Proposed Strategies

Capacity strengthening of key partners (National Statistical Offices, service providers, women's rights organizations, academia) to collect data on SGBV

- ▶ Work with regional and continental bodies and research institutions to identify key data gaps in SRHR, SGBV and HPs, and develop tools to address these gaps.
- ▶ Advocate for the need to collect national data on SGBV, HPs and SRHR; to understand its magnitude, nature and consequences and inform the development of relevant context-specific laws, policies and programmes, for monitoring the results and impact of these, as well as for reporting on relevant SDG indicators.
- ▶ Raise awareness of NSOs, government partners, women's organizations and relevant stakeholders, of the capacities, funding and time requirements for data collection on SGBV/HP/SRHR and most importantly of the globally agreed methodological and ethical standards that should be considered to ensure data are of quality, reliable and comparable.
- ▶ Strengthen capacities of those national partners involved in SGBV/HP/SRHR data collection efforts, to ensure data are collected in an ethical and methodologically sound manner. Ensure capacity building efforts are aligned, when relevant, with regional and global capacity building initiatives.

Collection, analysis and use of quality comparable data on SGBV and HPs to inform evidence-based decision making

- ▶ Bring onboard all relevant stakeholders (for example, NSOs, government, civil society including women's organizations, academia) as part of the agreed data collection initiatives.
- ▶ Support the analysis of collected data with adequate disaggregation to enhance understanding of the different forms and patterns of violence, relevant associations, for example, risk and protective factors, consequences, use of services, which also highlight the different types of violence experienced by different groups of women.
- ▶ Support advocacy efforts for a realistic budget allocation to ensure data are not only collected but also analysed and disseminated with the purpose of being used to inform laws, policy and programming.
- ▶ Support dissemination meetings/workshops for sharing and validation with all relevant stakeholders, in order to promote data ownership and use.

Key Proposed Strategies

- ▶ Taking stock of the existing and UNFPA-supported demographic dividend observatories, create a regional data and research repository to host relevant, recent and accurate disaggregated data on SGBV and HP, to generate evidence in order to inform policy and programmes development on gender norms change.
- ▶ Identify key data challenges in SGBV, HP and SRHR - such as lack of data on SRHR of very young adolescents - and work with regional and continental bodies and research institutions to fill these gaps.
- ▶ Adapt the GBV IMS to the development context.
- ▶ Support regional data and research institutions, (IFORD, Ibadan RIPS, ISSP, etc) structures and mechanisms to collect and analyse disaggregated data to generate evidence in order to inform policy and programme development on gender norms change, positive masculinities and male engagement to prevent SGBV/HP and to empower women and girls.
- ▶ Support the adaptation, use and development of technical guidance tools, guidelines, and training programmes at regional level, which are based on international standards and support countries to domesticate and adapt them.
- ▶ Generate evidence on effective strategies and platforms for providing prevention and response services for marginalized, hard-to-reach women and girls.
- ▶ Strengthen alignment with other relevant initiatives, such as the Global Partnership to End Violence against Children and related studies on violence against children as well as regional initiatives to end school-related GBV.
- ▶ Strengthen partnerships and coordination with UNICEF and other key partners to collect and analyse data on SGBV
- ▶ Strengthen South-South and triangular cooperation for technical support and knowledge sharing

UNFPA Regional Comparative Advantage

- ▶ UNFPA has a long history of data collection, processing, analysis and visualization globally and regionally (for example, its population dashboards, demographic dividend observatories). Since its inception in 1969, UNFPA has been supporting all developing countries around the world on census taking, as well with disseminating and using DHS & MICS findings.
- ▶ UNFPA is experienced in supporting countries to produce accurate and timely data by introducing modern technology to collect and disseminate data. UNFPA has been strengthening capacities of national statistics offices and lines ministries on data collection, including administrative data, processing, analysis and use of information for decision making.
- ▶ UNFPA and UN Women, together with other UN agencies, have successfully engaged with regional and continental bodies including by the development of the SADC Child Marriage Model Law, the SADC Regional Strategy on Women, Peace & Security 2018-2022, and the ongoing work to develop a SADC GBV Strategy. These engagements have proved to yield lasting results in-country, including the adoption of the Model Marriage Law in several countries.
- ▶ In West and Central Africa, UNFPA, UNICEF and several CSO partners brought together high-level representatives from governments, regional bodies, donor communities as well as First Ladies, religious leaders and young people in the first-ever High Level Meeting on Child Marriage in West and Central Africa in 2017 which led to a call to action to end child marriage in the region.
- ▶ UNFPA, UNICEF and CSOs also supported ECOWAS to develop an ECOWAS regional framework on child protection in 2017 that included a strong focus on child marriage.
- ▶ In 2015, UNFPA, UNESCO and other partners brought together representatives from education and health ministries from selected countries to strengthen capacities and encourage policy dialogue on commitments to CSE. In 2018-2019, these partners are building on national and regional momentum on CSE to garner a ministerial commitment from selected countries in the region.
- ▶ UN agencies are supporting the AU member states' commitment under the Solemn Declaration on Gender Equality in Africa (SDGEA) and its annual reports from member states on the progress to end violence against women and SGBV, as well as the AU campaign to end child marriage.

Outcome 6
Supporting civil society organizations, including community-based organizations, and women's movements

Country Programmes

Proposed key strategies

Strengthened multi-stakeholder dialogue, partnerships and enhanced policy space

- Support CSOs participation and contribution in the development, implementation and monitoring of legislation, policies, plans and programmes on SGBV, HPs and SRHR.
- Support multi-stakeholder dialogues to advance progress on prevention and response to SGBV, HPs and SRHR.
- Support CSOs' advocacy efforts through social accountability mechanisms.

Knowledge exchange

- Strengthen the capacity of CSOs on advocacy, management, administration, finance, human resources, reporting and other relevant aspects.
- Support creation of space within the women's movement for youth participation and young women's engagement.
- Support intergenerational dialogues among CSO on gender equality and ending SGBV.

Convening and networking

- Support the integration of organizations representing youth and other marginalized groups facing intersecting forms of discrimination into coalitions and networks of women's rights groups and civil society working on ending SGBV.

WCA

Output 6.1

Women's rights, youth and other civil society movements strengthened and enabled to engage with regional policy and law makers, influencers and media.

Output 6.2

Regional networks of champion professionals and leaders - including journalists, religious leaders and professional service providers - developed and strengthened.

Proposed key strategies

- Develop and strengthen regional networks bringing together women's rights organizations, youth leaders and activists, journalists, traditional and religious leaders, and professional associations such as medical, teachers and judicial associations and syndicates to deliver SI results at country level.
- Amplify social movements across borders and link them to continental/regional social behaviour and communication (SBCC) and CSE campaigns.

- Co-create an innovation lab to incubate social change driven by young women activists working in the field of SGBV/HP/SRHR across Spotlight countries.
- Promote quality regional and continental journalistic reporting on these issues, including by building capacities of journalists from all Spotlight countries and connecting them to each other; amplifying existing regional behavioural change tools like the “C'est La Vie” soap-opera; and strengthening capacities to design and implement mass media campaigns with an integrated view on SGBV/ HP/SRHR.

UNFPA Regional Comparative Advantage

UNFPA has a strong comparative advantage in working with civil society and their partners to advance SRHR in challenging contexts and ensure linkages with work to end SGBV and HPs. As a part of efforts to eliminate violence against women and girls and other HPs, UNFPA's WCARO has been highly engaged in strategic partnerships with traditional and religious leaders, FBOs and CSOs, and youth organizations, in order to foster positive social norms, empower women and girls, fight against child marriage and FGM and secure SRHR of all people, particularly women and girls.

UNFPA - Champions Meeting



8 Matrix Depicting Linkage Oof Unfpa Regional Programmes with Spotlight Initiative

Regional Initiative	Partners	Countries	Component 1 Legislation and Policies	Component 2 Institutional Strengthening
SWEDD	UNFPA - WB	Mali, Niger	Through the SWEDD programme, countries have supported policy and legislative change for women's empowerment	The SWEDD programme has a strong focus on improving health systems and reproductive health supplies
Muskoka	UNFPA-UNICEF UNWomen - WHO	Mali, Niger	Supporting development of policies on adolescent SRH is included in Muskoka	A key component of the Muskoka programme is strengthening health systems to deliver quality services
FGM	UNFPA-UNICEF	Mali, Nigeria	Developing policies and legislation to end FGM is a key part of the global programme efforts	Efforts to end FGM include strengthening protection, justice, GBV and health systems
Child Marriage	UNFPA-UNICEF	Niger (UNFPA and UNICEF), Nigeria (only UNFPA, till end 2018)	Through the global CM programme, Nigeria has successfully developed a national strategy on child marriage (2016) and Niger is in the process of developing a national action plan on child marriage (2018)	The child marriage programme has five strategies, one of which is focused on strengthening of health, education and protection systems
UNFPA Supplies	UNFPA	Liberia, Mali, Niger, Nigeria	UNFPA supplies works to integrate reproductive health supplies into national policies and allocations	The focus of the UNFPA supplies programme is to strengthen capacity for supply chain management and quality RHS
Lake Chad Basin	UNFPA	Niger, Nigeria	In relation to component 1: SRHR including FP are promoted	In relation to component 2: Protection of women on the move and community capacity building
UNISS	UN	Mali, Niger, Nigeria	In line with objectives 2 and 3: outcome 2: Women and youth fully enjoy their rights and participate in the economic life of their country	In line with objective 3 outcome 3: National and local institutions, civil society, and communities exercise better political, administrative, economic and security governance

Component 3 Prevention of violence	Component 4 Available, accessible quality services	Component 5 Quality and reliable data	Component 6 Supporting the women's movement and relevant CSOs
<p>Prevention of violence is a critical component on the women's empowerment focus of the SWEDD programme</p>	<p>Through SWEDD, governments have been supported to scale up quality health services</p>	<p>The SWEDD programme supports the generation, analysis and dissemination of quality data particularly on demographic profiles</p>	<p>A key partner for the SWEDD programme are CSOs involved in the women's movement</p>
<p>Prevention of violence, particularly among/towards adolescents, are part of Muskoka's framework</p>	<p>The main focus of the Muskoka programme is ensuring quality health and CSE services for all, particularly young people</p>	<p>The Muskoka programme also includes strengthening data analysis and sharing of best practices between countries</p>	<p>Engagement with CSOs are a part of the Muskoka programme</p>
<p>The global programme is focused on ending all forms of GBV, including FGM</p>	<p>The FGM programme strategies include providing access to quality protection, justice and health services</p>	<p>A key part of the FGM programme is strengthening quality and reliable data on FGM using DHS/MICS data</p>	<p>Changing social norms and engaging with CSOs are central to the global programme's work</p>
<p>The global programme is focused on ending all forms of GBV, including child marriage</p>	<p>The child marriage programme has two strategies that focus on services: 1) girl-centered strategies that include provision of services to adolescent girls; 2) health/education/protection systems strengthening, including provision of services</p>	<p>Strengthening data and evidence is also a key strategy for the global programme through regional studies, data generation and analysis, baseline mapping etc.</p>	<p>Partnerships with CSOs is central to the work on the global programme. CSOs are key advocacy, strategy and programmatic partners</p>
	<p>The UNFPA supplies programme focuses on the procurement and delivery of RH supplies to keep quality high and prices low and optimize delivery times</p>	<p>A key part of the UNFPA supplies programme is to use data on unmet need for FP and to analyse it against procurement and supply of RH supplies</p>	<p>UNFPA supplies works to mobilize political and financial commitment to enable the enviro-economic condition of the environment, together with other partners, including CSOs</p>
<p>In line with component 3: Social and economic empowerment of women and girls are strengthened</p>	<p>In relation to component 4: SRHR including FP are promoted</p>	<p>Component 5 is linked to the monitoring and evaluation part which recommends the collection of disaggregated and quality data</p>	<p>In line with component 5: Cooperation with youth movements, parliamentarians to establish lasting peace</p>
<p>In line with objective 3: outcome 3: National and local institutions, civil society, and communities exercise better political, administrative, economic and security governance</p>	<p>In relation to effect 1 outcome 1: Women and youth/adolescents have easy access to quality maternal health services, including FP services.</p>	<p>Component 5 is linked to the UNISS monitoring and evaluation part which requires a lot of survey data</p>	<p>Related to objective 4: outcome 4: The impact of security crises on the socio-economic condition of populations and the development of countries is mitigated</p>

Proposed Organization Arrangement

Rationale

This section presents proposed options for the management arrangements at both the country and regional level for the Spotlight Initiative. It provides articulated evidence-based arguments to position UNFPA as the lead agency for the initiative in Africa. It also builds on the results of a capacity development meeting that UNFPA WCARO held with four UNFPA country offices from 20 to 22 June in Dakar, in which participants highlighted UNFPA's added value at country levels.

Overall added value of UNFPA programmes, initiatives and networks:

- Technical expertise (in terms of information and knowledge) and leadership on programming in relation to SRHR, SGBV, HP and data.
- Strategic partnerships with the government and civil society. Examples include: network of religious and traditional leaders, parliamentarians, young people, journalists.
- Its consultative approach, using appropriate channels and structures.
- The cultural lens approach to programming with religious and traditional leaders.
- The focus on strengthening and working through government systems/ institutionalization as well as with CSOs and women's and youth organizations.
- Strong grassroots networks (for example in relation to FP sensitivities) that could also be used by the initiative to engage communities on sensitive issues.
- Its wide multi-sectoral approach.

In addition, WCARO's technical team is backed up by a pool of high-level consultants in the areas of SRHR, SGBV, gender and organizational development to support the design and formulation of the SI at country and regional level. With regard to the implementation of the initiative, the Regional Office has decided to strengthen its management and monitoring-evaluation capacities with the establishment of a "delivery capacity" to support the effective and efficient identification and delivery of results. This mechanism, attached to the Director, will be a sounding board for impulse, alert, anticipation, troubleshooting and

response at the regional level. It is expected that country offices will be encouraged to follow the same approach to strengthen their capacity to effectively implement the initiative and their country programme documents (CPDs), as well as other ongoing initiatives.

Country level

Country programme document outlines (CPOs) produced by the four WCA countries involved in the Spotlight were relatively weak with regard to the articulation and integration of the initiative's three main areas of work in Africa: GBV, HPs and SRHR. They were particularly poor on the SRHR component and need to be strengthened in future CPDs.

Consultation with country offices highlighted the outcomes and pillars where UNFPA should take the lead, as well as where it could leave the lead to other agencies. This is given below:

UNFPA added value per outcome:

Pillar 1: Laws and Policy

- UNFPA has the evidence and data to inform policymaking and legislation. It is critical to have evidence-based advocacy that allows for a deeper analysis.
- UNFPA has demonstrable experience in enacting legislation and policies (for example: gender policies, FGM, child marriage, SRH).
- UNFPA already supports CSOs to develop/revise and implement laws and policies.

Pillar 2: Institutions

- UNFPA has a good relationship with a wide range of institutions.
- UNFPA has partnerships with several line ministries and government bodies that will be key to the initiative – these include the ministries of health, planning, youth, education, internal affairs, foreign affairs, National Human Resources Commission, statistics and other ministries, departments and agencies.
- UNFPA has worked extensively with partners to strengthen health, protection and justice systems and institutions.

Pillar 3: Prevention of Violence

- UNFPA is deeply involved in several programmes either implemented jointly with other UN agencies (for example, FGM, child marriage, CSE, FP, PSS) or implemented under its own country programme, signed with the government.
- Most of these programmes have a strong operational women empowerment component that UNFPA is involved in or is leading.
- UNFPA has developed strong expertise with regard to prevention of GBV and linking GBV to SRHR in humanitarian settings and is to have a lead role in the sub cluster protection/GBV. Those assets and knowledge could be easily transferred in the context of the initiative.

Pillar 4: Essential services

- UNFPA has a recognized leadership and technical capacity when it comes to operationalized essential services in relation to the three main areas covered by the initiative.
- UNFPA works with government and implementing partners, including associations of midwives, on ensuring access to and quality comprehensive SRH and SGBV services. UNFPA is also the main and major actor on obstetric fistula which is strongly tied with HPs and quality essential services.
- Unpacking SRHR is important under this pillar: stakeholders' recognition of fistulas is easier than mere mention of SRH.
- Through the Global Programme on Child Marriage, the Global Programme on FGM, SWEDD and Muskoka , being implemented in most of the Spotlight countries, UNFPA has recognized expertise to lead this pillar on essential services.

Pillar 5: Quality, disaggregated, comparable data

- UNFPA has been investing in developing systems and building the capacity of data institutions, especially with regards to census and DHS in the four countries.
- Another strong point in favour of UNFPA is its secondary analysis of existing data sets - promoting data use for evidence-based decision making.
- Through SWEDD, UNFPA has taken the lead in both Mali and Niger in establishing demographic dividend observatories. Achievements and lessons learnt could easily be adapted/replicated to other African countries involved in the Spotlight, be it WCA or ESA countries.

Pillar 6: Women's movement and civil society

- UNFPA has a strong relationship with grassroots women's organizations as well as high-level women's groups such as the Organization of African First Ladies (OAFLA).
- UNFPA engages men and boys through initiatives including the schools of husbands and future husbands running in Niger and Mali.
- UNFPA has women specific programmes (role model mothers, young mothers' clinics, first-time mothers) as well as programmes focusing on lesbian, gay, bisexual and transgender and intersex (LGBTI+) people (leave no one behind).
- UNFPA has been working together with CSOs and has strong ties with religious and traditional leaders' networks, as well as with youth networks in all countries.

UNFPA Positioning in Transversal Component and Management Arrangements

i) Country level

Option

Overall coordination by RCO and delegation of financial and administrative management to UNDP CO (administrative agent) under the framework of MPTF arrangements

- Each pillar has its own management process with the lead being the coordinator, embracing all oversight and transversal functions: technical coordination, M&E, reporting, communication, etc

Considering UNFPA's comparative advantage on several pillars, UNFPA is well positioned as overall technical lead.

ii) Regional level

Stream 1 focuses on the six pillars.

Stream 2 focuses on existing joint programmes - UNFPA-UNICEF Global Programme on Child Marriage and the UNFPA-UNICEF Joint Programme on FGM/C.

Option

Establishment of a regional/continental steering committee with a subset of the R-UNDG.

In each sub-region, a regional/continental steering committee to be established to play a central coordination role and with the AU and RECs having an observer role. The regional steering committee would also welcome representatives of regional CSOs. This could include the following, based on UNFPA's analysis of agency comparative advantage:

- **Administrative Agent:** Spotlight being managed under the MPTF, administrative functions of the regional component could be delegated to UNDP-Regional Office.
- **Lead Agency:** UNFPA as lead agency for the African Programme considering the focus on SRHR and UNFPA's experience in 1) the technical areas (SGBV, HP, SRHR); 2) Extensive experience in managing regional joint programmes involving:
 - AU and RECs (ECOWAS, EECAS, etc.)
 - Regional networks (youth, FBOs, parliamentarians)
 - Various governments
 - CSOs.
- **Communication, visibility and reporting:** Considering the importance of this component, a specific unit could be set up for these transversal functions.

Detailed draft terms of reference for each 'management function' would be decided jointly among the three core agencies and then discussed with other agencies invited to contribute to the regional Spotlight component.

9 Spotlight Initiative Capacity Analysis

WCARO has conducted a human resources (HR) capacity assessment in the four countries selected for the initiative in the West and Central Africa region. The table below summarizes both the existing HR capacity for each of the country offices (COs) and the identified gap (new personnel needed), along with utilization rates specific to the initiative. It should be noted that in doing this, an effort has been made to remain lean and maintain some level of standardization across the countries, taking into account the projected funding of Euro 125 million for the four UN agencies core to the initiative for four years, and the overall funding of Euro 30 million for the regional component.

Also, partnerships with civil society being a key component of the initiative's approach, it is expected that an important part of the implementation will be carried out by partners. Thus, the proposed HR capacity should be understood as a minimum requirement, as some COs have requested a much higher staffing level for an ideal organizational structure for managing the initiative.

Vlad Vanderkelen - Ministry of Foreign Affairs - Belgium



Country	Staff Position	level of effort (%)	Existing	Gap	Justification Explanation	Level of effort cost USD	New post cost (Gap) USD	
Nigeria	Representative (D1)	5%	X		Strategic guidance	11 988		
	Deputy Representative (P5)	20%	X		Ensure overall integration and synergies between the initiative and the country programme	43 339		
	Assistant Representative (NOD)	30%	X			33 040		
	Gender/GBV Specialists/Officers							
	GBV Specialist (P4)	100%		X	The CO will need a senior staff member with strong cross-cutting SRHR/GBV experience, to carry out a coordination role for the initiative at country level and serve as liaison with other sub-working groups of the UN system. The incumbent will be fully dedicated to the SI project, and will directly report to the representative.		184 477	
	Programme Associate (G7)	30%	X		To support programme implementation	16 176		
	SRHR Specialists/Officers							
	Programme Analyst, ASRH/HIV (NOB)	30%	X		Will provide technical support in the areas of ASRH/HIV, map out IPs and develop specific prevention and response interventions in line with UNFPA minimum standards with regards to ASRH/HIV	19 139		
	Programme Analyst, RH (NOA)	30%	X		Will provide technical support in the areas of RH and develop specific prevention and response interventions in line with UNFPA minimum standards with regards to RH	14 741		
	Population and Development Specialists/Officers							
Programme Analyst (NOB)	30%	X		To provide technical support in relation to P&D aspects of the initiatives	19 139			

Country	Staff Position	level of effort (%)	Existing	Gap	Justification Explanation	Level of effort cost USD	New post cost (Gap) USD
Nigeria	M&E Specialist (NOB)	100%		X	The CO doesn't have any M&E staff currently		63 795
	Operations Staff						
	International Operations Manager (P3)	20%	X		Will support and integrate the deployment of activities pertaining to the initiative with country operations across the country	30 529	
	Procurement Associate (G7)	20%	X		The SM will assist with procurement activities pertaining to the initiative	10 784	
	Human Resource Associate (G7)	20%	X		The SM will assist with HR related matters	10 784	
	Finance Associate (G6)	100%		X	The country will need a staff member who understands EU financial and reporting rules in order to ensure full compliance		38 899
	Driver (G2)	100%		X	Nigeria is geographically vast. The six states covered are spread over huge distances. A vehicle will be required to ensure smooth running of the initiative.		15 952
Liberia	Representative (D1)	10%	X		Strategic guidance	27 159	
	Assistant Representative (NOD)	30%	X		Ensures the overall integration and synergies between the initiative and the country programme	28 631	
	Gender/GBV Specialists/Officers						
	GBV Specialist (P4)	100%		X	The CO will need a senior staff with a strong cross-cutting SRHR/GBV experience, to carry out a coordination role for the initiative at country level and serve as liaison with other sub-working groups of the UN system. The incumbent will be fully dedicated to the SI project and will directly report to the representative.		208 865

Country	Staff Position	level of effort (%)	Existing	Gap	Justification Explanation	Level of effort cost USD	New post cost (Gap) USD	
Liberia	NPO Gender (NOB)	50%	X		Will provide technical support in the areas of RH and develop specific prevention and response interventions in line with UNFPA minimum standards for prevention and response to GBV	30 346		
	SGBV Specialist (UNV)	100%		X	This will be a UNV dedicated full time to the initiative and to support the NPO Gender			
	SRHR Specialists/Officers							
	SRHR Analyst (NOA)	100%		X	The positions are required to make the linkage between GBV and SRHR, as a foundation to advance the initiative in the field		38 525	
	SRHR Specialist (UNV)	100%		X				
	Population and Development Specialists/Officers							
	Data Assessment (UNV)	100%		X	The CO doesn't have any M&E staff currently and will need this position for M&E and project data collection/assessment			
	Knowledge Management Specialist at the RCO (P3)	50%	X		The staff will be part of RCO, with a focus on Spotlight; and he/she will be the library of the whole initiative	86 378		
	Operations Staff							
	International Operations Manager (P3)	20%	X		Will support and integrate the deployment of activities pertaining to the initiative with country operations across the country	34 551		
	Procurement Associate (G7)	20%	X		The SM will assist with procurement activities pertaining to the initiative	8 781		
	Human Resource Associate (G7)	20%	X		The SM will assist with HR related matters	8 781		
	Finance Associate (G6)	100%		X	The country will need a staff member who understands EU financial and reporting rules in order to ensure full compliance		33 840	

Country	Staff Position	level of effort (%)	Existing	Gap	Justification Explanation	Level of effort cost USD	New post cost (Gap) USD	
Mali	Representative (D1)	10%	X		Strategic guidance	25 568		
	Assistant Representative (NOD)	30%	X		Ensures the overall integration and synergies between the initiative and the country programme	25 522		
	Gender/GBV Specialists/Officers							
	GBV Sub-Cluster Coordinator (P4)	60%	X		This is an inter-agency staff member coordinating the GBV Sub-Cluster while SI is in development. Currently dedicating additional time for SI proposal development but not deemed sustainable for implementation phase - need SI Coordinator back-up	118 002		
	National Programme Coordinator, Joint Programme Child Marriage (NOC)	50%	X		SM was also key in the development of the CPO. She is coordinating a joint programme with UNICEF on child marriage and was hired to coordinate the Belgium project and has to remain focused on it.	27 318		
	P3, Gender Specialist	100%		X	The SM will be in charge of Gender Equality and Women Empowerment, and will play a key role in the implementation of the initiative (UNFPA TTF)		162 702	
	SRHR Specialists/Officers							
	SRHR/GBV Project Coordinator (P4)	100%			X	The CO will need a senior staff member with a strong cross-cutting SRHR/GBV experience, including FGM, to carry out a coordination role for the initiative at country level and serve as liaison with other sub-working groups of the UN system. The incumbent will be fully dedicated to the SI project, and will report directly to the representative.		196 670
	Family Planning / SRHR (P4)	15%	X			The SM will organize and coordinate provision of UNFPA RH medical supplies, equipment and accessories to the partners	29 501	

Country	Staff Position	level of effort (%)	Existing	Gap	Justification Explanation	Level of effort cost USD	New post cost (Gap) USD	
Mali	SRH Specialist (NOC)	5%	X		The SMs will assist with the mapping of actors supporting and providing health and RH information and services and identify gaps to be addressed	2 732		
	RHCS Analyst (NOB)	5%	X			2 847		
	Maternal Health MUSKOKA inter agency (P4)	10%	X		The incumbent currently has a Muskoka interagency (TA) role, and will dedicate a portion of his time to support the SI with maternal health related matters	19 667		
	Population and Development Specialists/Officers							
	P&D Data Analyst (NOB)	10%	X		The staff will handle the project data collection/assessment	5 694		
	M&E Specialist (NOC)	100%		X	The CO doesn't have any M&E staff currently. Would be fully dedicated to the SI project, specialized in health programming, programme monitoring, reporting and evaluation, with experience working on EU programming		54 636	
	Operations Staff							
	International Operations Manager (P3)	20%	X		Will support and integrate the deployment of activities pertaining to the initiative with country operations across the country	32 540		
	Admin & Finance Associate (G7)	25%	X		The SM will assist with procurement activities pertaining to the initiative	11 677		
	Human Resources Associate (G6)	25%	X		The SM will assist with HR related matters	7 473		
Finance Associate (G6)	100%		X	The country will need a staff member who understands EU financial and reporting rules in order to ensure full compliance		29 891		

Country	Staff Position	level of effort (%)	Existing	Gap	Justification Explanation	Level of effort cost USD	New post cost (Gap) USD	
Niger	Representative (D1)	10%	X		Strategic guidance	26 241		
	Assistant Representative (NOD)	30%	X		Ensures the overall integration and synergies between the Spotlight initiative and the country programme	25 652		
	Gender/GBV Specialists/Officers							
	GBV Specialist (P4)	100%		X	The CO will need a senior staff member with a strong cross-cutting SRHR/GBV experience, including FGM, to carry out a coordination role for the initiative at country level and serve as liaison with other sub-working groups of the UN system. The incumbent will be fully dedicated to the SI project, and directly report to the representative.		201 837	
	Programme Analyst, GBV (NOB)	30%	X		Will provide technical support in the areas of RH and develop specific prevention and response interventions in line with UNFPA minimum standards for prevention and response to GBV	14 506		
	Programme Analyst, Fistula (NOB)	30%	X		The SM will provide leadership/technical assistance on issues related to harmful practices and fistula	14 506		
	SRHR Specialists/Officers							
	Technical Specialist, RHCS (P4)	30%	X		The SMs will provide technical support in the areas of SRHR and HIV, and will assist with the mapping of actors supporting and providing health and RH information and services and identify gaps to be addressed	60 551		

Country	Staff Position	level of effort (%)	Existing	Gap	Justification Explanation	Level of effort cost USD	New post cost (Gap) USD
Niger	Population and Development Specialists/Officers						
	Programme Analyst, P&D (NOB)	30%	X		The staff will handle the project data collection/assessment	14 506	
	M&E Specialist (NOC)	100%		X	The CO doesn't have any M&E staff currently		67 590
	Operations Staff						
	Operations Specialist (NOC)	20%	X		Will support and integrate the deployment of activities pertaining to the initiative with country operations across the country	13 518	
	International Operations Manager (P3)	20%	X		Will support and integrate the deployment of activities pertaining to the initiative with country operations across the country	33 392	
	Admin & Finance Associate (G7)	25%	X		The SM will assist with procurement activities pertaining to the initiative	14 707	
	Human Resources Associate (G6)	25%	X		The SM will assist with HR related matters	10 512	
	Finance Associate (G6)	100%		X	The country will need a staff member who understands EU financial and reporting rules in order to ensure full compliance		42 048
WCARO	Deputy Regional Director	5%	X		To ensure integration, synergies and coordination overall with other WCARO programmes	26 298	
	Gender/GBV Specialists/Officers						
	SRHR/GBV Advisor (P5)	100%			Responsible for overall coordination of UNFPA regional component and for coordinating support to COs		237 642

Country	Staff Position	level of effort (%)	Existing	Gap	Justification Explanation	Level of effort cost USD	New post cost (Gap) USD
WCARO	Specialist FGM/GBV (P3)	25%	X		Provide technical assistance and leadership to COs with FGM/GBV issues pertaining to the SI	41 828	
	Specialist Child Marriage (P3)	25%	X		Provide technical assistance and leadership to COs with child marriage issues pertaining to the SI	41 828	
	Population and Development Specialists/Officers						
	M&E Analyst (NOC/P3)	100%			Fully dedicated to M&E for the initiative at regional level		167 311
	Operations Staff						
Programme Associate (G7)	100%			Provides administrative support including following up with various parties involved in the initiative in the region		51 054	
Total Cost						1080 866	1795 734
Grand Total						2 876 600	

The estimated cost is USD 2.876.600. Guidance is needed on whether the full cost can be integrated into the SI budget or if it will be cost shared. If it is cost shared, what would be the proportion?

10 Summary of UNFPA Regional Programmes

Incl. selected key achievements

1. UNFPA-UNICEF Joint Programme on FGM: Since 2008, UNFPA and UNICEF have worked together to implement the Joint Programme on FGM which works with governments, civil society, communities and individuals to accelerate abandonment of FGM in 17 countries, eight of which are in the West Africa region, and also supports regional and global initiatives. It is the largest global programme addressing FGM and its third phase started in 2018 and will run until 2021, in line with the UNFPA Strategic Plan and Regional Programme Action Plan. The goal of the joint programme in its third phase is to accelerate efforts towards the reduction of FGM, fulfilling the rights of girls and women by realizing social and gender norms transformation by 2021. The majority of the programmes and activities addressing FGM specifically are implemented under the framework of this joint programme. Some of the key achievements of this programme have been: i) the denouncing of FGM by xxx communities in the region; launching of national campaigns against FGM by xxx countries; and ii) the publication of the Status of Legal Frameworks on FGM within West Africa.

2. The French Muskoka Programme: Covering eight Francophone countries of the West and Central African region: Benin, Cote d'Ivoire, Guinea, Mali, Niger, Senegal, Chad and Togo, the French Muskoka Initiative uses targeted high-impact interventions to improve the health of women, children and young people. It is aligned with national policies, supports coordination mechanisms and compliments inter-country activities and other regional initiatives. It recognizes the need to unlock adolescents' vast potential opportunity for transformative change, to harness the demographic dividend in the region. The key areas supported by the French Muskoka Fund include maternal and newborn health, child health, youth and adolescent sexual and reproductive health, FP; including cross-cutting areas of health system strengthening and gender human rights based approach. Key achievements have included:

i) a successful BCCC strategy on SRHR, GBV and quality of care, depicted through the TV soap opera “C’est la Vie” and televised in over 44 countries with an estimated more than 100 million viewers.

3. UNFPA-UNICEF Global Programme on Child Marriage: UNFPA and UNICEF launched the Global Programme to Accelerate Action to End Child Marriage in 2016. The programme has a 15-year strategy to promote the rights of girls to marry only after they have reached the age of 18, addressing the underlying conditions that perpetuate the practice; and supporting girls already married. The Global Programme focuses on adolescent girls aged 10-19 at risk of marriage or already in union in twelve high-prevalence and/or high-burden countries, of which four are in WCA: Burkina Faso, Ghana, Niger and Sierra Leone. Key achievements to date include: i) strong political support for the AU Campaign to End Child Marriage in Africa; development of national strategies/action plans on child marriage ; ii) 12 countries in the region (Niger, Burkina Faso, Chad, Mali, Ghana, The Gambia, Senegal, Sierra Leone, Cameroon, Nigeria and Liberia) launching national campaigns to end child-marriage and more countries in the process of developing similar initiatives ; and iii) under the leadership of the First Lady of Burkina Faso, there were 15 public declarations of abandonment of children’s marriage in 67 villages of four targeted provinces (Yagha, Séno, Gorom-Gorom And Fada).

4. The Sahel Women’s Empowerment and Demographic Dividend (SWEDD) regional initiative: The SWEDD programme is the result of a joint response by the United Nations and the World Bank Group, to a call made by the presidents of the six Sahel countries, Burkina Faso, Chad, Côte d’Ivoire, Mali, Mauritania and Niger. In 2018, it is also being expanded to include Benin. The overall goal of the project is to accelerate the demographic transition, spur the demographic dividend and reduce gender inequality in the region. The interventions proposed by the initiative are structured around three primary components: 1) Generate demand for reproductive, maternal, neonatal and child health and nutrition (RMNCHN) services by promoting social and behavioural change and the empowerment of women and adolescent girls; 2) Reinforce the regional availability of RMNCHN commodities and qualified health workers; and 3) Reinforce advocacy and dialogue at high levels and promote policy development and the project’s implementation. Key achievements to date included:

1. On demand generation for RMNCHN services, several key steps were taken to promote social and behavioural change and empower women and girls. 19 projects have been developed to increase demand for RH

services, girls' schooling and women empowerment (amounting USD 73.4 million). Safe spaces have been established to serve as a platform for the delivery of health and life skills to girls. Husbands and future husbands clubs have been established to enable men and boys at the community level to adopt more equitable gender behaviours and to become agents of change for women and girls' empowerment through: 19 community-based projects on girls' schooling and women's empowerment (representing 35 per cent of available project funds or USD 73.4 million USD), being implemented by selected NGOs and CBOs; 16,572 adolescents girls who are victims or at risk of child marriage supported with scholarships, vocational training, provision of transportation, school and sanitary kits; and 734 adolescents girls and women supported through capacity building and income generating activities.

Country specific strategies as well as a regional SWEDD strategy for SBCC were developed and endorsed by all countries. In October 2017, the Regional SBCC campaign was officially launched in Abidjan, along with a commitment from the African First Ladies to support SWEDD with a view to its consolidation-extension, followed by the adoption of six national SBCC awareness campaigns that have so far reached 1.5 million adolescents; and the establishment of a network of journalists to increase greater understanding of the demographic dividend (DD) by all.

2. On strengthened regional capacity for availability of RMNCHN supply chain, six projects have been developed and are under implementation in the six countries amounting to USD 18 million. The project is also actively supporting midwifery-training institutions in targeted countries to increase the quantity and quality of midwives and other personnel involved in RMNCHN. Six quality control laboratories are being supported to meet WAHO and international standards. Strengthening of quality and quantity of regional midwifery skills is taking place through - capacity assessment and equipment of 44 midwives training institutions and 314 health facilities, development of a regional harmonized midwifery training curriculum; installation of the E-learning data base at WAHO in collaboration with the University of Thiès, and training of 30 trainers on the utilization of the new harmonized midwifery curriculum in four countries.

3. On political commitment and capacity for policy making, a partnership has been concluded with CREFAT and ICON. This has led to built capacity of more than 150 experts and government delegates of the SWEDD countries on the National Transfer Account (NTA) approach to develop country specific DD profiles to inform national development plans, to establish national DD Observatories and to develop a DD programming tool to support national endeavors toward building capacities.

As a spillover effect, the SWEDD initiative has allowed an outstanding positioning of the DD Road Map in the region. Several high-level advocacy events were organized with parliamentarians, youth, traditional and religious leaders. As a result, governments of SWEDD countries have renewed their commitment to foster investment in youth; the private sector through the Global Business Coalition for Health is engaged to support women empowerment and the DD agenda; and a strong partnership has been established with the Muslim community to create an enabling environment to support SRHR and women's empowerment activities.

5. Lake Chad-Basin Initiative: Covering the four countries around the Lake Chad Basin (LCB), the purpose of this initiative is to “enable communities around the Lake Chad to foster a culture of peace, to build resilience and harness a DD to achieve sustainable development”. The initiative aims to do this through an integrated, holistic and multi-sectoral response in an effort to address the challenges faced by the population around the LCB, and in so doing contribute to long-term growth and stability of the region and eventually harness the DD. The initiative works to ensure protection of people in need and more specifically the most vulnerable – for example, youth and girls – and access to quality basic health and education services and economic opportunities. It also aims to facilitate early response and recovery, as well as efforts to build skills of vulnerable young girls and strengthen livelihoods.

Table 1

Synoptic mapping of regional programmes implemented by UNFPA/WCAR by countries of coverage:
A wealth of experience which could serve the Spotlight Initiative

Country	Muskoka countries	Child Marriage focus countries	FGM focus countries	SWEDD	Lake Chad Basin
Benin	Muskoka			SWEDD (new ; starting 2018)	
Burkina Faso		CM GP	FGM JP	SWEDD	
Chad (3)	Muskoka			SWEDD	
Cote d'Ivoire	Muskoka			SWEDD	
Gambia			FGM JP		
Ghana		CM GP			
Guinea	Muskoka		FGM JP		
Guinée-Bissau			FGM JP		
Liberia			non-JP		
Mali	Muskoka		FGM JP	SWEDD	
Mauritania			FGM JP	SWEDD	
Niger	Muskoka	CM GP		SWEDD	
Nigeria		CM JP (UNFPA only till end 2018)	FGM JP		
Senegal	Muskoka		FGM JP		
Sierra Leone			non-JP		
Togo	Muskoka				



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