Report produced by the UNFPA ESARO Communications Team, led by Daisy Diamante Leoncio, written by Naima Sakande and designed by Cyan Haribhai.

For inquiries, please contact comms-team-esaro@unfpa.org

Cover Photograph
Photo: ©UNFPA Mozambique
Dear Partners, Colleagues, and Friends,

As we reflect on the past year, it is with a sense of optimism and pride that I share with you the 2023 Highlights for UNFPA East and Southern Africa. This snapshot encapsulates our collective efforts to shaping a brighter, more inclusive, and equitable future for all, as we continue to advance the sexual and reproductive health and rights of everyone across the region.

From advancing SRHR and promoting gender equality to empowering women, young people, and marginalized communities, our collective efforts have not only transformed lives but also laid the foundation for a more just, inclusive, and sustainable society. Through innovative approaches, evidence-based interventions, and collaboration with governments, civil society, donors, and other stakeholders, we have made significant strides in making a world of zeros a reality.

I would like to extend my heartfelt gratitude to our dedicated staff, partners, donors, and supporters who have contributed to our collective success. Your commitment, passion, and collaboration have been instrumental in driving change, transforming lives, and building a brighter future for the people of East and Southern Africa.

As we embark on the next chapter of our journey, let us continue to work together with renewed vigor, determination, and solidarity to achieve our shared goals and aspirations.

Together, we have the power to shape the future we want and build a brighter tomorrow for generations to come.

Thank you for your continued support, partnership, and commitment to the mission and vision of UNFPA East and Southern Africa. I invite you to explore the stories of change and resilience within this report, reflect on our collective achievements, and reaffirm your commitment to creating a better world for all.

With hope, determination, and gratitude,

Lydia Zigomo
Regional Director
UNFPA East and Southern Africa

The future we want is a world of zeros.


Despite the challenges that have tested our resilience and resolve, we have pushed to fulfill our vision of a world where every pregnancy is wanted, every childbirth is safe, and every young person’s potential is fulfilled. 2023 presented us with unprecedented challenges, including increased challenges on sexual and reproductive health and rights (SRHR), the aftershocks of the global pandemic, and the violence against women and girls in the face of multiple crises—reminding us of the imperative and urgency of our mission to ensure that no one is left behind.

In these pages, you will discover inspiring stories of change, resilience, and transformation from across the region.

Photo: ©UNFPA Zimbabwe
Leaving No One Behind

Our guiding principles

**Human Rights-based Approach:**
We believe all individuals, regardless of their gender, age, ethnicity, sexuality or socio-economic status, deserve access to sexual and reproductive health services, information, and rights.

**Youth-centred Approach:**
We engage, empower, and invest in young people, ensuring their access to comprehensive sexuality education, youth-friendly services, and opportunities to participate in decision-making processes that affect their lives, health, and well-being.

**Gender Equality and Women’s Empowerment**
We are committed to advancing gender equality and women’s empowerment by addressing structural barriers, discriminatory norms, and harmful practices that perpetuate gender inequality.

**Accountability and Transparency:**
We uphold the highest principles of accountability, transparency, and integrity in our work. We are committed to ensuring responsible stewardship of resources, ethical conduct, and accountability to our stakeholders, beneficiaries, and partners.

**Inclusivity and Diversity:**
We value inclusivity, diversity, and respect for the inherent dignity and rights of all individuals. We strive to ensure that our programs, initiatives, and interventions are inclusive, accessible, and responsive to the diverse needs, perspectives, and priorities of populations, including marginalized and vulnerable groups.

Photo: ©UNFPA Zimbabwe
How We Serve East and Southern Africa

The Role of the Regional Office:

The UNFPA East and Southern Africa Regional Office, based in Johannesburg, South Africa, is a hub of strategic support and technical expertise. Our mission extends to 23 Country Offices, where we collaborate closely with on-the-ground partners to tangibly enhance people’s lives. We support countries’ development plans by offering policy advice, training, and vital support, aligning closely with national development agendas. A key part of our role involves assisting governments in collecting and analyzing population data, ensuring a deep understanding of demographic challenges. This data-driven approach is pivotal in crafting tailored strategies that enable individuals to experience significant improvements in their lives. Central to our efforts is the goal of harnessing Africa’s demographic dividend, a transformative opportunity that the continent is poised to capitalize on, marking a new era of growth and development.
Legislative Action:
Partnering with regional and national Parliamentarians and advocates to develop robust and comprehensive model legal and policy frameworks, leading to national, legal and policy changes for adolescent girls.

Targeted Partnerships:
Fostering targeted partnerships and coalition building with non-traditional actors to reach under-served locations and populations furthest behind.

Domestic resources or sustainable financing
Guided by evidence, developing sustainable and innovative financing models to leverage greater domestic resources for sexual reproductive health and rights, including through national budgets.

Data and Evidence:
In the ESA region, by the end of 2023, 17 out of 23 countries had conducted a digital census and released results, which are being used to inform policy actions, scale sustainable financing and advance resilient system strengthening across multiple sectors.

Connecting the Dots:
Strategically shaping the future by integrating ICPD Agenda and megatrends in national policies for intersectional interventions. Aiming to ensure strategic foresight and future forecasting in crafting policies that address challenges, encompassing climate change, disaster relief, and more, for a resilient and sustainable future.

UN Reform:
Achieving programmatic excellence and sharing success and learning within the United Nations system.
My name is Lindiwe. I am a 10-year-old girl living in East and Southern Africa. UNFPA encouraged my parents to send me to school along with my brothers. I love learning and my favorite subject is math. I hear stories of other girls who were cut between their legs, but my parents attended a UNFPA training that explained why this is against the law and is bad for me, so I was never harmed. I’m glad I can play happily and healthily with my friends.

I am 15. My community was considering marrying me to an older man until a UNFPA workshop on ending child marriage was held in my village. Now no girls are allowed to be married until they are adults. My parents have agreed to let me continue my education and I want to work in computer technology when I grow up. UNFPA have provided me with a menstrual hygiene kit, and it means I’m getting good grades because I don’t miss any classes when I’m on my period.

I am 20 and I’ve found work at a shop that fixes broken electronic devices. I love it! I recently got married to a man I met through work. My husband used to hit me when he was frustrated but I found a digital UNFPA workshop that explained why violence is never the best way of resolving problems. My husband apologized and has never harmed me again. I have been able to access a family planning professional at a UNFPA supported clinic to make sure I am in control of growing our family.

I am 30. I have found such joy in the birth of my baby daughter! UNFPA clinics supported me throughout my pregnancy, ensuring I had regular check ups, was eating properly and any issues were investigated early. The clinic ensured I gave birth healthily and have been following up to make sure me and the baby are progressing well. Motherhood is a delight and I’m glad that because I was able to plan for it, I feel prepared.

I am 45 and can barely believe I am the mother of 5 healthy children. I’ve been able to access UNFPA care for the symptoms of menopause, so I have been able to understand the changes my body is going through. I now run my own repair shop and have two employees helping me with the business. I want my children to have even more success and freedom than I have had and have been setting money aside for their education.

I am 60 and have just welcomed my third grand-child. I have returned to my village and built a small plot for my husband and me. We are respected because our family has been well educated, healthy and industrious and I am often asked for advice by others. I advocate for all the young women in my community to prevent them from being cut or married too young, and people listen because they can see what effect it has had on me. I am proud of the life I have lived and of my legacy.
Africa’s renewed commitment to advance the International Conference on Population and Development (ICPD)

10-year review of the Addis Ababa Declaration on Population and Development

Summary recommendations

1. Reduce poverty.
2. Prioritize integrated SRHR services.
3. Integrate population dynamics at all levels.
4. Strengthen integrated multisectoral data management systems.
5. Enhance Partnership & International Cooperation.
6. Ensure a coherent approach to migration governance and related actions.
The Addis Ababa Declaration on Population and Development (AADPD) 10-year review, Lusaka, Zambia, 7–10 November 2023:

The Africa We Want

Against the backdrop of the response and recovery from COVID-19 pandemic, the scaling up of the Sahel Women Economic Empowerment and the Demographic Dividend (SWEDD) and the implementation of the Spotlight initiatives that are a springboard for the realisation of the pillars of the ICPD program of action, Lusaka was thrumming with optimism and potential.

Looking at the past 10 years, delegates celebrated successes such as a decrease in poverty, a 10-year increase in life expectancy, an increase in girls completing primary education and a higher proportion of women in decision-making roles. They also acknowledged that progress has been slow and unequal. Delegates reflected on the impact of changes in size, age and location of populations; of armed conflict; of COVID-19; and of climate change, with a focus on ensuring that the declaration meets the needs of current and future generations.

1. Africa remains committed to the full implementation of the ICPD Agenda through the AADPD

2. Africa celebrates key achievements towards the Vision of the ICPD; acknowledges emerging challenges and opportunities for acceleration; and affirms the centrality of population dynamics towards achieving sustainable development.

“The ICPD agenda remains relevant for the African continent. We need to recommit to the breakthrough solutions and momentum needed to accelerate actions and change course where needed.”

Diene Keita, UNFPA’s Deputy Executive Director, Programmes.
Unmet need for Family Planning

Closing in on Zero…

Adolescent pregnancy in the region is twice the global average, especially among young, uneducated women in rural communities.

Across East and Southern Africa, more than 49 million women who want to plan their families cannot get access to modern family planning.

UNFPA in East and Southern Africa adopts forward-looking approaches to meeting the unmet need for family planning in diverse situations and settings, anticipating emerging issues and trends. It embraces a broader, more inclusive conceptualization of family planning and places even greater emphasis on gender equality and human rights.

Aligned with the UNFPA Strategy for Family Planning 2022-2023, we have prioritized expanding availability and access to family planning choices, including innovative self-care interventions - making family planning more accessible and tailored to individual needs. We worked on strengthening disaggregate data to assess barriers, identify opportunities, and improve financial tracking.

Together with partners, we worked to increase sustainability of national family planning programmes with strengthened health systems.

By garnering more domestic commitment to financing and promoting a more efficient use of resources, we have made an impact in creating self-reliant and long-lasting family planning initiatives.

We tapped into improving quality of person-centered care and services by expanding contraceptive choices. We also enhanced counseling, health workforce skills, and competencies to elevate the quality of care at service delivery points, ensuring a more responsive and client-focused approach.

In the region, we deepened integration of family planning into national health policies, strategies, and plans. This includes aligning our efforts with primary health care and universal health coverage, ensuring that family planning is a fundamental component of health care systems.

We have strengthened resilience in settings of humanitarian crisis and environmental change. Starting with the Minimum Initial Service Package, we worked for the inclusion of family planning in national policies, plans, and strategies, preparing communities for adaptive responses in times of crisis.

We focused on enhancing agency and addressing discrimination to ensure the full range of family planning services for women and girls from marginalized groups and others at risk of being left behind. By adopting new contraceptive method innovations, we ensured everyone had access to the latest and most effective family planning options.

Scaling up Sustainable Financing for Family Planning: 15 out of the 17 countries in East and Southern Africa that receive funding from the UNFPA supplies partnership program, have signed the Compact agreements and 12 of the 15 national Governments committed financing for the procurement of RH Commodities using domestic finances.

This is a key UNFPA strategic intervention aimed at encouraging countries to move from funding to financing, enhance national ownership of the family planning and SRH programs, and improve sustainability, accessibility and availability of quality RH commodities to the last mile.

Only DRC is yet to sign the compact agreement whilst South Sudan was exempted. Of note, Burundi, Lesotho, Madagascar, Rwanda, Malawi, Mozambique, Kenya, Ethiopia, Tanzania, Uganda, Zambia and Zimbabwe allocated the minimum finance contribution as per the compact agreements while Lesotho, Zambia, Rwanda and Uganda allocated beyond the minimum threshold and benefited from Match Funds in 2023.
Case Study: SRH Access in Ethiopia Industrial Parks

Around 85 thousand people are currently employed at the 13 industrial parks across Ethiopia. 95 per cent of the workforce at the industry parks is youth out of which 85 per cent are young girls. Gaps in Sexual and Reproductive Health (SRH) services at the industry parks across the country make workers vulnerable and affect their productivity.

UNFPA is providing sexual and reproductive health education and services to the workers, especially focusing on family planning, maternal and child health, and preventing and responding to gender-based violence in industrial parks in Ethiopia. Through collaboration with the Ethiopian government, private sector stakeholders, and local organizations, UNFPA has established health clinics within or in close proximity to industrial parks. These clinics offer a range of services, including contraception, antenatal care, safe delivery services, and postnatal care, ensuring that workers can access essential healthcare without disrupting their work routines.

Outcomes

Reached 30,000 young people in the three Industrial Parks and its surrounding communities with SRH/GBV information.

As a direct result of the intervention, a 55 per cent increase was reported of youth workers accessing sexual reproductive health care and HIV services from the industrial parks health centres.

80 per cent reduction in unwanted pregnancy and unsafe abortion of young workers was reported due to peer-to-peer sessions & SRH service accessibility.
Preventable Maternal Deaths

Closing in on Zero...

830 women and adolescent girls die needlessly every day because of complications in pregnancy and childbirth.

Leveraging digital technology: An eLearning course on Sexual and Reproductive Health for Health Workers through World Continuing Education Alliance (WCEA), which is now under the Technical Assistance platform of the UNFPA-Genesis contract. The e-learning modules significantly contributed to improving knowledge on maternal and newborn health topics. From October to December 2023, 24,900 courses have been taken. A total of 316,442 courses have been completed since the launch of the modules. The top 3 countries are Ethiopia (26,725), Tanzania (20,579), and Kenya (20,573). The most popular courses are the WHO Labour Care Guide, Medical Certification of Causes of Death, and Monitoring and Evaluation of Maternal and Perinatal Death Surveillance and Response. 36 per cent of the courses were taken by health workers in rural areas; 52 per cent are female health workers. The knowledge change is also encouraging, which improved from a score of 59 per cent in the pre-test average to 81 per cent in the post-test average, which is a 38 per cent improvement.

Climate Change and Sexual and Reproductive Health and Rights (SRHR): The Regional Office developed, and piloted the innovative module that links climate change and SRHR for young people - 'Resilient Futures: Young People, the Climate Crisis and SRHR.' The module utilizes Comprehensive Sexuality Education platforms, and teaching and learning methods for implementation.

Making Motherhood Safer:
UNFPA works at all levels to promote international maternal health standards and providing guidance and support to health systems. While our responses are tailored to the differing needs of each country in the region, we focus on the two things that have the ability to save the lives of mothers: competent, well-trained midwives and respectful maternity care.

Training midwives:
The 146,000 midwives in the ESA region translates to a density of 2.5 midwives per 10,000 population, far lower than the global average of 4.4. Among its many programmes, UNFPA helps to train midwives, supports emergency obstetric and newborn care facilities and networks, and provides essential drugs and family planning services.

Improving standards:
UNFPA-supported programmes emphasize capacity development in maternal care, especially the strengthening of human resources, emergency obstetric and newborn care and respectful and human-centred quality care. UNFPA also supports the implementation of maternal death review and response systems, which help officials understand how many women are dying, why, and how to respond.

Tackling obstetric fistula:
UNFPA’s work to prevent fistula is calling attention to health systems that are failing to meet the needs of women. UNFPA supports fistula repair programmes, directly supporting surgeries and bringing relief to women and girls in need of treatment.

Photo: ©UNFPA DRC

11.
In the remote village of Mababe, Botswana, getting results from a straightforward blood test is no simple matter. First, samples must be collected by an ambulance headed for Maun, where there is a major hospital and lab services; then, the ambulance must cover 116 kilometres of rugged terrain. The trip can take three hours or more, and that’s when it can be made at all; during the rainy season, flooding shuts the route down entirely. The distance and difficult road conditions can lead to the contamination of samples. Between 25 and 40 per cent of all temperature-sensitive medical supplies sent from urban centres to rural health clinics are wasted because of unreliable cold-chain infrastructure.

These are life-threatening access problems that the Drones for Health project helps to resolve, by leapfrogging traditional modes of transportation.

**Drones reduce delivery times from hours to minutes for essential medical supplies and samples from health-care hubs to reach remote clinics.**

**Drones curb preventable maternal deaths in Botswana through the swift delivery of maternal health supplies, such as blood, equipment and medicine.**

UNFPA is partnering on the initiative with Botswana’s Ministry of Health and Wellness, the Ministry of Tertiary Education, Research, Science and Technology, and Botswana International University of Science and Technology.
Gender-Based Violence and Harmful Practices

Closing in on Zero...

Gender-based violence among adolescents and young women remain prevalent in the region, and female genital mutilation and child marriage persist.

9 per cent of girls aged 20 to 24 years are married before the age of 15 while 35 per cent are married before the age of 18.

Although around 65 per cent of countries have laws explicitly criminalizing domestic violence, these are often limited in scope and coverage or are not enforced.

Only 37 per cent of sub-Saharan African countries have laws covering physical, sexual, psychological, and economic violence.

UNFPA has identified 4 direct pathways to focus on addressing this:

1. Improve availability and implementation of gender responsive legislation and policies
2. Supporting quality integrated and multisectoral GBV services
3. Strengthening and expanding effective partnerships
4. Innovate approaches to collecting and sharing disaggregated, intersectional GBV data

Our Regional Champion:
Miss South Africa 2020, Shudufhadzo Musida, is a pioneering digital supermodel, and as a virtual influencer and fashion icon, Shudu has a significant following on social media, making her an influential voice for women’s empowerment. Together with UNFPA, Shudu utilizes her platform to promote education and awareness about health and well-being while advocating for the elimination of gender-based violence and the promotion of gender equality.

Photo: ©UNFPA East and Southern Africa
Defining GBV and Child Marriage:
Providing a clear and comprehensive definition of gender-based violence and child marriage, ensuring that there is a shared understanding of these terms within the region.

Legal Protections:
Outlining a range of legal protections for survivors, including access to restraining orders, emergency protection orders, and safe shelters.

Prevention and Education:
Emphasizing prevention strategies, including awareness campaigns and educational programs that challenge harmful gender norms and promote gender equality.

Support Services:
Calling for the establishment of support services for survivors, such as counseling, medical care, and social services, to help survivors recover and rebuild their lives.

Minimum Marriage Age:
Setting a minimum marriage age, in line with international standards, to combat child marriage and protect the rights of children.

Penalties and Prosecution:
Imposing penalties for perpetrators of GBV and child marriage, sending a clear message that such acts will not be tolerated and will be punished by the law.

Data Collection and Monitoring:
Underscoring the importance of collecting data on GBV and child marriage to inform policy and measure progress in addressing these issues.

UNFPA worked in collaboration with our SADC partners to provide a comprehensive legal framework for member states to combat these deeply rooted problems. The partnership between the SADC and UNFPA in developing this model law is crucial in ensuring its effectiveness and implementation across the region. The UNFPA brings valuable expertise and resources to support member states in adopting and implementing the law, including technical assistance, capacity building, and funding for relevant programs and initiatives.

Key achievements of the SADC Model Law include:

Defining GBV and Child Marriage:
Providing a clear and comprehensive definition of gender-based violence and child marriage, ensuring that there is a shared understanding of these terms within the region.

Legal Protections:
Outlining a range of legal protections for survivors, including access to restraining orders, emergency protection orders, and safe shelters.

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Data Collection and Monitoring:
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Sexual Transmission of HIV

Closing in on Zero...

Although it’s home to less than 8 percent of the world’s population, the ESA region accounts for more than half the number of people in the world living with HIV. In 2022, there were 20.8 million people in ESA living with HIV.

In 2022, the region reported 500,000 new infections - a reduction of more than 230,000 since 2019.

Women aged 15 years and over still account for 61 per cent of all people living with HIV in the region in 2022, with adolescent girls and young women aged 15–24 years at inordinate risk of HIV infection. Many adolescent girls and young women lack sufficient decision-making power about their sexual relations, contraceptive use and health care.

UNFPA's work on HIV in East and Southern Africa includes:

HIV Prevention and Education:
Promoting access to condoms and educating young people and key populations, such as sex workers and men who have sex with men, on safe sexual practices and the importance of regular HIV testing.

Gender-Based Violence and HIV:
Providing support and services to survivors of GBV, including post-exposure prophylaxis (PEP) for HIV prevention.

Integration of SRHR and HIV Services:
Ensuring that individuals have access to a comprehensive package of care that addresses their sexual health needs, including HIV prevention, treatment, and support.

Maternal and Child Health:
Preventing mother-to-child transmission of HIV by providing antenatal care, HIV testing, and access to antiretroviral therapy for pregnant women living with HIV.

Women aged 15–24 years at inordinate risk of HIV infection. Many adolescent girls and young women lack sufficient decision-making power about their sexual relations, contraceptive use and health care.
Case Study: Uganda: A pathway out of commercial sex exploitation for a better life

An intervention for exploited girls, in collaboration with the AIDS Information Centre (AIC), a sex worker-led organization, the Alliance of Women for Change (AWAC), and local social welfare officials, identified 850 girls and young women in commercial sexual exploitation in 14 districts and offered them options for a new life.

Organized in small registered groups, the girls learned basic accounting and management skills and opened bank accounts. The groups were guided to select a viable micro-business such as hairdressing, tailoring, catering, and selling dry produce, charcoal or second-hand clothes.

Each group of 20 members received seed funding of 4 million Ugandan shillings (about US$1,300) to start their business.

UNFPA and AIC provided a package of comprehensive sexual and reproductive health, HIV and GBV services. This included learning the skills to negotiate safer sex and to report incidents of violence.

Results: 34 businesses created: 10 salons, 6 restaurants, 6 produce/cereal businesses, 5 tailoring shops, 2 retail enterprises, 3 fashion boutiques and 2 bakeries. 150 participants left commercial sexual exploitation and transactional sex work.

HADIJA KUNIMIRA:  
“I am never going back to prostitution. I suffered a lot. I started my charcoal business and no one, no one can convince me to go back.”

JUSTINE NAKANJAKO:  
“Now I know my rights. No one can abuse me.”
Resource Mobilization and Partnerships

Resource Mobilization Success:
UNFPA’s ESA Region has demonstrated innovative measures to mobilize essential resources, particularly focusing on ending harmful practices like female genital mutilation (FGM). The Resource Mobilization unit has broken barriers in the cycle, fostering partnerships and crowd-sourcing solutions for sexual and reproductive health and rights across Africa. Despite challenges, UNFPA ESA has made significant strides, surpassing its 2023 fundraising target.

2023 Target: $102.7 million

Resources mobilized:
$142.6 million *(as of the 31st of December 2023)

The Challenge Still Remaining:
Despite the success of our fundraising efforts, the need for innovative solutions to entrenched problems has never been greater. Beyond existing investments, a significant cash injection is needed between 2020 and 2030 globally:

- $59.9bn for ending the unmet need for family planning.
- $103.6bn for ending preventable maternal deaths.
- $58.7bn for ending GBV and harmful practices.

The case for investing in the Three Transformative Results and the ICPD agenda globally

Averts:

- 400 million unplanned pregnancies.
- 1 million maternal deaths.
- 6 million stillbirths.
- 4 million newborn deaths.

$79 billion additional investment (2022 - 2030)

$660 billion in economic benefits (2022 - 2050)

Changing the paradigm surrounding SRHR financing – to one of investment rather than cost – is critical if more resources are to be mobilised for the provision of essential SRHR services.

Photo: ©UNFPA Zambia
The UNFPA Development Impact Bond (DIB) in Kenya showcases innovative financing for transformative change. A partnership between UNFPA, the Government of Kenya, and a consortium of private and philanthropic investors, the DIB operates on a pay-for-success model, where investors provide upfront capital for implementing interventions aimed at achieving specific targets related to sexual and reproductive health. If the agreed-upon outcomes are achieved within a predetermined time frame, investors receive a return on their investment. However, if the targets are not met, the investors bear the financial risk, incentivizing efficient and effective program implementation. The DIB encourages innovation, accountability, and data-driven decision-making and demonstrates how creative financing mechanisms can play a vital role in achieving sustainable development goals and improving the lives of vulnerable populations.

**Case Study: Groundbreaking $10.1 Million Adolescent Sexual and Reproductive Health Development Impact Bond launches in Kenya**

The UNFPA Development Impact Bond (DIB) in Kenya showcases innovative financing for transformative change. A partnership between UNFPA, the Government of Kenya, and a consortium of private and philanthropic investors, the DIB operates on a pay-for-success model, where investors provide upfront capital for implementing interventions aimed at achieving specific targets related to sexual and reproductive health. If the agreed-upon outcomes are achieved within a predetermined time frame, investors receive a return on their investment. However, if the targets are not met, the investors bear the financial risk, incentivizing efficient and effective program implementation. The DIB encourages innovation, accountability, and data-driven decision-making and demonstrates how creative financing mechanisms can play a vital role in achieving sustainable development goals and improving the lives of vulnerable populations.

**Thank You To Our Top ESARO Humanitarian Non-Core Donors***:

- UN Office for the Coordination of Humanitarian Affairs
- USAID
- UNDP
- Denmark
- The Republic of Korea
- United Kingdom
- UN Joint Funding

*As of 31st December 2023

**BENEFIT-COST RATIO**

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Using adaptive leadership to accelerate UNFPA’s vision for 2030:
All UNFPA ESA’s senior leadership are committed to a visionary and adaptive form of leadership to achieve our ambitious transformative results. We aim to foster:

**Strategic Foresight:**
We implement a strategic foresight and futures thinking approach with the purpose of rethinking, reimagining, redefining and recalibrating critical pathways to 2030 and beyond for the ESA region.

**Persuasion:**
We are committed to better message, advocate, and influence through effective communication, to persuade others to back our aims.

**Inclusive Leadership:**
We stand ready to adjust our leadership mindset and skills to make UNFPA a more inclusive workplace and to increase business impact.
Collective leadership in 2023

Angola
Representative
Mady Biaye

Botswana
Head of Office
Tlangelani Shilubane

Burundi
Representative, Maïdah✍️
Judicael Elijde

Comoros, Madagascar & Seychelles
Representative
Josiane Yaguibou

DRC
Representative
Suzanne Mandong

Eritrea
Representative
Keita Ohashi

Eswatini
Head of Office
Margaret Thwala-tembe

Ethiopia
Representative
Koffi Kousme

Kenya
Representative
Anders Thomsen

Lesotho
Representative, OIC
Richard Delate

Malawi
Representative
Nelida Rodrigues

Mauritius
Head of Office
Marie Priscilla Lien-Hin LiYing

Mozambique
Representative
Berangere Boeli-Yousfi

Namibia
Representative
Erika Goldson

Rwanda
Representative
Kwabena Asante-Ntiamoah

South Africa
Representative, OIC
Innocent Modisaotsile

South Sudan
Representative
Ademola Olajide

Tanzania
Representative
Mark Bryan Schreiner

Uganda
Representative
Gift Malunga

Zambia
Country Representative
Seth Broekman

Zimbabwe
Representative
Miranda Tabifor

Regional Director
Lydia Zigomo

Deputy Regional Director
Chinwe Oghonna