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Statement by Mr. James P. Grant
Executive Director of the United Nations Children's Fund (UNICEF)
at the
Closing of the General Debate of the 1986 UNICEF Executive Board

New York 17 April 1986



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UNITED NATIONS CHILDREN'S FUND Executive Board 1986 session FOR INFORMATION

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New York - 17 April 1986

Mr. Chairman, distinguished delegates:

The past three days have again manifested the very special nature of UNICEF. I have reported to you on the work of the Organization and the directions in which I believe our experience suggests we proceed. You have, in turn, with frankness but friendship, articulated both support and concerns in your observation of our work and the needs of children.

# Programme issues

The issue which has been addressed most frequently by delegates has been the question of whether UNICEF's recent high-intensity attention to immunization and oral rehdyration represent a narrowing of UNICEF's focus. Is an imbalance developing to the exclusion of the other "GOBI" elements (as well as the "3 Fs") — and, beyond that, to the neglect of the broader UNICEF commitment to Primary Health Care and Basic Services?

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I and my colleagues listened to all of those concerns and I want to assure you that I have heard them. I know that each was expressed constructively and with profound commitment to our common purpose. Many were concerned that all elements of the GOBI-FFF strategy need to be pursued as forcefully as UCI and ORT, which have been called the "twin engines" of Child Survival and Development opportunities. The point is well taken.

I should stress my belief that on closer examination and experience most will find that there are differences between initial appearances, which can and should be valid cause for concern, and reality, which can be far more reassuring. It is thus encouraging that these major expressions of concern do not come from the developing countries who are active in accelerating child survival activities so that the health and nutrition of hundreds of millions of children can be improved and the lives of three to five million saved annually by 1990.

We have, in fact, been studying closely the reasons why UCI has moved faster even than we had dared hoped and why the other GOBI elements - including even ORT - had moved more slowly. I addressed this question, in fact, at the WHO/UNDP/UNICEF/USAID-sponsored International Conference on Oral Rehydration Therapy (ICORT II) meeting on 10-13 December in Washington, and I quote from the transcript:

"The question has been raised as to why it is that immunization has somehow taken off on a broader basis that ORT in many countries. There are those in this audience who can possibly give a better answer than I - Major General Burney from Pakistan, where they have been moving on all fronts simultaneously, for example. But I would say one reason is of course that the EPI infrastructure existed in many countries since the 1970s, while ORT is a much later arrival on the scene. Particularly given the breakthrough on smallpox, there was this latent existing structure in countries there to be re-mobilized.

"Second, and this is very important, on the immunization side there is less complication than on ORT where we are displacing traditional remedies or people have gotten accustomed to using antibiotics and intravenous rehydration. Hence, even though immunization requires more of an infrastructure to deliver than ORT, ORT has many other obstacles (if not enemies) to be overcome, and this does need to be taken into account.

"But third, and I would say that in many countries this has been the biggest difference, is that immunization has been much more definable in quantifiable goals. The concept of Universal Child Immunization — of at least 80 per cent of children immunized against these six major diseases — is very adaptable to a distinct national effort. It is very feasible for the President of a country to say to the governors of every province or every state. "I will hold you accountable for achieving this goal". Then that governor can hold each district administrator accountable, and when you look at the

success in Turkey or in Colombia, for example, one of the major reasons was that the top leadership of the country made it very clear to the provincial administrators that they were responsible for mobilizing their total communities. In Turkey all 67 governors were brought together for the first time in history for a civil purpose—(not security)—and given this responsibility. They went back and they told their Kaymakams at the next level down that they were responsible, and you could tell within 48 hours of the immunization days, more or less, how closely these goals were being achieved. In Colombia, it was possible because there was a reporting system, for President Betancur to pick up the phone at 2:00 in the afternoon on the first day of national immunization and call the governors, and ask "Why are you lagging?", "How are you going to avoid being in the bottom two or three states next time?" So there is an accountability device for the effort.

"We have not yet found in ORT the same way of mobilizing the total structure behind some kind of a goal which is accountable and I would say that this is one of the great challenges that lies ahead of us."

It is for that reason that the principals at the ICORT conference agreed to follow WHO leadership in supporting the goal of universal awareness and access to ORT by 1989/1990, with at least half of all mothers practising ORT by that time.

Likewise, we have been studying closely the reasons for the growth monitoring system not receiving as widespread acceptance as we had expected. We have identified many of these reasons and expect to develop a new approach at a major workshop we have scheduled in New Delhi next month. Similarly, I remain personally frustrated that we have not yet discerned a "handle" for significantly accelerating the trend back towards breastfeeding — the only "non-cost" intervention among the low-cost techniques. On this a joint meeting with WHO and other colleagues is scheduled for June.

Board Members' comments on the goals and approaches of the Medium Term Plan on the matter of programme balance were unanimously positive. I believe this underscores a unity of commitment to our country programming approach. I also welcome the assurance that most delegations found, from the Executive Director's Report and from my opening statement, that that balance in country programmes supported by UNICEF is being and will be maintained. This is done by:

- relating UNICEF's support to a comprehensive situation analysis, reviewing the totality of childrens' needs in each country;
- -- supporting the priorities selected by sovereign governments on the basis of such situation analysis;
- -- combining a focus on CSDR actions with the leading edges of UCI and ORT with an integrated range of other actions, set within a broader frame of basic services;

— providing additional financial support for accelerating UCI and ORT actions as supplementary finance, thus preserving balance in the use of general resources for the whole country programme; this is the approach adopted in the programmes submitted to the Board this year.

At the same time, acceleration of immunization and of support for ORT is dramatically real, supported by a social mobilization of all sectors of society which makes these efforts not vertical but fundamentally participatory and comprehensive. This is clearly demonstrated in the 61 countries which already have developed plans for accelerating immunization — many of which have acted in response to this Board's re-endorsement of the UCI-1990 goal last year. It is important to remember that these are not "UNICEF programmes" — they are <u>national</u> programmes which UNICEF supports. Many of these national programmes include other CSD elements — and specifically set the acceleration of UCI within the context of expanding Primary Health Care.

Indeed, many of the delegates whose countries experience UNICEF's cooperation first-hand - including Argentina, Bangladesh, Benin, Brazil, China, Colombia, the Dominican Republic, India, Indonesia, Lesotho, Niger, Oman, Pakistan and Tunisia - expressed the conviction that the international encouragement and support to achieve the 1990 goals for UCI and ORT which UNICEF, WHO and our bilateral and NGO allies have generated are enabling their countries not only to make major strides forward on the immediate protection of their children from the killing and disabling threats of immunizable diseases and diarrhoeal dehydration, but to also recapture attention - and re-establish functional commitment - to the broad agenda of child and maternal health and basic services to improve the child's developmental environment. This view was further supported by the United States and Italy, two countries which have made major investments in child survival and development initiatives, both through UNICEF and in their bilateral programming.

As President Betancur of Colombia told us:

"Campaigns and the Child Survival Plan accelerate the demand for Basic Services - indeed, it is necessary to make the Services offer just as quick. This is why we support UNICEF's postulate to increase immunization coverage within the context of Primary Health Care. This is a postulate that is and must continue being the cornerstone of multilateral cooperation, as it was established in the Bellagio Group meeting in Cartagena last year."

Thus, it is clear that experience in these countries do not support a view that UNICEF is neglecting the broader agenda as it is detailed in our Medium Term Plan proposals. I am confident that this perception will be shared by all Board members following the Board's review of that Plan and the country experiences which our Regional Directors report.

#### Sustainability and PHC

I have also taken note of related issues raised by several distinguished delegates on sustainability, post-1990 maintenance, infra-structure

establishment, and the importance of a primary health care approach. I would assure all members of the Board that these issues are critical points for our planning with governments in support of universal immunization and expanded awareness of ORT.

On this too, my comments to ICORT II may be relevant:

"On the question of sustainability, again it pays to look at We have not had that much time what is actually happening. experience but it is notable that in Colombia they have conducted national crusades of three national immunization days for two years. The second, completed early this December, is to be the end of the "crusade" approach, but the effort to keep immunization on a sustaining basis comes on a number of fronts. First, it is very clear that the whole health structure has changed; there is a new priority there. This kind of prevention has a new priority and I must say the health system is "walking tall" with what they have accomplished. Second, the national mobilization that took place has been followed in the schools; the primary school curriculum is being dramatically re-written and not in a way that takes 15 years to get written and implemented. It is being done on a trial period of just a few months. All high school students, before they can get their certificate of graduation, must spend 100 hours at voluntary health services - 20 hours of which is a standard course about ORT, diarrhoea prevention, importance of immunization, clean drinking water, washing hands etc. And for the other 80 hours they are attached to health clinics to do the house-to-house census for immunization programmes, to teach ORT and other measures.

"The Churches, which on the Sundays before the National Immunization Days, had devoted their sermons to what a responsible parent should do about immunization, now have a common training course for all parish priests on the range of child survival practices. And this is included in pre-marital counselling. When the babies are brought in for baptism, questions often asked include 'Have you immunized this baby? If not, why not?'. Do you know about ORT?'

"When we realise that if more than a third or 40 per cent of child deaths come from dehydration from diarrhoea, as in Egypt, why shouldn't the front-line people, whether they are religious workers or school teachers, get involved with this set of activities? The Red Cross has permanently changed its structure to include "Child Alive" as their primary thrust to deal with these sets of major challenges. In different parts of society there has been a major restructuring. We are beginning to see the same thing coming in other countries which have moved along these lines, but clearly we need to be vigilent, and this is why we in UNICEF, internally, when we talk about the immunization push - "UCI by 1990" - frequently we say "UCI to the third power" and write "UCI 1990<sup>3</sup>. Obviously, we want the kids immunized, but it must be on a sustainable basis and, third, it must be an entry point for a much broader promotion of PHC."

Again, on sustainability, I would ask us all to note the country experiences, reported by many Board members from developing countries in their interventions, as well as in the Regional Directors' Reports, other Board documents and other publications. For all the economic difficulties, we are going through a major awakening to the possibilities of social development rarely witnessed in history. Public and preventive health have, in many countries, become respectable, and children's concerns are now receiving attention of the highest leaders of state and different walks of life in the country and have been transformed into social movements. These national commitments and highest political wills are the best insurance that these programmes will be sustained because it will ensure the establishment and the use of the infrastructure, reallocation of resources and multisectoral inputs required for a successful PHC.

Examples well illustrate my point. Burkina Faso is a least developed country with very little health infrastructure. After the successful launch of "Vaccination Commando", the President of the Republic felt that without a PHC infrastructure the gains of the Operation could not really be sustained. He has therefore now begun a process of establishing PHC infrastructure, with two basic community health workers in each of the 7,000 villages in the country; their missions include ORT, MCH, sanitation, health education and basic nutrition as well as immunization. The first workers have now begun their training with support from many bilateral donors in addition to UNICEF.

In Pakistan, after the first phase of the accelerated health programme, workers have been re-trained as multi-purpose basic PHC workers. In Ethiopia, in the ambitious effort by Addis Ababa to reduce its infant mortality rate by two-thirds to under 50, the accelerated EPI effort, which has already achieved virtual universal immunization, was, from the beginning, part of a broader PHC programme comprising ORT, breastfeeding, supplementary feeding, nutrition, sanitation and health education.

I am happy to note that the delegates of Italy, Indonesia, Bangladesh, Thailand, Federal Republic of Germany, and Bulgaria, among others, have re-affirmed their support for the priority goal of reducing infant and child mortality, as established by the Executive Board in 1983 and as set out in the Medium Term Plan.

Mr. Chairman, I have related all of this only to put this discussion into context, and to underscore my belief that the matter at question is not whether UNICEF is, indeed, committed to full support of a broad range of child development interventions, but whether we are perceived to be so committed.

And I realise more clearly after this debate that we in the secretariat need to improve our communications if these messages are to get across without creating confusion. This we will remedy - but without losing the message that accelerated immunization and ORT is needed, is possible and will be greatly effective. We will also make greater efforts to distinguish advocacy for social mobilization and fundraising for specific purposes from our information about the content of our policy and the programmes we support.

Similarly, it is critically important for Board members to remember that we are talking about <u>national programmes of governments</u> with which UNICEF cooperates. These governments are embracing the Board's resolutions of the three previous years, the request of the United Nations Secretary-General and the resolution of the World Health Assembly which all Member States have endorsed...and they are doing so because they determine it to be in the best interest of their countries. As they move to reach these global goals set by the international community, it would be unconscionable for UNICEF's support to weaken - or to be seen at all at question. I therefore suggest that it would in fact be most propitious to send a signal to all developing countries that the Board fully endorses and supports what they are doing and what they are trying to achieve.

#### Trends in programme expenditure:

The distinguished delegate of the Netherlands has cited the increase in health expenditure from 26 per cent to 30 per cent from 1984 to 1985. I should add that it has risen from \$49 million (21 per cent) in 1981 to \$82.3 million (30 per cent) in 1985. It may come as a surprise to many that EPI and ORT together accounted for only \$22 million of this \$33 million increase. It must be noted, again, that this increase is due not just to expanded EPI and ORT but also to increases in programmes in essential drugs, more training activities in PHC, and also because of a shift in accounting practice which transferred growth monitoring expenditures from nutrition to health.

The Netherlands delegate noted that water supply and sanitation expenditure has dropped during the year from 28 per cent to 21 per cent, but please note that this does not include emergency expenditure on water supply and sanitation, where expenditure has been increased from 7 per cent to 13 per cent. The drop in 1985 was, in fact, due to the ending of the Lebanon programme and under-implementation in the Bangladesh and Ethiopia programmes. It should be remembered that year-by-year water expenditure always fluctuates because water is mainly funded from "noted" funds and the funding varies from year to year. In fact, in some country programmes, water supply and sanitation constitutes the highest share of expenditure, e.g. 56 per cent in Pakistan, 35 per cent in Nepal, etc.

Education expenditure has remained stable for the last 4-5 years except for 1983, which was exceptionally increased because of the emergency school reconstruction programme in Lebanon.

On our work with the urban poor, let me emphasize that, by the year 2000 the urban population will be 51 per cent; in Latin America, in fact, it is already about 70 per cent. UNICEF recognises the significance and magnitude of the problem and is already engaged in exploring the problems of urbanisation and its consequences on children in the 1990s and the turn of the century.

Now I would like to turn my attention to a series of other issues raised by various delegations.

### Inter-agency collaboration

Questions about collaboration between WHO and UNICEF, and about the cooperative effectiveness of the two organizations, were asked by the distinguished delegates of the USSR, Thailand, the Federal Republic of Germany, Switzerland, France, Belgium and Congo.

WHO and UNICEF have long worked closely at all levels - almost like a married couple, with occasional tensions but in essential harmony. It is not surprising that WHO is the agency which has sent a congratulatory message on the occasion of this Fortieth Anniversary meeting, the text of which I will read to you.

The Joint Committee on Health Policy meets every two years, and Inter-Secretariat meetings are held twice a year. Recently, contacts in relation to specific programmes and at regional and country level have grown considerably. Current collaboration between the two organisations focusses on the Expanded Programme on Immunization (EPI), Control of Diarrhoeal Diseases (CDD), Acute Respiratory Infections (ARI), maternal and neonatal care, malaria, nutrition, essential drugs, sanitation, and PHC in general, and particularly in respect to urban areas, and PHC information, education and communication. At the regional levels, memoranda of understanding were signed last year in Africa, Latin America, and the Middle East regions.

A meeting in Bellagio, Italy in April 1984 established the Task Force on Child Survival which, with a permanent secretariat, has proved to be a most useful mechanism for close global cooperation not just between WHO and UNICEF but also with the World Bank, the UNDP and major bilateral aid agencies. I am distributing today the report of the major meeting at Cartagena in October 1985.

#### Evaluation

We have taken note of the emphasis made by the distinguished delegates of Switzerland, Finland, Federal Republic of Germany, Italy, Australia, Bangladesh, Netherlands, Norway and USA on the need for UNICEF to further strengthen its evaluation activities. The Executive Director's Report shows how evaluation activities have grown over the last year, in all areas of UNICEF's activities. In addition, the delegations of Switzerland and Netherlands wished to see increased attention to evaluations that assess long-term impact of interventions. While efforts are being encouraged in this regard, particularly in disease-prevalence surveys, our priority to date has been on evaluations of the functioning and utilization of project and programme interventions with an emphasis on improving the feedback and use of evaluation results, so that immediate corrective action can be taken, as the delegation of Australia suggested. Impact evaluations, which are generally agreed to be much more costly and complex, are conducted in situations where the total cost of the project and the country situation justify it. example of this is the impact evaluation of the water supply and sanitation project in IMO State, Nigeria, which was presented as an Annex to the 1984 policy review paper on Evaluations. This is an area where UNICEF intends to rely more on the capabilities of outside research organizations, as the distinguished delegate of Hungary suggested.

UNICEF agrees with the delegate of the Netherlands that rapid assessments should not replace impact evaluations. At the same time, rapid assessments have their place and I hope Board members will take note of the four examples distributed at this meeting. Rapid assessments draw on but do not replace the more technical evaluations of EPI and related interventions, of which 21 were carried out by WHO, UNICEF and the governments concerned over the last year. We concur fully with the delegates of the United States and Norway that evaluation should be a part of the country programming process. During 1985 we also had most fruitful and productive joint evaluations undertaken with the Federal Republic of Germany in Sri Lanka, with the Netherlands in Nepal and with Norway in Nicaragua.

## Women in development

The importance and significance of women in development, in their own right, has been correctly stressed by many distinguished delegates, including those of Denmark, France, Canada, Australia, Federal Republic of Germany, Italy, Bulgaria, Thailand, and the Netherlands; the delegate of Japan expressed the cautionary note that we confine our attention to the area of women in the context of child health. I shall refrain from giving a full reply now, as at the Board's request this subject will be further discussed in the Programme Committee. I would only like to apologise if the information provided in my Report was inadequate. I hope that the Information Note being circulated will show that our involvement in this area is unwavering, and that the policy adopted during the last Board session is already being made operational.

The distinguished delegate of the FRG observed that the Regional Programme of Latin America was rather limited in scope and fell short of the programme strategy outlined last year. This impression may have been created by limitations on the length of the document; a copy of the unabridged description and analytical summary of the project is available to anyone who may wish to review it. (As, of course, are the full versions of all country programmes.)

## Education

Several delegations, including those of Thailand, Yugoslavia, Sweden and Italy, endorsed and stressed the importance and significance of female education and literacy in reduction of infant and child mortality and for development. I would like to report that it has been given prominence in all our situation analyses and in all education projects, especially where female illiteracy is high or female enrollment in schools is low. UNICEF also serves as the focal point on female education and literacy in the International Working Group on Education (IWGE), a consortium of donor agencies on education. A paper prepared by UNICEF on the subject should be published before the end of the year. I might add that the social mobilization efforts in UCI and ORT can be described as the most massive efforts ever launched in the world to bring knowledge to educate - to empower - women.

## Water supply and sanitation

I can assure the distinguished delegates of UK, Federal Republic of Germany, Sweden, Mali and Bangladesh that for the foreseeable future, as the Medium Term Plan makes clear, water supply and sanitation are likely to remain essential elements of UNICEF's programmes of co-operation - provided, of course, that national governments continue to request cooperation in this area from UNICEF. We will also be further strengthening linkages with health action and encouraging community participation. We have also developed some interesting techniques for trying to avoid bias and ensure the installation of water facilities in locations able to serve easily the majority of the community - a point raised by the delegation of Switzerland.

## Nutrition

I, of course, share the strong concern for nutrition expressed in the interventions by many delegations, including Thailand, Chile, Mexico and Cuba. I certainly reaffirm UNICEF's commitment to work for improved nutrition, both through health and through actions focussed on improved household food security. These, rather than major provision of foodstuffs, are now the appropriate way forward for UNICEF, since the World Food Programme now provides in far greater amounts under formal agreements in the 1970s with UNICEF the food which we had to provide in the 1950s. I hope this assures the distinguished delegate from the USSR that our concern for nutrition remains strong, even though the form of our support has now changed.

## **Africa**

I am grateful for the many complimentary observations made about UNICEF's publication on Africa's children, <u>Within Human Reach</u>. As mentioned by the distinguished delegates of Canada, Denmark, France, Australia, UK, Finland, Belgium, Japan, Italy, Sweden, Brazil, Ethiopia and others, emergency efforts need to be bridged into development and a better linkage developed. This has been and remains our basic policy. I should also take this opportunity to acknowledge Dr. Manzoor Ahmed's major contribution to the writing of this most useful publication.

UNICEF's strategy in Africa and our recent funding Appeal will be further discussed in the Programme Committee.

#### Adjustment

I would like to express our appreciation for the many expressions of support made by many delegations, including the distinguished delegates of France, Canada, Australia, Netherlands, Sweden, Congo and Brazil, for our work on "Adjustment with a Human Face". Over the last year, increasing interest and support has been shown to this call for a broader approach to adjustment. The battle is far from won, but ideas are changing and the need for a more growth-oriented adjustment process is already widely accepted. What is needed now is more action to follow rhetorical acknowledgement of this broader approach "with a human face". I ask delegations for their active support in

consistently asking for more attention to human needs in adjustment policy in international fora and national policy discussions.

#### Children in Especially Difficult Circumstances

I am grateful for many the expressions of support made by various delegations, including Canada, Australia, UK, China, Belgium, Lesotho, Bangladesh, Indonesia, Venezuela and others, as well as the cautionary note made by the distinguished delegate of the United States. Since the subject will be discussed further in the Policy review session, I shall not comment further here, except to clarify the matter of selectivity in some of the examples in the various papers.

May I assure Board members, and the distinguished delegate of Pakistan, in particular, that our intention was — and is — to direct attention to the needs of children in especially difficult circumstances and to identify practical ways to help. At points in the background papers, we included a few specific examples to illustrate the widespread nature of the problems. But in no way do we wish to raise issues of political interpretation or controversy which, by long tradition, are more appropriately raised in other fora outside the UNICEF Board. If the Secretariat has, in the perception of some, transgressed this tradition, I stress that it was inadvertent and I express our apologies. I am confident that this spirit, and the focus on children's needs, will guide our discussions of the paper later today.

# Finance and Administration

### Funding

Most delegations expressed concern over the funding difficulties being faced by the United Nations and UNICEF.

The financial plan presented this year gives a framework of projections for income and expenditures which are designed to be both positive and prudent. As the delegate of Thailand noted, we should view the expected nominal increase in resources as a positive prospect, and as the delegate from Japan observed, these projections have been revised downwards from the previous year's plan despite the favourable effect on the valuation of income resulting from the decline of the US dollar against currencies of contribution.

Nevertheless, as mentioned by several delegations including those of Belgium and Sweden, the uncertainties surrounding the level of future income need to be taken into account. As pointed out by the delegate from Thailand, one of the strengths of the financial plan is that it is a rolling forecast which gives us the capability to adjust the current planning levels should future increases in income not meet our present modest forecast.

On a more positive note, I am encouraged by the many delegations who have pledged increased financial support to UNICEF - especially to our General Resources. The delegate from Sweden brought the good news of a planned new

generous increase, bringing their contribution to general resources to approximately \$30 million at the current exchange rate. I was also pleased to hear of the intention of the Government of Japan to pledge a possible 16 million to UNICEF in 1986 to general resources; this would represent a welcome doubling since 1982.

I cannot take the Board's time now to express appreciation to all countries that have pledged increased contributions, but I would like to note, and especially commend, those developing countries which, despite the continuing unfavourable economy, have nevertheless pledged substantial proportional increases. These include Bhutan, Thailand, India and Indonesia. Likewise, despite events causing great human suffering and tremendous economic problems, Colombia has maintained its high level of contribution. I extend our thanks to each of these donors, not only for your financial support but also for the vote of confidence and the inspiration for even greater efforts on our part that they represent.

I look forward to further increases in support from other governments as we strive to achieve the goals set out in the Medium Term Plan.

The Federal Republic of Germany raised a question about the division of labour between UNICEF and WHO and the extent to which WHO could participate in accelerated programme of Universal funds for an mobilizing Immunization. UNICEF and WHO co-operate closely in this effort. For example, in the case of the Central America Child Survival programme "noted" by this Board last year, the Director-General of the Pan American Health Organization (PAHO) and the UNICEF Regional Director toured Europe last summer to raise funds for the project. This resulted in the \$30.5 million contribution from the Government of Italy and the EEC, and supplementary funding from other Another example of a frequent pattern of countries (France, Sweden). collaboration was the contributions made by both WHO and UNICEF to the Colombia UCI campaign. UNICEF and WHO are also jointly seeking funds for the Essential Drugs Revolving Fund to which the Netherlands has pledged a first substantial contribution, hopefully to be followed by others.

I also wish, to gratefully acknowledge the donations in-kind announced by the USSR delegate of one million doses of vaccines each year for five years, and the announcement by the Bulgarian delegate on the provision of vaccines to one African country.

The Netherlands delegation has asked for an improvement in the presentation of project documents for supplementary funding, and the Canadian delegation asked that we explain how the various elements of funding country programmes might be presented in a consolidated fashion. We are ready to make some specific proposals on this in the Working Group on Board Procedures.

UNICEF has made a serious effort to upgrade the quality of these documents, which was commended by a number of delegations. We will continue to make further efforts to improve them.

UNICEF's wide support not only among governments but also among private groups and individuals gives us the opportunity to develop innovative fundraising methods, for which a number of delegations, such as the UK and Sudan, have commended UNICEF. In pressing forward with these innovations, we will keep in mind the cautionary words of the Polish delegate, and his emphasis on the responsibility of governments to more adequately support UNICEF.

#### Budget Considerations

The reduced financial prospects and increased funding uncertainties have motivated reductions in previously planned and approved budgetary expenditures as explained in the Medium Term Plan. This was welcomed by many delegations. Belgium, France and India expressed concern that UNICEF exercise economy with regard to budgetary expenditures. On the other hand, some delegations such as Chile are concerned that too severe budget reductions may have a negative effect on capacity to deliver programmes, and the Federal Republic of Germany expressed concern that overly severe reductions in Headquarters could affect management capacity.

It should be noted that we will shortly begin a very thorough review at the divisional and regional level of the 1986-1987 revised budget and the 1988-1989 proposed budget. As was the case two years ago, the Budget Planning and Review Committee, chaired by the Deputy Executive Director (Operations), will visit all UNICEF regions and examine the budget proposals of each field office with UNICEF Representatives and Regional Directors. The same process will be carried out in the Headquarters locations with each division Director. The process commences in August and will be concluded in December of this year. During this process, the Budget Committee will benefit from annual reviews and programme previews and will assure that an adequate budget regarding staffing and administrative expenses is formulated. It is through this process that the concern, as expressed by the Canadian delegation for adequate linkage between programme and budget, is addressed. It is through such a budget preparation process conducted on-the-spot and together with our field and Headquarters' managers that we intend to protect ourselves from "cutting too little or too much", a concern expressed by several delegations.

Delegations such as Sweden and Italy were encouraged by the strengthening of UNICEF capacity in Africa which has better equipped UNICEF to provide lasting improvements; this indeed was a keynote of the 1986-1987 budget. After intensive training carried out during 1985 and with proper management support, we are confident that we will, during 1986, have office structures, staff and delivery capacity in many newly established offices in Africa able to effectively handle increased resource levels, a question touched upon by FRG and Australia.

Many delegations, including the Federal Republic of Germany, praised UNICEF's distribution of 83 per cent of all staff in field offices and I, of course, agree with the United Kingdom delegate's advice that UNICEF live up to its image as a field-oriented organization with a lean administration. I am pleased that even with the greatly increased efforts to help others use their

resources for UNICEF's priorities, we have been able to keep administrative services in the 10 to 11 per cent range.

Most delegates who referred to UNICEF House were supportive of the efforts that have now been made to trim the costs of moving to the new accommodation. This was achieved through an informal process of consultation between Board members initiated by the Chairman of the Board.

## Management Efficiency

Several delegates, including Japan, Finland, Bangladesh and Pakistan, referred to the need for UNICEF to increase its management efficiency as a means of using its limited resources more productively, especially in the present climate of uncertainty. The various words of support given to the actions taken by the secretariat in the context of our 1985 "Year of Management" are appreciated, but, as the distinguished delegate of Pakistan said, "there is always room for improvement". I look forward to further advice that the Board may give in this area in the Committee on Administration and Finance.

Several delegations raised issues related to staffing and supply. We will return to these agenda items in the Committee on Administration and Finance.

# Information and Communication

The United Kingdom suggested a review of the Secretariat's communications strategy in industrial countries and has asked that we report on this to the 1987 Executive Board session. This review would examine the role of public information to see whether it can be made a more effective vehicle for development education in these countries. I would certainly agree that bringing home the nature of long-term development to a mass audience is an objective of UNICEF's advocacy for children and that a public educated in the problems of development is clearly in the long-term interest of those children and our efforts on their behalf.

Quite a few delegations discussed our programme communications effort, with Netherlands, France and the United States raising concerns about sustainability. The demand for child services stimulated and articulated by families motivated through programme communications is building the foundations for a demand infrastructure which would enable primary health care to become a permanent, sustainable and continuous process. The heightened sensitization of the community makes other social interventions and programmes such as family spacing much more readily accepted by people.

## Cooperation with NGOs

Canon Moerman, in his opening remarks to the Board, reminded us of the multiplicity of experience and interests in the NGO community, in general, and the NGO Committee on UNICEF in particular. He was correct in pointing out that NGOs have frequently led the way in identifying problems affecting the

world's most vulnerable children and actions available to address these needs. We have seen this in the recent past in NGO leadership on the Convention on the Rights of the Child, in the important advice and consultation which they offered in the preparation of this year's policy paper "Children in Especially Difficult Circumstances", and in the NGO Committee's organization of the Forum on "Action for Children: Unfinished Business" and in the exhibition of NGO booths at the visitor's entrance.

Fruitful collaboration between UNICEF and the NGO Committee has seen another kind of Action for Children - the new monthly publication of the NGO Committee which is now distributed around the world in English, Spanish and French. Another working group of the Committee has sought to facilitate field level relations among NGOs and UNICEF at national levels and has helped expand the network of UNICEF and NGO contacts and cooperation in many areas of the world.

## Rights of the Child

The delegations of Bangladesh and the German Democratic Republic referred to the work being done on the drafting of the Convention on the Rights of the Child. UNICEF's traditional concern for the world's obligations towards children and the Rights which derive from this concern will be given increased attention in our work. UNICEF is actively participating in the drafting of the Convention, and looks forward to supporting its implementation once the Convention is completed and ratified.

## Inter-Agency Coordination

Several delegations reminded us of the importance of improved inter-agency co-ordination in order to achieve cost savings. The delegations of Hungary, Japan, Denmark and Sweden particularly noted - and commended - UNICEF's demonstrated commitment to collaboration. I take special pride in the acknowledgements of our genuine support for the work of the OEOA.

## Greeting Cards

Belgium cited the higher sales and income from greeting cards in 1985 and noted a new dynamism in the greeting card operation, which we believe is largely the result of activities under the Interregional Sales Development Programme (ISDP) approach approved by the Executive Board in 1984 and the excellent work done by National Committees. We certainly welcome the I million card increase in the USSR's orders for 1986.

Concern was expressed that some national committees retain more than 25 per cent in commission. Steps are being taken to bring all retentions down to the 25 per cent as will be explained in the Finance and Administrative Committee's deliberations.

The Chairman of the Standing Group of National Committees for UNICEF expressed concern over the GCO's plan to take increasing responsibilities in the area of promotion and fundraising, particularly in direct mail. He felt

that in view of the monumental task facing GCO in achieving the 50 per cent profitability level set for it by the Board, GCO's efforts should not be diverted or diluted into other activities. He said he hoped that GCO Geneva will have the means required to discharge its duties, as far as logistics, funds and staff are concerned.

I believe that the report of the Director of the Greeting Card Operations and the upward trends he will report will set Mr. Jaeger's fears to rest. But UNICEF would be interested in pursuing further discussion of this matter at the forthcoming Reunion.

I should add that we welcome the rapid increase in sales in such potentially huge markets as India, where sales have nearly doubled to 5.7 million cards in the past 4 years, and are headed toward 10 million in 1988.

#### UNICEF's 40th Anniversary

Delegations including those of China, Federal Republic of Germany, Finland, German Democratic Republic, India, Italy, Lesotho, Norway, USA and the USSR paid tribute to UNICEF on its 40th Anniversary. To the extent that their kind words were particularly addressed to me and to my colleagues in the secretariat, I express our own deep appreciation. And I enthusiastically join the Norwegian delegate in affirming that "at this milestone, it is even more important to look ahead".

That is exactly what I know all members of the Board - and the Secretariat - wish to do ... "making our opportunities as often as finding them", as Francis Bacon would advise us, and looking ahead to a UNICEF ever vital, ever innovative, ever championing the essential needs of children.

Let me conclude on the note that was captured by Shakespeare centuries ago:

"There is a tide in the affairs of men, Which, taken at the flood, leads on to fortune... On such a full sea are we now afloat; And we must take the current when it serves, Or lose our ventures."

I would argue to the Executive Board and to our colleagues, that we are just at such a point today on a historic breakthrough for child health, nutrition and development. We in this hall are the pioneers in what is one of the most exciting revolutions of this century. I can assure the Executive Board that the UNICEF Secretariat, under your guidance, will do everything possible to help in bringing about this unparalleled breakthrough in all the countries of the world.