Learning and insights to improve joint UN programming at the regional level: Lessons from 2gether 4 SRHR
Acknowledgments

A defining characteristic of Delivering as One is teamwork. In that spirit, we would like to acknowledge the extensive team that contributed to this document: Sida, whose generous support and partnership made this joint programme possible, and UNAIDS, UNFPA, UNICEF and WHO regional and country offices in Eastern and Southern Africa. We would also like to thank the regional economic communities, civil society organisations, implementing partners and national governments who continue to work tirelessly to advance sexual and reproductive health and rights for all.

The document was written by Judith Sherman, Independent Consultant.
## Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>CA</td>
<td>convening agent</td>
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<tr>
<td>COVID-19</td>
<td>Coronavirus 2019</td>
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<td>DAO</td>
<td>Delivering as One</td>
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<tr>
<td>EAC</td>
<td>East African Community</td>
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<td>ESA</td>
<td>Eastern and Southern Africa</td>
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<td>M&amp;E</td>
<td>monitoring and evaluation</td>
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<td>PUNO</td>
<td>participating United Nations organisation</td>
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<td>RACI</td>
<td>responsible, accountable, consulted, informed</td>
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<td>RISC</td>
<td>Regional Interagency Steering Committee</td>
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<td>RIWG</td>
<td>Regional Interagency Working Group</td>
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<td>RPSC</td>
<td>Regional Programme Steering Committee</td>
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<td>SADC</td>
<td>Southern African Development Community</td>
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<td>SDG</td>
<td>sustainable development goal</td>
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<td>SGBV</td>
<td>sexual and gender-based violence</td>
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<td>Sida</td>
<td>Swedish International Development Cooperation Agency</td>
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<td>SOPs</td>
<td>standard operating procedures</td>
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<td>SRH</td>
<td>sexual and reproductive health</td>
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<td>SRHR</td>
<td>sexual and reproductive health and rights</td>
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<td>UBRAF</td>
<td>Unified Budget, Results and Accountability Framework</td>
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<td>UN</td>
<td>United Nations</td>
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<tr>
<td>UNDG</td>
<td>United Nations Development Group</td>
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<td>UNAIDS</td>
<td>Joint United Nations Programme on HIV/AIDS</td>
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<td>UNFPA</td>
<td>United Nations Population Fund</td>
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<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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<td>UNSDG</td>
<td>United Nations Sustainable Development Group</td>
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<td>WHO</td>
<td>World Health Organization</td>
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In 2005, the United Nations (UN) launched a new way of working, Delivering as One (DaO). DaO is intended to increase the UN's impact through greater efficiency and coherency, and by consolidating development efforts and maximizing the strengths of the different UN agencies. While there are various approaches to DaO, UN agencies are increasingly using joint programmes to better influence policies, provide integrated support, and ensure efficient use of resources. An independent review of UN joint programming found that most formal
partnerships between agencies has led to more efficient, coherent, and effective country support.2

The aim of this document is to inform future regional joint programmes by sharing good practices and lessons learned from 2gether 4 SRHR, a UN joint programme designed to improve the sexual and reproductive health and rights (SRHR) of all people in 10 countries3 in Eastern and Southern Africa (ESA), particularly adolescent girls, young people and key populations. The programme (2018-2021) worked in partnership with Regional Economic Communities, national governments, civil society organisations, and networks of beneficiaries, including people living with HIV, adolescents and young people, men who have sex with men, lesbian, gay, bisexual, transgender, and intersex persons, and sex workers.

Why a regional joint programme?

The Government of Sweden’s feminist foreign policy4 focuses on enhancing the rights, representation and resources of women and girls globally, with a firm concentration on SRHR.5 The Swedish International Development Cooperation Agency (Sida) SRHR Strategy for sub-Saharan Africa explicitly calls for a regional approach, emphasizing identifying opportunities to tackle divisive issues, find common solutions to common challenges, and enhance health systems.6 In funding 2gether 4 SRHR, Sida consolidated its investments in the region into fewer UN funding streams, encouraged UN reform, promoted greater regionality, and broadened its agenda for SRHR, HIV and sexual and gender-based violence (SGBV).

2gether 4 SRHR brought together four UN agencies - the Joint United Nations Programme on HIV/AIDS (UNAIDS), the United Nations Population Fund (UNFPA), the United Nations Children’s Fund (UNICEF) and the World Health Organization (WHO) to advance SRHR in Eastern and Southern Africa. The selection of agencies by Sida built on the results of Sida’s previous regional investments, specifically the Linkages Project implemented by UNFPA and UNAIDS under the Expanded Accelerated AIDS Response Programme, and the Optimizing HIV Treatment Access for pregnant and breastfeeding women initiative implemented by UNICEF. WHO was brought into the partnership in recognition of its technical expertise in SRHR policy development and guidance on service delivery. The selection of agencies for funding was by no means exclusive; Sida was already contributing significant funding to other UN agencies, such as UNESCO, that were engaged in different aspects of SRHR.

The four participating UN organizations (PUNOs) comprising 2gether 4 SRHR share a common goal of improving SRHR to accelerate progress towards Sustainable Development Goal (SDG) 3 - to ensure healthy lives and promote well-being for all ages - and SDG 5 - to achieve gender equality and empower all women and girls. 2gether 4 SRHR represented a new opportunity for the PUNOs to collaborate on advancing SRHR priorities, with a focus on health systems strengthening7,8 and sustaining and leveraging progress in HIV.

The objectives of this programme were to:
1. Support countries in the ESA region to create an enabling legal and policy environment

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3 Focus implementation countries: Lesotho, Malawi, Uganda, Zambia, Zimbabwe; transitional countries: Botswana, eSwatini, Kenya, Namibia, South Africa
4 https://www.government.se/government-policy/feminist-foreign-policy/
6 https://www.government.se/4a725b/contentassets/75e7c3cad79e4c6f9fb3e4b164482774/resultatstrategi-srhr-eng-2015_2.pdf
7 https://www.who.int/data/gho/data/themes/topics/health-systems-strengthening
8 https://www.who.int/healthsystems/strategy/everybodys_business.pdf
that empowers all people, but particularly adolescent girls, young people and key populations to exercise their SRH rights and access quality integrated SRHR, HIV and SGBV services.

2. Support countries in the ESA region to **scale up the provision of client-centred, quality-assured, integrated and sustainable SRHR, HIV and SGBV services** which meet the needs of all people, in particular adolescent girls, young people and key populations.

3. Support countries in the ESA region to **empower all people, but with a focus on adolescent girls, young people and key populations, to exercise their SRH rights, adopt protective and health-promoting behaviours, and access quality integrated services in a timely manner.**

4. **Amplify the lessons learnt** from the implementation of the Joint UN Regional Programme to strengthen integrated SRHR, HIV and SGBV services for all people in particular adolescent girls, youth and key populations in the ESA Region.
Regional results

2gether 4 SRHR contributed to Delivering as One, greater regional advocacy, knowledge sharing, South-South collaboration, and strengthened partnership with regional economic communities and civil society in support of accelerating progress towards universal SRHR.
The decision to work regionally was integral to the conception of 2gether 4 SRHR. Sida and the PUNOs were committed to providing an environment in which a common vision for SRHR would be articulated and promoted across the ESA region. The following examples, while not exhaustive, are illustrative of the results achieved at the regional level to strengthen the policy environment, improve the delivery of integrated services, increase community support for SRHR, and empower adolescents, young people and key populations with information and skills to demand and access services.

Under 2gether 4 SRHR, the regional offices of the PUNOs provided technical assistance on expanding SRHR to the East African Community (EAC), the Southern African Development Community (SADC), parliamentary forums, human rights institutions, and regional civil society partners. The agencies helped to develop and/or reviewed regional laws, strategies, frameworks and guidelines; undertook applied research to strengthen the evidence base for SRHR; convened policy dialogues and advocacy on specific issues and supported regional peer review accountability mechanisms. The regional offices also provided technical and operational support to countries and played a pivotal role in documenting and amplifying lessons learned in the region.

The programme ensured a coordinated approach and strengthened the partnership with the EAC and SADC to advance SRHR outcomes. 2gether 4 SRHR promoted South-South collaboration through technical meetings convened with the Regional Economic Communities that provided an opportunity to update countries on latest technical developments across the four partner agencies, share emerging best practices across countries, and increase accountability for SRHR commitments. The programme also elevated SRHR outcomes, with 6 EAC Ministers of Health adopting a joint commitment on SRHR in advance of the International Conference on Population and Development +25 and 16 SADC Ministers of Health adopting the SADC SRHR Strategy and scorecard to track SRHR outcomes.

Increasing government accountability and reinforcing national SRHR commitments through regional institutions

2gether 4 SRHR played a technical advisory and advocacy role in developing and updating the SADC SRHR strategy 2019-2030 and the SADC SRHR scorecard, and the completion of the SADC SRHR Baseline Scorecard. A Technical Working Group, led by government officials from Eswatini, Namibia, and South Africa, and including the SADC Secretariat, UNAIDS, UNFPA, UNICEF, WHO, UNESCO and civil society partners, oversaw the Strategy’s development. The Strategy and Scorecard will accelerate and track progress in relation to the SDGs and other global commitments and is informed by the most current evidence and thinking on SRHR. The Scorecard established the foundation for advocacy on harmonizing indicators across countries, incorporating indicators related to SGBV, sexually transmitted infections and safe abortion care, and standardizing data disaggregation by age and gender in national health information systems. The Baseline Scorecard has been validated by 15 of the 16 SADC Member States. Data for the scorecard will be collected every 2 years until 2030 to track progress in meeting the SDGs. The first milestone scorecard was completed in 2021, tracking progress against the indicators and highlighting areas that are lagging as well as areas where progress is being made.

2gether 4 SRHR fostered greater linkages across joint UN regional initiatives and with civil society partners. The programme successfully brokered the active participation of civil society in regional forums convened by SADC and the EAC. Regular meetings were convened with civil society to strengthen coordination and collaboration, including a series of dialogues to inform the development of a regional SRHR advocacy strategy. The programme also supported civil society partners to lead the process around the development of the EAC SRHR Bill.

2gether 4 SRHR leveraged and complemented other bilateral and multi-agency efforts to strengthen SRHR outcomes. For example, the programme complemented the efforts of Safeguarding Young People, a regional programme supported by the Swiss Development Agency and the Embassy of the Kingdom of the Netherlands, through inclusion of youth friendly services into integrated services and joint advocacy to advance legal and policy interventions, including support for the development of the SADC Model Law on Child Marriage. The programme also worked in partnership with Spotlight, a joint UN programme supported by the European Union, to examine approaches to strengthen the integration of SGBV into comprehensive SRH services, including support for the development of the SADC Model Law on SGBV.

### Combining organizational strengths to address complex issues

After countries identified a need for improved comprehensive abortion care, UNFPA and WHO, through 2gether 4 SRHR, convened and supported a regional platform to build national capacity in improved clinical care. Health professionals from eight countries received training on post-abortion care and contraception and, working with their respective Ministries of Health, developed roadmaps to increase access to safe abortion care and post-abortion care within their countries. Global partners were identified to provide technical assistance at country level. This regional approach resulted in expanded investments and increased capacity across the region. From 2018-2022, the number of countries implementing activities to strengthen comprehensive abortion care expanded from eight to twelve. Activities included developing national policies and guidelines to strengthen the provision of comprehensive abortion care, training national level trainers in the clinical management of comprehensive abortion care, including values clarification and attitude transformation, and undertaking strategic assessments to strengthen policy and programme implementation.
The provision of integrated services for key populations expanded through a well-defined regional programme. 2gether 4 SRHR supported the development of the SADC SRHR and HIV Key Population Strategy. In Kenya and South Africa, different models were piloted to provide integrated services to female sex workers while Lesotho piloted programmes addressing the SRHR needs of key populations.

To maximize regional reach, 2gether 4 SRHR supported the development of an SRH and HIV toolkit for adolescents and young people, with content that can be used as-is or easily adapted by countries. The toolkit, developed in collaboration with Y+ Global and with content co-created by adolescents and young people from five countries, provides a set of high-quality communication materials for adolescents and young people on SRHR, HIV, SGBV, mental health, and related topics. The toolkit has assisted country teams in improving knowledge and understanding, driving adolescent and youth engagement and behaviour change, and promoting uptake of SRHR, HIV, SGBV and mental health services.

Regional technical support and south-to-south learning contributed to adapting and scaling up the number of country programmes addressing the multi-faceted needs of pregnant adolescents and young mothers. Countries have institutionalized peer mentor support, including allocating national funds and integrating peer mentors into health management teams. Initially implemented in 2gether 4 SRHR-supported countries, young mother initiatives have spread throughout the region. Results have included increased use of modern contraceptive methods, improved mental health, and, among pregnant adolescents and young mothers living with HIV, improved adherence to antiretroviral therapy, better viral suppression, and reduced vertical transmission to children.

At the onset of the COVID-19 pandemic, with additional emergency funds from Sida, the programme rapidly put in place digital modalities to build health care worker capacity. An inter-agency regional virtual learning platform for midwives, nurses and other frontline health workers reached over 27,000 frontline health workers to enhance their skills for providing essential SRH services during the pandemic. The programme also supported a regional inter-agency monitoring exercise to track utilization of SRH services in the ESA region during the pandemic. Findings informed both the pandemic response and the UN Secretary General’s policy brief on COVID-19 and Universal Health Coverage that highlights the importance of ensuring continuity of essential SRH services during the pandemic and beyond.
Programme administrative structure

Sida first approached UNFPA in 2017 to convene the PUNAs to discuss the possibility of a regional initiative on SRHR that built on previous agency-specific initiatives. The proposal was met with enthusiasm and it was later agreed that UNFPA would serve as the administrative agent and convening agent for the programme in compliance with the 2015 standard United Nations Development Group (UNDG) guidelines. As Administrative Agent, UNFPA was responsible for receiving and disbursing funds from Sida to the other PUNOs, using a pass-through funding modality. Each agency then disbursed funds to their respective country offices and conducted due diligence of their use. UNFPA was also accountable for the programme’s administrative deliverables, such as annual narrative and financial reports and programme reviews, and served as liaison with the donor, an adjustment for the other UN agencies that were accustomed to direct communication with Sida. The PUNOs signed a Standard Memorandum of Understanding outlining the terms and conditions governing the relationships, implementation, monitoring and evaluation (M&E), and financial management of the programme.
Programme governance

The governance structure of 2gether 4 SRHR was designed to prioritize UN coherence, mutual accountability, and joint UN-government ownership.

The UN is guided by global goals and commitments and, at the country-level, national priorities. At country level, the UN Sustainable Development Cooperation Framework, signed by UN country representatives and the host country government, guides the UN’s work toward the 2030 SDG agenda. At regional level, the Regional Collaborative Platform provides a mechanism for issue-based coalitions, as agencies determine how to collaborate on specific deliverables. There is currently no issue-based coalition on SRHR and each agency has its own framework that guides their respective efforts on key SRHR outcomes. 2gether 4 SRHR enabled the four agencies to articulate areas of synergy which were further elaborated during programme implementation.

Regional and national governance bodies with clear terms of reference and distinct roles guided joint programme implementation. With the aim of building country ownership and accountability, a Regional Programme Steering Committee (RPSC) was formed, comprising Sida Representatives, Deputy Regional Directors or their delegates from each of the PUNOs, and Permanent Secretaries or their delegates from the ten country Ministries of Health. The RPSC met annually (2018-2019)\(^{10}\) to review and approve the annual regional and country workplans and budgets, monitor results against objectives, and provide strategic input to programme implementation. Engagement through the RPSC ensured that Sida contributed to programme planning and implementation at strategic moments. The RPSC was also a platform for advocacy on the work being undertaken by the Regional Economic Communities, a forum for south-to-south learning, and an opportunity for the PUNOs and governments to engage on other areas of mutual interest.

The Regional Interagency Steering Committee (RISC), composed of the PUNO Deputy Regional Directors and Sida, was formed to provide a platform for strengthening programmatic oversight and alignment and harmonization with other joint UN initiatives and agency-specific global and regional strategies. Specifically, the RISC monitored programme implementation to ensure financial and programmatic decisions are aligned to the joint programme document and to resolve any interagency conflicts or barriers to implementation. The RISC also served as a platform to identify common areas for promoting SRHR in the region and respond to emerging issues, risks and changes, such as the COVID-19 pandemic.

Given the complexity of SRHR issues, the PUNOs recognized the importance of senior UN engagement and high-level advocacy. The Strategic Leadership Forum (SLF), consisting of UN Regional Directors and the leadership of Sida’s regional SRHR team, engaged senior management in strategic conversations on advocacy priorities and furthering the SRHR agenda regionally. SLF members were appraised on key issues in the region, such as ensuring the continuity of SRH services during COVID-19 and addressing restrictive laws to SRH, HIV and SGBV services.

At country level, National Steering Committees, composed of the PUNO’s Deputy Representatives/senior UN staff, provided strategic guidance and fiduciary and management oversight and coordination. The Steering Committees met regularly to review programme progress and financial expenditures and address any challenges to implementation.

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\(^{10}\) In-person meetings were replaced with virtual consultations after the onset of the COVID-19 pandemic.
Programme management

Coordinating as One

A core interagency technical team was key to implementation and managing results together.

The Regional Interagency Working Group (RIWG), composed of senior technical advisers from the PUNOs, provided overall programme oversight and managed daily programme implementation, working in partnership with relevant regional joint programmes and other technical advisers and units. In addition to monthly meetings to review implementation and track progress, this core group communicated regularly to make decisions on programme management. The RIWG also served as a platform to ensure greater multi-sectoral collaboration and synergy on key areas across the PUNOs. For example, regional technical experts from the PUNOs on gender, adolescent development, SGBV, mental health, and emergency response were engaged throughout programme implementation. This cross-sectoral collaboration and coordination with regional teams was particularly impactful throughout the COVID-19 pandemic.

Planning as One

Joint programme workplans included only joint activities, defined as any activity that involved two or more agencies.

The country-level teams developed joint annual workplans and budgets, in consultation with national government structures, clearly articulating roles and responsibilities in relation to their respective technical expertise and agency mandates. The country-level work plans and budgets were then submitted to the RIWG for technical review. At the regional level, the RIWG compiled the regional workplan after agreeing on strategic results, based on how regional efforts could contribute to national and regional priorities. The final consolidated work plan and budget was then submitted to the RPSC for review and approval.

Annual joint planning meetings – both in-person and virtual – were an important modality to share learning, as well as a source of motivation as countries compared their progress against regional and national targets. As meetings went virtual due to the COVID-19 pandemic, the RIWG and country-level teams seamlessly built upon the already established modes of working together.

Having a consolidated joint workplan with all planned and costed activities helped the PUNOs allocate funds in a way that would best contribute to objectives. Joint planning also resulted in the participating agencies leveraging other resources within their agencies, reducing duplication, increasing value-for-money and maximizing impact. Nonetheless, reviewing and consolidating five focus country workplans and budgets was a monumental task. Having a dedicated, coordination team was essential, given the sheer volume of work.

Country teams are accustomed to joint work planning under the UN Sustainable Development Cooperation Framework and the Joint UN Programme on HIV/AIDS. However, 2gether 4 SRHR pushed countries to identify areas that would benefit from the involvement of two or more agencies. The work planning process and work plans themselves improved annually as lessons learned were applied to streamline and simplify the process.
Joint programmes consist of multiple agencies contributing to a common result; they do not require joint implementation of activities. The organizational tool, RACI (Responsible, Accountable, Consulted, and Informed), was essential to joint programme management, ensuring clarity of roles and allowing PUNOs to focus on their strengths. During the planning process, the roles and level of involvement of each PUNO were identified against a corresponding activity. The roles included:

- **Responsible** – Any agency actively engaged in implementation of the activity. This was often been more than one agency as agencies work together to achieve a result. The agency might not contribute funding to the activity but would provide technical expertise.
- **Accountable** – The agency accountable for the activity. That agency led efforts and was ultimately “answerable” for implementation, while also being responsible.
- **Consulted** – Agencies providing technical reviews and expert opinions at key times in the process, strengthening the overall outcome of the activity.
- **Informed** – Agencies receiving updates only, ensuring that all agencies were aware of the full programme, even if they were not engaged in implementing specific components.

**RACI at work, 2021 Regional Workplan:**

“Support advocacy efforts for the East African Legislative Assembly’s SRH Bill in collaboration with a consortium of civil society partners.”

A - UNFPA accountable, R - UNAIDS and WHO responsible, C - UNICEF consulted

Implementing as One

2gether 4 SRHR adapted UNDG guidance on implementing joint programmes at the regional level.

An essential component of DaO was gaining efficiencies through streamlined operations. The UNDG Standard Operating Procedures (SOPs), developed in 2014, provide DaO guidance in leadership, business operations, funding, joint programming, asset management, and communications. The SOPs suggest strategies at the country-level for removing institutional bottlenecks in areas such as planning and reporting, procurement, financial management, logistics and human resources.  

While the PUNOs adapted the SOPs to guide regional operations, gaps remained that slowed down implementation of activities. For example, incompatible information technology systems constrained knowledge management as PUNOs use different document-sharing platforms, making a simple task, such as joint reviews of documents, problematic. The challenges of agency-specific financial, administrative, and procurement processes were not insurmountable, and led to developing new ways of working jointly. The PUNOs identified bottlenecks that were obstructing operations and developed SOPs for various internal procedures, such as review and approval of communications products, issuing per diems, jointly supporting consultancies, procurement, and dividing responsibilities for jointly convened meetings and activities. The PUNOs also advocated for greater utilization of the Mutual Recognition principle, although further implementation will require clear identification of the issues and agreed-upon SOPs.

The UN’s 2021 statement on Mutual Recognition\textsuperscript{13} “allows a UN corporate entity to use or rely on another entity’s policies, procedures, system contracts and related operational mechanisms for the implementation of activities without further evaluation, checks or approvals being required.”

**Monitoring as One**

A robust theory of change, results framework, and monitoring plan was fundamental in demonstrating how resources contributed to outcomes.

A regional M&E Task Force, led by UNFPA, combined UN agency expertise to develop and maintain the results framework, facilitate programme reviews, coordinate the baseline, mid-term review and end-of-programme evaluation, provide technical support to country offices, and inform knowledge product development and dissemination.

The joint results framework minimized multiple reporting and was an opportunity to look at data across countries, enabling the PUNOs to better identify gaps, re-direct resources, and make adjustments to programme implementation. The framework was part of a common data platform, Data for All, that tracked regional and country-level programme activities, milestones, intended results, rationales, progress, budget allocations and expenditures. Available to the agencies’ country offices, the Data for All platform was useful in joint evidence generation, analysis, and use, and in identifying gaps in national data management systems that then benefited from additional technical support.

The M&E framework was integral to informing programme decisions and steering programme implementation. However, the RIWG agreed that the initial M&E framework was overly complex, too detailed, and contained too many indicators. Over time, the balance improved as M&E processes were simplified without jeopardizing data quality and coverage.

\textsuperscript{13} https://unsceb.org/mutual-recognition; https://unsceb.org/mutual-recognition-factsheet
Communicating as One

A joint communication strategy helped amplify promising practices, and fostered south-to-south learning.

What's in a name?

Naming the programme was a participatory process, with regional and country office engagement. These conversations around a name and brand helped the PUNOs forge a common identity, broaden the understanding of SRHR, and further foster the concept of DaO.

Under the guidance of the RIWG, a regional Communication Task Force, led by UNICEF, oversaw the implementation of the 2gether 4 SRHR Communication Strategy through regional and country-based activities. The Communication Task Force was given authority to make decisions in accordance with the objectives, approach and scope of the approved Communication Strategy and to represent the communication voice of the respective agencies. The Communication Task Force guided and monitored implementation of the regional communication action plan; provided guidance on branding; documented lessons learned and promising practices on integration of SRHR, HIV and SGBV; supported high-level advocacy interventions at regional and country levels; and provided technical support to country-level flagship communication activities. The Communication Task Force built on each agencies’ communication architecture regionally and in-country, capitalizing on the expertise of their communication specialists.

A Brand Guide served as guidance on the development of visibility materials and the use of the 2gether 4 SRHR name and logo. The Brand Guide emphasized the importance of communicating as ‘One UN Voice,’ rather than four separate UN agencies, each with their own distinct logos and branding styles. This approach made certain that recognition was given to the collective efforts of 2gether 4 SRHR, rather than any single agency, and ensured recognition for Sida.

Together, the Joint Communication Strategy and Brand Guide promoted collective ownership, a harmonized approach to knowledge sharing, and consistency in tools, materials and other resources produced through 2gether 4 SRHR. The experiences and evidence generated through the programme were shared primarily in 2021 and 2022, after the programme had time for implementation. A diverse range of media was used, including UN corporate publications, communities-of-practice meetings, websites, peer-reviewed journal articles, press releases, news and social media, and partners working on SRHR and HIV in the region and globally. Joint dissemination also expanded programme reach as each PUNO shared information through their respective networks.

Generating and sharing evidence on adolescents and SRHR, HIV, SGBV and mental health

The “hey baby” research study, a University of Cape Town-Oxford University collaboration supported by 2gether 4 SRHR and other funding partners, is examining protective pathways to promote resilience among adolescent parents and their children. The research team has generated robust evidence to inform health and social policy and programming supporting young families. Findings have reached a global audience through high-impact peer-reviewed publications and policy briefs, presentations, trainings, workshops, webinars and consultations. Lessons learned from engaging remotely with adolescents and young people have been compiled into a practical toolkit to assist other researchers, policy makers, and implementing organisations who are undertaking or planning to undertake remote research with adolescents and young people.

14 https://www.heybaby.org.za/home
Final reflections

DaO is not one big change that occurs at once – it is many incremental changes, involving people who are committed to moving in the same direction over a period of time and requiring supportive structures and systems.

2gether 4 SRHR contributed to SRHR becoming more prominent as a regional priority, in keeping with the UN’s 2018 “Call to action to attain universal health coverage through linked sexual and reproductive health and rights and HIV interventions.” Universal access to SRHR is key to achieving the SDGs, but no single agency or government department can do it alone. Sida’s investment in 2gether 4 SRHR was catalytic in pushing the SRHR agenda forward regionally and in the ten partner countries. The joint structure contributed to building synergies across and within UN agencies, regional bodies and national governments, brought on board other key players, and emphasized agencies’ using comparative advantages to achieve objectives. In keeping with the principles of DaO, 2gether 4 SRHR had a greater impact on policies and programme results by the PUNOs working collectively, rather than individually.

At USD 57 million, 2gether 4 SRHR represented Sida’s largest SRHR investment to date. Sida’s long-term approach and deep commitment to government ownership, partnership, and multilateralism were fundamental to the programme’s success. Multi-year, predictable funding facilitated agencies’ ability to implement complex and politically-sensitive activities and achieve measurable results at both regional and country level.

Working jointly helped to decrease duplication of efforts and overcome organizational fragmentation. For example, UNFPA and UNICEF both have a strong focus on adolescents and young people; WHO and UNFPA both work on comprehensive abortion care; and UNAIDS and UNFPA both address the rights of key populations. 2gether 4 SRHR provided the framework for increased collaboration, leading to a compound effect. The joint programme also promoted peer support among agencies as the PUNOs collaborated on sensitive issues.

The joint programme strengthened linkages with other regional initiatives, further deepening the work on SRHR. These included activities supported by the Regional AIDS Team for East and Southern Africa, the UBRAF, the ACCESS Initiative on comprehensive abortion care, the Spotlight Initiative on GBV, and the Safeguarding Young People Programme. These cross-sectoral collaborative efforts enabled the region to benefit from the full technical expertise available across the PUNOs.

2gether 4 SRHR increased UN coherence between development and humanitarian assistance. During the COVID-19 pandemic, the PUNOs joined efforts to support service continuity and mitigate the impact of the pandemic on SRHR, HIV and SGBV prevention and services. Three waves of joint monitoring of the disruption of services regionally were undertaken, and the data used to inform advocacy efforts to sustain the delivery of services. Also, Sida’s flexibility and additional resources enabled the joint programme to adjust to shifting priorities and new work modalities, resulting in a rapid response to the initial decline in demand for and availability of SRHR and HIV services.

In 2021, in his report to Member States, the UN Secretary General António Guterres called for the UN to improve “our collaboration and strategic engagement with other actors and forums at the global and regional levels, while also maximizing our comparative advantage in service of the people who need us most.” The following reflections are offered in support of the Secretary General’s call to action:

Leadership commitment is vital for success. Sida, the Regional Directors and the Deputy Regional Directors provided a conducive environment that encouraged collaboration across the PUNOs’ technical teams, supporting the successful implementation of this joint programme.

Concerted efforts are required to identify and promote synergies between UN agencies and to develop a common understanding of DaO, especially at the regional level. Joint programmes can benefit from dedicated technical staff who design, plan, implement and monitor the programme. Reduced duplication, fragmentation and competition for funds does not happen by accident. 2gether 4 SRHR posed an opportunity to approach global commitments through a regional lens, develop a more strategic and coherent approach to SRHR, SGBV and HIV, and maximize the UN’s impact.

Working regionally is not the same as working in multiple countries. The 2gether 4 SRHR leadership, from the start, made a deliberate decision to strengthen relationships with Regional Economic Communities and identify issues that would benefit from regional support. The SADC SRHR Strategy and Scorecard and the communications activities amplifying lessons learned serve as examples of how working jointly and regionally added value to advancing SRHR within the countries. Importantly, the impact of these efforts extended beyond the ten countries, reaching additional countries in the region.

UN agencies have an opportunity to expand resource availability by engaging in more joint programme arrangements while donors have an opportunity to reduce transaction costs and increase coverage and impact. However, stakeholder expectations need to be clearly articulated from inception onwards, particularly as participating agencies move from programmatic cooperation and collaboration to convergence. In addition, multi-year funding is critical to influence policy change and deeply rooted social norms, such as those associated with SRHR, HIV and SGBV.

Lighter governance structures with strategic engagement of donor, UN, regional and country-level leadership will allow participating agencies to remain nimble and keep a sharp focus on results. The Strategic Leadership Forum, for example, nurtured a different level of partnership agreement between Sida and the UN, moving the UN Reform agenda forward and enhancing work with the Regional Economic Communities.

A dedicated interagency management team, such as the Regional Interagency Working Group, is essential for strategic thinking and to coordinate efforts across participating agencies and oversee day-to-day implementation. In addition, at the Convening Agent level, ensuring a well-resourced convening unit that is able to manage the programme, convene the different partners, document efforts, and provide oversight and reporting is crucial to programme success.

Putting in place systems that meet the minimum operational requirements of each participating UN agency will facilitate the operational aspects of DaO. The ‘nuts and bolts’ of DaO require having compatible operating systems. The UN Sustainable Development Group has established an Inter-Agency Advisory Group to review the 2014 UNDG guidance and develop policy options and recommendations for new guidance on joint programmes. Of note,

the revised guidance will encourage more regional and cross-border collaboration. In the meantime, joint programmes can build on the Mutual Recognition principle. Joint programmes would also benefit from capitalizing on existing tools (e.g., the RACI model). Most critically, joint programmes need to engage operations colleagues (e.g., administrative, procurement, human resources, and financial) early in the planning phase to discuss what processes are needed to operationalize a joint programme, identify potential bottlenecks and develop inter-agency solutions.

Delivering results jointly can be time-consuming and challenging. It requires individual and organizational willingness, patience, collective learning through trial and error, ongoing reflection, and acknowledging that being self-critical is important to success. It may also entail recognizing that some programmes might be better delivered by a single UN entity. However, the rewards can be significant, particularly in catalyzing action and reinvigorating commitments.

As new health and development challenges emerge that transcend national borders, combined with resource constraints, regional UN inter-agency collaboration is more important than ever. DaO is a voluntary endeavor that, as 2gether 4 SRHR has demonstrated, requires building on agencies’ comparative strengths to establish synergies that lead to better results. To paraphrase the UN Secretary General, it is how the UN will best serve the people who need it most.