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MEDIUM-TERM PLAN FOR THE PERIOD 1992-1995

SUMMARY

The medium-term plan is a rolling four-year plan that is updated every two years, except for the financial plan, which is updated yearly. Based on policy guidance received from the Executive Board on programmes, operations and external relations, it contains a strategic framework for action spanning the period of the next two biennial budgets.

While this 1992-1995 plan breaks no new ground as regards goals and strategies, it has been totally revised, and several sections are new or expanded in relation to the 1990-1993 plan. New sections include information on the "first call for children" in the introduction; implementation of the Convention on the Rights of the Child under "Major fields of activity"; and resource mobilization under "Basic strategy components". Sections that have been expanded include those on "Global strategy and the country programme process" in the introduction and on industrialized countries in the section on the dimension of UNICEF activities. Part IV on management implications for UNICEF deals more systematically with management issues than in the past. The section on external relations has been restructured and expanded in response to Executive Board decision 1990/14 (E/ICEF/1990/13).

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INTRODUCTION

A. Foreseeable socio-economic trends during the plan period

1. The rapidly changing pace of world events at the beginning of 1992 makes it hazardous to predict socio-economic trends for the coming four years. Events in Central and Eastern Europe and the former Soviet Union will have far-reaching implications for the world, yet these implications are difficult to foresee at the present time. Some aspects of the medium-term situation, however, are more predictable. Economic prospects for Africa and much of the Middle East and Latin America are poor in contrast to the continuing good prospects for Asia, especially East Asia. There is no major solution on the horizon for the debt crisis and the consequent net transfer of resources from developing to industrialized countries. Despite the Brady Plan of March 1989 and the Group of Seven meeting held in Toronto, Canada, in June 1988, the debt burden continues to dampen prospects for many of the 46 severely indebted countries. The World Bank foresees only a modest growth in international financial flows to developing countries over the next several years. World Bank predictions and those of the International Monetary Fund (IMF) for acceleration of growth rates are based on a series of relatively optimistic assumptions that include a 3 per cent average annual rate of growth in industrial countries, slightly more favourable commodity price movements, a decline in inflation and greater investment and productivity in developing countries. IMF also registers concern about the implications for developing countries of the potential demands on global savings by Eastern Europe, the former Soviet Union and the Middle East; the negative effects of the debt on prospects for attracting foreign capital; and the discouraging effect of the delays in multilateral trade negotiations.

2. There are, however, some extraordinary opportunities which, if seized and acted upon, could set the world on a new course of social, economic and political development. In both industrialized and developing countries, military budgets are being reconsidered, raising expectations for a peace dividend that could be directed to the alleviation of poverty. The dismantling of apartheid in South Africa has created a more favourable climate for the whole of southern Africa. The trend towards democratization in Latin America and Africa is involving people more in their own development. A new respect for human rights augurs well for the rights for children. The increased acceptance of the concepts of "corridors of peace" and "days of tranquillity" has created opportunities for humanizing social, political and ethnic conflicts. Although some violent conflicts of the past decade show little sign of abatement (Afghanistan, Somalia, Sri Lanka and the Sudan), and new ones have broken out (Yugoslavia and Zaire), several long-term conflicts have come to an end (Angola, Cambodia, El Salvador, Lebanon and Nicaragua). The growing effectiveness of the United Nations in helping to resolve those and other conflicts, and in dealing with emergencies, strengthens possibilities, if not for global peace, at least for the containment and early mediation of conflict.

3. Another hopeful sign for the decade is the remarkable convergence of goals and strategies among the major development assistance organizations as reflected in the International Development Strategy for the Fourth United Nations Development Decade. Never before has there been such agreement on the need for, in the words of the strategy, "a development process that is responsive to social needs, seeks a significant reduction in extreme poverty, promotes the development and utilization of human resources and skills and is environmentally sound and sustainable". The World Bank focus on poverty reduction, the United Nations Development Programme (UNDP) emphasis on human development and the growing acceptance of these same principles among bilateral donors provide the basis for hope that significant shifts in the proportion of aid allocated to human development can be achieved. Most prominent among those signs has been the extraordinary support given by heads of State and Government to follow up on the promises made at the World Summit for Children and the unprecedented speed with which the Convention on the Rights of the Child has been ratified. By the end of 1991, some 130 heads of State or Government had ratified the World Summit Declaration and Plan of Action, thereby committing themselves to preparing national programmes of action to help to implement an ambitious set of goals for children and development in the 1990s. To date, over 100 countries have ratified the Convention on the Rights of the Child. A series of regional and subregional summits in Africa, South Asia, Latin America and the Middle East has helped to maintain this momentum.

B. Goals and strategies for children and women in the 1990s

4. The Executive Board, in decision 1990/2 (E/ICEF/1990/13), approved the goals and strategies for children and development as contained in documents E/ICEF/1990/L.5 and E/ICEF/1990/CRP.2 and called upon Governments to support these goals. This call was answered on the occasion of the World Summit for Children in September of that year. (See the annex for the complete list of World Summit goals.) The 1991 Executive Board requested the Executive Director ensure that UNICEF "provides full support to developing countries within its mandate, comparative advantages and resources, for the achievement of objectives contained in the Declaration and the Plan of Action adopted by the World Summit for Children" (E/ICEF/1991/15, decision 1991/10).

5. In its decision 1990/2 approving the goals, the Executive Board stated that "the strategies for children should be situated within general development strategies and should take into account, inter alia, national capacity-building, poverty alleviation, people's, in particular women's, empowerment and participation in planning and implementation, sustainability and environmental soundness and coordinated and intersectoral policies ...". It also laid out the five major areas that would be the focus of UNICEF activities: integrated primary health care (PHC), with special emphasis on maternal and child health (MCH), including safe motherhood and family planning; food and nutrition; safe water supply and environmental sanitation; basic education, with special emphasis on girls and women; and children in especially difficult circumstances. "The principles mentioned above", states

the decision, "will guide the formulation of the UNICEF medium-term plan ...". Thus, the basic orientation and framework of this plan were laid out by the Executive Board and break no new ground as regards goals and strategies.

6. Another determinant of UNICEF planning that occurred in 1990 was the entry into force of the Convention on the Rights of the Child, which the Executive Board had so vigorously supported during the preceding several years. As of January 1992, 142 countries had signed the Convention and 107 countries had become States Parties to it by ratification or accession. While the Convention includes virtually all areas encompassed by the goals for children and development, the rights contained in the Convention are broader in scope. In its decision 1991/9 (E/ICEF/1991/15), the Executive Board urged all Governments to ratify the Convention and encouraged UNICEF to cooperate with developing countries in the following areas: (a) development of national mechanisms to gather gender-specific and area-specific data; (b) systematic incorporation of Convention issues in the situation analysis; (c) review of legislation pertaining to children; (d) relevant studies on Convention-related issues; (e) strengthening knowledge of the Convention among UNICEF staff and relevant governmental and non-governmental bodies; and (f) dissemination of information and education on children's rights among children, youth and influential groups.

7. Both the mandate to support implementation of the goals for children and development and the mandate to cooperate in the implementation of the Convention on the Rights of the Child make it clear that UNICEF support for children is being directed towards more strategic nationwide and world-wide objectives, in addition to the objectives of particular programmes and projects. This expanded role involves advocacy and social mobilization as well as monitoring.

C. The principle of a "first call for children"

8. The World Summit for Children captured the essence of UNICEF support and advocacy when it described the principle of a "first call for children", which it defined as "a principle that the essential needs of all children should be given high priority in the allocation of resources, in bad times as well as in good times, at national and international levels as well as at family levels". The report on the State of the World's Children 1992 expresses the principle similarly, by stating that "protection for the growing bodies and minds of the young ought to have first call on societies' resources ...". This is a logical consequence of the mandates given to the organization in relation to the goals for children and development and the Convention on the Rights of the Child.

9. Fundamental economic, social and political changes, at different levels and in different regions and countries, are required if child goals and children's rights are to become reality. UNICEF has an obligation to address these issues through advocacy and situation analyses. From this perspective,

in the 1980s, the organization launched the call for "adjustment with a human face" which, in the 1990s, has become a call for "development with a human face". UNICEF has spoken out on the need for debt relief for child survival and on the need for Governments to restructure budget allocations to give more to human development and less to the arms race. From this vantage point UNICEF has promoted the concept of "corridors of peace" and "days of tranquillity". UNICEF will continue to seize strategic opportunities to advocate a "first call for children" and influence the debate on global and regional issues that have a critical bearing on achieving the goals for children in the 1990s.

D. Global strategy, national programmes of action and the country programme process

10. There is a healthy dialectic between global goals and strategies and a country's national plans and actions. Global goals, such as the ones approved by the Executive Board and endorsed by the World Summit for Children, are useful in galvanizing the international community in pursuit of politically attractive, understandable and feasible objectives, and in creating a climate in which nations and communities vie peacefully to put children first and transform goals into reality.

11. In order to do this, however, each country must examine the goals in light of its own situation, its own policies and plans and its own cultural, religious and social traditions. It must select those that are applicable, adapt them to national reality, set priorities and pursue them according to the availability of resources. To achieve those goals, strategies must be formulated and programmes and projects developed. As a follow-up to the World Summit for Children, in most countries this process will take the form of a national programme of action, with specific targets, budgetary allocations, cost estimates and monitoring mechanisms. More than 100 developing and industrialized countries have engaged in this process during the past year.

12. The country programme remains fundamental to UNICEF cooperation with developing countries and is the principal means by which that cooperation is translated into action for children. The UNICEF country programme will naturally be inspired by and support the national programme of action, but UNICEF input into the national programme will be only a marginal, if catalytic, part of that effort.

13. The country programme, based on a thorough analysis of the current situation of children and women and an evaluation of past UNICEF cooperation in the country, will continue to be prepared in dialogue with the Government, based on national priorities, agreed upon by both parties and implemented, monitored and evaluated by national institutions using UNICEF financial and technical support as required. With the agreement of the Government, a portion of the country programme will be devoted to advocacy and social mobilization in support of both the national programme of action and the objectives of the country programme. UNICEF financial commitment to the

country programme will continue to be approved by the Executive Board, generally following a five-year programming cycle.

14. In addition to the funds allocated to each country programme at the start of the regular programming cycle, the Executive Board approves a limited amount of global funds that are used by UNICEF headquarters and regional offices to (a) support accelerated action in pursuit of the goals on the basis of need and opportunity; (b) support new initiatives and the exploration of innovative approaches without disrupting ongoing country programmes; (c) respond to emergencies; and (d) support activities that are less country-specific and need to be pursued in an intercountry or regional context. Together, these funds constitute about 13 per cent of annual planned programme expenditure. Of the 13 per cent, roughly three quarters are allocated to supplement country programmes and one quarter to programme support provided by headquarters.

15. Together with support for the country programme, UNICEF field staff, wherever requested by the Government, will be actively involved during the plan period in support of the preparation and implementation of national programmes of action. Such programmes are likely to become, with periodic revisions, 10-year perspective plans for children and women in nearly all countries of the world. UNICEF will provide:

(a) National-level advocacy with political, economic, social, religious, cultural, professional and community organizations and their leaders;

(b) Support for policy dialogue and strategy formulation for the achievement of goals for the 1990s and their periodic revision;

(c) Support for establishing elements essential for implementation, including national and local epidemiological capacity; management information systems; capacity to analyse systems performance with a view to increasing efficiency, effectiveness and relevance; and cost analysis;

(d) Support for sustainability of institutions and systems and national capacity-building;

(e) Support for establishing systems for monitoring and problem-solving, including affordable monitoring with a small number of useful indicators, systems of review and problem-solving and systems of accountability at different levels;

(f) Social mobilization of all sectors of society with strong input from the communications sector;

(g) Exchange of information and evaluations;

(h) Support for mobilization of such resources as domestic inputs involving review of national budgetary allocations and mobilization of community resources (including cost-sharing and options appraisal),

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development of systems of community management of its own resources as in the Bamako Initiative and mobilization of external assistance;

(i) Working with partners, especially in the areas of developing of indicators and monitoring systems, complementarity of inputs and exchange of ideas and experience.

16. As can be seen from the above, UNICEF support of national programmes of action is in complete harmony with support to UNICEF-assisted country programmes. In both cases, UNICEF is a partner of the Government, working within the framework of national policies, plans and priorities and actively pursuing the development of sustainable national capacity.

17. In close collaboration with other United Nations agencies, UNICEF also has a special responsibility with regard to periodic reporting on progress towards achieving the goals of the Plan of Action of the World Summit for Children, as called for in paragraph 34 (v).

I. MAJOR FIELDS OF ACTIVITY

18. At the operational level, country programmes are multisectoral and synergistic. For purposes of planning and analysis, however, specific activities designed to achieve the goals for children and development are separated into several major programme areas in keeping with Executive Board decision 1990/2.

A. Primary health care

19. The challenge facing UNICEF in the health sector during the 1990s is to support countries in universalizing access to knowledge, technology and health care to reduce morbidity, mortality and malnutrition among children and women significantly. This implies the strengthening, revitalization or establishment of PHC structures and systems to achieve key health sector goals in the 1990s. Owing to the achievement of universal child immunization (UCI) globally, there are now over 500 million contacts between health systems and families annually. During the plan period, UNICEF will support the broadening of immunization structures into PHC structures and the incorporation of management information systems into all these structures.

20. Working closely with the World Health Organization (WHO) and the United Nations Population Fund (UNFPA), UNICEF will collaborate with Governments, non-governmental organizations (NGOs), the private sector and international and bilateral specialized and development agencies to facilitate the redefinition of national and global health strategies and activities, especially in the areas of children's and women's health and family planning. Support will also be provided to define an integrated set of services more responsive to national and local needs, in terms of both culture and local epidemiology, to strengthen national management capacity and to broaden financing options in pursuit of equity, sustainability and self-reliance.

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21. At the global level, UNICEF will work to strengthen collaboration with such allies as, inter alia, Rotary International, Junior Chamber International, the NGO Group on Primary Health Care and the Christian Medical Commission/Pharmaceutical Advisory Group to promote the expanded PHC focus.

Child health

Reducing infant and under-five mortality rates

22. Achieving the goal of reducing mortality among infants and children under 5 years old by one third, or to 50 and 70 per 1,000 live births, respectively, whichever is less, will require the cumulative impact of efforts to reach many of the other goals for the year 2000. The causes of infant and child mortality are numerous and multi-tiered. The immediate cause of a child's death is usually a disease that is often preventable or could be readily treated with low-cost interventions. Behind these immediate causes of death, however, lie such factors as malnutrition, ignorance and, ultimately, poverty and inadequate human development. To reduce mortality, it is necessary to emphasize the intersectoral nature of the problem and for the services of various sectors to converge in time and place and to be available to those most in need. Infant health and the risks of infant mortality are also intimately linked to maternal health and perinatal problems.

23. To reduce the infant mortality rate (IMR) and the under-five mortality rate (U5MR), three principal sets of convergent activities will be supported: (a) the control of specific diseases that are major killers and for which feasible responses exist; (b) the identification and focus of activities on geographically and/or socio-culturally identified populations with high IMRs and U5MRs; and (c) the convergence of supportive actions in health communications, social mobilization, education and other related areas.

24. While the relative significance of specific diseases will vary from country to country and from region to region, major causes of child deaths in countries and regions with high IMRs and U5MRs are most likely to be vaccine-preventable diseases, diarrhoea, acute respiratory infections (ARI), malaria and perinatal problems, many of which are related to the condition of the mother during pregnancy (see tables 1 and 2 below).

Table 1. Immediate causes of death among children under five years of age in developing countries a/

	(In millions)
Acute respiratory infections (including neonatal pneumonia)	4.3
Diarrhoea	3.0
Malaria	0.8
Other	<u>4.8</u>
Total	<u>12.9</u>

Table 2. Vaccine-preventable deaths among children under five years of age in developing countries a/

	(In millions)
Measles	0.9
Tetanus	0.6
Pertussis	0.4
Deaths not currently preventable by vaccination	<u>11.0</u>
Total	<u>12.9</u>

Source: WHO, based on the United Nations Population Division estimates of total deaths.

Note: Measles and pertussis vaccines prevent mainly ARI deaths. Measles vaccine also prevents deaths due to diarrhoea. Tetanus vaccine prevents neonatal deaths (included in table 1 in the category of "other").

a/ 1990 estimates.

25. In many parts of the world, acquired immune deficiency syndrome (AIDS) is now likely to increase the number of deaths of infants and young children. If high levels of immunization coverage are sustained and disease control programmes for diarrhoea and ARI are implemented along with improved maternal nutrition, clean birth delivery, child spacing and family planning, IMRs and U5MRs could be reduced significantly. Unfortunately, consensus has not yet been reached on how best to control malaria. It is hoped that the ministerial-level meeting on malaria scheduled for the autumn of 1992 in the Netherlands will provide broad guidelines for future action. In the meantime, the use of impregnated bed-nets, together with symptomatic treatment of children in malaria-endemic areas, will be further pursued. Until a vaccine for AIDS is available, the spread of the disease will have to be controlled principally through preventive measures, especially through changes in sexual behaviour in vulnerable groups.

26. A significant overall reduction in IMRs and U5MRs will not take place, however, if actions are not focused on areas and social groups with the highest mortality rates. Actions such as improved nutrition, basic education, support for economic activities, provision of water supply and sanitation, birth spacing and the improved role and status of women will make major contributions to reducing infant and child mortality and to sustaining the rates at lower levels. Two additional factors that will also contribute significantly are improved technologies (especially new and better vaccines) and new roads into the control of AIDS in endemic areas. Finally, the empowerment of people with the knowledge and information required to lead a better life and take preventive measures (as summarized, for example, in Facts for Life messages), will assist in the reduction of infant and child mortality.

Immunization

27. Immunization coverage reached a global average of 80 per cent at the end of 1990. The challenge for the 1990s is to sustain this coverage and extend it still further, both in countries that have reached the target and in those that have not. Immunization programme goals for the 1990s include: (a) reaching 90 per cent of children under one year of age by the year 2000 for diphtheria, pertussis, tetanus, measles, poliomyelitis and tuberculosis and immunizing women of child-bearing age against tetanus; (b) reducing by 95 per cent measles deaths and reducing by 90 per cent measles cases, as compared to pre-immunization levels, by 1995; (c) eliminating neonatal tetanus by 1995; and (d) eradicating poliomyelitis world-wide by the year 2000. UNICEF will support the inclusion of yellow-fever vaccine in the expanded programme on immunization (EPI) as of 1992 and also the introduction of new and improved vaccines as they become available and affordable

28. UNICEF will focus its primary attention and resources on consolidating, strengthening and sustaining EPI as a whole; improving the quality of services; enhancing management capacity; increasing cost-effectiveness and programme efficiency; and promoting improved coverage in areas and countries that are below the 80 per cent target. This will require significant attention to operations analysis, replacement of cold-chain and injection

equipment, continued provision of vaccines and additional support for training, monitoring and evaluation. The establishment of management information systems will be encouraged and programmes will focus on improving national and subnational epidemiological capacity to monitor the incidence of disease and to set up rapid response systems to control disease outbreaks.

29. UNICEF will work closely with WHO and other partners to assure adequate high-quality vaccines to meet the needs of the programme in the 1990s. Forecasts of vaccine requirements indicate that volume will increase significantly over 1990 levels. Prices have been rising recently. Vaccines procured by UNICEF are currently projected to increase from 967 million doses in 1990 to 1,233 million doses in 1992, with almost a doubling in total cost. A strategy has been developed that includes supporting countries that have the capacity to become self-sufficient in vaccine production; soliciting support of the donor community to provide more funding for the procurement of vaccines for EPI; facilitating, through the Vaccine Independence Initiative, the procurement of vaccines on behalf of Governments, with either convertible or local currencies; and planning to assure the supply of much higher quantities of vaccines through current and/or new sources. Implementation of this four-part strategy will, however, take some time. Meanwhile, the priority for vaccine supply will be to meet the needs of the routine programme, which targets children under one year of age. UNICEF will also participate in the Children's Vaccine Initiative to develop and procure new and improved vaccines, which will make immunization programmes more effective.

30. The goal of a dramatic reduction in measles cases targeted for the 1990s is expected to be achieved by reaching high levels of coverage of children in all communities. In addition, case-finding and rapid response to outbreaks will be required. In many countries, infants contract the disease prior to receiving their vaccinations, which highlights the urgency for a vaccine that can be given earlier in life. UNICEF will work closely with WHO and other partners in the Children's Vaccine Initiative to develop, test and manufacture vaccines that can be used at or before six months of age.

31. The elimination of neonatal tetanus will be attempted through a two-pronged strategy: the immunization of all women prior to delivery and the provision for a hygienic birth with a trained health worker. The immunization of women of child-bearing age with tetanus toxoid is the most viable strategy. School-aged girls are an obvious target population. Strong social mobilization efforts will be required to raise coverage levels. Priority should be given to women at highest risk, and vaccine quality must be assured. UNICEF will work with WHO to assure vaccine quality and assist Governments to reach high levels of coverage and to develop sufficient epidemiological capacity to target high-risk areas.

32. The global polio eradication strategy includes augmenting routine infant immunization with special mass immunization campaigns, targeting children under the age of five years old, and rigorous case-finding and local outbreak control. These special activities, when implemented globally, will require approximately a tripling of vaccine volume. Tentative estimates are that the

cost (to UNICEF and/or Rotary International) for polio vaccines could be as high as \$30 to \$40 million annually. The Rotary International Polio Plus programme has indicated that it will phase down the 1992 commitment of \$33 million to \$15 million annually by 1995. Unless other donors are found, the funds required of UNICEF for polio vaccines will increase dramatically. UNICEF fund-raising efforts continue to give priority to immunization; a goal for private sector fund-raising has been set at \$20 million annually by the end of the plan period. At the same time, UNICEF will work closely with WHO and Rotary International to review potential alternative strategies that require fewer vaccines and to test the efficacy of these strategies in the polio eradication effort. This process is likely to take two to three years and can be done in conjunction with the development and perfection of case-finding/rapid response capacity. Countries that have high coverage rates and are committed to the eradication of polio by 1995 could serve as test sites for the alternative strategies. This would avoid the loss of political momentum and could set the stage for a massive global drive beginning in 1995 and lasting through the year 2000.

Control of diarrhoeal diseases

33. Since the endorsement of the WHO/UNICEF health goals by the World Summit for Children, the control of diarrhoeal diseases (CDD) has been given higher priority among the many national health programmes to which UNICEF lends its support. Increased attention to CDD is essential for reducing IMRs and U5MRs and for contributing to the reduction of malnutrition among young children. The means for achieving substantial reductions in mortality from diarrhoeal diseases, especially deaths from acute watery diarrhoea, are now well within reach.

34. To accelerate action in this area, a joint WHO/UNICEF strategy meeting was held in April 1991. The meeting reached consensus on several basic principles, including the need to support CDD at the national level as well as in area-based PHC initiatives; the importance of setting clear national targets; the essential role of feeding in successful oral rehydration therapy (ORT); and the substantial contribution of persistent diarrhoea and dysentery to death among young children from diarrhoea. The meeting also outlined several lines of action to expand current CDD efforts.

35. UNICEF and WHO agree that the following combination of targets could achieve a 50 per cent reduction in diarrhoea-related mortality, compared with the mortality that would have occurred if no improvements were made in case management after 1990: (a) 80 per cent use of ORT, plus feeding, for all cases of diarrhoea could prevent 30 per cent of the mortality; (b) 50 per cent correct use of antibiotics in 50 per cent of cases of dysentery correctly diagnosed could prevent an additional 6 per cent of the mortality; and (c) 50 per cent use of correct dietary management for cases of severe persistent diarrhoea could prevent an additional 14 per cent of the mortality. Five basic indicators were also identified that could be used to measure progress towards the mortality reduction goals. These include ORT use, plus feeding; provider compliance with oral rehydration salts (ORS);

access to ORS; access to home case management; and maternal knowledge of the three rules of home case management (continued feeding, increased fluids and knowledge of when to seek help).

Acute respiratory infections

36. As can be seen from table 1 above, current WHO estimates identify ARI as the leading cause of death among children under five years of age. At present, 10 to 20 per cent of children who contract pneumonia die, with fatality rates highest among children under 2 months of age. This results in approximately 4.3 million deaths per year, or 12,000 every day. UNICEF and WHO have developed a twofold strategy for controlling ARI which involves standard case management and immunization. Standard case management, the central strategy to reduce mortality from ARI, principally pneumonia, involves early recognition of the signs of pneumonia (by counting respiratory rates and the identification of chest in-drawing) and administration of an appropriate antibiotic to children suffering from the disease. Immunization, the second strategy, can prevent ARI in children caused especially by pertussis and measles. Up to 20 per cent of pneumonia cases are linked to those preventable diseases. By reducing the incidence of disease, those vaccines also contribute to reducing ARI deaths. The strategy includes the empowerment of families with knowledge about how to deal with ARI in children.

37. In addition, efforts are under way to learn more about other factors that contribute to the incidence of lower respiratory infections, including low birth weight, malnutrition, specific nutritional deficiencies (e.g., vitamin A), exposure to cold and overcrowding. More research is needed on the type and design of interventions to reduce these risk factors, and thus reduce the incidence of pneumonia among young children. Successful ARI efforts will, however, depend upon national policies allowing community-level health workers to use antibiotics for the treatment of ARI (with training and under close supervision) and the availability of drugs at the community level. In Africa, the supply of drugs could be sustained through the Bamako Initiative.

Acquired immune deficiency syndrome/human immunodeficiency virus

38. The AIDS pandemic continues to worsen. WHO estimates that as of 1991, there were 5 to 6 million men and 3 to 4 million women already infected with the human immune deficiency virus (HIV), and HIV-infected women have given birth to almost 1 million infected children. By the year 2000, a total of 30 to 40 million men, women and children will have been infected with HIV. By the year 2000, WHO expects over 1 million AIDS deaths, with the majority of these in developing countries - primarily in Africa, but with substantially increasing numbers in Asia.

39. The overwhelming majority of adults who are infected with HIV are exposed to the virus through unsafe sexual practices, while most children are infected by transmission from mother to child. To date, about two thirds of the transmissions are through heterosexual sex, and this proportion is likely to rise to 80 per cent by the year 2000. A small percentage of infections are

caused by the use of unsterilized needles, syringes and contaminated blood products, which are the modes of transmission that have been most successfully blocked by technical interventions. Together with WHO, UNICEF has espoused the use of a single sterile needle and syringe per child in all immunization activities, either through sterilization before and after each use or through the employment of disposable syringes and needles. This knowledge and practice needs to be extended to the use of all skin-piercing instruments.

40. During the plan period, UNICEF will focus on a small but progressively increasing number of selected countries, with emphasis on preventive measures using modern and traditional means of communication to promote behavioural changes. Additional measures will focus on promoting reproductive health and the control of sexually transmitted diseases (STDs) in order to reduce HIV transmission further. In these endeavours, UNICEF will work closely with Governments, community leaders, NGOs, religious and social organizations, the media, opinion-makers, the WHO/Global Programme on AIDS and other multilateral and bilateral organizations.

41. At the global level, an information/communications strategy on AIDS, with emphasis on education and prevention within the context of supportive mechanisms and informed and responsible sexuality is needed. This will be a particular priority of UNICEF, with a special focus on Africa, Asia and the Caribbean.

42. WHO estimates that there will be 10 million to 15 million AIDS orphans by the year 2000, most of them in sub-Saharan Africa. Based on experience gained, UNICEF is now pursuing programmes for AIDS orphans using non-institutionalized family and community-based services, with provision for vocational training and AIDS education so that the orphans may grow up in good health and in a supportive environment.

The Bamako Initiative

43. The growing experience in management, financing and community comanagement acquired in the Bamako Initiative will enable UNICEF to play a significant role in strengthening national and local capacity to provide such basic health services as immunization, prenatal care, curative services for malaria, respiratory and diarrhoeal diseases and mechanisms to counter the negative impact of AIDS. This is being done by building on the skills acquired during the acceleration of EPI in the fields of management, communication and information systems. The medium-term objective of UNICEF is to strengthen health services throughout sub-Saharan Africa, as well as in other countries most seriously affected by the economic crisis of the 1980s - up to 50 countries in all - by mid-decade. The empowerment of communities to oversee health services and initiate health promotion will increase local capacity and confidence, enabling them to play a pivotal role in such other sectors as basic education and nutrition.

Malaria

44. The incidence of malaria and the geographical spread of drug-resistant parasites are on the rise, especially in Africa. UNICEF will continue to support the provision of drugs within the framework of the Bamako Initiative. Special efforts will be made to ensure the constant availability of drugs for malaria cases in children and for treatment and prophylaxis of pregnant women. Interesting experiments with impregnated bed-nets are being carried out in a number of countries with UNICEF support. Preliminary results are very encouraging and should lead to the widespread use of this technique.

Children with disabilities

45. Childhood disability will remain a priority focus. The elimination or reduction of disabilities due to poliomyelitis, iodine deficiency disorders (IDD), vitamin A deficiency and severe malnutrition, as well as the improved protection of disabled children, are included among the goals for children and development in the 1990s. Disabled children constitute one of the categories of children in especially difficult circumstances. As more children survive, their quality of life will need extra attention. UNICEF will continue to focus on prevention, early detection and community-based rehabilitation. Increased attention will be given to the psycho-social effects of armed conflict and to the rehabilitation of children maimed and/or traumatized by war.

Women's health and maternal health

46. UNICEF is concerned about the health of women and women as mothers. The unacceptably high maternal mortality rate (MMR) resulting in 500,000 maternal deaths each year, 99 per cent of them occurring in developing countries, is a sign of the inferior status accorded to women in many parts of the world.

47. The goal of reducing maternal mortality by one half by the year 2000 will be pursued within the context of the safe motherhood initiative, with UNICEF focusing its activities at family and community levels, and on linkages with, and the strengthening of, the first referral level. One of the most significant contributions to the reduction of maternal mortality is the prevention of early marriage and the knowledge and practice of child spacing. Activities in support of improved health for women and mothers will be carried out together with measures for the improved role and status of women, increased income, reduction in the workload of, at least, pregnant women and the recognition of the need of pregnant women for more food and rest.

48. At the community level, trained traditional birth attendants (TBAs), community health workers, auxiliary nurses or midwives can help pregnant women to improve their nutritional status by distributing iron and folic acid supplements to those with anaemia and by providing tetanus toxoid immunization, malaria prophylaxis in endemic areas and risk-screening. Continued emphasis on hygienic delivery will be required, using the principle of the "three cleans" (clean hands, clean surface and clean handling of the

umbilical cord). Additional emphasis will be placed on the early identification of post-partum sepsis and the appropriate use of antibiotics for treatment. Using the current EPI/PHC structures, these services could be delivered with limited additional training and support. Improving women's health will be assured through proper provision of antenatal care and attention to women's concerns.

49. UNICEF support to the first referral level will build on existing services. Two areas that need particular attention are the establishment of community transport systems and maternity waiting homes for risk referrals. These and other pragmatic, efficient measures for women most in need are expected to have a significant impact on reducing MMRs.

Family planning

50. According to the Plan of Action of the World Summit for Children, "all couples should have access to information on the importance of responsible planning of family size and the many advantages of child spacing to avoid pregnancies that are too early, too late, too many or too frequent". It is now accepted by national leaders that family planning needs to be practised not only for its contribution to national development, but also for improved MCH. At the same time, experience has indicated that family planning programmes are more successful when families have both the desire and the requisite knowledge. The desire to have a smaller family grows with the better chances of survival of the offspring, improved socio-economic status, better education, especially for girls and women, and the improved role and status of women. The knowledge that pregnancies that are too early (before 18 or even 20 years of age), too late (after 35 years of age), too frequent (less than 30 months apart) or too numerous (over 3 or 4 children) are dangerous to both mother and child provides a strong motivation for family planning. As the issue is a sensitive one, the choice of family planning method or methods within each country will depend on its national policy and social, cultural and religious factors.

51. Within the limits of its policy and mandate, and as set out in the February 1991 joint letter to the staff of WHO, UNICEF, UNDP and UNFPA on MCH and family planning, UNICEF will work closely with these agencies, as well as with bilateral agencies and NGOs, to integrate activities for the responsible planning of family size into country programming in accordance with national policies and with a view to greater complementarity of approaches. Building on this principle of complementarity, UNICEF will concentrate on those areas in which it has some comparative advantage - information, education and communication (IEC) on birth spacing and responsible parenthood. Special emphasis will be given during the plan period to discourage early marriage and early pregnancies. Further elaboration of UNICEF policy in this regard is presented in document E/ICEF/1992/L.13.

B. Food and nutrition

52. Nutritional status is the result of many development processes. Inadequate dietary intake, infection and disease, most often in combination, are the most immediate significant causes of malnutrition. Mild protein-energy malnutrition doubles the risk of mortality, while its severest form increases the risk threefold. The lack of household food security, inadequate care for children and women, the lack of health services and an unhealthy environment are underlying causes of malnutrition. These causes are themselves functions of the availability and control of resources, which are determined by ecological, economic, political and cultural factors.

53. UNICEF will address the causes at all levels by pursuing and promoting four strategies, as described in "Strategy for improved nutrition of children and women in developing countries" (E/ICEF/1990/L.6):

(a) Control of the three major micronutrient deficiencies (vitamin A, iodine and iron);

(b) Protection, promotion and support of breast-feeding and improved child-feeding practices;

(c) Community participation and empowerment through improved assessment, analysis and capacity to design and implement sustainable actions (the "triple A" approach), including support to community organizations and the use of growth monitoring and promotion;

(d) Improved national nutrition policies and strategies through policy dialogue, training and the use of improved information systems (nutrition surveillance).

54. National and international commitments to promote and support national programmes to overcome micronutrient malnutrition were substantially enhanced by the international policy conference on "Ending hidden hunger" held in Montreal in October 1991. This meeting, convened by WHO and UNICEF, cosponsored by the Food and Agriculture Organization of the United Nations (FAO), UNDP, the World Bank, the Canadian International Development Agency (CIDA) and the United States Agency for International Development (USAID) and organized by the Task Force for Child Survival and Development, was a direct follow-up to the World Summit for Children. It focused on the goals of virtually eliminating vitamin A and iodine deficiencies and significantly reducing iron-deficiency anaemia, especially among women. Because of their potential for achieving a highly positive, cost-effective impact on the health and well-being of large numbers of children around the world, these nutrients, although needed in tiny amounts, have been called "super-micronutrients".

55. It is clear that some countries will attain the micronutrient goals before the end of the century. UNICEF will support national programmes containing appropriate components related to dietary diversification and food fortification and supplementation. Support will be integrated as much as

possible into broader programmes of improved health and nutrition that are designed to increase awareness of these problems and demand for long-term, sustainable solutions. At the global and regional levels, UNICEF will continue to support training and support activities and the work of other bodies.

56. Enabling all women to breast-feed their children exclusively for four to six months and to continue breast-feeding, with complementary food, well into the second year is one of the supporting goals for children and development in the 1990s. Pursuit of this goal will help to reduce infant and child mortality as well as malnutrition. In addition to its direct nutritional value, breast-feeding is a source of protection against infection and contributes to women's health by reducing the risk of breast and ovarian cancer and by increasing the space between pregnancies.

57. One important strategy for achieving the breast-feeding goal during the plan period will be the "baby friendly" hospital initiative. Hospitals are designated "baby friendly" when they have made it standard practice to complete the "Ten steps to successful breast-feeding" proposed in the WHO/UNICEF "Joint statement on protecting, promoting and supporting breastfeeding: the special role of maternity services". This initiative is being implemented at the country level in such a way that it accelerates the promotion, protection and support of breast-feeding and gradually makes hospitals more PHC-oriented. The readiness of the infant formula manufacturers who belong to the Infant Food Manufacturers Association to cease distribution of free and low-cost supplies to hospitals and maternity wards in developing countries makes the initiative attainable in a shorter period. At the global level, UNICEF is working with the media on this issue, providing information materials and support, while helping to mobilize action through its network of contacts. This is a time-bound initiative that should be completed well before the end of the plan period.

58. The promotion of breast-feeding and adequate weaning practices among mothers who do not give birth in hospitals will be the objective of a more sustained effort. The problem of working mothers will be given special attention. UNICEF will continue to advocate and support implementation of the International Code of Marketing of Breast Milk Substitutes.

59. The third strategy will involve a review of community-based, nutrition-oriented programmes. The aim is to expand these area-based programmes by linking them more closely with national programmes. Three criteria will be used for monitoring the success of nutrition-oriented, area-based programmes. The programme should: (a) expand to new areas within three to four years; (b) expand at a decreasing external cost per beneficiary; and (c) become increasingly sustainable in the original areas of operation. Growth monitoring and promotion, at present being reviewed by UNICEF, will not be implemented in isolation, but as an integral activity in more comprehensive community-based programmes.

60. The last strategy - the most important in the long term - will involve an intensified dialogue with key planners and decision makers in the Government and other institutions. These discussions aim to establish a national consensus about the causes of malnutrition, using the conceptual framework of the nutrition strategy that underlines the necessity of household food security, adequate health services, a healthy environment and adequate care for children and women. Programmes will be developed as required in these areas in response to country needs. Globally, capacity-building, including the training of staff, participation in reviews and the preparation of national nutrition policies, strategies and programmes, will be given highest priority. Also at the global level, UNICEF will draw the attention of the media to nutrition issues, including breast-feeding and micronutrients, and will develop an information strategy and materials for the International Conference on Nutrition to be held in 1992.

61. The establishment of improved nutrition surveillance systems will be crucial to monitor the efficiency of all four strategies and to attain the nutrition goals for the 1990s.

C. Safe water supply and environmental sanitation

62. The International Drinking Water Supply and Sanitation Decade, which ended in December 1990, reached an additional 1,350 million persons with water supply and 750 million with sanitation. Despite this achievement, an estimated 1,230 million people (31 per cent of the world's total) are still without access to safe water supply and 1,740 million (43 per cent) are without access to sanitary excreta disposal. The consequences in terms of human health and suffering, as well as social and economic cost, are staggering. To make clean water and basic sanitation accessible to the still unserved is a major challenge of the 1990s. The Decade has left workable models and approaches for effective programming of water supply and sanitation inputs. The challenge now is to secure the resources - human, material and financial - to do the job.

63. Globally, UNICEF will continue to advocate shifting the allocation of bilateral and multilateral aid in this sector to lower-cost systems. Relatively minor changes in the percentage of all government expenditure and external assistance from high-cost systems to intermediate- and low-cost ones could produce dramatic increases in coverage. Water supply and sanitation issues will be featured in UNICEF publications and media work and will be presented in the context of overall environmental concerns.

64. At the level of the country programme, UNICEF will endeavour to increase further its financial support for water supply and sanitation programmes over that of the previous period. It is hoped that this higher level will be maintained through additional supplementary funding. In implementing these programmes, greater priority will be given to sanitation and hygiene education, community management for the maintenance of sustainable systems and social mobilization to serve as a catalyst. Indicators are being developed to

monitor the efficiency of water supply systems. All water supply and sanitation programmes will be closely linked with CDD programmes and with other control programmes of water-borne and water-washed diseases. Priority for UNICEF-supported water supply programmes will be given to areas with water-related diseases so that the additional benefit of disease control or eradication can be achieved. Technical cooperation among developing countries (TCDC) will be encouraged with respect to experience and information sharing, while UNICEF will continue to work closely with WHO, UNDP and the World Bank towards the goals of universal access to safe drinking water and sanitation by the year 2000.

65. UNICEF is working to eliminate dracunculiasis (guinea-worm disease) during the 1990s by providing a safe water supply and health education. This disease, which has been largely eliminated from Asia and the Middle East, still afflicts some 10 million persons in Africa, causing great pain, loss of productivity and absence from school for thousands of children. Two highly endemic countries, Ghana and Nigeria, have reduced the number of cases by 30 and 40 per cent, respectively, over a one-year period. With such progress as a stimulant, UNICEF will intensify its efforts, in collaboration with WHO, UNDP, the Global 2000 project of the Carter Center in the United States and other interested organizations, to eliminate the disease within the target period.

D. Basic education

66. As a follow-up to the World Conference on Education for All goal of meeting basic learning needs, and within the context of national programmes of action, UNICEF will support efforts by developing countries to prepare national plans of action on education for all. The principal thrust in basic education will be to work towards the universalization of primary education. UNICEF, together with the United Nations Educational, Scientific and Cultural Organization (UNESCO), UNDP and the World Bank, will give special focus to the 10 most populous developing countries in order to reduce drastically the number of out-of-school children and illiterate adults in the world by the year 2000.

67. UNICEF will work closely with Governments, external donors and NGOs to extend formal school systems, adapting programmes as necessary to specific circumstances so as to reach disadvantaged and underserved children. In many countries, Governments will be encouraged to re-examine their budgetary allocations to accord a higher proportion for primary education and to improve the efficiency and effectiveness of schools.

68. In many countries, it is unlikely that primary education can extend throughout the country through the formal school system alone. Alternative ways of providing primary education will be explored and pursued, together with measures to give full recognition to these programmes as equivalents of primary schooling. Schools run by the Bangladesh Rural Advancement Committee are good examples of effective alternative schools, reaching those not served

by regular primary schools with equal and often more effective results. In pursuing basic education for all, UNICEF will promote and support provisional approaches and temporary structures that will serve until more permanent, and often more costly, structures can be established.

69. While the issue of quantitative access to universal primary education will remain a principal concern for most countries in South Asia and Africa, the challenge of improved efficiency, effectiveness and relevance needs to be addressed by all countries. Increased efficiency will be an objective for all countries through such measures as the minimization of drop-out rates, better quality training of teachers, improved effectiveness of teaching and teaching standards and making learning more relevant to life.

70. The World Conference on Education for All adopted learning achievements rather than the number of years in school as the criterion for success in basic education. A commonly accepted method of determining achievements that would also be simple and easy to use on a wide scale has not yet been developed. Systematic work needs to be undertaken, including trials in a few countries, to devise systems for testing the learning achievements of individual students and the efficiency of the system.

71. In many parts of the world, male/female disparity remains high, and girl children constitute a most disadvantaged group. If the goal of universalization is to be achieved, girls' access to school must be addressed, including the economic, social and cultural barriers inhibiting this access. Planners and programmers will need to address both physical accessibility and social practices that serve as disincentives to participation, such as early marriage. The special learning needs of the girl child should be investigated further and new ways of providing special incentives explored, such as combining continued schooling with delayed marriage and increasing the recruitment of female teachers.

72. Effective universal primary education can eliminate adult illiteracy. Moreover, literate parents, especially mothers, support their children's primary education. The child of a literate mother rarely fails to enrol in school. In the context of each country's basic education strategy, UNICEF will assist in specific aspects of literacy, especially programmes targeted at women and girls, making learning content relevant and promoting opportunities for post-literacy learning, the lack of which has been the cause of poor results of many literacy efforts.

73. Until now, early childhood development has been either largely neglected, too costly or inappropriate. It is unlikely that many Governments, particularly in countries where primary education has not yet become universal, will be able to afford large-scale early childhood development programmes requiring significant governmental financial support. Because it is important that children receive learning stimulation at an early age, UNICEF will focus on developing and supporting low-cost, family- and community-based early childhood development programmes that will help to prepare young children for various types of schooling. Empowering parents

with knowledge about the developmental needs of the young child will be an important element of this effort.

74. The contribution made by the "third channel", comprising traditional and modern means of communication as a powerful medium of education, is being recognized increasingly throughout the world. The successful experience of the UCI programme in the late 1980s has aptly demonstrated the potential impact of the "third channel", especially as the principal instrument for public education. Efforts to prevent early pregnancy, STDs, including AIDS, and substance abuse will depend largely on the ability to communicate critical health information to families and to persuade individuals to avoid high-risk behaviour. In addition, the media (including folk singers and artists) could become a key component in a nationwide network of basic learning if they are used systematically in post-literacy learning and continuing education and viewed as a way of offering life-long learning opportunities.

75. Despite the attention generated by the World Conference on Education for All, public awareness on education issues continues to be weak. A number of activities supporting education for all will be undertaken as UNICEF involvement in this sector grows over the plan period. External relations activities will focus on the following: capacity-building to strengthen the education network among NGOs and others; bringing education issues to the attention of the media; and generating a discussion on the relevance and importance of education in the context of other issues such as health, nutrition and the plight of the girl child. UNICEF will also help to promote the objectives of education for all through its Education for Development programme, the basis of which is reflected in the first article of the Declaration of the World Conference. Through the Global Communication Support Programme, UNICEF is assisting regional and field offices to explore ways of making the "third channel" an effective means of communicating education issues.

E. Children in especially difficult circumstances

76. The Convention on the Rights of the Child and the World Summit for Children have led to a growing emphasis on protecting children in especially difficult circumstances globally, as well as at the country level. During the plan period, UNICEF hopes to broaden and extend the concepts of "corridors of peace" and "periods of tranquillity" to ensure the protection and well-being of women and children in conflict situations. Dealing with the special needs of children displaced and traumatized by war will receive increased attention based on the strategy of preserving and strengthening families and communities and reintegrating unaccompanied children as quickly as possible into families, schools and communities. This work will be carried out in close collaboration with the Office of the United Nations High Commissioner for Refugees (UNHCR), the Centre for Human Rights of the United Nations Secretariat in Geneva and networks of NGOs working on peace education and related concerns.

77. During the plan period, UNICEF will also work with partners and allies on the special problems and needs of orphans, especially AIDS orphans and street children, victims of natural and man-made disasters, socially disadvantaged groups, child workers or youth trapped in bondage and victims of child abuse and neglect. UNICEF will help to facilitate the exchange of experience now accumulated in different regions and countries and in different agencies through cooperation with concerned organizations. Particular attention will be given to raising awareness in countries and communities regarding children in especially difficult circumstances.

78. Special focus will be given to collaborating with NGOs on basic education opportunities for street and working children, developing education materials on environment and peace, and increasing educational opportunities for hard-to-reach girl children. UNICEF will also work closely with the International Labour Organisation (ILO) with respect to working children, especially those engaged in hazardous work. Programme actions will focus on situation analyses and programme development to protect their interests and well-being, leading to the development of a mechanism to monitor child labour globally. Themes are now being considered for an International Symposium on Child Labour in 1993.

79. In the areas of advocacy and social mobilization, UNICEF will work with targeted NGOs to build and broaden the network of organizations active in this field. As the media are already interested in these issues, the task will be to channel this debate into constructive reporting, which will facilitate the search for effective solutions. Within this broad area, issues related to children in especially difficult circumstances will be presented in the context of children's rights and disparity reduction. The production of information materials will focus on specific issues such as children in war, the urban child, disabled children, socially disadvantaged children (indigenous communities, ethnic and religious minorities), child labour, prostitution and child abuse.

F. Implementation of the Convention on the Rights of the Child

80. With unprecedented speed, over 100 countries have ratified the Convention on the Rights of the Child. This presents both a special opportunity and a special challenge; in many countries ratification was not preceded by adequate debate on the major issues, and the gap between ratification and actual implementation remains wide.

81. The Convention on the Rights of the Child, while it articulates children's rights to health, nutrition, education, etc., for which UNICEF has been striving since its inception, also insists on their rights to protection and participation. In so doing, the Convention has added new dimensions to UNICEF programming; advocacy for the Convention transforms charity-oriented approaches to providing services for children into national obligations to give meaning to their rights. While implementation of the Convention is the

responsibility of Governments, UNICEF will assist at the country level through support for policy formulation, improved and broadened situation analyses, mobilization of public opinion, facilitation of national legislation and programming and advocacy that directly involves the participation of children and youth. While UNICEF is not responsible for monitoring implementation of the Convention, assistance will be provided to Governments to improve their collection of accurate data on the situation of children.

82. Globally, UNICEF will work towards the ratification and implementation of the Convention by all countries. This will be done by helping UNICEF country offices and National Committees for UNICEF to mobilize public opinion, facilitating reviews of national legislation and ensuring that all relevant elements of the Convention are integrated into UNICEF advocacy and the country programme process. Technical support will be provided as requested to the Committee on the Rights of the Child and to NGOs and other relevant bodies to assist as appropriate in monitoring implementation at the national level.

83. UNICEF will also work to inform the general public, expanding its level of awareness, commitment and understanding of the rights of the child. The Convention will be used as a framework within which children's rights and such priorities as the right to basic education for all will be presented to the media and to partners. A balance in the dissemination of information about the cases of both abuse and protection will be sought and presented in the international context. UNICEF will pay special attention to and share information on how to handle sensitive issues that attract media attention. The publication First Call for Children will highlight children's issues and serve as a medium of exchange with NGOs, international media and other allies. Through education for development, children and youth will be encouraged to explore issues of children's rights and to participate in the process of change.

G. Women in development

84. Women deeply affect the health and quality of future generations in many ways. Their empowerment, therefore, is crucial. For this reason, and for fundamental reasons of social justice, equity and development, women and girls must be empowered to improve their status and participation in development. The commitment made by Governments in the Declaration of the World Summit for Children to "work to strengthen the role and status of women" was amplified in the Summit Plan of Action, which acknowledged that the enhancement of the status of women and their equal access to developmental resources and opportunities constitute a valuable contribution to a nation's social and economic development. The Plan of Action made the fundamental recognition that "efforts for the enhancement of women's status and their role in development must begin with the girl child".

85. This clear perception and commitment provide the impetus for renewed efforts in resolving some of the most critical concerns of women and girls in the plan period such as low social and legal status, inadequate health and nutrition, disparities in education, excessive and disproportionate workload within and outside the household, low income and lack of employment opportunities, and weak participation in decision-making and the planning and management of social development programmes. These constraints and the associated gender gap emanate partly from pervasive socio-cultural attitudes that undervalue women and girls and discriminate against them in favour of men and boys. The situation is exacerbated by poverty and the lack of democratic or participatory institutions for change.

86. UNICEF will intensify its advocacy and social mobilization efforts to generate political will to formulate appropriate national policies, enact legislation and allocate necessary resources. UNICEF will contribute to raising awareness among women through IEC activities and to enhancing the capacity of women through support to women's organizations. Advocacy and social mobilization measures will also be adopted to sensitize men and boys and mobilize them to assume shared responsibility for parenting, child survival, protection and development and women's equality. The gender-sensitive application of the Convention on the Rights of the Child will be promoted.

87. Priority will be given to gender-disaggregated data collection and multilevel situation analyses (national, subnational, regional and socio-cultural) to facilitate the identification of problems and better targeting of programme interventions to disadvantaged women and girls. Women heading households, low-income rural and urban women and women and girls from ethnic minorities will receive particular attention. Sectoral programmes in health, nutrition, education and water supply and sanitation will be encouraged to set clear objectives for girls and women. These programmes will adopt mutually reinforcing intersectoral strategies to respond to the multiple roles and needs of women. Special emphasis will be placed on the universalization of basic education, reduction of adult illiteracy, women's health and safe motherhood, women's income-generating activities and their full participation in the planning and management of basic community services.

88. Priority focus on the girl child will be increased during the plan period with particular attention given to the education of girls, reducing the incidence of early marriage, pregnancy and motherhood and changing social attitudes of preference for sons. This will be achieved through family education and more egalitarian and gender-sensitive early childhood development programmes. Major advocacy and social mobilization campaigns will be launched to promote the interests and well-being of the girl child.

89. To achieve those objectives, major partnerships will be forged with Governments, political leaders, women's groups and organizations, community and religious leaders, NGOs, donors and professional associations in the legal, social and economic fields. Training of UNICEF staff and national counterparts will also be a major component of the strategy to ensure improved programming and service delivery to meet the needs of girls and women. More sensitive monitoring instruments and indicators will be called for to help to correct inequitable programme impacts and to alert policy makers to adverse trends that require action.

90. Information and education for development will play an essential role in bringing about the fundamental change of attitudes and values needed at all levels of society to improve the status of women and children. An integrated information strategy on the girl child will be developed. In covering all priority issues, UNICEF will ensure that the special situation of the girl child is addressed and featured in all materials, including education, safe motherhood, nutrition and health issues.

H. Emergency assistance

91. In addition to several major natural disasters, the previous plan period was characterized by the growing involvement of UNICEF in large and complex emergency situations caused by political instability, transition and upheaval. Conditions remain serious in several countries, and the trend is likely to continue in the current plan period. However, there were also hopeful developments in countries where for years political settlements had seemed impossible. These countries now provide opportunities to rehabilitate the social services for children and women and rebuild structures that were destroyed.

92. In order to meet the ongoing challenges, UNICEF will need to strengthen its capacity to respond to emergencies as they occur and to provide support to pre-disaster planning, prevention and mitigation activities under the United Nations International Decade for Natural Disaster Reduction. In its approach to emergencies, UNICEF strives to respond as much as possible in ways that also strengthen rehabilitation and lead to development. For this reason, linkages will be made to country programmes, particularly in emergency-prone countries, to build safeguards such as non-food supply, use of ORS, measles immunization and water supply and sanitation.

93. Within the framework of various initiatives undertaken to enhance the capacity of the United Nations system to respond expeditiously to emergencies, UNICEF will continue to work closely with the Office of the Secretary-General, the Secretary-General's special representative for emergency situations, the Office of the United Nations Disaster Relief Coordinator (UNDRO) and other agencies (notably WHO, the World Food Programme (WFP) and UNHCR) to ensure that UNICEF contributions in dealing with emergencies are integrated into, and are supportive of, the overall United Nations emergency response system with respect to both planning and response capacity.

94. UNICEF is uniquely placed to respond quickly and effectively to emergencies owing to its field office structure with sub-offices in the interior of many of the larger developing countries, its Supply Division warehouse in Copenhagen with long experience in the rapid delivery of emergency supplies and the work done in industrialized countries by National Committees. Indeed, while broader responses of the United Nations system to major disasters are being planned, the international community expects a specific response from UNICEF when emergencies arise affecting children and women. To do so, UNICEF will continue to use the flexible instruments at its disposal: the capacity of field offices to reallocate a portion of programme funds to Government-declared emergencies; the Executive Director's Emergency Reserve Fund (ERF); and the use of special appeals. By far, the largest portion of resources expended by UNICEF on emergencies comes from special appeals, and it is anticipated that this will continue to be the case. Nevertheless, the Executive Director's ERF is valuable for quick and flexible action when disaster strikes.

II. BASIC STRATEGY COMPONENTS

95. Strategies for achieving the goals adopted by each country will be developed as part of a national programme of action and the country programming process. These two programmes are based on a situation analysis, national policies and plans, the review of past experience, consultation with partners, the examination of resources and constraints and the assessment of areas of comparative advantage and available opportunities. Although no two country programmes will have exactly the same strategy, UNICEF-supported activities will generally have some common components. They will be based on the extensive use of affordable, low-cost and community-based measures, with the active participation of the beneficiaries and aimed at disparity reduction and large-scale replication. They will make extensive use of modern and traditional communication media and social mobilization. All programme measures will be intersectoral in nature. Emphasis will be on building sustainable national structures, integrated with other national and local institutions.

A. Empowerment of women

96. Strategies for achieving the goals for children and improving the status and role of women in society must include fundamental measures to enhance the capacity of women themselves. This involves knowledge, information and skills; the ability to organize to defend their interests and demand their rightful share of development resources and benefits; and the capacity to participate effectively in all societal processes and decisions that establish values, control access, allocate resources and responsibilities and award benefits within the family, community and nation.

97. Critical measures will include the improvement of the self-image of women and girls through education, information and skills development. Within educational and basic services programmes, girls and women will be empowered with knowledge and information free from gender stereotypes. Non-conventional skills will be promoted in vocational training, income-generation and service-maintenance schemes, such as the maintenance of village water pumps. Women's groups will be assisted to develop their own strategies and plans to participate more effectively in programme activities, from planning and management to monitoring and evaluation.

98. Support for research on women's issues will help to strengthen advocacy, policy and programme formulation at national and community levels. Advocacy and social mobilization will give increased attention to removing obstacles to women's full participation in development. Thus, efforts will be intensified to reduce poverty and disparity between sexes; invest more in girls' education; improve child spacing and family planning; pay special attention to the specific needs of girls and women; promote sharing of responsibilities between men and women; and gradually change societal values and attitudes that undervalue women and girls and undermine their social power and development potential.

B. Sustainability and national capacity-building

99. With substantial progress made in discrete aspects of child health and survival, the question of sustaining this progress in the longer term by enhancing indigenous capacity to carry on the activities and contributing to strengthening the national systems of health care and other basic services assumes special significance. While strategies and programme responses will differ among countries and for different goals, the question of programme sustainability and national capacity-building will have to be addressed in most situations in political, financial, technical and managerial terms. All programme cooperation activities supported by UNICEF will have to incorporate those dimensions as key features in the formulation, implementation and assessment of programmes and projects.

100. During the plan period, UNICEF will give special attention to building systems and structures that are appropriate and relevant to national and local situations and staffed as far as possible by local experts. Measures to

promote closer working relationships among government agencies, institutions of learning and communities will also be encouraged. Training and experience exchange will be two principal modes to enhance the quality and effectiveness of the institutions established or supported. UNICEF will continue to use national professional expertise as extensively as in the past.

101. Sustainability is likely to be a principal challenge during the plan period. While prospects for financial sustainability are brighter in Asia, selective international support for recurrent costs is likely to be needed in Africa, probably until the end of the century, unless the economic deterioration is reversed. In this connection, the growing experience in management financing and community comanagement acquired in the Bamako Initiative will enable UNICEF to play a significant role in Africa in strengthening national and local capacity to provide such basic health services as immunization, prenatal care and curative services for malaria and respiratory and diarrhoeal diseases and better to face the negative impact of AIDS. This will be done by building on the skills acquired during the acceleration of EPI in the fields of management, communication and information systems.

102. A new Cost and Economics Unit has been established at headquarters to strengthen the organization's capacity to assist countries in this area and to promote the development of more affordable, sustainable programmes.

C. Reaching the unreached and disparity reduction

103. All children, irrespective of their ethnic, cultural or geographic origin within a country, must be the beneficiaries of programmes to achieve the goals for children and development in the 1990s. Reducing serious disparities between the mainstream of the population and marginal groups and eliminating gender disparities are crucial for achieving several of the major goals of the 1990s, among them, completion of primary education by at least 80 per cent of children and eradication of diseases and micronutrient deficiencies. The programming approach for reaching the disadvantaged and reducing disparity will require collecting and analysing relevant data to highlight the problems, determining appropriate timing and geographical concentration of activities and devising methods of targeting the disadvantaged as beneficiaries and participants. The difficulties and costs of reaching those who are the most difficult to reach and the trade-off between serving these groups and achieving an overall high coverage, however, have to be considered in decisions about the phasing of programme implementation and optimal use of resources. Disparity reduction calls for more sensitive and disaggregated monitoring instruments that will help to target programme interventions to the disadvantaged, unreached and hard to reach.

D. Area-based programmes

104. Paragraph 34 of the World Summit Plan of Action outlines the main actions needed at the national level to implement the Summit commitments. It states that child-specific actions must form a part of broader national development programmes which strengthen community organizations, reduce poverty and inculcate civic responsibility. It calls upon Governments to encourage and assist provincial and local governments in preparing their own programmes of action. Area-based programmes are well-suited to contribute to the achievement of those aims. They enable sectoral programme assistance to be focused on poor and underserved areas and social groups, provide a proving ground for developing programme responses specifically suited to local conditions and, through community participation, enhance overall programme sustainability and mobilization of local resources, thus ensuring local acceptance.

105. Area-based or subnational programming provides a testing ground for innovative, low-cost approaches that may lead to solving problems on a wider, national scale. They are particularly suited to situations in which Governments seek to implement decentralization policies. They provide key linkages between the target population and planning and management systems at the national, regional and district levels and, because they are generally multisectoral, these approaches solidify the synergistic linkages among the various sector goals. UNICEF will continue to support such approaches wherever they have a clear potential for sustainable, large-scale expansion and for reaching the unreached.

106. Among subnational areas that call for special approaches are the low-income, underserved and heavily polluted areas of both small and large cities. Such areas may have infant and child mortality and morbidity rates three or four times higher than the city's average. The urban poor remain largely invisible because their status is obscured by urban averages skewed by wealthier inhabitants. The urban environment is a serious threat to child welfare in many ways. Diarrhoeal diseases of many kinds, including cholera, intestinal parasites and food poisoning, can be traced to the many hazards of the urban child's environment, such as untreated human excrement, open mounds of rotting garbage and pollution in the waterways and ditches used by children as playgrounds. Crowding in makeshift housing helps to spread tuberculosis, influenza, meningitis and measles. The most serious health hazards in many cities of developing countries could be reduced or eliminated by a safe water supply and adequate waste removal together with provisions in the home for washing, cooking, laundry and food storage. Extending basic services on a scale that would cover most settlements of the urban poor in developing countries is possible.

107. Cost-effective primary health, sanitation, education and nutrition strategies aimed at making the lives of the urban poor visibly better will continue to receive attention and support, as will early childhood development, including child care, problems of working children and street children and income-generation schemes. The urban environment will be the

subject of special focus during the plan period. UNICEF is currently reviewing its experience in programmes for the urban poor and will present a paper on this subject to the Executive Board in 1993.

E. Going to scale

108. To be effective, programmes concerned with the essential elements of survival, protection and development of children must serve all children. Innovative, experimental or demonstration projects are, of necessity, on a small scale; however, they have to be replicable on a larger scale to have a national impact and to contribute towards achieving the goals for the 1990s.

109. In the past decade, experience in child health and survival, especially in relation to UCI, ORT and child nutrition, have taught useful lessons about scaling up programmes to make a nationwide impact. Even when beginning on a small geographic or demographic scale, the larger national perspective must be kept in view.

110. It is often useful to pursue a two-pronged approach in UNICEF cooperation: supporting the formulation and implementation of national policies and strategies, while also assisting trials and demonstrations on a local scale that can be incorporated in the national programme. The most critical element in achieving nationwide impact is mobilization of support and commitment at different levels: State and government leaders; the technical and professional community; all those involved in public outreach, including the mass media; various organized entities; and potential beneficiaries and participants. It has also been found that accountable political commitment at different levels, monitoring of results with feedback and problem-solving mechanisms, intersectoral collaboration and coordination and societal involvement are also critical factors.

111. UNICEF will support and facilitate a learning process of going to scale, and the experience gained will be shared with countries through visits, studies, workshops and arranging for direct exchange of experience.

F. Community participation

112. The organized and informed involvement and participation by all elements of a community or a society are not only strategies for making programmes workable and sustainable, but they are also increasingly a matter of equity and social justice. Participation is a prerequisite for programme sustainability, effective disparity reduction, the empowerment of women, successful capacity-building and, ultimately, sustainable national development. Social mobilization and community empowerment are reciprocal and complementary strategies to achieve the multiple goals for the 1990s. UNICEF-assisted programmes will endeavour to involve all the people concerned and to do so in all aspects of programme activity, from planning and management to monitoring and evaluation.

G. Development with a human face

113. Human development has increasingly been given a central role in development by the international community, as reflected in the International Development Strategy for the Fourth United Nations Development Decade. In line with this perspective, UNICEF will continue to examine the impact of the economic environment and economic policies on children and the poor. It is clear that poverty reduction on a global scale cannot be achieved without some form of debt relief and the resumption of economic growth in Africa and Latin America and sustained growth world wide. But the character of that growth is of vital concern to UNICEF. The number of children adversely affected by inadequate economic policies and adjustment efforts is still very large since in most countries measures to protect the most vulnerable are either absent, inadequate, underfinanced or slow to be implemented.

114. UNICEF will continue to advocate for a strong social dimension in all economic planning and adjustment measures, as well as in long-term development. During the plan period, efforts will continue to influence policy dialogue on redesigning fiscal, price and investment policies in favour of the poor. This will involve participation in key forums involving international financial agencies, limited support for research in the field and workshops aimed at stimulating national debates on the issues.

115. UNICEF will make particular efforts to collaborate with the other United Nations agencies also represented in the Joint Consultative Group on Policy (UNDP, UNFPA, WFP and the International Fund for Agricultural Development (IFAD)), as well as with international financial institutions, in monitoring the impact of the economic environment and economic policies on the implementation of social sector programmes at the country level. UNICEF will continue to collaborate with UNDP and the United Nations Office at Vienna in the human development initiative, which provides senior-level support to selected countries that request assistance to adjust budgetary policies and planning in ways that allow greater scope for human development. This initiative creates an excellent framework for Governments to reconsider budgetary allocations to ensure priority for children as called for in the Plan of Action of the World Summit for Children.

H. Environmental enhancement

116. Most UNICEF programme concerns and activities already have a strong environmental component that includes water supply and environmental sanitation, prevention of land degradation and availability of household fuel and food. While attainment of the goals for children and development in the 1990s means a major improvement in the immediate environment of children, it will also entail amelioration of basic environmental conditions. Indeed, it will be difficult to achieve the goals without increased attention to certain of these environmental conditions.

117. Once the basic needs of survival, development and protection are met, children as well as parents can be more sensitive to protecting the environment and parents will be more open to family planning. Both child survival and family planning need to be part of a broader approach to environmentally sound and sustainable development.

118. During this plan period, UNICEF will continue to promote and expand programmes with strong environmental components, including social forestry and agro-forestry; low-cost appropriate technology for household energy; enhancement of household food security; innovative appropriate technology for the provision of clean water supply; affordable solutions to pollution of the urban environment; appropriate health interventions such as CDD and child spacing; and formal and non-formal environmental education. In all these programmes, environmental improvement will be carried out in a holistic manner in the context of poverty alleviation, the principle of a "first call for children" and fulfilment of the decade goals.

119. UNICEF will also focus greater attention on the impact of environmental degradation on children and the linkage between children and the environment, including linkages with poverty, consumption patterns, macroeconomic and structural issues, and the human and social aspects of environmental improvement. To this end, UNICEF advocacy will be carried out through country programmes of cooperation and different forms of information dissemination. The UNICEF approach of achievable community-level initiatives, or "primary environmental care" will be promoted, together with an emphasis on a favourable national- and international-level framework to encourage and sustain such initiatives for children. Support will be given to Governments in the formulation of national plans on environment, water supply and other related issues.

120. UNICEF work with the media on this issue will focus on the need for the problems of the environment to be addressed in development terms. A major objective is to ensure that the issues of children and women are placed prominently on the agenda of the United Nations Conference on Environment and Development to be held in Rio de Janeiro, Brazil, from 3-14 June 1992. UNICEF is reaching out to environment-related NGOs in an effort to link their concerns with children's issues and to promote the active participation of children and youth. Education-for-development work will focus on broadening young people's understanding of environmental issues and developing educational programmes for child participation.

I. Situation analysis, monitoring and evaluation

121. The analysis and monitoring of the situation of children and women have gradually acquired a much broader role in many countries. This change has been accelerated by the World Summit for Children and the adoption of the Convention on the Rights of the Child.

122. The situation analysis is an essential point of departure for an effective national programme of action, for identifying the baseline against which to measure progress towards achievement of the decade goals and for assessing resource requirements for achieving them under the specific political and socio-economic circumstances of a country. UNICEF, where requested, can offer the same support it provides for a situation analysis within the country programme process to help to satisfy the need for the same analysis in the national programme of action, updating it as necessary. The UNICEF country programme can also contribute to building national monitoring capacity, which includes not only strengthening the monitoring mechanisms at national, subnational and community levels, but also developing the capabilities to feed the data back into the process of policy-making and planning. The situation analysis is not limited to the perspective of the decade goals. The Convention on the Rights of the Child, which contains either implicitly or explicitly all the decade goals for children, offers an even more comprehensive framework.

123. UNICEF will strive to enhance the effectiveness of the situation analysis and monitoring as programming tools. The situation analysis needs to be more integrated in the country programming process by becoming more of an ongoing process in which data gathered for analysis are updated and used in annual programme reviews. Deviations from the expected course of programme implementation and output will be monitored more regularly so as to permit a more adaptive programming approach to enable the limited resources available, either to UNICEF or to Governments, to be used in the most efficient manner.

124. UNICEF efforts to strengthen the evaluation component of its country programmes will undergo further development during the plan period in two directions: (a) the strengthening of national capacity, where appropriate and necessary, to learn from project and programme experience to improve programme management; and (b) the improvement of UNICEF "institutional learning". The latter is discussed in paragraphs 205 and 206 below.

125. In an effort to strengthen national management capacity, the concept of an evaluation in each programme area during the country programme cycle will be promoted, and increased attention will be given to the behavioural elements of survival issues and to child development and protection. Countries will also be encouraged and assisted to broaden their evaluation perspective beyond individual projects to a more focused evaluation of entire programmes.

126. The strengthening of national evaluation capacity will be tied closely to monitoring progress towards the goals of national programme of action by emphasizing the development and use of approaches that involve programme managers in monitoring and evaluating the impact, coverage and cost of programmes they manage and using monitoring data for ongoing management decisions. Support for the use of operational research to improve country programme delivery and to build national analytical and management capacity will also be strengthened where appropriate.

J. Advocacy and social mobilization

127. Major advances in advocacy and social mobilization for children were achieved during the 1980s. They culminated in the 1990 World Summit for Children and the Convention on the Rights of the Child, which have provided an agenda for advocacy and social mobilization in the 1990s. The World Summit Plan of Action encourages families, communities, local Governments, NGOs and social, cultural, religious, business and other institutions, including the mass media, to play an active role in support of the goals. It states that all forms of social mobilization, including the effective use of the greatly expanded world-wide information and communication network, should be marshalled to convey to all families the knowledge and skills required to improve dramatically the situation of children. During the plan period, advocacy and social mobilization will be integrated more fully into country programmes which, as part of larger national programmes of action, will themselves become instruments of advocacy and mobilization.

128. As the material, financial and human resources that UNICEF can contribute to the well-being of children are limited, each country programme is designed to make the most efficient and effective use of these inputs, together with the country's counterpart resources, not only to benefit a certain number of children directly, but also to advocate for changes in attitudes and policies that affect all children in the country and to mobilize whatever other resources are potentially available to benefit them. Indeed, what the country programme can achieve by way of direct improvement of the situation of a limited number of children should be a model of how the same can be done, cost-effectively and sustainably, for children in the whole country.

129. Advocacy and social mobilization are also at work on other levels. At the regional level, regional partners and allies are enlisted and efforts are made to influence regional opinion in support of children. In industrialized countries, these efforts are undertaken by National Committees for UNICEF, supported by the Divisions of Information and Public Affairs, as well as by direct contacts with national and international media and through the specialist and development networks with which executive and programme advisory staff have professional contacts. Specific activities are presented throughout the present plan where appropriate, particularly in the section on the management of external relations (see paras. 216-225 below).

K. Inter-agency cooperation

130. The increasing consensus in the international community is that long-term human development should be the focus of national and international efforts. This provides a unique opportunity for the United Nations system to pursue a set of objectives with much stronger inter-agency collaboration. The goals and strategies of the World Summit for Children are a central contribution to such a broad-based, inter-agency effort. Many of the policies being advocated in the UNDP Human Development Report and in the work being done by the World Bank on poverty have a similar focus. Indeed, the World

Summit goals have often been the work of inter-agency collaboration: with WHO in the area of health; UNESCO and the World Bank in the area of basic education; WFP and IFAD in the area of nutrition; and UNDP, the World Bank and WHO in the area of water supply and sanitation.

131. The mechanisms to support such collaboration were described in the General Assembly's 1989 triennial policy review (resolution 44/211 of 22 December 1989). These include an emphasis on such themes as poverty, children and women; moving the United Nations system from a project to a programme approach; the increased use of national execution and capacity; and achieving greater coherence within the United Nations system, in part by strengthening the resident coordinator system.

132. UNICEF will continue to play an active role in helping the United Nations system to implement these mechanisms. The upcoming triennial policy review will provide another important opportunity to advance these endeavours. At the headquarters level, UNICEF will be working actively in forums such as the Administrative Committee on Coordination (including its Committee on Field Activities, the Consultative Committee on Administrative Questions (Operational Activities)) and the Joint Consultative Group on Policy. At the country level, UNICEF plans to use national programmes of action for children as key documents for inter-agency collaboration so that national priorities continue to serve as the basis for inter-agency work. UNICEF will support strengthening the resident coordinator system through expansion of the inter-agency training/policy development seminars; the formation of subgroups focused on specific themes and chaired by the organization best suited (under the overall leadership of the resident coordinator); and a more systematic process of inter-agency meetings and work plans that are monitored at the senior level at headquarters.

133. In order to provide governmental oversight and guidance, the United Nations system would greatly benefit from a strengthened Economic and Social Council that focuses on the policy elements of operational activities. Among other responsibilities, such a forum could help to establish international goals and strategies and to ensure that the United Nations system and the international community are mobilized to support them.

L. Resource mobilization

134. It is currently estimated that the achievement of the goals for children and development in the 1990s requires that, by mid-decade, developing countries should be investing an additional \$20 billion annually in the necessary programmes and activities. About two thirds of this could come from the restructuring of developing country budgets, as called for in the World Summit Plan of Action. The remaining one third could come from external assistance. Such estimates will, of course, vary considerably among countries: many countries in East Asia, the Middle East and Latin America will require much less, while the least developed countries may require up to 50 per cent or more. Estimates of resource requirements will be revised and

refined on the basis of country-level assessments made in national programmes of action and in studies at the global level.

135. Meeting these additional financial requirements is essential to the achievement of the goals. UNICEF will promote the re-examination of development assistance budgets called for in the World Summit Plan of Action, with a view to ensuring that human and child development will have priority when resources are allocated. This will be facilitated by better statistics on the distribution of present aid, for which an improved reporting format is being discussed with UNDP and the Organization for Economic Cooperation and Development (OECD). UNICEF will endeavour to promote the financing of national efforts to further human development and to reach the decade goals for children in several different ways. Advocacy with donor Governments, opinion leaders, NGOs and the media will include a reminder that the principle of a "first call for children" also has a financial dimension.

136. Developing countries themselves can contribute to the financing of national programmes of action through internal reallocation and presentation of programmes to donors as matters of national priority. UNICEF will support this process.

137. UNICEF is also consulting with creditor and debtor Governments on the possibility of using local currency obtained through the conversion of official debt for social sector programmes under the recently agreed Paris Club arrangements. The additional resources thus obtained are potentially very large and well-suited to funding national programmes of action. With the end of the cold war and the beginning of disarmament, resources previously devoted to military expenditure in both developed and developing countries will become available for other uses. UNICEF will continue to advocate that the principle of a "first call for children" should be applied in decisions concerning the reallocation of funds.

138. UNICEF will, of course, continue to seek funds for its own programmes, both with Governments and the general public, as discussed in paragraphs 213 to 236 below.

III. THE REGIONAL DIMENSION

139. The UNICEF approach to planning is country-specific. Regional strategies are based on country strategies that are characteristic of a particular region. To avoid repetition, major programme areas and strategy components that are common to UNICEF as a whole are not treated here unless they are of special importance in the regional context. The priorities and programme emphases that characterize a given region may not always be applicable in all countries of that region.

140. Regional priorities should also not be allowed to obscure the fact of UNICEF commitment to, and priority for, least developed countries. Although the majority of least developed countries are in Africa, there are very large

numbers of children living in least developed countries in other regions of the world as well. In its programming guidelines, UNICEF has taken into account the outcome of the Second United Nations Conference on the Least Developed Countries and will be guided by its Programme of Action for the Least Developed Countries for the 1990s as called for in General Assembly resolution 46/156 of 19 December 1991.

A. Sub-Saharan Africa

141. Sub-Saharan Africa remains in the grip of its deepest economic crisis since independence. Although IMF is predicting a gradual recovery, with slowly increasing real gross domestic product (GDP) and an improvement in terms of trade over the medium term, the economic picture is generally negative and GDP growth in many countries is still very sluggish. No other region of the world is so dependent upon the export of raw materials. Nine out of 10 African countries depend on primary commodities for 70 per cent or more of their exports. Commodity prices continue to fall and, as noted in the World Bank's Global Economic Prospects, the erosion of Africa's export capacity during the 1980s has reduced its ability to respond to increased external demand, even if such an increase was to occur. "Even by the year 2000", says the Bank's 1991 World Development Report, "average incomes in Africa will be less than in 1980." Meanwhile, prospects for greater external resource flows to the region appear dim as the competition for donor assistance grows. Africa's ratio of debt servicing to exports is 30.4 per cent. The debt crisis is largely unresolved, war and civil unrest affect quite a few countries in the region and drought and famine threaten in a number of places. Add to this the growing scourges of AIDS and malaria, and it is evident that the 1990s will most certainly witness growing poverty in many parts of the region. For all these reasons, sub-Saharan Africa is the region of highest priority at present for UNICEF, as reaffirmed by the 1991 Executive Board.

142. On the positive side, more realistic economic policies have been accompanied by better management of resources in a number of countries that are now aware of the need to give priority to low-cost services for the many and to restructure budgets in favour of the poor. A growing number of countries have embarked on the road to democratization. Although several countries are experiencing great political instability, as those long excluded from the political system fight for position, political reforms in many countries are resulting in greater democratization and more open political systems that are bringing people's organizations and community groups into the development process as decision makers. These reforms can only strengthen sustainability in the key areas of human development addressed by the goals for children in the 1990s.

143. The dismantling of apartheid in South Africa has profound implications, not only for that country, but for all of southern Africa. This plan period is likely to see greater involvement of the United Nations in South Africa, in which UNICEF will be expected to play a role.

144. African countries have strongly endorsed the goals for children and development in the 1990s and, although political instability is a constraint for some, most have set up mechanisms to determine specific priorities and targets. Several countries have already adopted additional time-bound goals that reflect national development priorities, while others, recognizing the severe resource constraints and low baseline indicators prevailing in the region, have adopted more modest goals. National programmes of action are being developed, and intersectoral committees are analysing their implications in terms of human and financial resources required. However, attaining the goals requires that national efforts are supported by an improved economic environment, reduction of debt and substantial increase in resource flows.

145. The latest Organization of African Unity (OAU) Summit held in Abuja, Nigeria, addressed this very issue by calling for a donors' conference on the African child to assess Africa's efforts in reaching the goals and to mobilize support for the implementation of the World Summit Plan of Action. The conference is planned for late 1992. It is hoped that, on that occasion, African Governments will adopt far-reaching, coherent and realistic strategies and programmes for children and women and ones that can be systematically monitored.

146. For African countries caught up in conflict, such as Liberia, Mozambique, Rwanda, Somalia and Zaire, reaching the goals by the year 2000 is especially problematic. At the same time, once peace is secured, prospects, even in the near term, for achieving the goals improve considerably both because external assistance, long withheld from conflict-ridden areas, may increase substantially and because countries at peace will be in a position to restructure domestic budgets away from military expenditure and towards human development. In those countries still wracked by conflict, UNICEF will continue its efforts to promote "corridors of peace" and "children as a zone of peace". Effort will also be made, once the conflict has ended, to make children the focus of peace and reconciliation.

147. In the field of health, the strategic approach of the Bamako Initiative is being applied in a number of countries, with national capacity-building being strengthened at both national and district levels. Where there are solid EPI structures, PHC systems have been able to develop more quickly, thus facilitating the gradual integration of EPI with other health activities. A functional peripheral health system providing proper prenatal care should help to reduce MMRs and low birth weight while promoting family planning. Through this system, UNICEF will also support the distribution of iron, vitamin A and iodine tablets. Outbreaks of cholera in several countries further exposed the need for improved CDD and increased international coordination.

148. The high incidence of AIDS and malaria greatly affects the ability of African countries to reach the decade goals, especially in the areas of health and nutrition. In recent years, Africa has seen an alarming increase in the incidence of both diseases. AIDS is already a principal factor in the deceleration in the reduction of IMRs, U5MRs and MMRs that has occurred since

the mid-1980s. The strategies for dealing with AIDS and malaria outlined in paragraphs 38 to 42 and 44 above will be applied as appropriate in the African context.

149. In collaboration with WHO and FAO, UNICEF is developing community-based nutrition surveillance and early warning systems to generate basic food and nutrition data. UNICEF is also accelerating its support to household food security programmes and community-based growth monitoring and promotion.

150. In the field of water supply, considerable progress has been made in national capacity-building and community management. Major improvements in this sector could be achieved if additional resources were made available to small community water supply schemes. Dracunculiasis eradication programmes are on course in Benin, Cameroon, Ghana and Nigeria. The elimination of this disease is achievable by the end of the decade. However, results in the sanitation sector are still unsatisfactory. UNICEF support to latrine construction will continue, but more focus will be put on hygiene education.

151. In education, emphasis will be placed on improving the quality and efficiency of the system, especially to reduce levels of failure or repetition during the early years of primary education. Where access continues to be a problem, more flexible approaches will be developed to cater to the needs of the still unreached groups and children in difficult circumstances.

152. There is increasing awareness in Africa about the plight of children in especially difficult circumstances. A number of major studies in the region are expected to lead to broad-based interventions for these children. UNICEF will continue to work with Governments to address the underlying causes of the problem and to expand its collaboration with NGOs active in this field.

153. Greater attention will be devoted to improving the situation of African women with respect to their empowerment, workload, education and access to income. Several country offices have begun to collect disaggregated data on the girl child, whose situation needs particular attention because of her high vulnerability and poor chances for education.

154. To improve the skills of UNICEF staff in support of country goals, regional training activities will be strengthened in the fields of socio-economic analysis, participatory development, monitoring, surveillance and evaluation. Staff are increasingly assuming the role of trainers. In the context of political instability, staff capacities in emergency preparedness is being enhanced and UNICEF is working to develop ways to assess regularly the situation of women and children to be able to adapt the country programme to rapidly changing needs.

155. All parts of the organization will contribute to assuring that the current priority for Africa reiterated by the Executive Board is observed. The external relations group as a whole will support it with advocacy, mobilization and fund-raising. The Programme Funding Office, the Division of

Public Affairs and the Africa Section, together with the two regional offices in Africa, are coordinating UNICEF support to the organization of the OAU-sponsored donors' conference on the African child. The Division of Information will work with the international media to draw attention to the problems of children in Africa and to create an appropriate climate of support for them. In particular, emphasis will be on identifying and disseminating success stories and balanced presentations. Workshops to share information and better motivate and equip information officers of UNICEF and National Committees for UNICEF to support mobilization for Africa will be held. Africa will continue to figure prominently in the annual joint Division of Information/National Committee information work plan which outlines information strategies and anticipated activities. The Division of Public Affairs will give special attention to such initiatives as the OAU Charter for the African Child, the 1992 OAU donors' conference and the Day of the African Child.

B. Latin America and the Caribbean

156. During the past decade, per capita GDP in the Latin America and Caribbean region fell by about 10 per cent. Poverty increased to the point where it now affects 62 per cent of the population. A net outflow of \$223 billion has been estimated for the period 1982-1990. International and regional financial institutions are predicting a modest recovery for Latin America in the medium-term period, but if this recovery is to succeed in reducing poverty it must be directed towards greater equity and social justice, must give priority concern to children and women and must include attention to such traditionally neglected groups as indigenous populations and those of African origin. Closely related to recovery efforts, therefore, are the preparation of national programmes of action and the ratification and implementation of the Convention on the Rights of the Child. Mobilization activities related to the national programmes and the Convention are under way in almost all countries. These are being complemented by subregional and regional initiatives such as the Ibero-American Summit and joint action by countries in the Group of Rio, in Central America, in the Caribbean and in the Andean subregion.

157. Most countries have already produced at least a draft of their national programme of action. Attention has turned to completing the programmes and improving the quality of certain portions; translating plans into practical, affordable programmes; and establishing monitoring and financing mechanisms. Measures to deal with these issues are already in place in many countries.

158. The issues of debt and adjustment continue to concern many countries in the region. A debt relief for children initiative involving debt swaps and supported by the Netherlands Committee for UNICEF is in the advanced stages of negotiation in Ecuador, Honduras and Jamaica, and a number of other Governments in the region and National Committees for UNICEF have expressed interest in the scheme. The Special Adjustment Facility for Latin America and the Caribbean (SAFLAC), on which a mid-term evaluation report has been

prepared for the 1992 Executive Board (E/ICEF/1992/L.15), has enabled UNICEF to provide modest resources to help Governments to deal with the impact of the crisis on the most vulnerable population groups. It is proposed that SAFLAC continues during the plan period to provide limited support in those critical areas that have been outlined in the evaluation report.

159. CDD, the control of ARI and immunization will continue to be basic health thrusts. They will be complemented with attention to perinatal problems and programmes for women's health. Interest sparked by the cholera epidemic will continue to be used to reinforce CDD programmes and to increase collaboration regarding safe water supply and sanitation. A renewed effort to promote ORT, establishing community oral rehydration units and disseminating Facts for Life messages, is being linked to the fight against cholera.

160. Significant progress has been made over the past five years towards achieving UCI and the eradication of polio. To ensure the sustainability of UCI, UNICEF will continue its active participation with the Pan American Health Organization (PAHO), USAID and Rotary International in the Inter-agency Coordinating Committee. The goals of eliminating neonatal tetanus and controlling measles by 1995 will be included in phase II of EPI, 1992-1995.

161. The promotion of breast-feeding will include efforts towards compliance with the International Code of Marketing of Breast Milk Substitutes. A regionwide "baby-friendly hospital" initiative and collaboration with companies that produce and market breast-milk substitutes are part of those efforts. Other nutrition interventions will concentrate on growth monitoring, emphasizing children under 36 months old, and micronutrient deficiencies. Facts for Nutrition, a regional version of Facts for Life messages, is to be launched and promoted.

162. Significant progress in access to and coverage of education has been achieved in most of the region, with current attention shifting to the quality and efficiency of primary schooling. The drive to universalize primary education will be supported by promoting collaboration and exchanges between countries focusing on effective alternatives. Another component of the drive to reduce repetition and drop-outs rates will be the promotion and application of the "child readiness for school" concept. Existing low-cost, family- and community-based interventions will be expanded. Work in this area will be complemented with research on the health, nutrition and psychosocial dimensions of child development.

163. Two additional lines of action call for significant regional inputs during the plan period: reducing illiteracy and use of the "third channel". Literacy efforts will focus on women of reproductive age and youth. The concept of "education for life" will be further developed, and a regional initiative on child development will be implemented, drawing on UNICEF experience and relations with the mass media and other communication networks.

164. The problem of children in especially difficult circumstances continues to attract wide interest in the region. More knowledge of the situation and

effective policies and action methodologies are high on the regional agenda. As a result, the goal of defining, adopting and implementing national policies by the end of 1993 has been set. A further step will focus on achieving the necessary legislative adjustments on the protection of minors in every country by 1995. The Convention on the Rights of the Child will guide those efforts. To achieve the objectives, existing alliances will be consolidated, methodological guidelines for working with children affected by violence and armed conflict will be developed, and a regional training network and alternative solutions will be established.

165. The content of national programmes of action and country programmes regarding the girl child, young women and women heads of household will serve as the framework for action, policy development and monitoring during the plan period. Support for the organization of a regional network of women's offices is to be continued. Monitoring and the dissemination of information by the network on policy, legislation and compliance with the Convention on Elimination of All Forms of Discrimination against Women will be a part of this support.

166. Two special problems will be the subject of new initiatives: teenage pregnancy and intrafamily violence. Efforts will be made to achieve a better knowledge of the situation and regional and subregional (Andean, Caribbean and Central American) strategies will be developed.

167. The regional team of advisers has been strengthened with the addition of staff responsible for urban basic services, environment, water supply and sanitation and macroeconomic analysis. Urban basic services are being examined to increase coverage through expansion and replication of successful experiences.

168. The provision of safe drinking water and sanitation to the poorest population groups, using conventional technologies, will require significant investments. In this context, UNICEF will intensify efforts to complement other sources of cooperation. This course of action includes low-cost, appropriate, participatory alternatives targeted for replicability. Progress towards the relevant goals will be monitored in collaboration with PAHO/WHO through the water supply and sanitation monitoring system.

169. Support to subregional programmes on children and the environment in Central America and the Amazon basin will be provided, along with ongoing actions in Chile, a regional thrust in this field. Promotional efforts of the United Nations Conference on Environment and Development will provide the opportunity for UNICEF follow-up.

170. A regional external relations strategy is being formulated with a number of components. "Children of the Americas", the print, radio and television package, will be launched around mid-1992 and updated periodically during the plan period and for the remainder of the decade. Plaza Sesamo IV (Sesame Street IV), a television series for children, will be produced by mid-1993. Recent "third-channel" drives regarding the use of soap operas and animated

cartoons will also take shape during the plan period. A popular radio health "encyclopaedia", a Central American initiative produced with the support of Radio Nederland, will be expanded for regional use.

171. There are ample opportunities to duplicate experiences and expand cooperation in the region. However, this will call for a sizeable investment of time and resources. Some examples of collaborative initiatives, backed by operational agreements, include monitoring national programme of action goals and national capacity-building with the Economic Commission for Latin America and the Caribbean (ECLAC), UNESCO and the Latin American Demographic Centre; working on related MCH components with PAHO, UNFPA, the Inter-American Development Bank (IADB) and USAID; control of cholera and diarrhoea with the Junior Chamber International and PAHO; child development and health in partnership with the Catholic Church; and programmes for women and development with parliamentarians, by subregional groupings.

172. These various programme thrusts create new challenges and opportunities. In that context, regional efforts during the plan period will focus on the integration of programmes, external relations, operations and personnel development; the application of sound management principles; and the promotion and implementation of the recently established regional management information system network to assure compliance with monitoring and reporting requirements.

C. Asia

173. Although Asia has by far the largest number of children in the world and the largest number of persons living in absolute poverty and suffering from malnutrition, parts of Asia have known remarkable economic growth and, for the region as a whole, basic social indicators such as child mortality, school enrolment, literacy and availability of safe drinking water have shown a positive trend over the past decade.

174. India now has more children than China, and the two countries together account for 57 per cent of the world's children. China has made great strides in reducing mortality among both children and women and in extending the coverage of basic services. According to the 1991 World Development Report, China and India are both expected to grow faster economically than average for a developing country "under the assumption that they adopt favourable domestic policies". The market economies of East Asia remain robust, with annual growth rates averaging 6 to 7 per cent. They are expected to continue to grow at a comfortable 5 to 6 per cent until mid-decade, which is well above the population growth rate. Some countries, such as Malaysia, the Republic of Korea, Singapore and Thailand, are expected to join the ranks of developed countries by the turn of the century. Difficulties are being met by the countries of former Indo-China as they undergo a transition from centrally planned to market-oriented systems, while development in the Philippines has been slowed by natural disasters and political uncertainties. Cambodia, after long years of internal strife, is moving towards a peaceful settlement that augurs well for its reconstruction and development. The South Asian

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economies, particularly Bangladesh, India, Pakistan, and Sri Lanka, were adversely affected by the situation between Iraq and Kuwait in 1991 owing to higher oil prices, reduced exports and a severe drop in remittances from workers.

175. For Asia as a whole, major problems continue for children and women, with serious implications for long-term human development in the 1990s. There are disparities of income among regions and unmet basic needs that affect many millions. These needs are reflected in continuing unacceptable levels of malnutrition, disease and death. Some 6 million children under five years of age and 157,000 women die every year in South Asia, where malnutrition affects the normal growth of about 86 million children under five. As a result of social, cultural, legal and economic obstacles, girls face critical problems in many parts of Asia. Female children are at greater risk of dying during birth, infancy and childhood. Malnourished girls grow into undernourished women with low-birth-weight babies and perinatal complications. In many countries, girls marry at a very young age. Fewer girls enrol in primary school than boys and more girls drop out. In South Asia particularly, poverty is exacerbated by population growth and environmental degradation. The juxtaposition of economic growth and transitional difficulties in East Asia is reflected in unequal development for the child. Amid the prosperity of rapidly industrializing countries, there are pockets of disparities in development. Rapid urbanization has placed significant numbers of children in especially difficult circumstances and the problem of street children is growing. There are urban/rural differentials and gender disparities in status and job opportunities. It is evident that the region will continue to be characterized by uneven development in achieving the goals for children and development during the decade.

176. Nevertheless, nearly universal support for children has been expressed by the political leadership in Asia, as most countries have signed the World Summit Declaration and Plan of Action, ratified the Convention on the Rights of the Child and taken concrete steps in formulating and implementing national programmes of action. The national development plans of most of the countries have adapted and incorporated the major goals for children and development. A priority during the medium-term plan period will be to maintain a sense of urgency to achieve the cluster of major and supporting goals for all children through improved strategies and the allocation of national and international resources.

177. In November 1990, the South Asian Association for Regional Cooperation (SAARC) Summit held in Male, Myanmar, took a leading role among the regions of the world by incorporating the World Summit recommendations into a regional plan of action in the South Asian context. It declared the 1990s as the SAARC Decade of the Girl Child. All SAARC countries have prepared national programmes of action based on this directive. A panel of experts appointed by the SAARC Secretary-General is expected to prepare a regional plan of action for South Asian children based on strategies common to all countries. The 1991 SAARC Summit in Colombo, Sri Lanka, endorsed the convening of a second conference for children. This and other meetings to be organized during 1992

will recommend detailed implementation strategies and supportive structures to be promoted in each country.

178. Asia has achieved dramatic progress towards UCI. The East Asia region led the global programme with coverage rates of greater than 90 per cent, a level of achievement that the rest of the developing world still hopes to meet by the year 2000. This remarkable feat translates into 33 million of the region's 36 million infants being reached five times during their first year of life. Immunization efforts in almost all countries of South Asia have also been successful. Health workers have been trained and health facilities activated. Therefore, in the medium term, it should be possible to strengthen PHC in all countries and lay the groundwork for a sustainable system capable of delivering a broader range of MCH services. The maintenance of UCI in the coming five years will remain a high priority in Asia, preparing for "UCI plus" strategies to enable other basic services to be delivered and to achieve more complete child survival and development alternatives. Social and political mobilization, keys to the region's UCI successes, will be intensified.

179. Opportunities exist for achieving child health and basic education goals in most countries. According to current projections, the goal to reduce IMRs, U5MRs and MMRs will be attained within the decade in most East Asian and Pacific countries, except for Cambodia, the Lao People's Democratic Republic and Myanmar, where there are difficulties in economic management and a critical shortage of external assistance. Available medium-term estimates indicate that MMR could remain high in Cambodia, Indonesia, the Lao People's Democratic Republic and Papua New Guinea, but it will decline substantially, perhaps below 100 per 100,000 live births in other countries of the East Asia region. The nutrition goal will be achieved in many countries of East Asia, although difficulties are anticipated in Cambodia, the Lao People's Democratic Republic, Myanmar and Papua New Guinea. In South Asia, basic social indicators show a positive trend over the past decade in terms of child mortality, school enrolment, literacy and the availability of safe drinking water. But serious problems still remain, especially in the unacceptably high levels of malnutrition, disease and maternal mortality. There are significant variations among South Asian countries: Maldives and Sri Lanka have made considerable progress and are close to the decade goals, while Afghanistan, Bangladesh, Bhutan and Nepal have a greater distance to go. Afghanistan has faced particular problems during the past decade as a result of its prolonged civil war. The trends in India and Pakistan have been positive and opportunities exist for achieving the child health and basic education goals in these countries.

180. Goals that will need increased support are universal access to water supply and sanitation, access to quality primary education and efforts for children in difficult circumstances. Major strides have been made on the provision of water supply in China and India, but because of the sheer numbers involved, there are still large populations unserved. Water supply and sanitation have lagged behind in East Asia because of the orientation towards urban water systems that are expensive but have limited coverage, as against

low-cost low-technology rural and urban systems. Access to quality primary education is well advanced in most countries of East Asia and the Pacific, but lags in former Indo-China, particularly in the case of minority populations, and in South Asia, especially among girls. However, retention of all pupils until completion of primary school remains a problem in many countries. Throughout Asia, strategies for basic education and increased access to water supply and sanitation will be linked to the empowerment of women.

181. The severity of the AIDS problem is being recognized increasingly in countries of the region, including its links to child protection and survival and to such vital health programmes as vaccination. UNICEF continues to advocate the control of AIDS through education and mass communication, with special attention to mothers and children because of the severe impact not only on their health but on their social and economic situation as well.

182. Country programmes strategies will be based on Asia's unique development experience. They include advocacy for and support to community action and community organization in all the major goal areas to increase basic services management capacity and authority. As progress towards one goal can be hampered by lack of progress in others, UNICEF will assist in the review of existing arrangements and promote the coordination of services at community and district levels. Countries will be encouraged to pursue their decade goals through district plans to achieve the cluster of major and supporting goals.

183. Professional groups and voluntary agencies are widespread in many parts of Asia, often working with communities. UNICEF will promote the active participation of both in the cause of children. Social communication will play a key role in support of the 1990 goals at all levels. UNICEF support at the country level will be in capacity-building, information-sharing and monitoring of progress.

184. The recent realignment of UNICEF regional offices in Asia incorporates China and Mongolia into the East Asia and Pacific region and conforms the South Asia region with the membership of SAARC, plus Afghanistan. This will further rationalize support to country offices and regional initiatives. The emergence of independent States in Central Asia following the dissolution of the Soviet Union, however, raises the likelihood of a further rearrangement of UNICEF offices during the plan period.

D. Middle East and North Africa

185. Beginning in August 1990, the region experienced numerous shocks that will affect development activities well into this decade. The situation between Iraq and Kuwait led to increased unemployment, a reduction in remittances and the displacement and relocation of large numbers of persons. In addition to exacerbating divisions within the Arab world, the crisis weakened regional institutions and cooperative networks. It is hoped that this is a temporary phenomenon. The human cost of the crisis continues to be

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