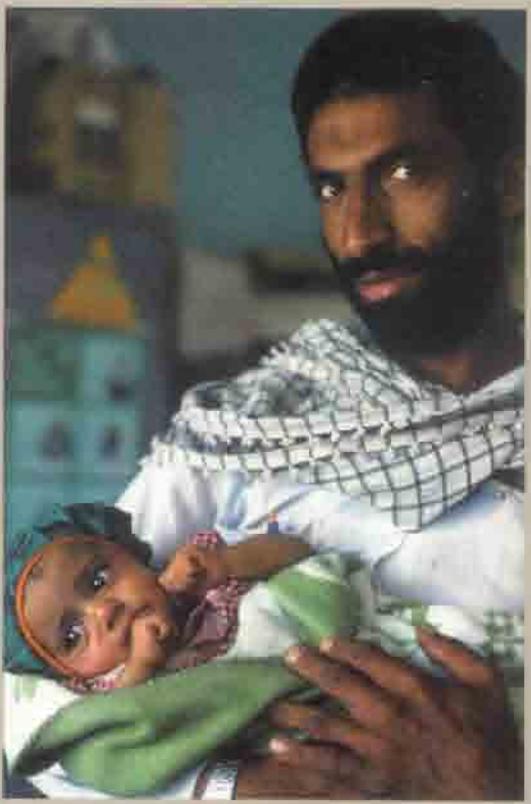
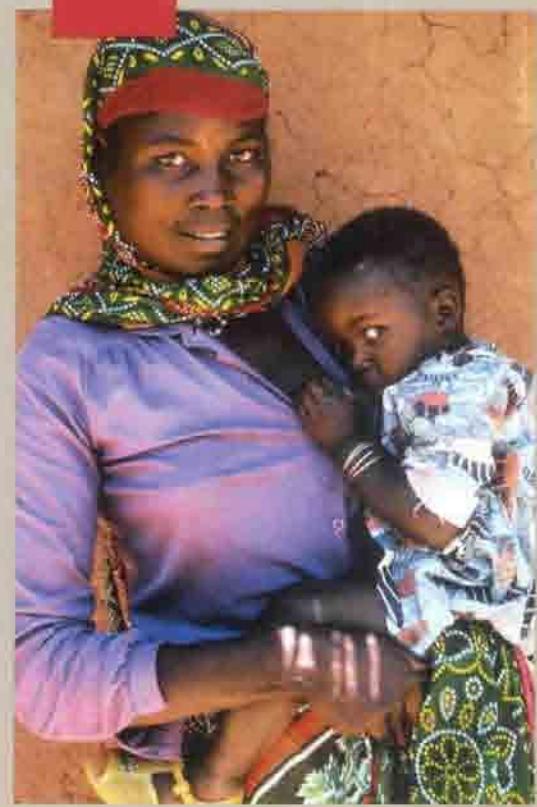


1993

UNICEF Annual Report



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United Nations Children's Fund

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1 August 1992 to 31 July 1993

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Cover photographs

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I NTRODUCTION

BY THE EXECUTIVE DIRECTOR
JAMES P. GRAHAM



Violent acts of man and nature challenged the conscience and resources of our global village last year as rarely before.

UNICEF was involved in 50 major humanitarian relief operations caused by events which ranged from drought and floods to volcanic eruptions and civil wars. Long gone are the days when the world was blind to suffering in far-off places. A revolution in communications has made it impossible to conceal large-scale famine or violence. Or for our leaders to avoid the question: "What are you doing about it?"

Television and news-hungry media have brought these 'loud' emergencies into our homes, our offices and our schools. The world of CNN reaches out to us even as we wait on line at the supermarket or the bank. We can turn a blind eye but the imprint of suffering is not easily erased. At the very least, we have to ask ourselves: "What are we going to do about it?"

In developing countries, televised images of the environment and lifestyles in the industrialized world also have the power to shock and invite comparison. Awareness of opportunities elsewhere in the global village has fuelled democracy movements and helped to break down barriers, overpower authoritarian regimes and transform the conduct of national and international affairs.

The graphic repetition of scenes of violence and suffering has a downside. The recent proliferation of emergencies shouting for our attention carries with it the risk of 'compassion fatigue' – a numbing of the senses. It can also distort perceptions of the scale of suffering in relation to human needs elsewhere.

In 1992, the world was shocked by the deaths of about 500,000 children as a result of 'loud' emergencies. The anguished faces of those children from Somalia, the Sudan, former Yugoslavia and other distant lands were in our living rooms night after night.

What the cameras missed last year were the silent emergencies – the hidden suffering of millions of other child victims of malnutrition, disease and endemic poverty. The cameras missed the 'silent' trauma of death – death because children were not immunized, because their communities lacked safe water and sanitation, and because their parents were unaware of oral rehydration therapy (ORT). They also missed the tens of thousands of otherwise healthy children who went blind because their parents did not know that vitamin A in the right foods or a capsule could save the sight of a son or daughter.

The deaths of some 5,000 children every day from diarrhoeal dehydration passed

largely unnoticed by the media. The needs of those children were overshadowed by the televised profile of 1,000 children who died each day at the height of the Somalia emergency.

Such silent emergencies claimed the lives of nearly 12 million of the 12.5 million children who died in 1992 and will take at least as many again this year. We cannot allow those deaths to remain in the shadows. Some 35,000 children are dying every day, the great majority from causes which we can prevent at very low cost. No earthquake, flood or war has taken the lives of 250,000 children in a single week, and yet that is what is happening week after week in the world's poorest countries.

The international community must also come to terms with the fact that increasing demands are being placed on limited resources. At the time of writing there were 45 civil and ethnic conflicts raging around the world, in addition to natural disasters and the ongoing silent emergency.



UNICEF/93/1000

Every life is precious, and we welcome the increasing international response to the fires sparked by loud emergencies, but the nations of the world must also invest far more than they do today in their prevention. As the Secretary-General of the United Nations stressed in his Agenda for Peace report, there is a critical link between democracy and the satisfaction of people's basic needs and aspirations through development. The alleviation of poverty's worst manifestations early in children's lives can do much to break the cycle of want, frustration and social disaffection that is at the root of so many of today's conflicts. There is a critical need as well to educate children not only in the 'three Rs' but also in tolerance for ethnic, cultural and other community differences.

This is not Utopian thinking. In Lebanon and the Philippines, 'education for peace' pro-

grammes supported by UNICEF have shown that much can be done towards teaching children to get along with their neighbours and reduce conflict. Immunization is perhaps our best example of prevention and what we can accomplish by extending the reach of an affordable technology. The campaign for universal child immunization (Uci), led by UNICEF and the World Health Organization (WHO), is now reaching more than 80 per cent of the world's children with vaccines against six child killer diseases before their first birthday. Our target is 90 per cent coverage within seven years. Uci is saving over 3 million lives every year at a cost of between two and three dollars per child.

Ambitious but doable goals were adopted by the world's leaders at the historic World Summit for Children in 1990. In the great majority of countries, national programmes of

action (Npas) to seriously pursue those goals have been, or are being, prepared.

If our goals for children in the 1990s are met, the world for today's generation and future generations can be a safer, more peaceful place. With a restructuring of nations' priorities to give children a first call on their resources, we can reduce infant and child mortality by one third. We can halve malnutrition, illiteracy and maternal mortality rates. We can provide universal access to safe water supplies and sanitation facilities and we can meet our immunization target.

We would need very little new money to achieve those objectives. We estimate that an additional US\$25 billion a year would be sufficient to implement the goals of the World Summit for Children and that most of it could be found within existing local and official development assistance (oda) budgets.

UNICEF has initiated 'education for peace' programmes in countries where armed conflict has closed schools and disrupted children's lives. Here, children from very different cultural and religious backgrounds learn to accept these differences, working and playing together at a peace camp outside the war zone.



UNICEF/EPZ/90/Dan Smith



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UNICEF responds to the needs of women and children not only through its emergency programmes, but also by providing continuing care for those caught in 'silent' emergencies, the victims of malnutrition, disease and poverty.

Developing countries are trying to find two thirds of that amount by rerouting resources from less productive areas to the social sector. There has been an encouraging shift in attention, in Africa and other developing regions, towards the need to develop nations' human capital. At the present time, only about 10 per cent of government spending in the developing world goes towards basic nutrition, health care, water supply, sanitation, primary education and family planning.

Industrialized countries have been asked to find an extra US\$8 billion a year by rearranging their priorities as well. Major donors currently spend less than 10 per cent of their ODA on meeting priority human needs in the social sector. If budgets are restructured so that at least 20 per cent of local and ODA spending is earmarked for meeting priority human needs, then the Summit goals for children would fall within our grasp.

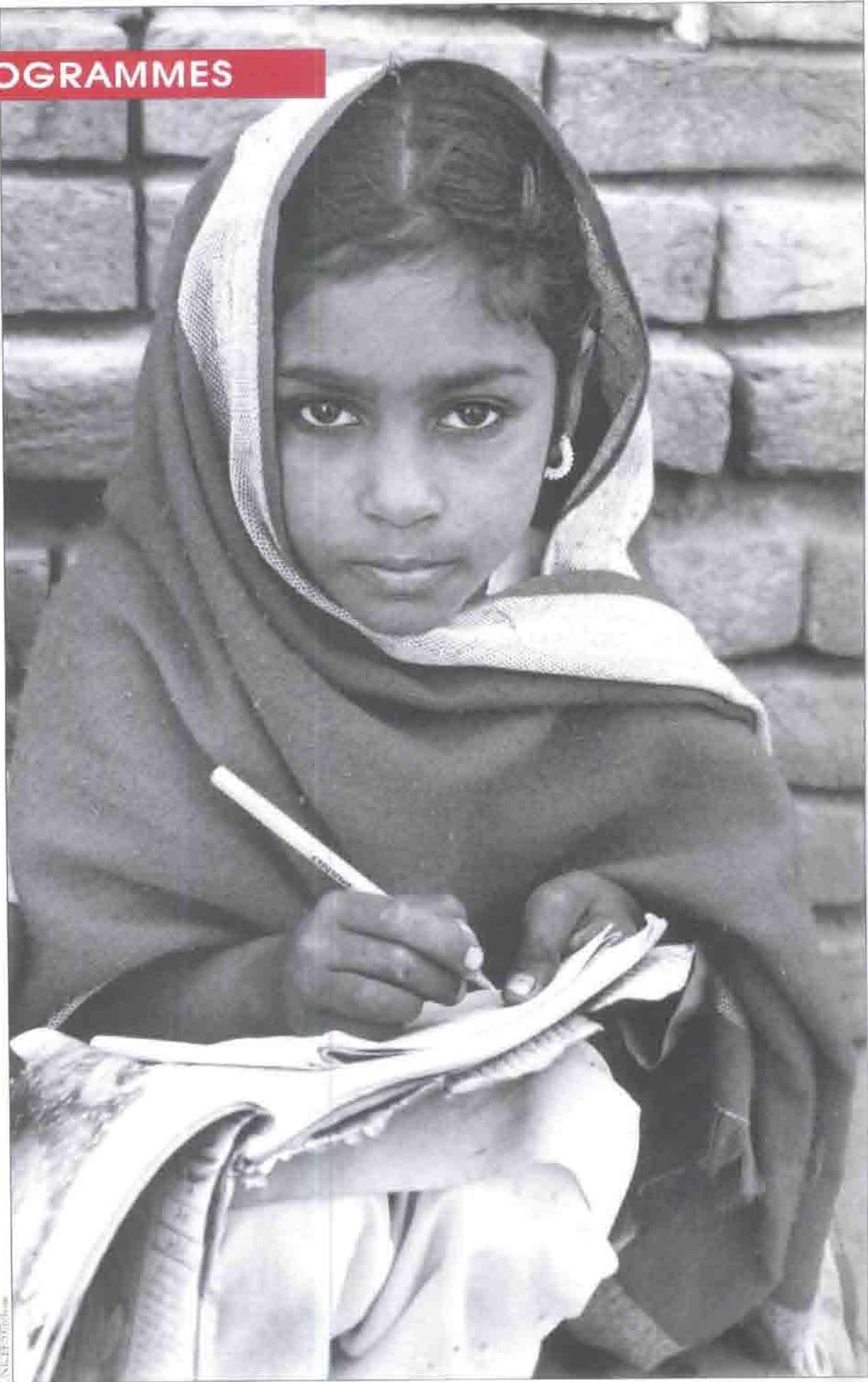
Unfortunately, while the world has become increasingly responsive to the 'loud' emergencies, it is still lagging in its efforts to alleviate the 'silent'

ones where so much can be done with so little additional commitments. What the international community must recognize is that the two travel hand in hand. Poverty, want and disaffection too often find expression at the point of a gun. Tragic events of the past year should convince nations that prevention through development is the least painful and costly course to pursue.

We can and we must break the cycle of poverty, sickness and violence that squanders children's potential and poisons their view of the world at large. Given the needs and the low-cost solutions at the disposal of the international community, it is an increasing obscenity not to act. Morality marches with changing capacity. The decade of the 1990s has ushered in a new era of opportunities for cooperation and social progress. We must seize it with both hands for our children today and for a better world tomorrow.

James P. Grant
James P. Grant
Executive Director

PROGRAMMES



1992 – A REVIEW

A new wave of emergencies in 1992 served notice that the world remains a dangerous place. Many of the dreams of the post-cold war era were put on hold as rivals in a host of countries pursued ethnic, religious, territorial and political differences at the point of a gun. Children, as always, were among the first to suffer. Nature was also relentless. Drought, floods and other traumatic events challenged the resources and logistical capacity of development and relief agencies as never before.

During the year, UNICEF was involved in humanitarian responses to children's needs in over 50 countries, most of them very poor, and many of them riven by factions which complicated the delivery of emergency supplies. With other agencies of the United Nations, notably the United Nations High Commissioner for Refugees (UNHCR) and the World Food Programme (WFP), and under the broad coordination of the newly created United Nations Department of Humanitarian Affairs, UNICEF is involved in 10 'complex' emergencies.

UNICEF expenditures on humanitarian relief totalled almost US\$170 million. This was 22 per cent of the total budget expenditures for 1992 – the highest level since the post-World War II emergency effort – and over three times the amount spent on emergency operations in 1990.

The strife and suffering in Somalia and in former Yugoslavia were emblematic of political complexities which have stretched to the limit UNICEF's capacity to meet the needs of children so clearly drafted in the Convention on the Rights of the Child and the Declaration of the 1990 World Summit for Children.

On numerous occasions, UNICEF found that its ability to deliver humanitarian assistance was hindered not by difficult terrain or shortages of resources, but by lack of political will and respect for human rights. In several instances, protracted negotiations with the parties concerned not only delayed relief efforts but also added to the suffering and death among civilians engulfed by the crisis.

Frequently, it became exceedingly dangerous to deliver food, water, medicines and other relief supplies. In spite of system-wide measures to strengthen security during relief operations, four international and three locally hired UNICEF staff members were killed in Somalia and the Sudan.

With the proliferation of politically complex emergencies, the Secretary-General of the United

Nations established the Department of Humanitarian Affairs (DHA) to coordinate United Nations relief activities. The UNICEF Executive Director travelled to Somalia with the Under-Secretary-General for DHA, and to Iraq as leader of a United Nations humanitarian relief delegation. Mr. Grant also made two trips to former Yugoslavia.

The heavy involvement in emergencies raises basic issues of UNICEF policy and support for longer-term development efforts to tackle poverty, hunger, ill health and illiteracy. Most of the 13 million children who died during 1992 died as a result of 'silent' and mostly preventable emergencies. The eradication of poverty is the key to most of UNICEF's goals for children in the 1990s.

UNICEF programmes in such chronic emergency countries as Afghanistan, Angola, Ethiopia, Mozambique and the Sudan recognize this development-emergency continuum by attempting to ensure that emergency activities, in the areas of health, water supply and sanitation, nutrition or household food security, not only relieve immediate suffering but also accelerate rehabilitation and development. Water tankers can provide relief in the midst of a drought emergency, but they are of little use when the rains return. Emergency resources invested in a well and handpump, however, will give a community the foundation for a more secure future.

Warring factions permit the passage of a relief convoy to deliver supplies – blankets, clothing, food, water and medical supplies – to children in need.



UNICEF efforts to contain the silent emergencies wrought by disease, malnutrition and illiteracy continued to yield significant gains in child survival, development and protection.

Immunization coverage was sustained and expanded in a large number of countries, although the price UNICEF paid for vaccines increased by an average of 23 per cent. UNICEF negotiated with suppliers in the hope that they would moderate their increases, and developing countries were encouraged, wherever possible, to begin paying for their own vaccines through the vaccine independence initiative.

The global oral rehydration therapy (ORT) use rate reached more than 38 per cent during the year, more than double the 17 per cent of 1985. But some 3 million children died needlessly in 1992 from diarrhoeal diseases. Revitalized programmes are needed at global and national levels, and a series of country-based reviews began to examine governments' plans of action, goals and training, together with nations' capacity to produce and distribute oral rehydration salts (ORS).

UNICEF expanded the focus and scale of its support to Central and Eastern Europe, the Baltic States and the newly independent States, and work started on the development of country programmes for Albania, Armenia, Azerbaijan, Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan. A special representative was appointed for Albania and the UNICEF Representative in Kabul served as focal point for the four Central Asian Republics and Kazakhstan. In February and March, UNICEF and World Health Organization (WHO) collaborative missions with the United Nations Development Programme (UNDP), the United Nations Population Fund (UNFPA) and WHO reviewed actions to deal with the looming crisis of health and other urgent human needs in 11 republics of the newly independent States and the three Baltic countries. The missions recommended that some US\$420 million of international support be provided during the remainder of 1992 and 1993 for urgent health and other human needs.

The special needs of Africa's children, dramatized by several ongoing emergencies, remained a UNICEF priority. Programme expenditures in Africa increased from US\$210 million or 36 per cent of total programme expenditures in 1991, to US\$284 million or 38 per cent of the total in 1992.

Total UNICEF programme expenditures for the year totalled US\$744 million – 26 per cent more than in 1991.

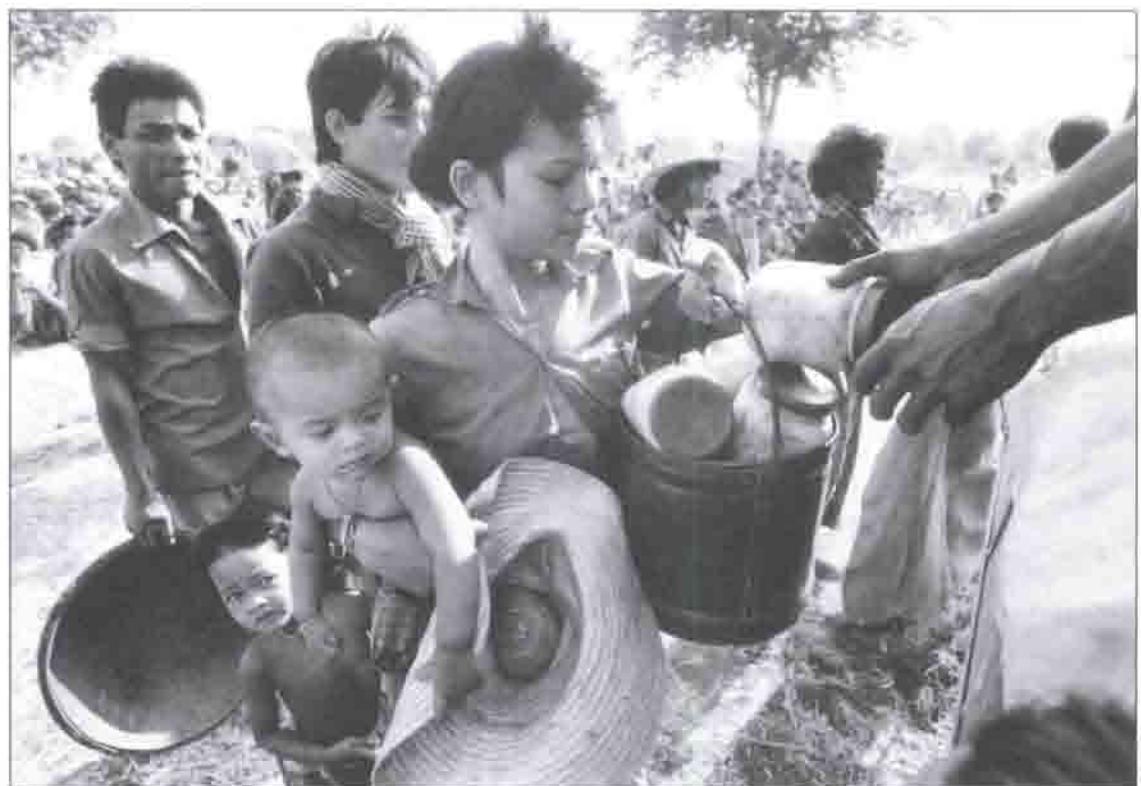
During the year, the number of countries implementing the Bamako Initiative advanced to 25, and the Initiative received increasing support as a valuable alternative to traditional mixes of public and private health services. Although 22 of the countries actively implementing the Initiative are in sub-Saharan Africa, several countries outside Africa, including Myanmar, Peru and Viet Nam, either received UNICEF technical support during the year or asked about the feasibility of community-managed and financed health care for their people.

UNICEF and WHO wrote to all Heads of State or Government during the year seeking their personal support for breastfeeding and the baby-friendly hospital initiative (BFHI). By the end of 1992, 122 developing countries either had taken action to end free and low-cost supplies of breast-milk substitutes or had never had them. In total, 767 hospitals are committed to achieving or have already achieved baby-friendly status, having undertaken the 'Ten Steps to Successful Breastfeeding' to promote and provide optimum support for breastfeeding.

The girl child is still a victim of discrimination, but more countries are committed to improving her chances in life.



UNICEF/92/101



Humanitarian assistance – the delivery of the basic essentials of life to victims of armed conflict – has become difficult and dangerous.

UNICEF/Lorayne

More than 100 Heads of State or Government attended the Earth Summit in Rio de Janeiro (Brazil). Agenda 21 – the Summit blueprint for action – embraced the major goals for child survival, development and protection, together with the concept of primary environmental care (PEC). The voices of the young were also heard at the Summit, which supported global forums for children and youth.

One of the most alarming trends in the worsening acquired immunodeficiency syndrome (AIDS) pandemic was a rapid global shift in infection rates towards Asia, the most populous region. WHO predicted that by mid-decade, more Asians than Africans would be newly infected each year. AIDS is taking a heavy toll on youth, who represent an increasingly large proportion of the populations of developing nations.

During the year national programmes of action (NPAs) and the Convention on the Rights of the Child have become important guidelines for setting priorities and strategies for children's well-being. By year-end, 127 countries had ratified the Convention, and 9 out of 10 children in the world lived in countries with NPAs, adopting or adapting the goals of the World Summit for Children to the particular circumstances of each country. Some 137 countries have prepared, or are in the process of preparing, NPAs that effectively translate their leaders' commitments to the World Summit Dec-

laration into measurable goals with programmes to implement them. UNICEF estimates that 98 per cent of children in Asia, 97 per cent in Latin America, 90 per cent in sub-Saharan Africa and 83 per cent in the Middle East and North Africa are now covered by NPAs.

The NPAs and the Convention were also given political impetus by four regional meetings focused on mobilizing commitments and resources. These meetings were the International Conference on Assistance to African Children (ICAAU), held by the Organization of African Unity (OAU) in Dakar (November); the Conference on Children's Welfare, Protection and Development, held by the League of Arab States in Tunis (November); a high-level meeting on NPAs for Latin America, held in Mexico City (October); and the Conference on Children in South Asia by the South Asian Association for Regional Cooperation (SAARC), held in Colombo (September).

NPAs also reflect the international community's growing acceptance of the need for development to have 'a human face'. During the year, UNICEF attempted to involve the World Bank and regional development banks more closely with the NPA process so that they would direct a greater share of their resources to the social sector, with special emphasis on primary health care (PHC) and basic education.

UNICEF's capacity to monitor its goals for children was strengthened during the year by the adoption of indicators to enable comparisons between countries. A new approach to the estimation of infant and under-five mortality rates was adopted. During 1993, a status report, *The Progress of Nations*, will be published, showing the progress, country by country, towards the major goals of the World Summit for Children.

UNICEF cooperated in programmes in 137 countries in 1992. The majority were in sub-Saharan Africa (45), followed by Latin America and the Caribbean (35), Asia (34), the Middle East and North Africa (14), and Eastern Europe and Central Asia (9). In keeping with UNICEF's priority focus on the needs of the poorest, programme expenditures for least developed countries were 43 per cent of the total. □

CONFERENCE PURSUES GOALS FOR AFRICA'S CHILDREN

10

Despite progress made to alleviate poverty and lower mortality rates, African nations still have far to go to meet international goals for children in the 1990s. One third of the estimated 13 million children who die from preventable causes each year are African, although they comprise just over 10 per cent of the world's children.

It was against this background that UNICEF supported the Organization of African Unity (OAU) and the Government of Senegal in holding a three-day International Conference on Assistance to African Children (ICAAC) in Dakar in November. Forty-six African Governments were represented – most of them at the ministerial level – together with 26 non-African countries, both industrialized and developing, and two liberation movements. Non-governmental organizations (NGOs), which provide about 30 per cent of the aid for Africa, were invited for the first time to participate in donor-government discussions. Eighteen United Nations agencies, in addition to UNICEF, also joined this major endeavour to find ways and means of accelerating progress for the continent's children.

At the time of the Conference, more than 40 African countries had prepared, or were in the process of preparing, national programmes of action (NPAs) in order to reach the goals for the 1990s agreed to at the 1990 World Summit for Children.

NPAs address priority needs in health, nutrition, education, and water and environmental sanitation through low-cost collaborative efforts with the communities and families most at risk. Conference participants agreed to incorporate their NPAs in their bilateral and multilateral consultations and development programmes.

♦ TO SAVE 1 MILLION LIVES

The medium-term (1995) and longer-term (2000) goals are ambitious. The countries attending the Conference agreed to accelerate action towards a set of intermediate targets by the end of 1995 to:

- raise Africa's average immunization coverage level from 75 per cent to 80 per cent against diphtheria, pertussis, tetanus, polio and tuberculosis;
- ensure 90 per cent coverage against measles and 90 per cent coverage against tetanus for women;
- achieve 80 per cent usage of oral rehydration therapy (ORT) against diarrhoeal dehydration;
- virtually eliminate iodine deficiency;
- encourage exclusive breastfeeding.

These goals are achievable for the most part with only modest increases in external support, provided there is a strong political commitment and widespread social mobilization. Taken together these measures could help prevent the deaths of 1 million children a year.

A conference report prepared by the OAU and UNICEF estimated that African nations collectively would need an additional US\$12.7 billion a year to achieve the agreed goals. About two thirds of this (US\$8.8 billion) would be needed for major sectoral programmes in the areas of health, education, nutrition, and water supply and sanitation. Some US\$4 billion would go towards programmes for the poorest households, especially in countries that are recovering from war, drought and other disasters.

Most of these resources could be found through a restructuring of national and official development assistance (ODA) priorities. African and other developing nations devote just over 10 per cent of their budgets to priority human needs. More is spent on armies and debt servicing than on education and health. Donor countries similarly direct less than 10 per cent of ODA towards basic needs in the world's poorest communities. About 1.5 per cent of all bilateral aid goes to primary health care, 1.3 per cent to family planning, and 0.5 per cent to primary education.

What is needed, in the words of UNICEF Executive Director James P. Grant, is "20/20 vision" – a reassessment of priorities by which 20 per cent of national budgets and 20 per cent of ODA are apportioned to the social sector and the special needs of children.

CHILD SURVIVAL AND DEVELOPMENT

PRIMARY HEALTH CARE

THE past year has seen a movement towards developing a more comprehensive package of health interventions at the community level by building on the outreach of the expanded programme on immunization (EPI) and the spread of the Bamako Initiative. Evidence of this is seen mostly in Africa, where there is an urgent need to organize the PHC delivery system. Examples of such action are found in the Gambia, Guinea-Bissau and several other African countries.

Many countries continued to build on the successes of universal child immunization (UCI) to develop integrated health systems. Immunization programmes provide at least five contacts between infants and health care providers in the first year of life, and several countries – Bangladesh, Indonesia, Iran, Nepal, Nigeria and Uganda – utilized these contacts during the year to deliver vitamin A and iodine supplements, promote ORT, give guidance to mothers on the treatment of acute respiratory infections, and promote breastfeeding and prenatal care for pregnant women.

At the meeting of the Joint Consultative Group on Policy (JCGP) in January, WHO and UNICEF were directed to prepare a document on the subject of organizing district health systems based on PHC. The paper highlights the importance of systems in

maintaining the health gains made in the 1980s. It also emphasizes ways in which successful programmes such as EPI can reinforce district health systems.

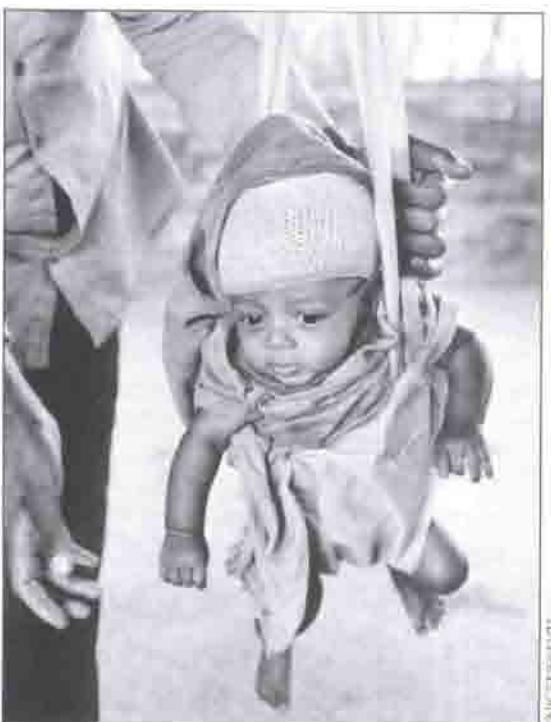
THE BAMAKO INITIATIVE

AFTER five years of careful nurturing, the Bamako Initiative has reached a critical stage in its evolution. In an extensive evaluation, the London School of Hygiene and Tropical Medicine has found the Initiative to be an appropriate way to develop PHC services. Thus far, 25 countries are implementing it as an alternative to traditional mixes of public and private health services, but unless donors resolve to give a major push financially and otherwise, its contribution to PHC is destined to remain small. At the present rate of progress, it would take 40 years for the Bamako Initiative to revitalize Africa's health infrastructure, and even then, half the population beyond the range of existing facilities would be left without access to adequate health care.

Based on past experience in 22 sub-Saharan African countries, Peru in Latin America, and Myanmar and Viet Nam in Asia, UNICEF estimates that 9 countries already have the potential to accelerate implementation of the Initiative and achieve national coverage by mid-decade if suffi-

11

The basic health protection that is every child's right is at last within the reach of the developing world.



UNICEF/Thomas



UNICEF/Thomas

YEMESSOA, CAMEROON

Hope restored in Yemessoia

When he reached the top of the hill, Celestin Ngba cast a weary eye towards the health centre and then back downward into his village.

He traced the thin gravel line of the main road as it wound between mud walls and iron rooftops, burrowed through plantations of cocoa, cassava, groundnuts and plantains, and then surfaced briefly as if to take in air before disappearing for good beneath a wall of equatorial forest.

The Ngba family seldom travelled beyond the tree line. Motorized transport was infrequent, and it was a three-hour trek to the town of Obala, just 15 kilometres away. Besides, they had most of what they needed in Yemessoia. Isolated within the forest, the village was modern by rural standards. The water supply was pumped from a deep borehole and piped to outlets conveniently located along the main road. Electricity was drawn from the national power grid, and now there was a health centre with a full-time head nurse and one trained assistant.

Mr. Ngba's 17-year-old daughter, Adele-Philomene, had just given birth there, and both mother and child were in excellent health.

Fortunately, the centre had recently reopened under community management and offered essential drugs and basic health care for very modest fees. "It was unbelievable," said Mr. Ngba. "If we had been able to afford transportation to the mission hospital in Efok I can tell you it would have cost 10 times more. Before our community took over the management of the centre, the place was almost abandoned and there were never enough medicines. The nurse wrote long prescriptions and sent you away."

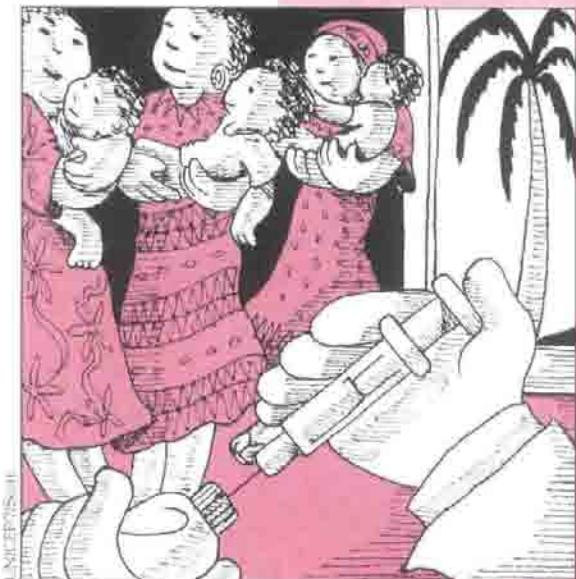
The health centre in Yemessoia is one of 38 which have been set up in 10 provinces of Cameroon under the Bamako Initiative to replace poorly run government services and to protect communities from the overpriced and sometimes dangerous drugs prescribed by street merchants. The Initiative was launched in 1987 in Bamako (Mali) by African Ministers of Health after discussions with UNICEF and WHO about ways of transforming some 40,000 government health facilities in sub-Saharan Africa into efficient and affordable community-run operations.

The Yemessoia centre has two buildings which are open day and night. Vaccinations are given daily. Drugs are always available to treat the most common ailments: malaria, roundworm, skin infections and acute respiratory infections. An antenatal clinic is available to all pregnant women. The chief of the village reports that not one woman has died from pregnancy or birth-related complications in more than a year. He said that although falling cocoa prices had hurt local farmers, more than 80 per cent of villagers had been able to afford the drugs and health care provided. Attendance at the facility had more than doubled from 958 visits in 1991 to 2,190 in 1992.

Yemessoia is in one of three provinces which have introduced the Bamako Initiative with UNICEF assistance. USAID and a Germano-Cameroonian primary health care project each support another three provinces, while FAO helps one other. NGOs, including Save the Children, CARE and the Association of French Volunteers, are also supporting the Initiative in a number of provinces. In the UNICEF-assisted area, inhabited by about 4 million people in 41 health districts, the objective is to bring 38 per cent of the population under the umbrella of the Bamako Initiative by 1995.

Each centre is supplied with essential drugs from a warehouse in the capital, Yaounde. The drugs are procured internationally through UNICEF channels at extremely favourable bulk rates. Each centre then adds its own margin to cover operating costs and sets fees for other health services. Only 10 per cent of the centres have failed to recover their operating costs.

Almost 2,000 government health centres covering some 20 million people in sub-Saharan Africa have been revitalized by the Bamako Initiative. Cameroon hopes to increase the number of its health centres under community management from 38 to 118 in 1993.



cient financial resources are made available. For the remainder, including many large countries, resources will have to be found and, in addition, the basic capacity of the health system will require strengthening.

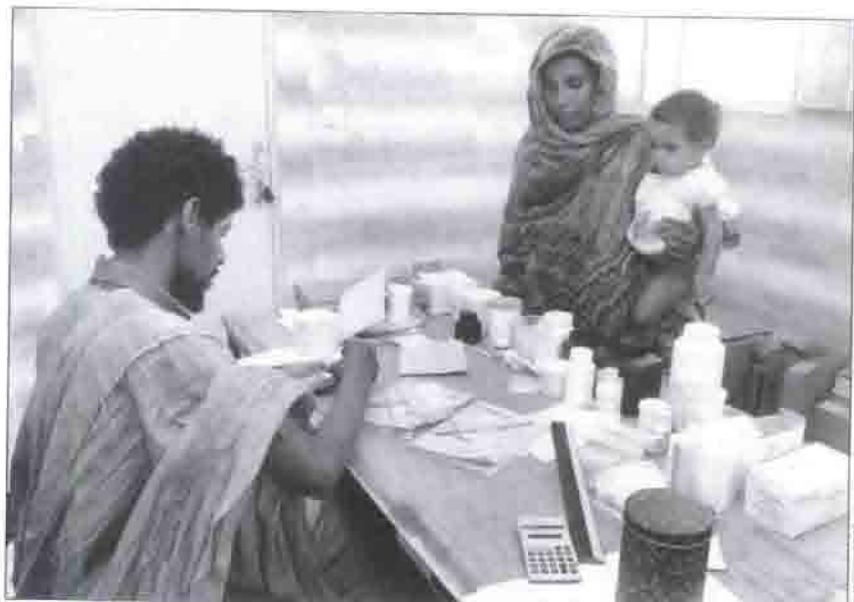
♦ **ALLIANCES:** A positive development in 1992 was that a World Bank report entitled 'Better Health for Africa' provides strong support for a broad-based alliance between the Bank, the African Development Bank, bilateral and multilateral agencies and NGOs to revitalize Africa's health care system at the periphery and district level following the principles of the Bamako Initiative. UNICEF is convinced that this alliance is feasible and has increased its interaction with WHO, the banks, bilateral agencies and NGOs which are working on African health issues.

In Mali, UNICEF is working with the European Community, French and German bilateral assistance agencies, the United States Agency for International Development (USAID), WHO and the World Bank. It is expected that by 1996 incorporation of the basic principles of the Bamako Initiative will have transformed health infrastructures in five regions of Mali into fully functioning, community-based health systems. In the Gambia, revitalization of PHC based on the Bamako Initiative is in progress. One health division has become operational, and five more will follow in early 1993. Integration of vertical interventions with more broadly based health programmes has been supported by UNICEF without sacrificing the satisfactory results of the EPI programme.

♦ **CHANGING TIMES:** Many African countries have been cautious so far about instituting the reforms which they helped to frame in the 1980s – especially those leading to greater community involvement in health services management – but the times are changing rapidly. Democratization in Africa has helped to generate public demand for affordable and better-quality services, and both governments and donors will have to adapt accordingly.

Democratic change has also opened up possibilities to apply the principles of the Bamako Initiative in Central and Eastern Europe where traditional drug supply lines have collapsed. Many countries are soliciting loans amounting to hundreds of millions of dollars to finance the purchase of essential drugs. If this money could be used to purchase the most cost-effective generic drugs, competition among international suppliers would invariably drive down prices on the global market, to the benefit of all.

Another new development in 1992 was the



UNICEF/93/270/DEBROOKE

The Bamako Initiative gives families access to essential drugs at prices they can afford.

appearance of a publication for health workers entitled *The Prescriber*, published by UNICEF initially in cooperation with the US Pharmacopeial Convention and now with Association Mieux Prescrire, in consultation with WHO. The publication provides technical information on the use of drugs for different pathologies. Four issues were published in four languages during the year, covering such subjects as pregnancy, sexually transmitted diseases and AIDS-related diseases, acute respiratory infections (ARI) and the control of diarrhoeal diseases (CDG). Some 35,000 copies were distributed, and circulation is increasing rapidly.

UNIVERSAL CHILD IMMUNIZATION

IMMUNIZATION coverage was sustained and improved in a large majority of countries. But success has placed new demands on the vaccine supply pipeline, and the prices UNICEF pays for vaccines increased by an average of 23 per cent. UNICEF has been working closely with WHO to ensure that additional vaccines are available to all who need them and that the UCI goals of developing countries are not jeopardized. Steps have been taken to:

- » help developing countries which produce large amounts of vaccine to improve the quality of their products and become self-sufficient;
- » persuade vaccine suppliers to moderate their price increases;
- » encourage developing countries, wherever possible, to begin to pay for their own vaccines through the vaccine independence initiative.

The immunization effort of the 1980s has brought dramatic declines in the incidence of disease among children, preventing over 3 million child deaths and 400,000 cases of paralytic polio each year. Everything now depends on the maintenance of strong health systems to sustain and increase immunization levels.



UNICEF/UNI 1017 Lemeyne

This initiative offers high-quality but low-cost vaccines through the UNICEF warehouse in Copenhagen, which accepts non-convertible currencies. It also includes a revolving fund to pre-finance vaccine procurement. UNICEF uses local currencies for in-country expenses and reimburses the revolving fund in dollars. Morocco has taken advantage of the initiative and several other countries are negotiating to join the scheme.

A situation analysis of global vaccine production and demand will be completed in 1993.

♦ **POLIO ERADICATION:** The last case of polio in the Americas was reported in Peru in September 1991, and polio-free zones are being created in East and South Asia, the Middle East, North Africa and southern Africa.

Rotary International is an outstanding example of popular support for the eradication campaign. Rotary raised more than US\$240 million for the effort and provided thousands of volunteers to assist immunization services.

Most countries of Asia and the Middle East and North Africa have started to implement plans to eradicate polio, eliminate neonatal tetanus and control measles, and UNICEF is supporting efforts to strengthen their disease-surveillance systems. These systems will provide timely reporting on the onset of any suspected case of polio and the incidence of measles and neonatal tetanus. Many countries have started to map cases of neonatal tetanus and polio and to identify high-risk areas where immunization coverage is low.

♦ **DELIVERY SYSTEMS:** Unfortunately several countries – most of them in sub-Saharan Africa – have not been able to maintain the high levels of coverage achieved in 1990. Civil unrest, drought and lack of infrastructure are among the reasons cited. Attempts are currently being made to strengthen their delivery systems.

In Guinea-Bissau, however, EPI activities are well implemented across the country through the use of outreach centres. This decentralized approach has had a positive impact on delivery of PHC services. While EPI began as a vertical programme, it is foreseen that in 1993 it will be integrated into the Bamako Initiative to revitalize the PHC system all over the country. (See 'The Bamako Initiative'.)

♦ **VACCINE RESEARCH:** UNICEF is actively collaborating in the children's vaccine initiative (CVI) with UNDP, WHO, the World Bank and the Rockefeller Foundation. CVI task forces are analysing the global vaccine supply situation and co-ordinating support for selected countries to improve quality and increase local production. Research has commenced on a more heat-stable polio vaccine, a single-dose tetanus vaccine and an improved measles vaccine. UNICEF does not provide financial support for research activities, but is leading efforts to assure affordable high-quality vaccines for the global immunization programme. UNICEF is also supporting the development of stronger disease surveillance capacity in developing countries.

ACUTE RESPIRATORY INFECTIONS

EACH year, ARI and, in particular, pneumonia account for some 3.6 million deaths among children under five and are the single biggest cause of child mortality in the world.

By December, more than 65 developing countries had operational plans of action for the control of ARI, and another 20 had prepared technical guidelines for case management.

Most country programmes rely heavily on community health workers for diagnosis and treatment. During the year, UNICEF and WHO supported training for more than 1,000 senior health personnel in 25 countries.

UNICEF's comprehensive approach for the control of ARI includes: helping develop plans of action geared to the needs, infrastructure and resources of each country; decentralizing activities to subnational levels; assisting with the training of health workers; supporting access to essential drugs and appropriate technological devices; and helping with monitoring and communication.

♦ **BAMAKO INITIATIVE:** Access to antibiotics is essential for effective case management, and the Bamako Initiative has helped guarantee community supplies in a number of countries, particularly in sub-Saharan Africa. Cotrimoxazole, the drug recommended for the home treatment of pneumonia, is now available in many countries.

In 1992, WHO, with UNICEF support, took the lead in surveillance of antibiotic resistance. UNICEF also collaborated with WHO in efforts to develop equipment for treatment of children suffering from pneumonia. Respiratory-rate timers and oxygen concentrators were introduced in 1992 in Africa and Asia, where their use will be closely monitored.

♦ **CORRECT TREATMENT:** Programme reviews in several countries where ARI programmes exist showed a marked reduction in the use of antibiotics for coughs and colds, and in the use of x-rays for the detection of pneumonia.

Ethnographic studies have been useful in determining household practices and thereby developing appropriate home-care messages for mothers. The messages help mothers recognize the early signs of pneumonia and seek appropriate treatment outside the home if needed.

An ARI managers' meeting in Bolivia (February 1992) resulted in the formation of a consultative group to provide intercountry support for ARI activities. This support covered such elements as general surveys, epidemiology, training

and communication. During the year, several Asian countries included components of the ARI programme in an integrated package of services for child survival. The package was very cost-effective, combining training, programming, management of services, drugs and logistics.

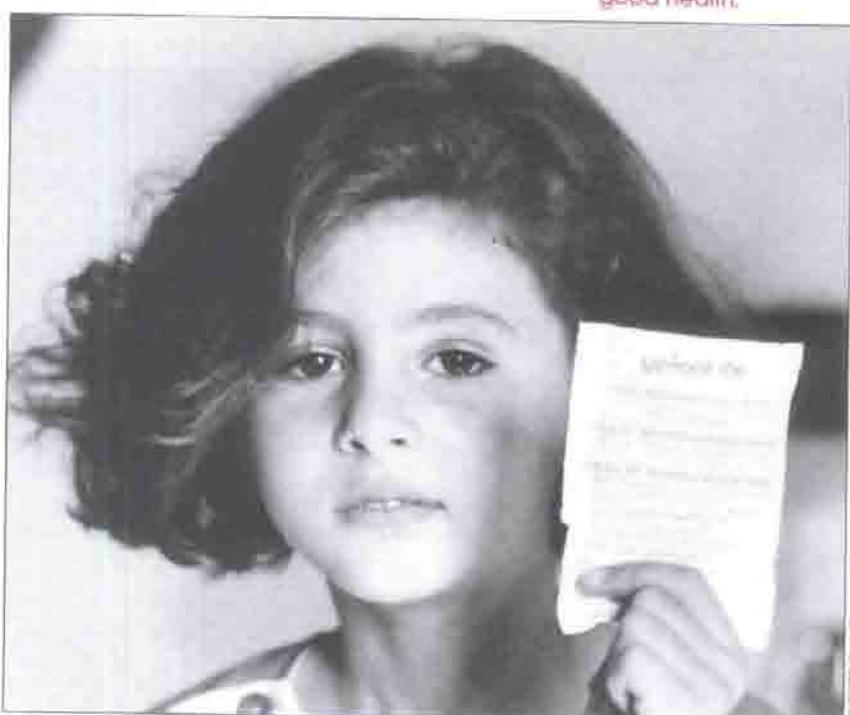
CONTROL OF DIARRHOEAL DISEASES

ALTHOUGH the rate of ORT use, based on the percentage of cases of diarrhoea treated in children under five, has more than doubled from 17 per cent in 1985 to 38 per cent at present, some 3 million children died during the year from diarrhoeal diseases. These unnecessary deaths were a poignant reminder that a revitalized diarrhoeal diseases control programme is essential at global and country levels.

Analyses of global and country-specific data show that nations must address diarrhoeal diseases with greater emphasis and specificity if they are to achieve the goal of halving child deaths from diarrhoea by the year 2000. An intermediate goal of 80 per cent ORT usage has been set for selected countries in order to focus political support and commitment to achieve the health target. Efforts will be made to ensure proper case management at home and in health facilities as well as to improve access to ORS.

International organizations can play a major role in these areas. In Mexico, the International

A packet of oral rehydration salts is a child's passport to good health.



Junior Chamber of Commerce signed an agreement with the Minister of Health to support ORT activities as part of the CDD programme in states where diarrhoeal diseases pose the greatest risk.

♦ **REVISED STRATEGIES:** In a number of countries of Asia, Africa and Latin America, ORT use rates and deaths due to diarrhoeal diseases have come under close political observation. After an analysis of child mortality in Morocco, King Hassan II declared that deaths due to diarrhoeal dehydration must be reduced dramatically. A two-year initiative to achieve that objective includes a revised communications strategy directed to the family and the marketing of ORS, combined with training for health personnel.

At the SAARC ministerial meeting on children held in Colombo (16-18 September), senior government officials from Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan and Sri Lanka cited CDD as a key objective through home-based interventions supported by the health system. Country planning includes improved production and distribution of ORS in Pakistan.

♦ **COMMITMENT TO CDD:** At a ministerial meeting in Mexico in October, 19 Latin American countries discussed their NPAs and committed their health systems to a revival of CDD. In Brazil, the Catholic Church and non-governmental organizations (NGOs) aim to carry the ORT message to every home in states with the highest infant and child mortality rates.

Child survival and CDD were also a major focus of the countries represented at the International Conference on Assistance to African

This young mother is saving her child's life. But dehydration from diarrhoea still causes over 1.5 million child deaths a year.



Children (ICAC), convened by the OAU (Dakar, 25-27 November).

It is important that countries and agencies integrate their activities at the field level. A package for programme development and training is being developed for case management of children with diarrhoea, pneumonia, measles, malaria and malnutrition. WHO continues to be a major partner with UNICEF in all activities related to policy development, programme design and implementation.

AIDS AND CHILDREN

By end-1992, WHO estimated that, worldwide, 13 million adults had been infected with the human immunodeficiency virus (HIV) and that 2.5 million of these had progressed to AIDS. Every day, approximately 5,000 additional people are becoming infected. HIV infections among women and children are increasing rapidly, and for children the results are especially devastating. Approximately one out of every three children born to an HIV-infected mother dies of AIDS, usually before the age of five. Even children who are not infected suffer the disease's consequences when it develops in their parents. While sub-Saharan Africa remains the most heavily infected area, the pandemic continues to spread throughout the world, making the problem truly global, with no country spared.

♦ **MULTISECTORAL APPROACH:** There is increasing recognition that no single intervention or approach is sufficient to contain the epidemic and that the spread of AIDS is directly linked to societal factors, especially to the status of women, with poor women and young girls being the most vulnerable.

In this context, the UNICEF AIDS prevention effort focuses on youth and women through a multisectoral approach. In line with the AIDS prevention and care strategy approved by the Executive Board in 1992, UNICEF supports activities aimed at: increasing life skills among youth, both within and outside the school system, through youth organizations and peer groups; strengthening health services; and supporting AIDS-infected families. An important aspect of the work is social mobilization to spread knowledge through all levels of society – particularly among youth and women – and to increase the commitment of leaders and policy makers.

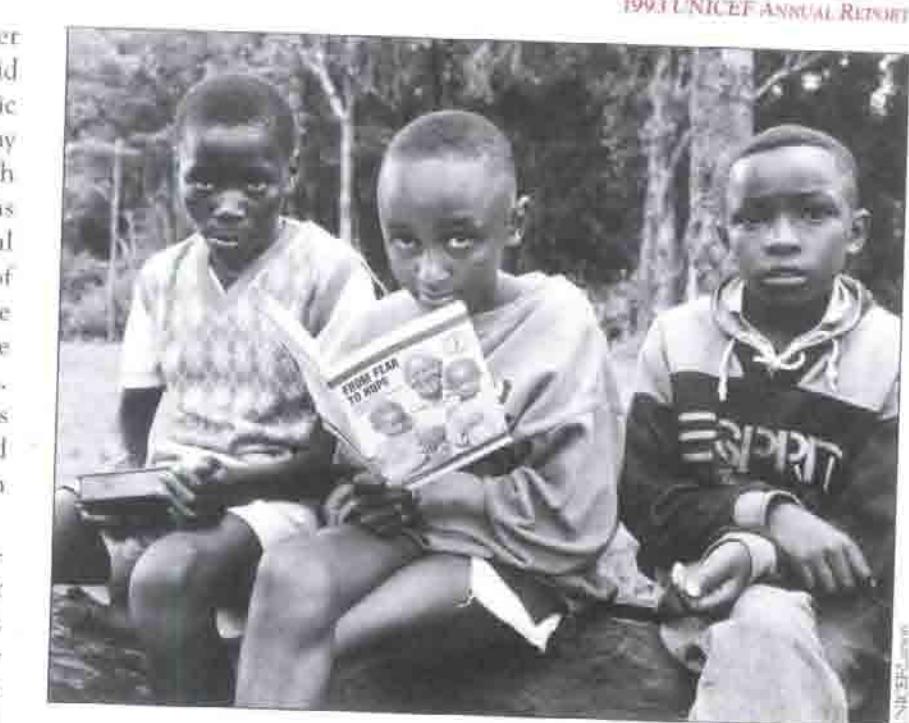
♦ **CONTRIBUTING FACTORS:** The eastern and southern Africa region remains the most severely

affected by the AIDS pandemic. As in other regions, many factors contribute to the rapid spread of HIV including the low socio-economic status of women and girls, the tendency of many men to have multiple sexual partners, the high persistence of sexually transmitted infections known to facilitate HIV transmission, seasonal migration patterns and the consequences of armed conflict. Recognizing these factors, the UNICEF approach has been to strengthen the capacities of communities to address the problem. In Uganda, this is being done through alliances with NGOs working both in prevention efforts and in activities to protect children who have been orphaned.

♦ **FOCUS ON YOUTH:** In nearly all the countries of the region, a large part of UNICEF support is directed towards preventing HIV transmission among young people. In Rwanda, a peer-to-peer project, with youth choosing their own leaders and developing their own materials, was tested during 1992 and will now be carried out on a larger scale. This type of approach is proving successful in a number of other countries. In Zambia, there is a specific focus on women, with UNICEF supporting the prevention and control of maternal syphilis, an activity that will contribute to decreasing maternal mortality as well as to the prevention of HIV transmission.

In West and Central Africa, one of the underlying causes of the spread of the disease is population migration, so UNICEF is developing prevention activities which cover adjacent countries.

In an attempt to contain the AIDS epidemic in the Caribbean, UNICEF supports educating women in safe sexual behaviour.



UNICEF uses a peer-to-peer approach in Africa to protect the continent's young people.

The most alarming increases in the rate of transmission are in Asia. After a period of denying the existence of the problem, countries are beginning to respond with a sense of urgency. This is most evident in Thailand, where the Government is engaged in a campaign to liberate girls forced into prostitution. UNICEF is providing assistance for their reintegration in society.

In Latin America and the Caribbean, UNICEF support to the AIDS prevention effort is building on existing activities with children in especially difficult circumstances. Again, the focus is on young people, particularly those in high-risk situations.

Finally, in the Middle East and North Africa, the region currently least affected by AIDS, UNICEF supports activities to convince governments of the reality of the problem and is developing programmes to address the underlying situations known to contribute to the rapid spread of the virus. Thus, in Morocco assistance is given to programmes to address the reproductive health needs and overall situation of women and girls.

♦ **IMPROVED COORDINATION:** During 1992, UNICEF took a number of steps to ensure better collaboration and coordination with other organizations both within and outside the United Nations system. Its closest relationship continues to be with the WHO Global Programme on AIDS (GPA). Joint activities organized in 1992 included a consultation of experts on HIV transmission and breastfeeding as well as a number of country assessments.



Exclusive breastfeed-
ing from birth is the
best way to ensure a
baby is well nourished.

NUTRITION

On the global level, protein-energy malnutrition (PEM) among children under five years of age declined from 42 per cent in 1975 to 34 per cent in 1990. However, because of population growth, the absolute number of malnourished children has increased, from 168 million in 1975 to 184 million in 1990.

The data contained in the *Second World Nutrition Situation Report* (1992), compiled by the Subcommittee on Nutrition of the Administrative Committee on Coordination (ACC/SCN), do not show significant differences among regions and between countries. South America shows a 50 per cent reduction over the past 15 years, but PEM has not decreased in sub-Saharan Africa; and South Asia, the region with the largest child population, has more than 54 per cent of the world's malnourished children.

During the 1980s, in many countries, including Brazil, China, Egypt, India, Indonesia, Kenya, Thailand, Venezuela and Zimbabwe, the prevalence of malnutrition, as measured by the number of underweight children, showed a slow but significant decline (see profile, 'Brighter Days in Ban Dawa'). The situation in some other countries, including Bangladesh, Colombia, the Philippines and Rwanda, was static, while the trend in several African countries worsened. In 1992, wars and domestic conflicts led to famine in Angola, Ethiopia, Liberia, Mozambique, Somalia and the Sudan, and severe drought affected household food security and nutrition in most countries of eastern and southern Africa.

The UNICEF nutrition strategy has been promoted in all developing countries and adopted to a large extent by Bangladesh, Bolivia, Burkina Faso, Ecuador, Malawi, Mali, Namibia, Nigeria, the Philippines, Sri Lanka, Swaziland and the United Republic of Tanzania. Other countries, including Brazil, Chad, Egypt, Ethiopia, India, Indonesia, Nepal, Madagascar, Mozambique, Niger, Peru and Viet Nam, are following suit.

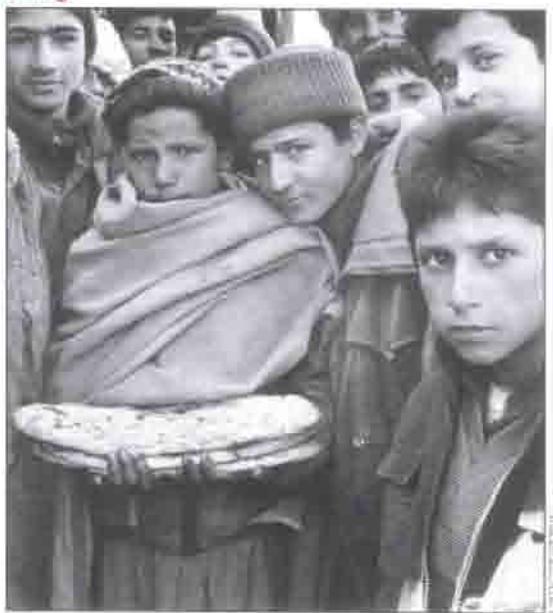
Major constraints on the development of coherent national nutrition strategies are:

- a lack of national consensus on the nature of the nutrition problem, in particular on the causes of malnutrition;
- the continued marginalization of nutrition issues in governments, agencies and universities;
- a failure to recognize the impact of sectoral policies and strategies on nutrition in such areas as agriculture, health, education, water and sanitation;
- inadequate understanding of the key role of women in nutrition.

The four main elements of the UNICEF nutrition strategy involve:

- control of the three main forms of micronutrient malnutrition (iron, iodine and vitamin A);
- protection, promotion and support of breastfeeding and improved child-feeding practices;
- community participation and empowerment through improved assessment, analysis and sustainable actions (the triple-A approach);
- improved nutrition information systems.

Not only an adequate food supply but also health and care are essential for nutritional well-being.



BAN DAWN, THAILAND

Brighter days in Ban Dawn

The loose sandy soil of this north-eastern village is dry much of the year, but most families scrape by on small plots of jute, tapioca and peanuts, which they cultivate alongside a canal which follows the main road. In a good year, water stays in the canal long enough for farmers to plant rice, but good years, like the rains, are infrequent. Rice is the main dietary staple, but in families that cannot grow enough to meet their own needs, rice purchases consume about 20 per cent of the household budget.

Some 320 people – mostly very young or very old – live in Ban Dawn in thatched wooden houses. Young people with six or more years of education tend to strike out on their own.

More than half of the country's poor live in villages like Ban Dawn, with about one ninth the income of those employed in the non-agricultural sector.

Malnutrition rates among children in the north-east averaged 25 per cent in 1990 and ranged as high as 43.9 per cent among preschoolers in the dry season (March to May). Diseases caused by micronutrient deficiencies are also prevalent: iron deficiency anaemia and goitre, caused by inadequate iodine in the diet. Deficiencies in vitamins A and B2 are also a concern.

In 1989, a survey in Ban Dawn of 44 children aged six years and younger found that 42 per cent suffered from first degree, and 4 per cent from second degree malnutrition, although their prospects have improved considerably since then. The main reason for hope is an Integrated Child Services project (1989-1993) supported by UNICEF and the Christian Children's Fund.

The project blends modern knowledge of nutrition, health and education with the community's perception of malnutrition and traditional responses. Villagers are asked what they are doing in a nutritional context and why. The project for Ban Dawn, and seven other rural villages in the north and north-east, has analysed the main causes of malnutrition in each community and works with several government agencies to alleviate the problem.

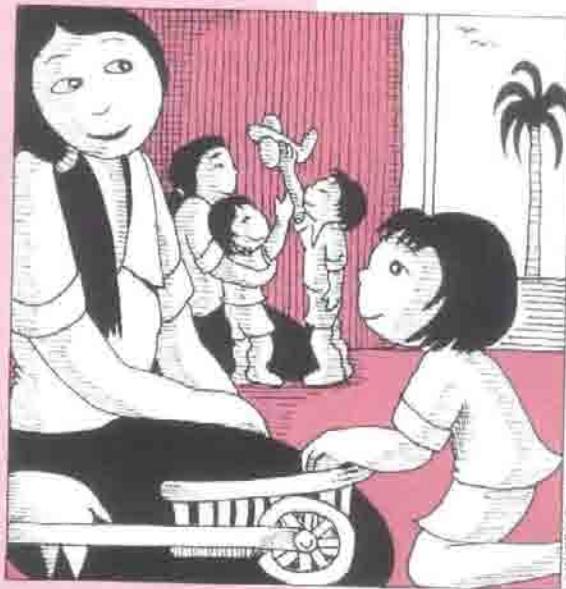
During the action phase (January 1991-December 1992), a day-care centre was set up in each village, and a manual and videotape on child growth and development were produced for village volunteers to use with parents or other caregivers. After training, the 20 to 40 volunteers recruited from every project village each trained between 5 and 10 parents in better child-rearing practices.

At the Ban Dawn day-care centre, preschoolers are now taught good health and hygiene habits and are encouraged to express themselves verbally. In primary school, fifth and sixth grade girls and boys are shown how to take better care of their siblings and become good parents. The centre is run by a committee which gathers contributions from each household and pays a volunteer to care for the children during the day and give them their lunch. The volunteer has been trained to teach counting and the Thai alphabet. The centre also serves as an information and training resource for parents who want to know more about child care, health and nutrition. Additional information is provided over public address systems or by monks and other respected spokespersons.

Village volunteers also organize feeding stations for children in selected homes or at the community centre. Food is provided by the community and is supplemented with fresh vegetables and other produce from school gardens. While the children eat, the parents are shown how to make playthings with local materials and to stimulate child learning.

The project decentralizes authority – a striking departure from conventional child health, nutrition and education programmes, which tend to be shared among ministries and managed by officials who are not necessarily disposed towards community participation.

Preliminary data suggest that children's weight and height for age have improved in Ban Dawn. Ban Dawn is the poorest of the eight villages in the project, but has shown the greatest degree of improvement, particularly in second degree malnutrition. Early indications are that the approach can be replicated nationwide for all 6 million of Thailand's under-six-year-olds.



Of the three necessary conditions for nutritional well-being – food, health and care – the last has received the least attention, although UNICEF has successfully promoted awareness of improved feeding practices, including breastfeeding. Other important components of child care are personal hygiene, the use of basic health services, and protection and stimulation of the child.

UNICEF reviewed the role of care in child nutrition in a paper for the International Conference on Nutrition held in Rome in December.

◆ **HOUSEHOLD FOOD SECURITY:** Per capita food production has stagnated in many nations and has fallen by as much as 50 per cent in some countries of eastern and southern Africa. Declining food production has resulted in major price increases, making food inaccessible to poor households and reducing the frequency of meals and amount of food for many children.

UNICEF support for household food security has included: credit schemes for women producers in Cambodia, Malawi, Namibia, the Philippines, Rwanda and Tanzania; seed multiplication projects in Nigeria; training for agricultural extension workers in Namibia; food banks in Chad and Niger; and multiple cropping schemes in Benin and Burkina Faso. The UNICEF Eastern and Southern Africa Regional Office (ESARO) has coordinated a study of household food security focusing on Angola, Botswana, Burundi, Ethiopia, Madagascar, Malawi, Mozambique, Namibia, Rwanda, Tanzania and Zambia. UNICEF has

also been active in preparations for an International Decade for Food and Nutrition in Africa.

◆ **MICRONUTRIENTS:** There were a number of successful moves during the year to combat micronutrient malnutrition and increase awareness of the consequences of this 'hidden hunger'. Consensus strengthened on the importance of vitamin A in fighting common infections, and it now seems feasible that by 1995 iodine deficiency disorders (IDD) can be eradicated in a number of highly populated regions. Clearer evidence also emerged on the negative impact of simultaneous deficiencies of micronutrients, including iron, vitamin A, iodine and zinc, on the body.

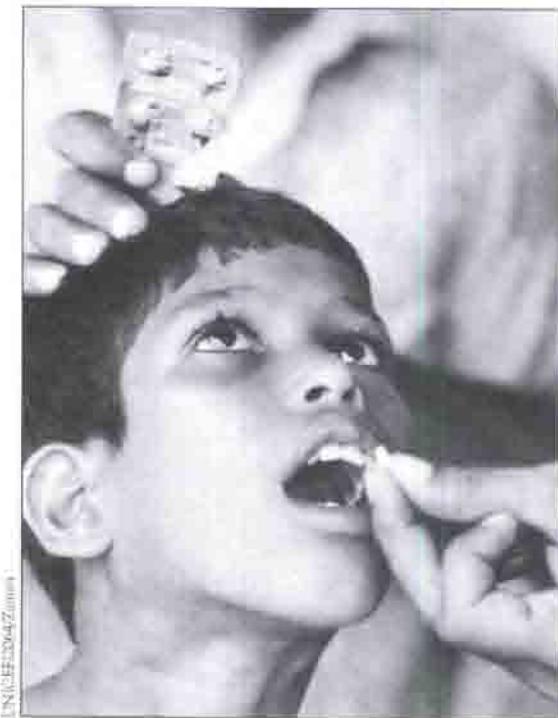
◆ **IDD:** A Ministerial Conference on Children in South Asia (September) accepted a challenge to iodize all salt in SAARC countries by the end of 1995. There are preliminary indications that Bhutan has virtually eliminated IDD, and important steps have been taken towards iodizing all salt in Bangladesh. China has developed a comprehensive plan with UNICEF, UNDP and WHO to tackle IDD, and important steps were also taken to eliminate the disorders in Mongolia, Myanmar and the Philippines. In the Americas, Bolivia and Ecuador are close to eliminating IDD; Cameroon and Namibia have been among the most successful African countries in tackling this problem. A survey carried out by the International Council for the Control of Iodine Deficiency Disorders (ICCIDD) revealed that these disorders remain a significant problem in Central and Eastern Europe.

◆ **VITAMIN A:** National vitamin A supplementation programmes were implemented in Bangladesh and Sri Lanka during the year, and a number of other countries plan to deliver vitamin A supplements through their EPI programmes. A national survey in Indonesia is expected to confirm that xerophthalmia has been virtually eliminated.

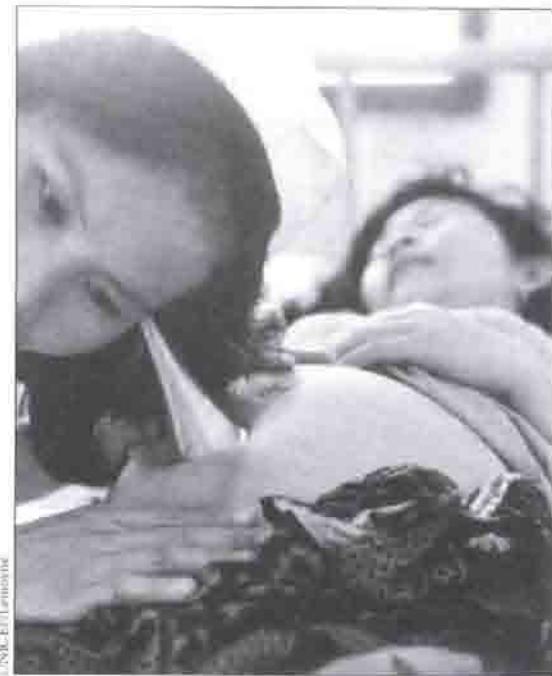
◆ **IRON:** UNICEF supplied iron and folic acid supplements on a large scale to pregnant women in 30 countries during the year.

◆ **NUTRITION INFORMATION SYSTEMS:** A review of nutrition information systems in Botswana, China, Costa Rica, Madagascar, Mali, Mexico, Venezuela and Viet Nam was not encouraging. It showed that while most countries gathered substantial data and generated impressive computer diagrams, inadequate analysis meant that little of the information was used by decision makers. Surveyors noted a need for stronger advocacy to generate understanding of the problems and demand for solutions.

Lack of vitamin A could cause this child to become blind, but two capsules – costing four US cents – will protect him for a year



UNICEF/92/2047/UNIS/92



UNICEF/Enrique

One of the year 2000 goals is access to prenatal care for all pregnant women.

SAFE MOTHERHOOD AND FAMILY PLANNING

At least 500,000 women died during the year from causes related to pregnancy and childbirth. And for each of these deaths 15-20 women suffered some form of lifelong disability. About 25 per cent of maternal deaths are due to abortions and another 25 per cent to the complications which are common in ill-timed, high-risk pregnancies. This tragic loss of life would be greatly reduced if couples who did not want to have a baby were able to avoid pregnancy safely and effectively.

• **GOALS:** The 1990 World Summit set important goals for safe motherhood and family planning, including a 50 per cent reduction in maternal mortality by the year 2000; access by all pregnant women to prenatal care, trained attendants during childbirth and referral facilities for high-risk pregnancies and obstetric emergencies; and access by all couples, especially women, to family planning information and services to avoid pregnancies which are too early, too late, too many or too frequent during a woman's reproductive cycle.

Working in partnership with WHO, UNFPA and UNDP, UNICEF's focus on reaching the goals of family planning is in the areas of information, education and communication on birth-spacing, responsible parenthood and discouraging early marriage and early pregnancies as stressed in the

medium-term plan 1992/1995. WHO provides technical assistance and UNFPA provides support for training, demographic studies and census taking, women in development activities, and the supply of contraceptives. UNDP gives necessary institutional support.

In addition to saving lives and improving the quality of life for mothers and children already born, family planning would reduce demand for abortions and help prevent the more than 50,000 illegal abortions currently performed every day.

During 1992, the Earth Summit (UNCED) provided a major forum for discussion on population policies in the context of sustainable development.

In many developing countries, particularly in Africa and South Asia, communities depend on traditional birth attendants (TBAs) for prenatal and delivery services. UNICEF continues to support training for TBAs in many countries, including Egypt, Ghana, Iran, Malawi, Mexico and Nepal. UNICEF is now conducting these programmes in accordance with the guidelines worked out jointly by UNICEF, WHO and UNFPA. Special efforts are being made to upgrade the knowledge and skills of TBAs in maternal and child health (MCH) activities and to establish closer links between the health sector and TBAs.

UNICEF continues to supply iron and folic acid supplements for antenatal clinics and hospitals, and chloroquine, where appropriate, for malaria prophylaxis in pregnant mothers.

Training of UNICEF staff in safe motherhood was

21

A health worker explains different methods of family planning. Such services can change the lives of women in the developing world.



UNICEF/Enrique

The family has the first responsibility for the care of children. Happy, healthy families are the goal of the safe motherhood initiative.



continued in 1992 with an interregional training workshop in Ouagadougou (Burkina Faso), 26 October-3 November. Participants were from both the East and West African regions and from the South Asia Regional Office (rosa).

In March, UNICEF participated in a meeting of Partners for Safe Motherhood, hosted by the World Bank in Washington, D.C. It was acknowledged that while much interest had been generated since the launching of the safe motherhood initiative in 1987, the number of maternal deaths remained indefinitely high.

A strategy paper on safe motherhood was prepared under contract by Columbia University in New York in consultation with UNICEF staff.

♦ **GLOBAL ACTIVITIES:** In Bangladesh, access to MCH and family planning information and services continued to improve; together with support for a government programme to raise the average age of marriage and prolong the interval between births.

In Ghana, a safe motherhood project was supported by UNICEF in three of the country's ten regions. Projects in the remaining seven regions are supported by UNFPA and USAID.

In Malawi, UNICEF is helping to increase public awareness of safe motherhood and improve maternal services at health units. Antenatal clinics and trained TBAs are supplied with essential drugs, including iron folate and chloroquine.

In Iran, UNICEF supports government efforts to reduce maternal mortality rates by training rural midwives and monitoring their impact and efficiency. By the end of the current training cycle it is expected that 95 per cent of deliveries will be handled by TBAs. A government programme integrates family planning with the PHC network, makes extensive use of the media for health education and provides low-cost contraceptives. UNICEF assisted with health education and advocacy and a KAP (knowledge, attitudes and practices) study in 24 provinces.

In Egypt, TBA training is linked to the immunization of women against tetanus. The main objective of the programme is to ensure hygienic delivery practices and the early referral of patients who have complications to appropriate health facilities.

In Mexico, more than half of the 14 million couples practise some method of family planning. UNICEF supports training and communications activities, and some 252,000 community health promoters, 24,000 health workers and 3,400 traditional midwives have been trained in MCH activities.

In Nepal, UNFPA and UNICEF collaborate in programmes to encourage smaller families and child care. Elements of family planning have been woven into every aspect of UNICEF programme activities in the areas of MCH, education and poverty alleviation.

In the Philippines, UNICEF's urban basic services (UBS) programme has integrated family planning and adolescent fertility in 25 poor urban areas. UNICEF assistance for MCH is supplemented with funding from the Australian International Development Assistance Bureau.

In Tanzania, UNICEF supports family planning as part of the safe motherhood initiative.

In Zimbabwe, the AIDS Prevention Programme has a major focus on education for schoolchildren about responsible sexual behaviour, including information about reproduction and family planning.

♦ **FEMALE CIRCUMCISION:** Female genital mutilation affects more than 80 million women globally. Its psychological consequences have not been adequately studied but the devastating physical effects are well documented. These range from infertility and pelvic infection to frigidity and difficulties at delivery.

The mutilating effect of female circumcision varies widely and is closely tied to cultural practices and beliefs. It is a delicate issue which makes behavioural change difficult, particularly in those

countries where the health department does not recognize it as a problem.

UNICEF's main role has been in public education about the harmful consequences of female circumcision through training programmes for midwives and TBAs.

In Guinea, where 80 per cent of all women are circumcised, UNICEF provides advocacy and programme support for local NGOs concerned with excision and infibulation.

BREASTFEEDING

THE effort to accelerate action on the protection, promotion and support of breastfeeding, with BFHI as a key strategy, resulted in a great resurgence of activities in 1992.

Within 18 months of its launch in June of 1991, BFHI activities had been undertaken in more than 120 countries – both developing and industrialized. At the end of last year, 97 per cent of all the developing world's children lived in countries that had either taken action to end free and low-cost supplies of breastmilk substitutes or had never had them. Only six developing countries had not yet acted to end the distribution of free supplies; hopefully, all will have done so by April 1993. The goal of ending the distribution of free and low-cost supplies in all industrialized countries has been set for mid-1994.

♦ **SAVING LIVES:** The goal of BFHI is to mobilize health care systems and health workers to provide information and support to women to breastfeed exclusively from birth. Even in the poorest of circumstances a mother can conveniently provide all the nutrition her child needs for the first four to six months by breastfeeding. But many hospitals actively discourage this natural option by separating infants from their mothers at birth and using infant formula as a 'modern' feeding alternative. In many communities, especially poor ones, the results are often disastrous. WHO reports that a bottle-fed baby in a poor community is 15 times more likely to die from diarrhoeal diseases and 4 times more likely to die from pneumonia than a baby who is exclusively breastfed. WHO estimates that more than 1.5 million infant lives could be saved from diarrhoea and ARI deaths each year if mothers breastfed exclusively during the first four to six months.

♦ **GLOBAL CRITERIA:** UNICEF and WHO have supported the process of the designation of 'baby-friendly' hospitals by developing global criteria based on the 'Ten Steps to Successful Breastfeeding'. Guidelines, training manuals and an international assessment instrument provide common global standards for judging accomplishments. Countries were assisted in establishing BFHI national committees and in designating baby-friendly hospitals. UNICEF identified a global



A smiling mother welcomes her newborn, who is given to her to breastfeed immediately after birth at a baby-friendly hospital. UNICEF efforts to promote BFHI worldwide are gaining ground.

network of health professionals qualified to help in training health workers, in transforming hospital practices and in supporting countries to plan for long-term changes.

During 1992, 90 developing countries had targeted hospitals to become baby-friendly. In more than half of those countries, 767 hospitals are committed to achieving or have already achieved baby-friendly status, having undertaken the Ten Steps to promote and provide optimum support for breastfeeding. In several developing countries, the Ten Steps were adopted to apply to whole vil-

lages, cities and regions. Breastfeeding promotion organizations have continued to mobilize the public to demand baby-friendly hospitals.

◆ **CHANGING HOSPITALS:** BFHI is the first WHO/UNICEF initiative launched with goals for both developing and industrialized countries. This global initiative set in motion dialogue and actions aimed at re-establishing a breastfeeding culture, as well as the gradual, sustainable transformation of the way hospitals treat new parents, newborns and eventually their patients all over the world. □

BASIC EDUCATION

THE Executive Board has strongly endorsed the expansion of basic education activities, giving priority to primary education, education of girls and women, and linkages with early child development (ECD).

Primary education was a priority theme at representatives' meetings in all regions during the year, and at an NGO conference on girls' education (New York, April 1992) the Executive Director called for the full integration of girls into the mainstream education system, while recognizing the importance of using non-formal approaches to provide learning opportunities to girls in the interim period until the formal system was adequately able to meet the demand.

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A basic education must equip a child for the responsibility of adulthood. Education of the girl child is increasingly a UNICEF focus.

UNICEF organized a regional workshop in Botswana on girls' education in order to develop NPIAs based on diagnostic studies prepared for eight countries in the eastern and southern African region.

UNICEF efforts to support education for girls included training of female teachers in Nepal, Pakistan and Yemen; preparing gender-sensitive curricula in Bangladesh, Mozambique and Nepal; ensuring that schools were located near communities in Bangladesh, Bhutan and Nepal; and supporting day-care centres for younger siblings in China. In Pakistan, the new UNICEF country programme focused on the enrolment and retention of girls in school. In Morocco, a project was launched in 1992 to double the enrolment of rural girls in primary schools by 1995. (See also profile, 'Educate a girl, educate a nation'.)

◆ **CREATIVE APPROACHES:** Stronger emphasis was placed on creative ways of bringing basic education services to poor and difficult-to-reach communities. Determined advocacy generated many enquiries for information about successful innovations including the Bangladesh Rural Advancement Committee (BRAC) non-formal education project and the Escuela Nueva, a formal education project in Colombia. A senior member of BRAC travelled to Nigeria, Senegal and Sierra Leone to provide information about these community-based schools, and educators from Turkey went to Colombia with UNICEF assistance to learn about Escuela Nueva.

◆ **EARLY CHILD DEVELOPMENT:** UNICEF policy on young child development was updated during the year in collaboration with agency partners from the Jomtien Conference, NGOs and private volunteer organizations in the field. A framework

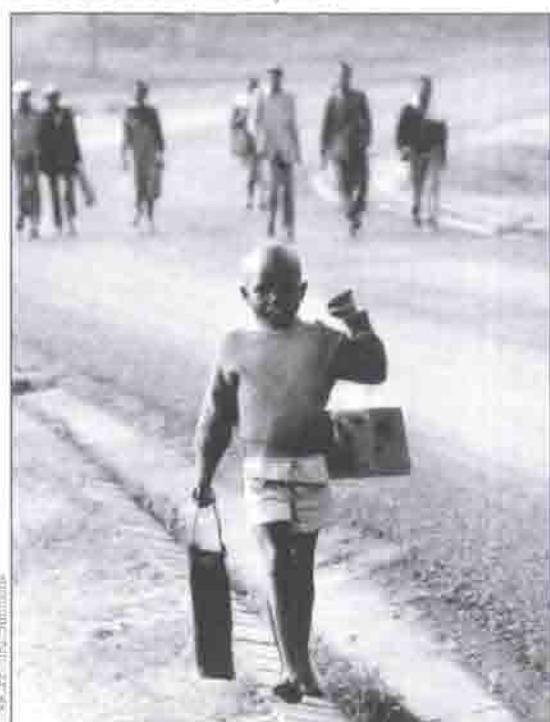


for policy development was prepared and shared with 20 African countries and Facts for Life messages were expanded to include child development. Training focused on the young child was initiated for UNICEF staff in nine Sub-Saharan countries, and training modules were introduced in Angola, Ghana, Rwanda and several other countries of Africa, Asia and Latin America. Twelve Latin American countries had strong young child development components in their basic education programme for 1991-1992, and 20 African and 11 Asian and Middle Eastern countries are adopting more comprehensive strategies in this area.

♦ **ADULT LITERACY:** UNICEF participated in several meetings and seminars on literacy and adult education, and is preparing policy guidelines for further discussion and consensus-building.

A number of countries have new literacy activities. Nepal has an integrated adult and children's literacy programme which includes reading, writing, numeracy and basic knowledge on health and nutrition. Namibia launched a national literacy programme in September, with the target of achieving literacy for all by the year 2000. Egypt established a National Agency for Adult Education and the Eradication of Illiteracy and is in the third year of a 'Decade for Literacy'. The Dominican Republic has adapted a new set of literacy materials from the *Facts for Life* manual.

A boy sets off for school before sunrise, carrying his books and his midday meal.



UNICEF/SHARMA



UNICEF/SHARMA

A teacher conducts a literacy class for women during a break in their work as carpet-weavers.

A UNESCO/UNICEF regional seminar was held in Bogota in May 1992 to develop a new framework for adult education in Latin America, and a number of activities are planned in this area with UNESCO, the International Council for Adult Education, the Latin American Council for Adult Education, and the US-based National Center on Adult Literacy.

♦ **MONITORING GOALS:** UNICEF continued its work with UNESCO and other partners to help countries improve the quality and timeliness of data collection, and a joint UNESCO/UNICEF project is developing ways to determine learning achievement. UNESCO and the World Bank are working on indicators for selected activities.

♦ **BUILDING PARTNERSHIPS:** Existing networks were strengthened and extended during the year, both at headquarters level and in the field. Meetings were held with USAID, the World Bank, UNDP and UNESCO to share information and to plan joint activities, and strong working relationships were initiated in the areas of ECD and girls' education. Both the Bank and USAID have agreed to incorporate ECD in their list of educational priorities and have asked for ongoing assistance from UNICEF. A UNICEF publication, *Strategies to Promote Girls' Education*, made an important contribution in focusing policy discussion at the donors' meeting on basic education held in Paris (June 1992).

Promotional activities continued under the UNESCO/UNICEF Cooperative Agreement, and UNICEF participated in the first meeting of the International Consultative Forum on Education,

BOLIVIA

The language of education

For indigenous people in Latin America, education is often a double-edged sword. Delivered only in Spanish, the language of colonial conquest, it has tended to disparage native cultures and make students feel ignorant or ashamed of their heritage. Drop-out rates for indigenous students are far above national averages, and for those who enrol in school and stay long enough to graduate, the price can also be high. Very often, education becomes a barrier between children and parents who speak only their native tongues and are illiterate.

In a poignant letter to UNICEF, leaders of the Guarani community in Bolivia wrote: "Many years ago, when schools arrived in our region, they told us that education would be the way out of our backwardness, a way of achieving our development. We thought so as well and struggled to have schools. We built the buildings with our own scarce resources and fought for the state to send teachers to our community. Each child we sent to school represented our hopes for a better tomorrow."

"The years went by, and we did not see the fruits of these schools. Those of us who are parents today suffered the frustration at that time of having to leave school after a few years without any advantage. The meaning of things was inverted for us. Strangely, education did not help us to advance, quite the opposite. It served as a pretext for them to tell us, on top of everything, that we were stupid, ignorant and backward. The Spanish language, which was supposed to open the doors to science and knowledge for us and be the vehicle for improvements in our lives, ended up making us ashamed of the customs and language of our fathers and our Guarani culture. School became an obstacle to our efforts to relate to the rest of society."

There is a total of some 200,000 indigenous Guarani in Argentina, Bolivia, Brazil and Paraguay. In Bolivia, an estimated 80,000 live in the Chaco region close to the borders with Argentina and Paraguay.

A meeting between the Assembly of the Guarani People, UNICEF and the Bolivian Ministry of Education in 1989 brought the promise of change through a project to introduce bilingual

education without cultural biases to schools in marginal areas. There are 114 indigenous bilingual schools in Bolivia, of which 23 are for Guarani-speaking children. The project is sponsored by Bolivia's Primary Education Programme with support from UNICEF, UNESCO, the Government of the Netherlands, the Catholic Church, and local and international non-governmental organizations (NGOs). The effort was reinforced in January 1992 by the presidential launching of a literacy campaign to give every Guarani girl, boy, woman and man a basic bilingual education. By the end of the year, more than 10,000 Guarani and 500 community educators were involved in the campaign.

A council of Guarani elders, including women, has been involved in all phases of the project and has reviewed the writing and illustration of texts to ensure their relevance to the cultural and daily reality of the students. Bartomeu Melia, a Jesuit priest and authority on the Guarani language and culture, said that the elders or Arakuaia (guardians of knowledge) have expressed themselves through the new curricula with an authenticity and precision that anthropologists have found difficult to achieve.

Early results show that boys and girls in the Guarani bilingual schools are earning higher grades in all subjects than their peers in comparable monolingual schools and that the number of drop-outs and students repeating grades has decreased significantly. According to UNESCO, in the Guarani bilingual schools the repetition rate for the first grade was 10.5 per cent after two years of the project, while at the national level it was 26.4 per cent.

Although the Bolivian project is still in its infancy, reports from parents to UNICEF are encouraging. "Now the children are learning more and better," wrote one parent body. "They can express themselves freely without being punished for speaking another language."



hosted by UNESCO in Geneva in September. Constructive working relations were developed with two UNESCO-affiliated institutions – the International Institute for Educational Planning (IIEP) in Paris – and the UNESCO Institute of Education (UIE) in Hamburg. Collaboration arrangements also exist with the Christian Children's Fund, the Bernard Van Leer Foundation, the World Organization for Preschool Education and the Child-to-Child Trust.

In 1991 the UNESCO/UNICEF Joint Committee on Education (JCE) proposed the development of a joint 'Nine Largest Countries' strategy. Nine of the most populous countries – Bangladesh, Brazil, China, Egypt, India, Indonesia, Mexico, Nigeria and Pakistan – were selected because, since they have 75 per cent of the world's illiterates, significant progress would be made in achieving the Jomtien goals if those countries were encouraged to provide universal access to basic education by the end of the decade. In 1992, plans for a joint strategy to help the nine reduce illiteracy and provide access to primary education by the end of the decade were started, and each Head of State was

invited to participate. UNICEF/UNESCO consultations, advocacy visits to selected countries, country sector analyses and technical support are planned for each country during 1993. These efforts will culminate in an international meeting, hosted by India and involving Heads of State and educators from all nine countries, in November 1993.

♦ **BUDGET:** Although UNICEF budgetary commitments for basic education have gone up in many countries, actual programme expenditure for education went down from US\$57 million in 1990 to US\$48 million in 1991 or only 8 per cent of the total programme budget. This phenomenon may have been partly due to the demand for resources created by an unusually high incidence of emergencies in various regions during 1991. In 1992, however, expenditures on basic education rose to US\$72 million or about 10 per cent of UNICEF total programme budget for that year. This latter increase does suggest that there may now be a growing commitment on the part of UNICEF field offices to invest more resources in basic education. □

WATER AND ENVIRONMENTAL SANITATION

DROUGHT, civil strife and combinations of both severely tested the capacity of UNICEF and other agencies to meet the demand for safe water supplies in 1992. Virtually all of southern Africa and countries of the Horn, as well as parts of Asia and Latin America, suffered the disruption of regular development programmes as governments and relief agencies were forced to respond to emergencies.

In most, if not all, of the emergency countries there are both regular and emergency water and sanitation (WATSAN) programmes. To make optimum use of emergency funds, these programmes should be linked as far as practicable. For example, it can be very wasteful in emergency zones to use resources to buy water tankers, which are of very limited use after the crisis has passed. It can be far more cost-effective to sink wells in the emergency zone and sustain them. There should be a judicious mix of emergency and regular WATSAN programmes in areas of instability.

♦ **MONITORING:** Following the World Summit for Children, NIPAs have become a rallying point for sectoral goals, and the Water and Sanitation Monitoring System (WASAMS), developed

by UNICEF and WHO, has become a useful tool for those countries wanting to assess and track their

Restoring clean water to war-torn areas requires a combination of emergency and regular measures.

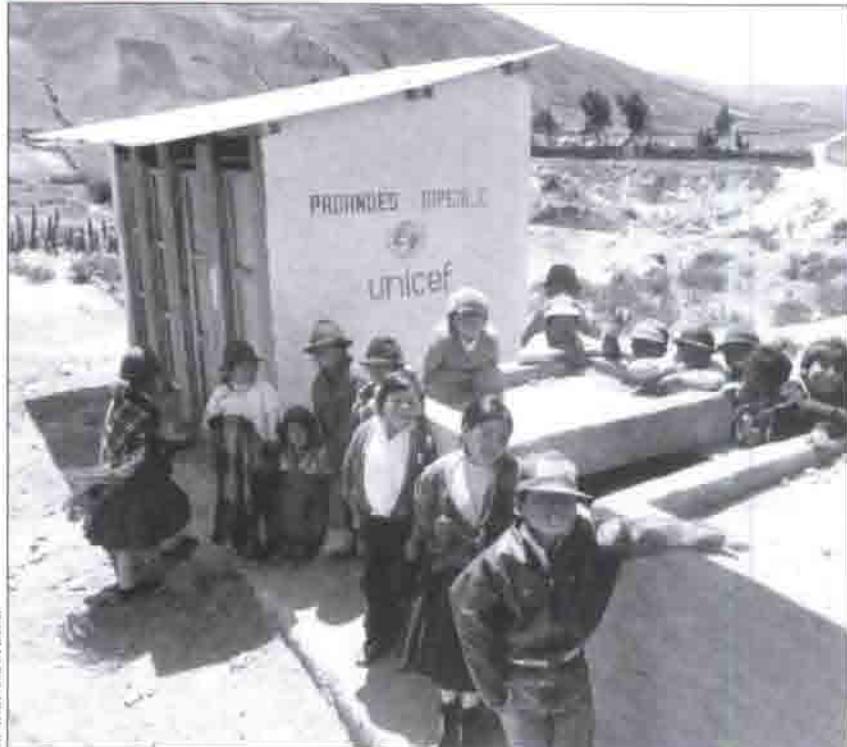


own performance. UNICEF and WHO collaborate in gathering national data each year to enhance sector monitoring at the global level, analyse trends and make regional and global comparisons. These data are published by the Geneva-based Global Collaborative Council for Water Supply and Sanitation. About 70 developing countries provided baseline data in 1990, while some 18 countries carried out some form of WATSAN review in 1992. These included in-depth evaluations in Angola, Bangladesh, Cambodia, Haiti, Indonesia, Mexico, Sri Lanka and Viet Nam.

◆ **NATIONAL PROGRAMMES OF ACTION:** The strength of NPAs for advocacy and follow-up was most evident in Mexico where investment in the sector has grown fivefold since WATSAN goals were inserted in the NPA in 1990. By the end of 1992, coverage had increased from 79 per cent to 84 per cent for water supply, and from 63 to 68 per cent for sanitation.

◆ **ENVIRONMENT:** Two meetings during the year highlighted environmental aspects of WATSAN projects. An International Conference on Water and the Environment, held in Dublin (January) submitted a number of substantive proposals to the Earth Summit (UNCED) in Rio de Janeiro (June). Both conferences emphasized intersectoral linkages for sustainable development, and UNCED's Agenda 21 gave integrated water resources management well-deserved prominence.

UNICEF has helped to build latrines for the people of this remote, mountainous village.



UNICEF/SAR/Elmer



UNICEF/SAR/Elmer

Women mechanics repair a handpump. Their team maintains 50 pumps in good working order as part of a UNICEF-assisted programme.

◆ **GUINEA WORM DISEASE:** Significant progress was made towards the eradication of dracunculiasis (guinea worm disease) with the completion of national case searches in all known endemic countries except Chad and the Sudan where political instability hindered safe access to endemic areas.

A promising sign is that while globally the number of known endemic villages has increased as a result of stronger surveillance measures, the number of cases has declined. About 85 per cent of the known cases of dracunculiasis occur in just six countries — Benin, Burkina Faso, Ghana, Mali, Nigeria and Uganda — and it is believed the Sudan also has a large number of victims.

A UNICEF/WHO Inter-agency Technical Support Team, created for endemic francophone countries, became operational during the year and is based in Burkina Faso.

◆ **SUSTAINABILITY:** The concept of local management involving women in the operation and maintenance of WATSAN systems has been adopted by an increasing number of countries, some of which are broadening the scope of the Bamako Initiative from its health focus to include cost-sharing for water systems. A number of countries have established community WATSAN com-

UM SHUGAIRA, THE SUDAN

Child-friendly villages**G**

laring suspiciously, the old man barked, "Why are you asking?"

"By God! Answer me," said the younger man. "How many children do you have?"

"Fourteen," said the old man reluctantly before self-consciously counting again...

"Perhaps 15." The crowd roared with laughter and the Sudanese mobile theatre group knew it had another hit for its repertoire.

The theatre group has had a string of successes in Um Shugairā – a community of former nomads from the Hawazma tribe. The Hawazma have embraced almost every available social improvement from handpumps to oral rehydration. Personal hygiene is better, child nutrition has improved, and mortality rates – about 180 per 1,000 live births – are in retreat.

A village committee of five women and five men has been trained to promote health and hygiene, and two members have accepted responsibility for maintaining the community's handpumps and low-cost pit latrines. UNICEF supports these activities together with income-generating projects for women and a child nursery.

About 20 other villages in the state of Kordofan consider themselves to be equally progressive. There has been some discussion about the possibility of officially designating villages as 'child-friendly' once they achieve immunization, water, sanitation, education and other development goals.

A UNICEF-supported project backed by creative government financing aims to provide safe water supplies and sanitation for most of the state's 3 million inhabitants. The Sudanese Government has negotiated with donors to write off US\$65 million in debt in return for government local currency investment in the project.

One of the most successful components of UNICEF assistance in Kordofan has been the installation and maintenance of handpumps. About 6,500 wells, dug since 1989, have been capped with India Mark II handpumps. The combined cost of well digging and pump installation per unit is about US\$3,500, compared with US\$8,000 per unit before the project started. Annual maintenance of each pump is about US\$25, and an average village like Um Shugairā has seven handpumps. Each handpump serves about 200 people and is affectionately known as a *hayati* – 'my life' – appropriate in a land where the struggle for safe drinking water is a struggle for life itself.

In villages like Um Shugairā, women have assumed responsibility for maintenance of the pumps to ensure that never again will they have to walk four hours every day to fetch the household water supply. Maintenance money is gathered from a tax on sugar, levies at harvest time, or a fixed monthly tariff for each household. Quarterly surveys indicate that more than 85 per cent of the pumps remain operational throughout the year.

The child-friendly village project also promotes the construction of simple latrines together with hygiene education. A handpump maintenance manual carries messages from the UNICEF handbook *Facts for Life*, which schoolteachers and religious leaders have been trained to communicate to parents and students in Kordofan. Last year, more than 1 million school exercise books, 500,000 matchboxes and 250,000 school timetables carried immunization messages. Schools are priority sites for the installation of both handpumps and latrines.

UNICEF project support has also been given to the enrolment of more than 7,500 women in a literacy programme; mobilization of international, national and local resources for girls' education and early childhood development services; and provision of solar refrigerators for safe vaccine storage. The refrigeration units will extend the reach of mobile immunization units into communities isolated by hot desert terrain.

UNICEF has also helped to establish more than 20 oral rehydration 'corners' at health units around the state. The health units are the focal point for a trial introduction of the Bamako Initiative which UNICEF believes could eventually make Sudan's child-friendly village project self-sustaining.



UNICEF/1993/908

To combat disease in shanty towns, UNICEF combines hygiene education with the upgrading of water points. Here, water is collected at a conservation project supported by UNICEF.



UNICEF/92/2000

mittees with financial as well as technical responsibilities. UNICEF is supporting these endeavours with regional workshops to build local capacity in countries including Angola, Mozambique and Nepal.

♦ **LINKAGES:** Several countries are seeking to expand the most common linkages between water supply, sanitation and health to include nutrition, education, women in development and the environment. African Sahelian countries have sought sectoral linkages with the environment. Oman has linked WATSAN with a campaign to combat trachoma, and other countries are establishing linkages with education through school hygiene.

♦ **SANITATION AND HYGIENE:** The need to change human behaviour has made sanitation and hygiene elements more difficult to programme than water supply. However, a decision by UNICEF in 1990 to shift the focus from engineering to health and social communications with a preference for women to handle this task (because of their key role in educating the family on the need for sanitation and as an opportunity to empower them to demand better facilities in the community) has had satisfactory results in Bangladesh, Benin and Ethiopia. (See also the profile on the Sudan, 'Child-friendly villages'.) In each of these countries women with a public health background head the sanitation and hygiene components of the programme.

♦ **TECHNICAL COOPERATION:** Highlights of technical cooperation among developing countries (TCDs) during the year included: a visit to Guatemala and Honduras to look at low-cost WATSAN projects in marginal areas by Peru's national WATSAN officer; the secondment of Moz-

ambique's Senior Project Officer to advise on the drilling and rehabilitation of boreholes in Zambia; assistance to drought-affected areas of Zambia by a WATSAN officer from Sierra Leone; guidance on WATSAN services for refugees in Kenya from a WATSAN officer from Mozambique; an exchange of information between Uganda and Tanzania on the use of PVC rising mains (pipes) for hand-pumps; a visit by four Nigerian government officials and one WATSAN officer to Tegucigalpa (Honduras) to inspect urban programmes.

♦ **COLLABORATION:** Inter-agency collaboration needs to be pursued more energetically and systematically both inside and outside the United Nations system. During the year UNICEF worked closely with a number of agencies and organizations including UNDP, WHO, the World Bank, NGOs and several bilateral bodies.

♦ **RESEARCH AND DEVELOPMENT:** A French company, Rhône-Poulenc, has developed a cylinder which can be inserted in boreholes to release regulated amounts of iodine into drinking water supplies in areas deficient in this vital micronutrient. A water source which provides 7,200 litres of water a day can be iodated at a cost of US\$150 a year. The company claims that the system has been well received during tests in Mali, and UNICEF staff in the areas of WATSAN and nutrition will participate in field trials in Benin, Guatemala, Indonesia, Kenya, Malawi, Nepal, Nigeria, Pakistan, the Sudan, Tanzania and Viet Nam, all of which have iodine deficiency problems.

♦ **GLOBAL ACTIVITIES:** During 1992, UNICEF cooperated with approximately 100 countries in WATSAN projects or activities, with an approximate financial input of US\$84 million. □

SUSTAINABLE DEVELOPMENT – THE ENVIRONMENT

THE Earth Summit (UNCED), held in Rio de Janeiro in June, provided an extraordinary opportunity for people of all nations to examine the sustainability of their natural development pattern and their lifestyles.

UNICEF played its part in this process by helping to mobilize governments, NGOs and citizens from all walks of life. Its main role was that of an advocate for development approaches focused on human concerns and the special needs of children and women. Many country offices were involved in studies and situation analyses linking the state of the environment to the plight of the poor, and in co-sponsoring national seminars and conferences on this subject. UNICEF's role and special concerns for children and women were subsequently reflected in many of the national reports prepared for UNCED.

Several offices helped initiate public campaigns and children's hearings to increase environmental awareness among children and involve them actively in the protection and improvement of the environment around their school, home and community.

Further efforts were made during the year to include environmental dimensions in all country programme areas including PHC, household food and fuel security, water supply and environmental sanitation, income-generating activities for women, LBS and integrated area development. UNCED reinforced the UNICEF argument that children are the most vulnerable victims of environmental degradation, and it allowed their voices to be heard through Global Children's Hearings and the Global Youth Forum held in Rio at the time of the Conference.

◆ **CHILDREN'S CONCERN:** Children from 21 countries spoke passionately about their hopes and fears for the environment and of the need for governments to reassess their priorities. Among the issues they raised were poverty, human rights, armed conflict and military expenditure, Chernobyl and the fear of nuclear war, environmental education, access to information, and the needs of street children and indigenous peoples (*see profile, 'The language of education'*).

At the Global Youth Forum, 15-year-old Melanie Paris of Trinidad and Tobago made this eloquent plea to adult society for young people's involvement in decisions affecting their future:

"Tell me, I forget;
Show me, I might remember;
Involve me and I will understand."

◆ **FRAMEWORK FOR ACTION:** In spite of many limitations, Agenda 21, the operational document on environment and sustainable development agreed upon by world leaders gathered at Rio, provides a good framework for comprehensive and far-reaching action. Three points in particular are relevant in this context:

- * Agenda 21 has placed human beings at the centre of environmental concern, emphasizing the socio-economic dimensions as much as the conservation of resources.

- * It recognizes that, for protection of the environment, the participation and empowerment of the poor are essential, and that so long as one fifth of the world's population continues to consume

Young people were eloquent in their pleas for a safer planet at the Earth Summit's Global Youth Forum.



As part of an emergency programme to restart local food production in a region devastated by war, farmers receive seeds, tools and fuel in exchange for part of their seed production, which is then passed on to others to plant.



four fifths of the world's resources and produces most of the pollution and waste; no lasting solutions to the crisis will be possible.

» Agenda 21 has gone further than any other international conference document in emphasizing the importance of collaboration between governments and NGOs.

♦ **OBJECTIVES:** The main challenge presented to UNICEF by Agenda 21 was to: promote PEC activities that address the needs of communities; improve the environment for children at household and community level; and encourage local participation through women, youth and children.

Although PEC was firmly established in the development lexicon at UNCED, UNICEF country programmes have long pursued its objectives through the provision of safe water and sanitation services; household food security and nutrition; PEC and the empowerment of communities through the Bamako Initiative; formal and non-formal education through the 'Third Channel' and 'education for life'; activities to generate income and reduce the workload of women; the promotion of conservation and alternative energy sources; and small-scale agroforestry.

UNICEF's partnership in Education for All also provides a channel for development of school curricula, highlighting aspects of environmental pro-

tection and sustainable development and the opportunities that exist for children, teachers and parents to put into action the lessons learned.

♦ **SUPPORT FOR PEC:** UNICEF supported many environmental projects during the year.

» In Brazil, six UNICEF offices serving eight Amazon Basin countries participated in a Poverty and Environment Project to help indigenous and other poor communities affected by deforestation caused by logging, agriculture, gold mining and petroleum extraction.

» In Fenerive (Madagascar), the primary school curriculum integrates health, nutrition and environmental awareness with school gardening and tree planting.

» In Niger, UNICEF has included an environmental component in most of its programme support in the provinces of Zinder, Maradi, Tahoua and Tillaberi.

» In Bangladesh, a well-digging project, which the Government made conditional on each community constructing and using five to ten latrines, has contributed to a 25 per cent reduction in reported diarrhoea cases.

» In the Philippines, UNICEF support for community food production as a follow-up to emergency relief has made significant inroads on malnutrition, particularly in the sugar-producing province of Negros Occidental. □

URBAN BASIC SERVICES

ALMOST half of the developing world's urban dwellers are children whose vulnerability over the past decade has increased with the rapid growth of towns and cities amid economic and environmental crises and recurring conflicts.

In 1980, there were twice as many poor rural households (80 million) as poor urban ones (40 million), but by the year 2000 it is estimated that there will be more poor urban households (72 million) than those in rural areas (56 million). More than half of the absolute poor will be concentrated in urban centres, which are growing at annual rates of 5 per cent in Africa, 4 per cent in Asia and 3 per cent in Latin America. Some cities report growth rates as high as 10 per cent with the influx of migrants.

Disaggregated data, although limited, indicate that urban children fare worse with respect to infant mortality rates (IMR) than the national average and are sometimes even worse off than their rural counterparts. A survey of 35 countries found that average access to safe water was 64 per cent in marginal urban areas and 67 per cent in rural areas, and within urban areas there was great inequity. The poor were spending up to 40 per cent of their earnings on water supply alone—three to ten times more than other urban dwellers whose supplies were subsidized.

Urban malnutrition is also widespread. Studies in a number of developing country cities showed that up to 50 per cent of children in slum areas were malnourished and that the incidence of anaemia was twice as high in the slums as elsewhere.

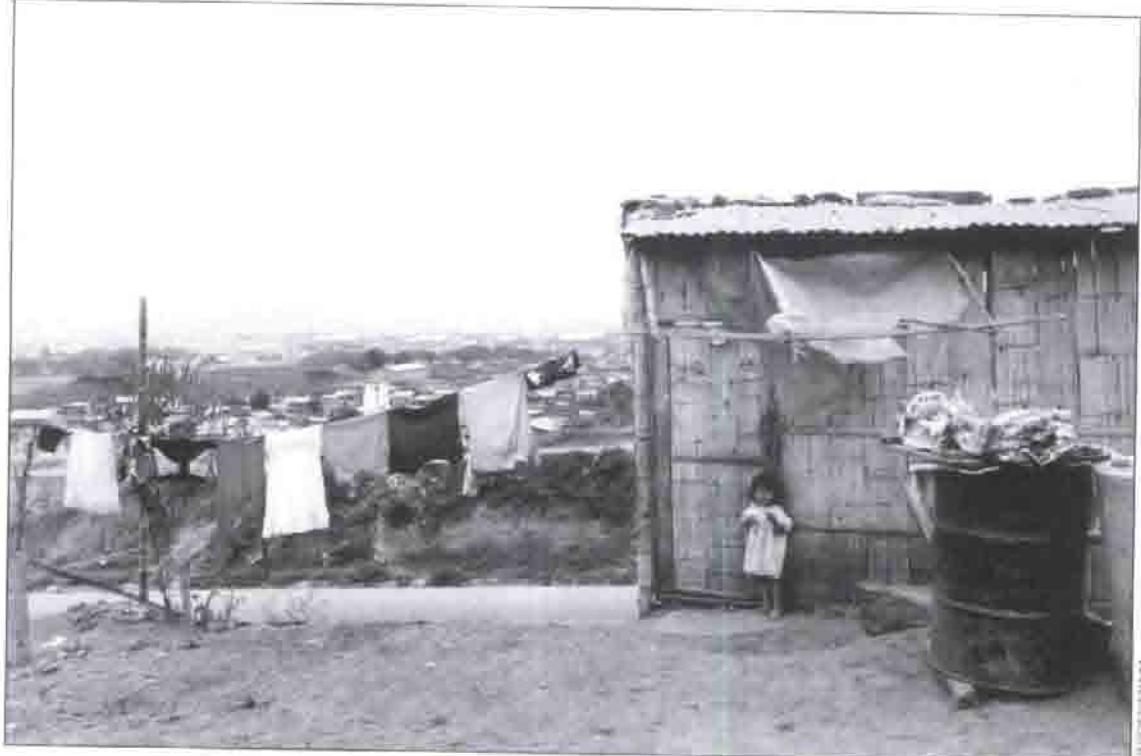
♦ **UNICEF ASSISTANCE:** During the year, UNICEF assistance to children and women in urban areas focused on:

- » support for national, centrally designed and sectoral services in urban areas;
- » support for subnational, participatory and intersectoral UBS programmes;
- » greatly expanded efforts in favour of working and street children;
- » country-specific studies and assessments;
- » advocacy for economic adjustment policies 'with a human face'.

Heightened global concern about the environments in which the children of the urban poor are forced to live their lives, coupled with a trend towards democratization and the decentralization of authority, have opened up new opportunities for progress which UNICEF has seized by realigning its UBS strategy.

♦ **REALIGNED STRATEGY:** UNICEF plans a two-pronged approach comprising an urban child focus in various sectoral programmes and a revi-

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Over half the world's poor will live in cities by the year 2000, and UNICEF is realigning its strategy to help their children. This child lives in a country with an extremely high poverty rate, compounding the severe urban problems she faces every day—lack of food, clean water and sanitation services.

NEELAM BHATA, INDIA

Devkali's diary: Hope for an urban slum

This congested slum settlement in the industrial town of Faridabad is home to some 11,000 of India's urban poor. Living conditions here are squalid. The housing is makeshift, the water supply limited and sanitation facilities grossly inadequate. Families of six and seven people crowd together in one-room huts of barely two square metres.

Gradually, however, the picture is changing. With help from UNICEF and government and non-governmental organizations, residents are learning that if they organize themselves and work together, basic amenities are attainable and the environment can be made safer for their children.

In one small pocket of Neelam Bhata some 50 residents – most of them women – have been meeting once a month for almost five years to make plans for a better future. They sit cross-legged on the floor of a small unfurnished room just bursting for their turn to speak. Devkali, a woman of about 55, listens to their discussions intently, carefully recording their observations in her diary to incorporate in a list of needs which she and other community volunteers will present to the municipal authorities.

Scenes like this are now repeated in similar meeting places throughout Neelam Bhata, where women like Devkali act as a bridge between the residents and local government. Each volunteer represents about 25 families. The volunteer makes it her business to know if the children are sick, when they are due for vaccinations, if they attend school and what basic community services are available to each household. The accumulated data are invaluable to planners, who can also call on the volunteers to help mobilize community support for their interventions.

About 400 volunteers in Neelam Bhata interact with community organizers employed by the local government under an urban basic services (UBS) project. Between 1986 and 1991, the UBS project, with UNICEF assistance, provided facilities for 168 cities and towns in India. The state and central authorities and UNICEF shared the cost of services for some 2 million people on a 40-20-40 per cent basis respectively.

In Neelam Bhata, the project raised the level of immunization coverage, installed handpumps and trained locals to maintain them. Many open drains and sewerage channels were covered, pathways were paved, some shanties were upgraded and a community lavatory block was built. Local people also built a school with its own water supply and latrines. Most of the primary school age children attend school, and adult literacy classes have become popular. Over the next 12 months, development committees plan to help build three dispensaries and two more lavatory blocks.

With the project well established, UNICEF has been able to reduce its financial input and assume the role of a facilitator, providing assistance for the training of project staff and officials, and support for the development of management and monitoring systems. The central Government has expanded the project to 500 more cities and made a financial commitment of about US\$33 million for the eighth five-year plan period (1992-1996).

The provision of services remains just one aspect of the programme. The main UNICEF objective is to enable people, and women in particular, to take control of their lives.

Devkali was illiterate until she was 50 and seldom set foot outside her home. She learned to read and write through the project and agreed to represent her neighbourhood on the development committee. Her work is unpaid but she was able to take out a loan – about 2,000 rupees (US\$70) – through the project and use it to rent and stock a small general store. Business has been good, and she has been repaying about 200 rupees a month.



"It is important for women to have their own money," she says. "For 45 years of my life I trembled if a man spoke to me. I had lived in this area for 25 years, and my neighbour's husband never once spoke to me. Now he greets me in the street and asks about my family. And now that I have been chosen to represent my neighbours and negotiate with the local government administration, I don't care if ten thousand men speak to me."

SHEEJ LISHMAN

talized UBS strategy, which has four main thrusts within the framework of NPAS. They are:

- » promotion of the decade goals for children while joining other partners in poverty reduction;
- » the application of the UNCED Agenda 21 concept of PEC for urban areas;
- » support for rehabilitative and preventive approaches to children in especially difficult circumstances;

» advocacy, technical support and applied research for urban development with a human face.

The Convention on the Rights of the Child and the goals set by the World Summit for Children provide the broad policy umbrella for the urban child by demanding the elimination of poverty and equal opportunities for all children. □

CHILDHOOD DISABILITY

ABOUT 80 per cent of the world's disabled people live in developing countries and an estimated 150 million of them are children. According to WHO, less than 3 percent of disabled adults or children receive rehabilitation services of any kind, and various estimates suggest that only one in every 100 disabled children in Asia and Africa attends school.

The statistics were especially troubling as the United Nations Decade of Disabled Persons (1983-1992) drew to a close. And in a statement to the 17th World Congress of Rehabilitation International in Nairobi (7 September), the UNICEF Executive Director said that the world's threshold of tolerance towards disability remained much too high. He called for a "global offensive against disability" as powerful as that being waged against infant and child mortality.

♦ **BITTER LEGACY:** While the IMR rate in the developing world fell from 136 deaths per 1,000 live births in 1950 to 67 deaths per 1,000 in 1991, disability has continued to increase. Armed conflicts – most tragically visible during the past year in Afghanistan, Cambodia, Somalia and former Yugoslavia – have greatly swelled the ranks of the disabled, particularly among children and women. More than 1.5 million children in Asia, Africa, Latin America and the Middle East have been killed in armed conflicts over the past decade, and for every child killed, it is estimated that three others have been injured and/or physically disabled. The millions of mines, toy bombs and other booby traps planted by warring parties continue to claim innocent victims years after conflicts are resolved. The psychological trauma of war also endures and is estimated to affect some 10 million children globally today.

♦ **TASK FORCE:** A United Nations Task Force to follow up on the Decade of Disabled Persons met in conjunction with the World Congress of

Rehabilitation International and agreed to an advocacy campaign with the broad objective of reducing avoidable disability by one third by the year 2000. UNICEF will maintain the Task Force secretariat through its joint Technical Support Programme with Rehabilitation International for the next two years.

During the year, some 51 countries reported that they had programmes in the area of childhood disability prevention, rehabilitation and support. Among the activities covered were:

- » the early detection of disabilities;
- » advocacy for protective legislation for the disabled;
- » promotion of family- and community-based rehabilitation;

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An innocent victim of war, this young boy was maimed by a land-mine.



UNICEF/93/10000

Helped by his father,
a boy learns to use
crutches at a hospital
for war victims.
UNICEF helps provide
prosthetic and
orthopaedic services
for children and
women.



UNICEF/PAUL SIMONE

- * the elimination of vitamin A and iodine deficiency disorders;

- * the protection of disabled children in institutions;

- * the training of health workers;

- * support for safe motherhood and MCH clinics to eliminate birth-related accidents.

◆ **FUTURE CHALLENGES:** Also on the UNICEF agenda are the need for sustainable immunization programmes; the elimination of water-borne diseases such as river blindness; multi-drug therapy for leprosy; timely rehabilitation; support for national and local production of low-cost artificial limbs and other mobility devices; measures to limit the physical and mental impact of armed conflicts on children; and a ban on the production, marketing and use of land-mines, which primarily target civilians and are a major cause of disability and trauma.

Rehabilitation International continued to assist UNICEF in this work and the Technical Support Programme liaised with a number of United Nations organizations and NGOs. □

CHILDREN IN ESPECIALLY DIFFICULT CIRCUMSTANCES

MEDIA coverage of conflicts in Bosnia and Herzegovina and Somalia highlighted the brutality inflicted on children as innocent victims of war. It also underscored the pressure on agencies like UNICEF to respond to new emergencies as ongoing conflicts simmered and flared unpredictably elsewhere. As fighting in Bosnia and Somalia intensified, conflicts in El Salvador, Ethiopia and Mozambique were winding down, but fighting in Afghanistan, Liberia, Sri Lanka and the Sudan challenged UNICEF resources throughout the year.

The main UNICEF response to these conflicts has been emergency relief coupled with negotiation for opening up or maintaining corridors of peace in Bosnia, Somalia and the Sudan so that relief supplies and workers could reach children and women in need. These efforts were mostly effective but the price was high in terms of staff security. (See 'Emergency relief and rehabilitation'.)

In armed conflict situations, the rehabilitation of children has increasingly been incorporated in emergency programmes. Special emphasis has been placed on means of dealing with psychosocial stress and trauma on a large scale through schools, health care systems, community organi-

zations and mass media. UNICEF is now assisting programmes for psychosocial rehabilitation in 13 countries including Croatia, Iraq and Liberia.

Internal guidelines for providing more effective assistance for children in armed conflict situations have been published in the form of country experiences entitled *Survivors: Rehabilitation of Children in Armed Conflict* and, as a guide for action, *Children in Armed Conflict: A Guide for the Provision of Services*.

◆ **PREVENTION AND REHABILITATION:** UNICEF continued its support for prevention, early detection and community-based rehabilitation of physically disabled children, but its capacity to respond is dwarfed by the scale of the problems in armed conflict situations. Unfortunately, most national responses have been designed for adults, particularly ex-combatants. A major UNICEF objective is the reintegration of disabled children into their families, communities and schools. In several countries, the media has been used to educate the public on the need to 'mainstream' disabled children in the public schools.

◆ **EDUCATION FOR PEACE:** The concept of peace education as a means of breaking cycles of prejudice and conflict between rival groups in

many societies continued to expand during the year. Innovative approaches to help young people understand and accept intercultural differences and to resolve conflicts peacefully have been well received in Lebanon and Sri Lanka, and efforts are being made to replicate them elsewhere. UNICEF is continuing to develop a series of educational strategies and activities for exploring issues of peace and teaching conflict-resolution skills to young people.



UNICEF/9384/Janek

• **ABUSE AND NEGLECT:** There is as yet only limited national acknowledgement of child abuse and neglect in many developing countries. Only a few country programmes make reference to the phenomenon as a significant problem, and fewer still have programmes to monitor, prevent or respond to it. Concern for these children, however, is increasingly reflected in the growing membership of developing countries in international and regional networks for the prevention of child abuse and neglect. Developing countries are being encouraged to investigate the issue, and many have begun to address it publicly. In the industrialized world, ongoing country studies indicate that the problem is much more widespread than previously realized.

• **EXPLOITATION OF CHILDREN:** The trafficking of children in South Asia and child prostitution related to tourism in South-East Asia and Latin America are of growing concern and were the subject of regional meetings during the

year. A number of regional NGO networks have been organized to combat the sexual exploitation of children, and UNICEF is assisting their efforts through the Campaign to End Child Prostitution in Asian Tourism (CEPAT), the International Catholic Child Bureau (ICCB), ChildHope and others. Some local NGOs have developed effective education programmes to prevent children from being sold into prostitution, while others are working directly to protect sexually exploited children and provide them with medical, educational and other rehabilitation services.

Street and working children are among the most visible signs of poverty and social dislocation. The media brought new urgency to the problem with reports that street children were being murdered in Brazil and other Latin American countries, and that increasing numbers are found in African cities due to civil strife and displacement.

UNICEF has played a key role in support for street and working children throughout the developing world. Studies have been completed in a number of African countries and special projects have resulted. Situation analyses of street children were initiated in Cambodia and Viet Nam, and almost every country in Latin America has a programme to protect and assist these children.

Increasing efforts to identify and protect children in hazardous work are indicated in initiatives in Nepal, Pakistan and the Amazon in Brazil. Discussions are also under way with the International Labour Organisation regarding country-level cooperation in the ILO International Programme for Eliminating Child Labour. □

UNICEF workers worldwide seek to comfort traumatized children.



WOMEN IN DEVELOPMENT

ENCOURAGING efforts are being made to change attitudes and beliefs that discriminate against women and girl children and to dismantle the structures that impede their advancement. But massive work is required to close the gender gap. Government policy makers and community leaders are learning much too slowly that nations cannot afford to squander half their human resources by denying women opportunities to develop to their full potential.

While many speak the language of equality, the translation of commitment to concrete results demands skill in gender analysis based on sex-disaggregated data and the development of gender-responsive strategies, plans and programmes.

UNICEF accelerated training for its staff in 'gender analysis' (analysis of the role of, and division of labour among, men and women to help address issues of inequality) during the year to improve the capacity of its staff as well as that of governmental and NGO counterparts. Country offices in Bangladesh, Chad, Ethiopia, Kenya, Morocco, Mozambique, Namibia, Pakistan and Rwanda conducted gender analysis workshops for most of their staff. Colombia, Mexico, Peru, Syria, Tanzania, Venezuela and the countries of the Caribbean planned training courses, while Bolivia,

Swaziland, Thailand, Tunisia, Zimbabwe and the Pacific Islands countries had between 50 and 80 per cent of their staff trained in gender analysis following regional or country-based workshops. In Angola, Bangladesh, Ethiopia, India, Indonesia, Kenya and Tanzania, country offices extended their training to cover high-level government policy makers and planners, local extension workers, NGO activists and community leaders.

Many countries made efforts to improve their statistical database and provide sex-disaggregated information for analysis. The resulting indicators have shown gains for women in areas such as school enrolment and literacy, although the poorest and most disadvantaged households in many countries are headed by women, and the majority of school drop-outs remain girl children. In Bangladesh, half the female-headed households are in the extremely poor category, earning 40 per cent less income than male-headed households. The nutritional intake of women in Bangladesh was also found to be just 88 per cent of that of men.

◆ **POLITICAL PARTICIPATION:** The year also brought marked changes in the political participation of women, especially in countries where governments are forging towards democracy. In Ethiopia, Niger and Rwanda, transitional governments appointed women to ministerial posts for the first time. The Indonesian Ministry of Women established machinery for women's advancement at the provincial level. Women have also taken advantage of the new political climate to run for elected office and to advocate that political parties include gender issues in their platforms. In Kenya, UNICEF supported a workshop for media on gender and democratization.

◆ **LEGISLATIVE CHANGE:** Gains were also made on the legislative front. In the Philippines, a Women in Nation Building law (1992) is a major milestone in the country's commitment to promote the role of women in development and improve their status. The new law recognizes the rights of women to enter into contracts, be admitted to military schools, apply for loans from the national housing fund and qualify for social security. In Namibia, a bill was passed establishing minimum representation levels for women on municipal councils. Zimbabwe ratified and Namibia acceded to the Convention on the Elimination of All Forms of Discrimination Against Women. UNICEF advocacy has had a catalytic effect in each of these countries. In Syria, UNICEF supported

Literacy classes for women can help to close the gender gap.



CHEFCHAOUEN PROVINCE, MOROCCO

Educate a girl, educate a nation

"Teach a boy and you will train one individual. Teach a girl and you will train the whole nation."
— A. Ibn Badis, Algerian reformer (1889-1940)

Nine-year-old Najat Benkacem became a schoolgirl in 1992. Defying national statistics and the poverty of her home and village, she was enrolled at the nearby Hassan Abi Jamaa school and took the first step towards her dream of becoming a teacher.

That first step for Najat and for many other Moroccan girls is due in large measure to a government decision in 1985 to restructure the nation's primary and secondary education system; a 1989 project to support basic education in rural areas; and a recent decision by King Hassan II to give priority in the 1993-1996 National Plan of Social Action and Economic Development to basic education for girls like Najat, who are especially disadvantaged by conditions in rural areas.

In 1992, the Government and UNICEF reinforced these measures with a school enrolment campaign for girls in Chefchaouen and four other provinces noted for their low female literacy rates, high infant mortality and heavy workload for women and children. One objective of the campaign, beyond the moral imperative of providing equal opportunities for girls and women, is to improve the living conditions dramatically.

Life is harsh in Chefchaouen. Winters are bitterly cold and summers are dry and hot. Women and girls are mostly captive to domestic duties which include the time-consuming burden of carrying water and collecting firewood. There are few, if any, employment prospects for women outside the home, so fathers see little point in educating their daughters. The sons are sent to school, and if their sisters do follow, they tend to drop out early to help their mothers.

A recent national study estimated that, while 62.5 per cent of boys in rural areas enrolled and continued attending school, only 28.5 per cent of girls had the same opportunity. In Chefchaouen, the rate for girls is thought to be even lower.

Until Morocco's education system changed course, Najat's future would have been little different from that of her mother. She lives in the village of Bab El Ain with her parents, three brothers and two sisters. Their house is small and has neither a kitchen nor a lavatory. The nearest water well is 500m away and there is more than enough work for everyone. Najat's father is a farm labourer with barely sufficient income to feed his family, let alone pay for school fees and books for all his children. Like most fathers, his first choice was to educate the boys. Besides, he could not be assured that his daughters would be safe either on the road to school or in the schoolyard. The teachers were male and there were no toilet facilities for girls. He was also concerned that an education might 'complicate' his daughters' outlook on life, particularly on early marriage.

Fortunately for Najat, many of those hurdles were lowered by official recognition of the need for equal education opportunities for girls, the training and placement of female teachers in schools, the provision of toilet facilities for females, the development of school curricula relevant to rural communities, the removal of sexism from school texts, and special incentives for parents to send both their girls and boys to school.

In Chefchaouen, UNICEF worked with the provincial Governor to convince parents of the value of education for their daughters. About 60 traditional birth attendants were trained to persuade mothers to push for an education for their daughters, while religious leaders assumed a similar role with the fathers. Campaign messages were broadcast, and school uniforms, coats, boots, school bags and books were provided for 500 girls. UNICEF also offered to pay the girls' tuition.

Although it is too early to evaluate the returns to Najat and her peers, these and other measures nationwide have already led to higher enrolment growth rates for girls than for boys. The Ministry of National Education has set enrolment targets for rural girls at 50 per cent by 1994, 65 per cent by 1995 and 80 per cent by 1996.



efforts by the Women's General Union to advocate new laws related to women's welfare.

♦ **ECONOMIC OPPORTUNITY:** UNICEF continued to support income-generating activities for women in a number of countries including Namibia, Pakistan and Tanzania. Support also continued for credit schemes for poor rural and urban women in countries including Kenya and the Philippines, replicating the Grameen Bank approach to give women in Bangladesh access to credit.

♦ **THE GIRL CHILD:** The value of UNICEF advocacy on behalf of the girl child was evident during the year in the increased attention given by governments, NGOs and individual communities to child gender issues. Plans were made for a Girl Child Decade in Bangladesh. Tanzania's Ministry of Community Development, Women's Affairs and Children commissioned a review of laws affecting the girl child. Morocco hosted the first girl child symposium in the Maghreb. Iran had a UNICEF booklet, *The Girl Child: An Investment in the Future*, translated into Farsi, and Tanzania translated the Convention on the Rights of the Child into Swahili. India also drafted plans for a Decade of the Girl Child and introduced special sponsorship schemes and scholarships for girls. Kenya and Morocco carried out situation analyses on conditions affecting the girl child in their countries. Textbooks were reviewed for gender sensitivity in Ethiopia, and the Government of



UNICEF/STANISLAW

A Muslim woman trains to be a peace counsellor to help prevent ethnic conflict.

Pakistan promoted a gender-awareness curriculum at universities and among NGOs.

UNICEF programmes also addressed the issues of child abuse and violence against women in a number of countries including Chile, Namibia and Papua New Guinea. □

EMERGENCY RELIEF AND REHABILITATION

AS crisis situations multiplied in 1992, so did UNICEF's involvement, particularly in response to the needs of children and women affected by large-scale and politically complex emergencies.

UNICEF provided support in nine major flash-points – Afghanistan, Angola, Haiti, Iraq, Liberia, Mozambique, Somalia, the Sudan and former Yugoslavia – while continuing to assist children caught in 'silent' emergencies through its regular country programmes. It also provided support for the drought-affected countries in southern Africa – Angola, Botswana, Lesotho, Madagascar, Malawi, Mozambique, Namibia, Swaziland, Tanzania, Zambia and Zimbabwe.

Other emergency events in 1992 included: the conflict situation in Zaire; floods in Ecuador, Lebanon, Pakistan and Paraguay; earthquakes in Egypt, Indonesia, Pakistan and Turkey; outbreaks

of cerebrospinal meningitis in Cameroon and cholera in El Salvador and Peru; volcanic eruptions in the Philippines as well as in Nicaragua, where the damage was compounded by a tidal wave.

UNICEF also responded to the immediate needs of refugees from Myanmar entering Bangladesh; displaced persons and returnees in Sri Lanka; Malian refugees in Mauritania; and Liberian refugees in Côte d'Ivoire, Guinea and Sierra Leone. It also provided assistance to meet urgent health needs in the 11 republics of the CIS and three Baltic States, and health and other child survival needs in Albania.

In all, the organization responded to emergency situations in 54 countries with an expenditure of US\$167 million in 1992, compared with 26 countries (US\$49 million) in 1990, and 50 (US\$111 million) in 1991.

◆ **DIFFICULT AND DANGEROUS:** A host of political and operational factors made effective delivery of humanitarian assistance difficult and often dangerous. Four international and three locally hired UNICEF staff members were killed during relief operations in Somalia and the Sudan.

UNICEF's efforts were further complicated by the insensitivity of the leadership of some opposing forces to human rights; the need for protracted negotiations before relief could be delivered to some civilian victims of conflict; the collapse of public administrations in a number of countries; and the imposition of economic sanctions on others.

◆ **UNICEF ROLE:** Emergency interventions were mostly in the priority areas of health care services, nutrition, water supply and sanitation, household food security, basic education, and the psychosocial rehabilitation of traumatized children. The Executive Director visited Iraq, Somalia and former Yugoslavia to strengthen the organization's advocacy activities for children and women in emergency situations.

Experience during the year underscored the importance of:

- coordination and team leadership at the country level;
- protection for relief workers and humanitarian relief;
- an emergency reserve like the Emergency Programme Fund to facilitate a rapid response;
- the media for resource mobilization.

◆ **FUNDING:** Sources of funding included the Emergency Programme Fund (EPF), special contributions from donors in response to appeals, diversions from regular country programmes, mail-poll approval of general resources by the UNICEF Executive Board and borrowings from the Central Emergency Revolving Fund (CERF) of the newly established Department of Humanitarian Affairs (DHA).

During the year, UNICEF allocated US\$242.3 million for emergency interventions—an increase of US\$91.3 million over 1991. Africa received the largest share, totalling US\$129.8 million, or 54 per cent. The EPF was used to cover initial emergency needs in 32 countries of Africa, the Americas and the Caribbean, Asia, Middle East and Central and Eastern Europe.

◆ **DHA ESTABLISHED:** The establishment by the United Nations Secretary-General of the Department of Humanitarian Affairs to coordinate United Nations emergency responses was a welcome development. UNICEF is working closely



The psychological damage caused by war can be even more devastating than physical injuries.

with DHA in developing its emergency policies, guidelines and operational directives.

Although UNICEF responses have focused primarily on the provision of supplies to relieve suffering, it is recognized that there is a close link between emergency activities and long-term development. Emergency programmes should accelerate rehabilitation and development. Since the number of complex emergencies is likely to increase, UNICEF is updating policy directives to further ensure a relief-to-rehabilitation continuum, especially in disaster-prone countries.



Rehabilitation is a permanent component of UNICEF emergency relief programmes. After immediate provision of supplies, the focus turns to helping children regain the confidence to rebuild peace in their countries.

♦ **CAPACITY STRENGTHENED:** Steps have been taken to enhance UNICEF's emergency response capacity at headquarters in New York and Geneva and in the field with additional staff and the secondment of experienced officers from governments and external agencies including SwedRelief and the Norwegian Refugee Council. In Somalia, 12 Indonesian doctors worked with the measles vaccination programme, and a US Centers for Disease Control and Prevention team also helped with health surveillance efforts.

♦ **TRAINING AND MANAGEMENT:** An emergency roster was established at headquarters to facilitate the rapid deployment of staff to the field.

Training in emergency management was also strengthened, with the objective of providing at least two staff members in each country office with the necessary skills to handle emergencies. In 1991/1992 regional emergency training workshops were organized for 85 staff in Abidjan and Nairobi. Staff members from Djibouti, Ethiopia, Haiti and Iraq were also included, and country-level briefings followed during the year. A briefing and training package developed for staff in Somalia was shared with UNICEF offices in Iraq and former Yugoslavia. Ten staff members also attended DHA/UNDP Emergency Management Workshops during the year. □

SOCIAL MOBILIZATION/FACTS FOR LIFE

THE achievement of the World Summit goals for children in the 1990s will require sustained change in the way individuals, communities and societies think and act in important areas of life. UNICEF is accordingly examining national experiences of social mobilization to derive lessons for broader application.

Studies under way show that 'sustainable mobilization' emphasizes the importance of individuals and their community acquiring the relevant knowledge and skills to help them take decisions and actions that give them more control of their own lives and thus enable them to participate actively in the broader development process.

Examples of such an approach are *Educación Popular*, developed in Latin America for literacy and other community-oriented purposes, and education for development, which is beginning to gain ground in formal school systems initially in the industrialized world, but with stirrings of interest also in the South. The skills fostered by both these initiatives, because they help the making of decisions and the taking of consistent action, are sometimes known as 'life skills'. (See also '*ATT&children*.'

♦ **DECENTRALIZATION:** Sustainable mobilization, being based on broadening participation, draws strength from the trend towards decentralized responsibility for services. In the Philippines, mobilization efforts have deepened the involvement in service delivery at various levels – provincial, municipal and neighbourhood – and in particular increased the interaction between them. In Tanzania, the Government has created a powerful institutional framework and, in many

instances, community-based efforts have been made to tackle pervasive child malnutrition. Some villages report startling reductions in malnutrition and death among young children, and broad-scale improvements in nutritional status have also been impressive.

♦ **NEED FOR CHANGE:** Studies also show that change, and support for change, is needed at the national and political levels as well as at the often neglected intervening administrative and technocratic levels. Reciprocal interaction between all layers of government and community is essential, with responsibilities and accountability clearly established. Communication is the life-blood of this interaction, and a steady and dependable exchange of information for action has proved a reliable catalyst.

Facts for Life

While action for social change on the scale required to realize the World Summit goals for children depends critically on empowering and enabling processes, the basis for action is knowledge, and in priority areas of child health, *Facts for Life* continued to provide a succinct compilation of the most vital aspects of this knowledge.

As the total number of copies in circulation after three years swelled to some 6 million, in more than 170 languages, work began on a new edition with an added chapter on early childhood development and an additional co-publisher, UNEP, which will promote further dissemination through the global network of planned parenthood organizations. □

EVALUATION AND RESEARCH

EMPHASIS is now being placed on going beyond increasing the numbers, the quality and use of evaluation, to focusing on managing the evaluation process more systematically and effectively at all levels. A review of evaluations and their use, as well as a summary of the evaluation plan and structure for each programme area, will now be included in all UNICEF country programmes submitted to the Executive Board.

◆ **SHARING LESSONS LEARNED:** The evaluation database was expanded to provide qualitative information and serve as a management tool for country and regional offices. It currently contains information on some 4,000 evaluations and studies completed by UNICEF since 1987. A test edition of the database was completed for distribution to regional offices and selected country offices. Following this test phase, a full-fledged version will be shared organization-wide.

Checklists have been developed for grading the quality of evaluations, and the methodology for reviewing evaluations has also been improved. The *Evaluation Newsletter* continued to serve as an information exchange.

◆ **THEMATIC PLAN:** A thematic rolling evaluation plan is being developed as a guide to policy and programme development. Critical factors assessed will include the sustainability of programme action, impact on the poorest groups, development and empowerment benefits for women, stimulation of community participation, social mobilization and cost-effectiveness.

A thematic evaluation process involving a seven-country case-study of UNICEF support to growth monitoring and promotion was carried out to review and share experiences, identify technical and operational improvements and examine sustainability. Priority areas for further operational research were identified and an attempt is being made to build national capacity to conduct rapid anthropological assessments. A set of global findings, lessons learned and recommendations was agreed upon in a workshop in Nairobi in May. A workshop held at headquarters in October examined implications of the evaluation for nutrition policy development and a new UNICEF strategy for nutrition-oriented information systems. A summary report was made available at the end of 1992 to guide country offices in the implementation of the new strategy in existing and new programmes.

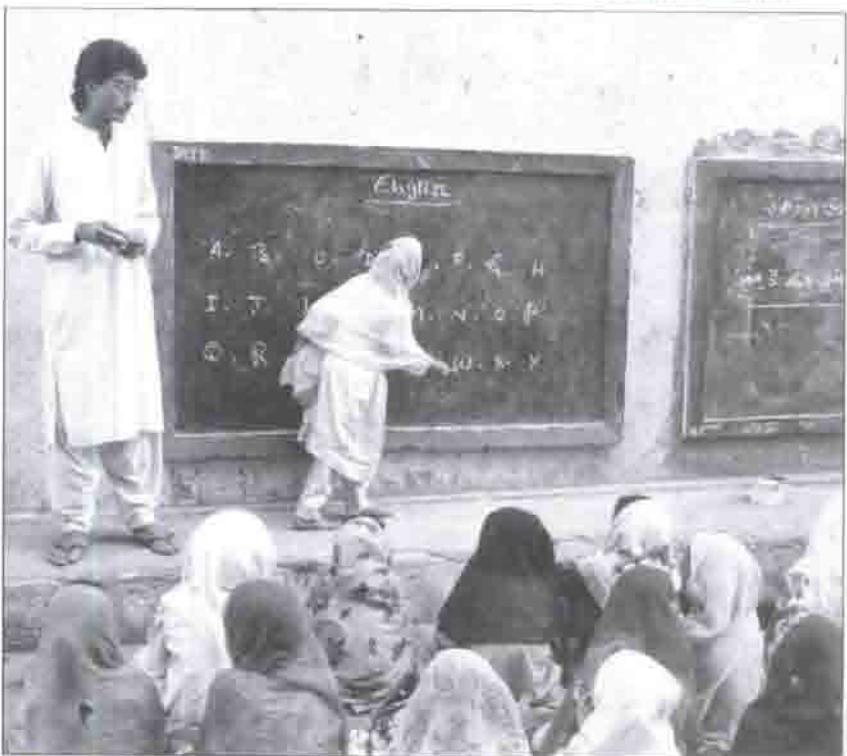
An evaluation of UNICEF's emergency response

led to the formation of a senior-level task force to modify UNICEF policy in the operations area. One of the findings was that very few evaluations of UNICEF's emergency activities exist. Since there is no standard methodology on how to evaluate emergency programmes, a special methodology was developed. It was first applied in Liberia and included interviews with key actors involved in the emergency response, together with a review of existing documents and the linkages between UNICEF inputs and programme outputs. The impact, coverage and costs were assessed through a process of sentinel community surveillance (SCS), carried out by teams of community members, NGOs and government officials.

◆ **CAPACITY-BUILDING:** Intensive training on low-cost essential research and evaluation methodologies was conducted in Angola, Burundi, Chad, Honduras, Liberia, Malawi, Mexico, Mongolia, Nicaragua, Niger, Rwanda, Thailand and Zimbabwe. In addition, two regional workshops for the East Asia and Pacific Regional Office (EAPRO) and ESARO, and a seminar at headquarters, were also held on the subject. Over 100 UNICEF staff from 50 countries have been involved in the training, which aims at enhancing the UNICEF country office evaluation function and monitoring of goals for the 1990s.

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Evaluation can help assess the impact of programmes on the poorest groups, especially women.



UNICEF/59040/Brown

UNICEF PROGRAMMES FROM GENERAL RESOURCES

UNICEF programmes are approved for multi-year periods. Programme recommendations being proposed to the 1993 Executive Board session are indicated in colour and should be regarded as tentative until approved.

The UNICEF programme budget in each country is allocated according to three criteria: under-five mortality rate (USMR) – the annual number of deaths of children under five per 1,000 live births; income level (GDP per capita); and the size of the child population.

**UNICEF cooperates in programmes in 137 countries:
45 in sub-Saharan Africa; 35 in Latin America; 34 in Asia; 14 in the Middle East
and North Africa; and 9 in Eastern Europe and Central Asia.**

Afghanistan	1992-94: \$16,500,000	Angola	1992-96: \$3,750,000	Niger	1990-94: \$10,195,000
Albania	1993-95: \$3,000,000	Ghana	1991-95: \$11,625,000	Nigeria	1991-95: \$65,000,000
Algeria	1991-95: \$3,750,000	Guatemala	1992-96: \$5,000,000	Oman	1991-95: \$3,750,000
Angola	1991-95: \$11,000,000	Guinea	1991-95: \$9,250,000	Pacific Islands	1992-96: \$7,150,000
Argentina	1991-95: \$3,750,000	Guinea-Bissau	1989-93: \$2,715,000	Pakistan	1992-96: \$71,500,000
Armenia	1993-94: \$2,000,000	Guyana	1990-94: \$3,168,000	Panama	1992-96: \$1,750,000
Azerbaijan	1993-94: \$1,000,000	Haiti	mid-1990-mid-95: \$7,305,000	Peru	1992-96: \$7,450,000
Bangladesh	1993-95: \$52,800,000	Honduras	1991-95: \$3,750,000	Philippines	1994-98: \$21,500,000
Barbados	1992: \$100,000	India	1991-95: \$175,000,000	Rwanda	1993-97: \$9,900,000
Belize	1992-96: \$3,750,000	Indonesia	1990-95: \$62,450,000	Sea-Toms and Pelicans	1991-95: \$2,500,000
Benin	1990-94: \$5,404,000	Iran, Islamic Rep. of	1993-97: \$6,000,000	Seychelles	1992: \$50,000
Bhutan	1992-96: \$5,000,000	Iraq	1993-94: \$4,000,000	Sri Lanka	1992-96: \$6,875,000
Bolivia	1993-97: \$6,875,000	Jamaica	1990-94: \$3,043,000	Sudan	1991-95: \$25,000,000
Bosnia and Herzegovina	1990-94: \$4,603,000	Jordan	1993-97: \$5,000,000	Suriname	1992-96: \$8,800,000
Burkina Faso	1990-95: \$9,552,000	Kazakhstan	1993-94: \$2,000,000	Togo	1990-94: \$4,250,000
Burundi	1993-97: \$7,150,000	Kenya	1989-93: \$19,551,000	Tunisia	1992-96: \$38,500,000
Cambodia	1992-94: \$9,000,000	Kyrgyzstan	1993-94: \$2,000,000	Tajikistan	1993-94: \$2,000,000
Cameroon	1991-95: \$4,900,000	Korea, Dem. People's Rep. of	1994-98: \$5,000,000	Thailand	1989-93: \$14,000,000
Cape Verde	1990-94: \$3,008,000	Kosovo	1990-94: \$1,800,000	Turkey	1991-95: \$10,000,000
Central African Republic	1993-97: \$6,000,000	Lao People's Democratic Rep.	1992-96: \$6,600,000	Turkmenistan	1993-94: \$2,000,000
Chad	1990-94: \$7,500,000	Latvia	1992-96: \$5,000,000	Uganda	1990-95: \$22,800,000
Chile	1991-95: \$3,750,000	Lithuania	1992-96: \$5,000,000	Uruguay	1992-96: \$3,750,000
China	1994-95: \$36,000,000	Macedonia	1991-95: \$2,500,000	Uzbekistan	1993-94: \$2,000,000
Colombia	1993-97: \$6,050,000	Maldives	1992-96: \$13,200,000	Venezuela	1991-95: \$3,750,000
Comoros	1990-94: \$3,181,000	Mongolia	1990-95: \$27,900,000	Viet Nam	1991-95: \$40,000,000
Congo	1992-96: \$5,000,000	Myanmar	1991-95: \$25,000,000	Yemen	1994-98: \$12,500,000
Costa Rica	1993-96: \$3,750,000	Namibia	1992-96: \$5,000,000	Zaire	1993-95: \$20,400,000
Côte d'Ivoire	1992-96: \$7,700,000	Nepal	1992-96: \$25,000,000	Zambia	1991-95: \$7,360,000
Cuba	1992-96: \$5,000,000	Nicaragua	1992-96: \$5,000,000	Zimbabwe	1992-96: \$6,000,000
Djibouti	1989-94: \$2,704,000				
Dominican Republic	1992-96: \$5,000,000				
Eastern Caribbean Islands	1993-97: \$5,100,000				
Ecuador	1994-98: \$5,000,000				
Egypt	1990-94: \$21,450,000				
El Salvador	1992-96: \$5,000,000				
Equatorial Guinea	1991-95: \$2,500,000				
Eritrea	1992-94: \$49,500,000				
Gabon	1993-95: \$2,250,000				

(1) UNICEF is providing assistance for Palestinian women and children in West Bank and Gaza – \$2,175,000 (1992-94); Jordan – \$800,000 (1990-93) and \$800,000 proposed for 1994-97; Lebanon – \$1,050,000 (1992-94); Syria – \$800,000 (1991-94).

(2) Includes Antigua and Barbuda, British Virgin Islands, Dominica, Grenada, Montserrat, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, and Turks and Caicos Islands.

(3) Includes Cook Islands, Federated States of Micronesia, Fiji, Kiribati, Marshall Islands, Niue, Palau, Samoa, Solomon Islands, Tokelau, Tonga, Tuvalu and Vanuatu.

(4) Financed from interregional funding only in 1992: Barbados, Seychelles, Suriname, and Trinidad and Tobago.

UNICEF conducted training in SCS, which includes the direct and active involvement of the communities where the research or the evaluation takes place, the immediate action-oriented feedback to those communities, combined with a structured feedback to the district and national-level management information processes. As a direct result of this training, 17 countries are now

using the SCS method with an emphasis on impact measurement.

♦ **EVALUATION:** A multi-donor evaluation of UNICEF programmes and operations was carried out in 1991-1992 by the Governments of Australia, Canada, Denmark and Switzerland. An executive summary of the evaluation reports will be presented to the Executive Board in 1993. □

INTER-AGENCY COOPERATION

DURING the year, UNICEF maintained close collaboration with a wide range of partners including:

- ♦ the Centre for Human Rights on implementation and monitoring of the Convention on the Rights of the Child;
- ♦ WHO on a series of health measures including immunization, the children's vaccine initiative, ARI, CDD, AIDS, BFHI, the Bamako Initiative, malaria control, MCH, essential drugs, healthy lifestyles for youth, safe motherhood and health education;
- ♦ UNESCO on basic education, literacy and early child development;
- ♦ UNFPA and WHO to strengthen MCH and family planning activities at the country level;
- ♦ UNDP, WHO and the Carter Center on guinea worm eradication;
- ♦ FAO and WHO on nutrition surveillance;
- ♦ UNESCO, UNFPA and WHO on *Facts for Life*;
- ♦ UNDP, UNESCO and the World Bank on follow-up to the World Conference on Education for All;
- ♦ DHA, UNHCR, WFP, WHO and others on emergency and rehabilitation;
- ♦ UNDP, UNFPA, the United Nations Development Fund for Women (UNIFEM) and WFP on women in development;
- ♦ UNEP on environment.

UNICEF also worked closely on a range of issues with the Consultative Committee on Administrative Questions, the Department of Economic and Social Development, the United Nations Sudano-Saharan Office and the United Nations Office at Vienna.

UNICEF has been advocating that common goals and strategies are the fundamental starting-point for integrating cooperation. It offered a detailed proposal for a common United Nations country strategy which was accepted by ACC and adopted by the General Assembly in resolution 47/199.

UNICEF believes this landmark resolution will greatly strengthen collaboration in operational activities for development.

♦ **JCGP:** The Joint Consultative Group on Policy (JCGP), comprising IFAD, UNDP, UNFPA, WFP and UNICEF, met regularly under the chairmanship of UNFPA. UNICEF continued to chair the subgroup on harmonization to synchronize programme cycles so that the United Nations system could respond more effectively to national development plans. UNICEF has also worked to promote common understanding in the areas of programme terminology and accounting procedures for national programme execution as well as on the establishment of common United Nations premises in the field.

♦ **DEVELOPMENT WITH A HUMAN FACE:** UNICEF continued to pursue its concerns about the impact of adjustment programmes on children. It stressed the need for focusing more attention on investment in basic services to meet human needs in the World Bank's consultative groups and at UNDP round tables. It also continued a fruitful dialogue with the International Monetary Fund (IMF), the World Bank and regional development banks.

♦ **AFRICA:** Based on the experiences of the Bamako Initiative, UNICEF has become an active partner in the World Bank's health policy dialogue with governments in Africa. It also continued to cooperate with the World Bank and the African Development Bank in the fields of education, WASH, women in development and safe motherhood.

Close working relations with UNDP continued at headquarters and in the field. Regional directors consult and exchange information with their UNDP counterparts during visits to New York, and country representatives visit each others' headquarters when taking up new assignments.

◆ **CHILD SURVIVAL:** UNDP, UNICEF, WHO and the Rockefeller Foundation are partners in the Task Force for Child Survival and Development.

This Task Force is providing important technical and advocacy support for national follow-up to the goals of the World Summit. □

DEVELOPMENT WITH A HUMAN FACE

A series of initiatives during the year placed the concept of 'development with a human face' on a new and more active footing.

Nearly 80 countries produced NIPAs to implement the goals for children agreed upon at the World Summit for Children, and 60 others were in the process of preparing them. NIPAs effectively transform the spoken commitments of national leaders into social and economic policies for the remainder of the decade.

Other developments which consolidated this recognition of human needs included:

- » Recommendations in the World Bank's *Poverty Reduction Handbook and Operational Directive* (Washington, D.C., 1992) that social sector targets for the year 2000 should be in line with those of the NIPAs. The Handbook notes that UNICEF's 'on-the-ground-presence' and 'in-depth involvement' in Bank-funded projects gives it a special

edge in the field. (See 'World Bank' panel.) Referring to recent projects in Guinea, Mali and Venezuela, the Bank states: "UNICEF's in-depth involvement means that grass-roots issues can be dealt with more thoroughly than they might otherwise be. Examples include staff motivation in community centres, or transition from one organizational and financial model to another. In addition, because UNICEF operations are more decentralized and flexible than the Bank's, UNICEF is able to fill unforeseen needs as they emerge during government-donor reviews of implementation."

- » Completion of human development country strategies for Bangladesh, Colombia, Ghana and Pakistan. UNICEF was particularly active in the preparation of Ghana's country programme which dovetailed with its NPA and UNDP's *Human Development Report*. UNICEF also collaborated with

WORLD BANK-UNICEF COOPERATION IN INDIA

Following India's adoption of universal immunization as a national priority, coverage rose from about 15 per cent to about 70 per cent by 1990. UNICEF assistance played a very major role in this achievement. Two years ago, the Indian Government decided to build on its success with immunization by attempting to boost the coverage of several other key mother and child health interventions. It approached the Bank for assistance, since the programme costs would be greater than it – or UNICEF and UNICER's traditional bilateral co-financiers – could easily provide.

Negotiations were successfully concluded in August 1991 for a mother and child health project of more than US\$600 million, financed by the Indian Government, the Bank and UNICEF.

The cooperative relationship between the Bank and UNICEF was extremely good during project identification and preparation. There were probably four reasons for this. First, both agencies could see benefits from an enhanced partnership. The Bank benefited during preparation from the technical expertise of UNICEF's large Delhi staff and their close working relationship with the Government. UNICEF's field presence will also be important during project supervision. UNICEF saw the Bank's financial commitment as necessary for the programme to take off – and as some guarantee that government funding for the programme would be sustained during difficult financial times. Second, cooperation between the Bank and UNICEF was forged initially

through warm personal relationships between the Bank's and UNICEF's Delhi-based staff. The personal factor in building mutual confidence strengthened agency policies about cooperation. The relationship between field staff, given UNICEF's decentralized decision-making, was rewarding. Third, it was important that the relationship in the field was cemented at headquarters with expressions of commitment from management in both agencies. Fourth, the Bank – at headquarters and in the field – recognized the lead role of UNICEF in this major intervention.



Development with a human face is the UNICEF strategy towards the achievement of real social progress – and the good health and well-being of mothers and children.

UNDP on human development reports for Argentina and Botswana.

♦ Completion of a UNICEF study, *Africa's Recovery in the 1990s*, setting out policy alternatives focused on human development. A similar study of eight Latin American countries was also completed in 1992.

♦ A joint review of NPIAs in Ghana, Guinea, Uganda and Zimbabwe by the World Bank and UNICEF prior to the OAU International Conference on Assistance to African Children (Dakar, 25-27 November). UNICEF has been trying to involve the World Bank in the NPA process in sub-Saharan Africa in particular. There are plans to extend the joint review process to other countries in 1993.

UNICEF worked with UNDP and the Development Assistance Committee of the Organization for Economic Co-operation and Development (OECD) on methodology for the analysis of development aid allocations for human needs. It also worked with other members of the Joint Consultative Group on Policy (IFAD, UNDP, UNEP, and WFP) on a proposal to monitor poverty and the impact of adjustment policies on vulnerable groups.

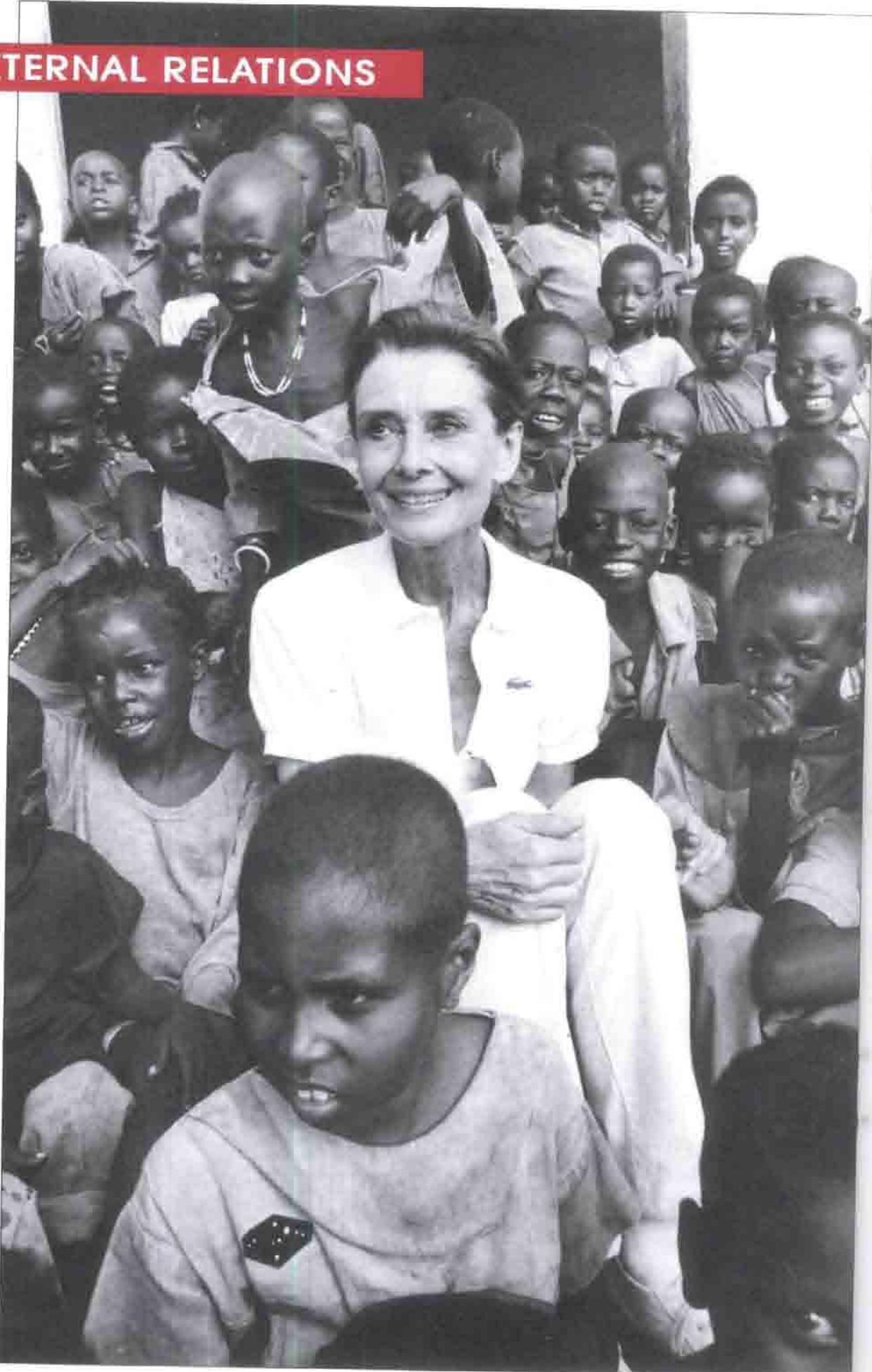
♦ COMMONWEALTH OF INDEPENDENT STATES: UNICEF with WHO conducted collaborative missions to all but one of the Commonwealth of Independent States (CIS) in February/March, followed by second visits to Armenia, Azerbaijan, Kazakhstan and the Central Asian States in

October/November. The country reports that followed argued that the social gains from independence had been jeopardized by hyper-inflation, the collapse of trade and the termination of subventions from the budget of the former Soviet Union. UNICEF appealed for assistance from the donor community at international conferences in Geneva, Lisbon and Tokyo, to ensure that the transition to market economies had safety nets for the poorest families. The response, however, was inadequate. UNICEF provided modest emergency assistance to seven qualifying countries of the CIS and helped with the preparation of country programmes of assistance.

♦ AFRICA: The regional network dealing with adjustment in East and West Africa remained active during the year, and a cost and economics unit was created to strengthen in-house capacity to deal with macroeconomic issues and programme costing. Two economic advisers were also added to the regional office in sub-Saharan Africa.

♦ DEBT SWAPS: Jamaica, Madagascar and the Philippines joined the Sudan as countries in which UNICEF has carried out debt conversions for child development. UNICEF has now arranged swaps of commercial bank debt with a face value of over US\$68 million into local currencies valued at more than US\$11 million. Negotiations to convert debt for an additional 11 countries, primarily in Africa and Latin America, were continuing. □

E XTERNAL RELATIONS



MOBILIZING FOR CHILDREN

EFFORTS to integrate the goals of the World Summit for Children into the Earth Summit's Agenda 21, an explosive increase in the number of emergencies affecting children and the situation of children in Africa dominated the information and media work of UNICEF in 1992.

International media attention grew in direct proportion to the deteriorating situation of children in a score of countries including Afghanistan, Angola, Iraq, Liberia, Somalia and southern Sudan, 10 drought-stricken countries of southern Africa, and the former Soviet Union. The volume and complexity of emergency situations during the year involved information staff in emergency assessment missions, media field trips and almost daily reports on relief efforts. As winter approached in former Yugoslavia, a 'week of tranquillity' was negotiated for the safe passage of blankets and winter clothing for tens of thousands of vulnerable children, and journalists travelled with the Executive Director in a relief convoy into Sarajevo. In Somalia, UNICEF information staff defied escalating violence to become a main source of facts and figures quoted regularly by international news agencies, newspapers and major television newscasts.

WHO/UNICEF collaborative missions to the Commonwealth of Independent States (CIS) in February and March also generated strong press coverage. Special support was provided to National Committees and UNICEF offices in Central and Eastern Europe through the publication of an information kit and an analysis of opportunities for advocacy.

The first annual World Breastfeeding Week (August) succeeded in drawing considerable public and media attention to the baby-friendly hospital initiative (BFHI). It was initiated by the World Alliance for Breastfeeding Action (WABA) with UNICEF support and had the backing of national non-governmental organizations (NGOs). Wellstart and La Leche League International reinforced these endeavours with training in breastfeeding promotion for hospital staff. UNICEF spokesperson Eartha Kitt promoted the event in New York with a press conference at St. Vincent's Hospital and delivered a keynote speech on behalf of UNICEF at the ninth Annual International Congress on Child Abuse and Neglect (Chicago, September).

A media meeting of 20 leading British, French and other European journalists and experts on

African affairs was held in London in November prior to the Organization of African Unity (OAU)-International Conference on Assistance to African Children (ICAA). The Conference, and the meeting that preceded it, generated widespread coverage of the continent's debt problems and economic crisis as well as the challenges posed by AIDS, poverty and urbanization. UNICEF arranged several media trips for international and African journalists, who later travelled to Dakar for the Conference. Other related events in Dakar included an international meeting of mayors (24 November). (See 'Public participation'.)

◆ **AGENDA 21:** Political commitments to the UNICEF goals for children in the 1990s were strengthened by the United Nations Conference on Environment and Development (UNCED) held in Rio de Janeiro in June. Agenda 21 – the UNCED manifesto for environmental and development strategies into the next century – incorporated the World Summit goals, encouraged ratification of the Convention on the Rights of the Child and supported the alleviation of poverty. The Conference generated massive media attention and triggered events with important messages for child survival and development. The successful integration of issues affecting children into Agenda 21 should have a number of ongoing benefits for UNICEF external relations including fund-raising, work with NGOs and the development of new partnerships.

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Smiling faces bear witness to the fact that the essential human needs – enough food, clean water, health care and a basic education – are now within reach.



UNICEF/SZW/Roser

A regional report, *Children of the Americas*, points out that projects for Indians must respect their culture and traditions.



UNICEF/SHIBATA

♦ **THE STATE OF THE WORLD'S CHILDREN:**

The 1993 report argued that it should be possible to end child malnutrition, preventable diseases and widespread illiteracy within a decade. The report was launched on 17 December 1992 in Mexico, and the press conference was transmitted in association with Visa news via six satellites to a record number of countries. A video news release on the launch was transmitted to all of North and South America, Europe and the Middle East, Asia, Australia, New Zealand and parts of Africa. National Committees and country offices received an advance video package of stories which provided background for news conferences and briefings. News conferences were held in 36 cities of the United States alone where extensive reports were covered by ABC, CBS, CNN, PBS and scores of television stations. Major newspapers, such as *The New York Times*, *The Washington Post*, *Los Angeles Times*, *The Miami Herald*, *The Boston Globe* and *The Baltimore Sun*, devoted columns and editorials to the event. Elsewhere, the launch generated impressive coverage on major networks worldwide, including the BBC World Service (UK), CBC (Canada), French TV 2, NHK (Japan), NRK (Norway), RAI (Italy), Televisa (Mexico) and TV Globo (Brazil). Major newspapers which carried reports were *Corriere della Sera* (Italy), the *Daily Telegraph* and *Financial Times* (UK), *The Globe and Mail* (Canada), *La Repubblica* (Italy), *Yomiuri Shimbun* and *Asahi Shimbun* (Japan).

For the first time, UNICEF also issued a regional report – *Children of the Americas* – in both English and Spanish, which was preceded by a radio co-production in Spanish with the BBC World Service. A satellite radio programme was broadcast live from Bogota and other Latin American locations as well as from London, and UNICEF staff assisted the US Committee for UNICEF with a Miami-based news conference which targeted Spanish-speaking residents in the United States. The activities in Miami were broadcast by television satellite services throughout the Americas.

♦ **BROADCASTING AND VIDEO:** Support for UNICEF in the broadcast industry was expanded through a new initiative – the International Children's Day of Broadcasting – observed in more than 70 countries in mid-December. An information kit and specially recorded television spots were distributed with the support of broadcast executives from The International Council of the National Academy of Television Arts and Sciences. This will be an annual event with considerable fund-raising and advocacy potential.

Demand for UNICEF video footage on emergency and other situations grew by 25 per cent with the distribution of more than 8,000 videos. The overwhelmingly positive reception given to UNICEF coverage and co-productions suggests this work will become increasingly important. UNICEF television coverage of emergencies in Afghanistan, Haiti, Somalia and former Yugoslavia were aired on television networks worldwide. Information/Communication Training workshops are being developed to further this capacity to use audiovisual media and to strengthen partnerships with international broadcasters, national agencies and mass media.

Among the co-productions initiated in 1992 was the *Growing Up* series, which records the birth of a number of children around the world and plans to track the way in which environmental conditions shape their lives over the next 10 years. *Growing Up* will be the official film of World Environment Day in 1993. The co-production partners are Television Trust for the Environment and Central Television in the United Kingdom.

Other video co-productions included:

- » *The Other Side of Africa* with NCRV-TV of the Netherlands;
- » a prime-time television special on primary environmental care (PEC) and children with Norwegian Broadcasting;
- » environment spots with Television Trust for the Environment and the Saatchi & Saatchi advertising agency;

» a three-part production on the environment with the German National Committee and Transtel;

» a simulation game about international trade and responsibility aired by BBC TV;

» a series with French television on the girl child in Pakistan, AIDS in Burundi and Rwanda, and water in Niger;

» the first part of a series on micronutrients, *Ending Hidden Hunger*, which was shown at the International Conference on Nutrition in Rome (in December), sponsored by the United Nations Food and Agricultural Organization (FAO) and the World Health Organization (WHO);

» daily news reports and a 10-minute news spot on the OAU conference on children in Dakar for viewers in Europe, the Pacific Rim and North America.

Headquarters helped field offices with television post-production and the distribution of a number of special video productions. Work started on a funding project to help individuals from developing countries produce 10-minute films or videos about children and development.

UNICEF productions included: *The Bamako Initiative in Action*; two videos on HIV; spots on the Convention on the Rights of the Child which were aired on CNN International; *Images on edu-*



UNICEF/Durand

While the world struggles towards peace, children deserve immediate protection from the horrors of war.

cation for development; and a compilation of videos for the Ninth World Food Day Satellite Conference that was seen throughout North and South America.

A clearing-house was established at the Tulane University School of Public Health and Tropical Medicine in New Orleans to share information about video productions by country offices, and the first issue of a clearing-house newsletter was distributed.

A 'Tape Forum Award '92' was initiated with the BASF company for the best broadcast-quality video documentary on children's issues. Over 75 productions were submitted globally, and a British entry won the award.

◆ **EDUCATION FOR DEVELOPMENT:** The year marked a turning-point for UNICEF activities in education for development, which broadened both in concept and outreach. The programme has become a forum for social action and has expanded to include educators in developing countries through UNICEF regional offices.

Training workshops were held during the year for National Committee education officers at Oxford (UK) and for curriculum planners and senior educators from the eastern and southern Africa regions in Nairobi. The Standing Group of the National Committees recommended that from 1993 onwards education for development should have its own National Committee workshop separate from that on information.

A manual of practical education for development learning strategies for teachers and youth facilitators was compiled and tested in 22 coun-

Using the concept of 'a week of tranquillity' to achieve a lull in fighting, UNICEF is able to deliver supplies to children caught in war zones.



UNICEF/Durand



UNICEF will help provide a safety net for the children of Eastern Europe and Central Asia.

tries. *Images*, a video about how stereotypical views of life in developing countries can be projected by the media, was also produced. It is accompanied by suggestions for group work activities.

♦ **INFORMATION MATERIALS:** Mobilization for Africa was an important focus of headquarters publications in 1992. The range of materials produced to coincide with the OAU Conference (ICAAC) in November included: *Africa's Children, Africa's Future: Priorities for Human Investment in the 1990s*; a bibliography of UNICEF publications and videos on Africa; and an information kit. The materials are intended for use beyond the Conference and have a shelf-life of several years.

Areas of concern highlighted in the quarterly *First Call for Children* included reports on national programmes of action (NAPs) and activities in support of the Convention on the Rights of the Child, children and the environment, mobilization for Africa, and children in war.

A number of booklets were produced covering such subjects as the UNICEF policy on nutrition, UNICEF assistance in Romania, the mayors' initiative and UNICEF issues in Agenda 21. Also produced were thematic kits on the environment, the Day of the African Child, and children in Central and Eastern Europe.

A new initiative was the establishment of the UNICEF Features Service. Human-interest feature articles on development issues and programmes are being transmitted to National Committees for advocacy and fund-raising or for placement in

their local media. A regular monthly newsletter has given a further boost to BFHI. Publication of the newsletter *BFHI News* is expected to continue through 1993.

Major policy statements by the Executive Director were widely disseminated through a series of booklets that were sent to National Committees, field offices, and organizations concerned with the particular issues covered.

All UNICEF headquarters information materials and core publications are now printed on recycled paper.

♦ **PHOTOGRAPHS:** In addition to meeting ongoing media, NGO and other publishers' requests for photographs, more than 45 series of black-and-white prints and colour slides were distributed to National Committees and UNICEF headquarters and field offices. Representing almost 1,000 new images, subjects included BFHI, African children and women, the girl child, the environment, and emergencies in Afghanistan, Somalia and former Yugoslavia. Photographs were a major component of UNICEF publications as well as exhibitions on Africa and UNCED. Technical support to field offices was also increased during the year, including the distribution of photo acquisition and treatment guidelines.

♦ **INFORMATION CAPACITY-BUILDING:** Working through the Global Communication Support Fund, UNICEF stepped up its support for creative communications. Emphasis was put on projects to develop the capacity of media professionals—radio producers, journalists and creators of animated films. Among the projects approved in 1992 were: a joint UNICEF/FAO rural radio training project for francophone West and Central Africa; a social mobilization training project in the Philippines; a global communication training project with the Radio Netherlands Training Centre and the Australian Broadcasting Corporation; a seminar and workshop for producers of children's television programmes in Central America; and a multi-media package to mobilize public opinion on the problems of children in the Americas.

After a year of curriculum development, a contract was signed in November 1992 with the Children's Television Workshop and Mexico's Televisa for the production of 130 Spanish-language episodes of *Sesame Street* (*Plaza Sésamo*) for use in Latin America and the Caribbean. The series will contain educational material based on UNICEF objectives in the region.

UNICEF Bangladesh finalized a pilot episode of the animated film *Meena* with Hanna-Barbera's studios in the Philippines and began field surveys

to assess its impact on the target audience. The office also produced a poster, comic book, leaflet and prototype models of Meena products for possible sale in South Asia. Supplementary funding for the Meena project was provided by the Norwegian Government.

The movement towards democracy in Africa and elsewhere opened a number of doors for UNICEF advocacy through privately owned commercial radio stations and newspapers. Among the initiatives taken by UNICEF regional and country offices in Africa was the development of a partnership with FAO to train radio producers and other communicators in cooperation with universities and institutes.

The first meeting of the Working Group on Images was convened to examine ways in which UNICEF interacts with the media, as well as the contradictions that may arise in the course of its information/education work and fund-raising endeavours. Further research was commissioned in both of these areas.

A series of regional consultation/training ses-

sions was held for information and communications officers in Abidjan, Beijing, Caracas, Kathmandu, Nairobi and Rio de Janeiro. New representatives received training in media and presentation skills.

In Nice (France), a training session on the subject of media and emergencies was held from 30 November to 1 December. The participants were information officers from National Committees as well as regional information officers and field staff from emergency countries. The training session coincided with the annual National Committee Information Workshop.

◆ **POLLS:** After a year of preparation, opinion polling was initiated to gauge public awareness of UNICEF and its image, as well as perceptions of development issues. The first poll was conducted by the US Committee for UNICEF, and it is hoped that other National Committees will follow suit. On behalf of the Danish, German and Spanish National Committees, UNICEF also carried out a secondary analysis of opinion poll data held by the European Commission. □

CONVENTION ON THE RIGHTS OF THE CHILD

EFFORTS to accelerate implementation of the Convention on the Rights of the Child focused mainly on training, research and encouragement for NGOs and other external partners.

One consequence of war is the ever-growing number of child workers, whose homes and schools are in ruins.



UNICEF developed a comprehensive training package for representatives and senior programme officers. The training package was field-tested during the year, and a training workshop was held in Addis Ababa from 20 September to 2 October. The workshops will be extended to all regions by the end of 1993.

At the request of the Executive Board, the International Child Development Centre (ICDC) carried out a study analysing the compatibility and complementarity between the Convention on the Elimination of All Forms of Discrimination against Women and the Convention on the Rights of the Child.

◆ **INFORMATION BASE:** ICDC also proposed the development of an effective, user-oriented information base on children's rights. As a preliminary step, the Centre commissioned a survey to determine the capacity of UNICEF and selected intergovernmental organizations to handle information relating (directly or indirectly) to children's rights. As a second step, ICDC is proposing to undertake a survey of NGOs and other groups. The information gathered could form the basis of an organizational database on children's rights, which would be the beginning of a process of

information sharing. Special efforts will be needed to ensure that key institutions in the 'South' as well as the 'North' are included both in the initial surveys and in subsequent information management and networking activities for children's rights.

UNICEF documentation in the area of child rights was improved and key guidelines for the preparation of country programmes were amended to include standards set by the Convention. All future situation analyses will address the full range of needs and interests necessary to fulfil the Convention's objectives.

♦ **COMMITTEE ON THE RIGHTS OF THE CHILD:**

UNICEF arranged an inter-agency consultation in Quito (Ecuador) so that the Committee on the Rights of the Child could learn what other agencies are doing to promote child rights. The meeting was also attended by government officials and NGOs. The Committee had an opportunity to travel within the country, visiting project sites in mountain, coastal and urban areas. UNICEF also provided the Committee with supplementary information on the situation of children in countries that have submitted their first reports on implementation.

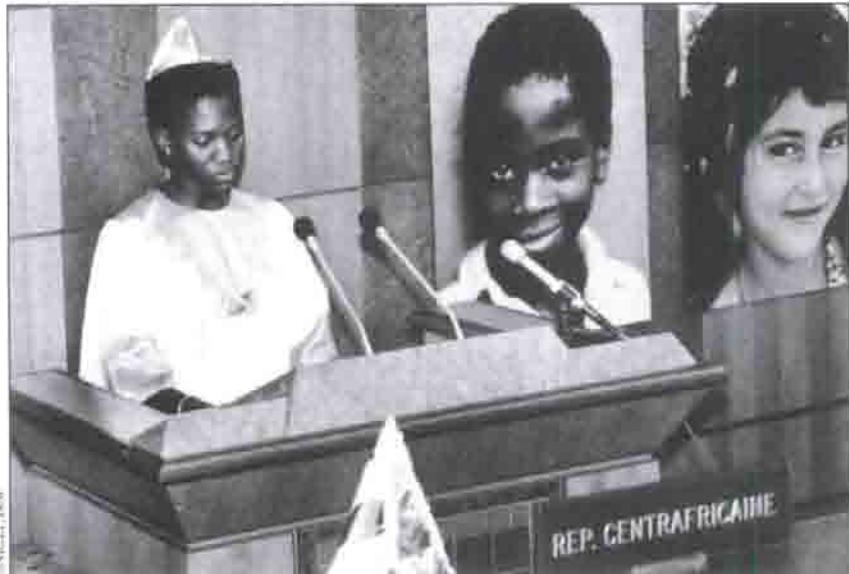
♦ **CHILD RIGHTS' PARTNERS:** Cooperation with external partners has focused on support for activities to promote public awareness of child rights and to educate the constituencies of these organizations about the Convention and its implications for their work. UNICEF supported an international conference on discrimination against the girl child in education (New York, 21-22 April); a regional seminar on the implementation of the Convention in terms of preventing child abandonment (Sofia, 28 September-2 October) (see 'Non-governmental organizations'); and is helping national and international NGOs to develop a system to share information.

UNICEF is also supporting the efforts of the NGO Group on the Convention to facilitate creating or strengthening existing national NGO coalitions for children's rights. The main objective of these national coalitions is to promote implementation of the Convention and to provide information about the situation of children in their countries to the Committee on the Rights of the Child. UNICEF offices worked directly with children as well as with parliamentarians, mayors and professional groups to promote compliance with the Convention's ideals. □

PUBLIC PARTICIPATION

A major international conference held by the OAU in Dakar in November called on the world to make a 'human investment' in Africa's children.

UNICEF continued its advocacy for children through collaboration with intergovernmental organizations as well as community, religious and political leaders.



♦ **INTERGOVERNMENTAL ORGANIZATIONS:**

UNICEF advocacy for children in general, and the OAU Dakar Conference (ICAAC) in particular, resulted in declarations and action from many quarters including: the tenth Summit of Heads of State or Government of the Non-Aligned Movement in Jakarta (September); the Ministerial Conference on Children of the South Asian Association for Regional Cooperation (SAARC) in Colombo (September); the Summit of First Ladies of Latin America and the Caribbean in Cartagena, Colombia (September); the France-Afrique Summit in Libreville, Gabon (October); the Ministerial Meeting of the League of Arab States in Tunis (November); and the Summit Level Group for South-South Consultation and Cooperation, known as the 'Group of Fifteen', in Dakar (November). All reaffirmed their commitment to implement the goals for children in the 1990s.

♦ **PARLIAMENTARIANS:** About 500 parliamentarians from 101 countries attended the 88th Inter-Parliamentary Union Conference in Stock-

holm (7-12 September). They reaffirmed their commitment to the World Summit goals for children in the 1990s and joined UNICEF in placing special emphasis on needs in Africa.

At a Parliamentary Earth Summit in Rio de Janeiro (5-7 June), they joined religious leaders, scientists and artists in adopting the Rio Consensus, which stated that societies unable to care for their children could not consider their development to be sustainable. Parliamentarians also figured prominently in UNICEF advocacy for implementation of the Convention on the Rights of the Child.

♦ **RELIGIOUS LEADERS:** An interfaith service in New York on the Day of the African Child (16 June) reflected growing international concern for children in the region. A task force of religious leaders was formed to help link UNICEF activities with African communities, and a regional meeting of religious leaders in Harare (June) discussed a broad range of children's issues.

The importance of advocacy through religious leaders was again demonstrated when Patriarch Pavle of the Orthodox Church of Serbia appealed to citizens of all faiths in former Yugoslavia to respect the 'week of tranquillity' so that food, clothing, medicines, vaccines and vitamins could be delivered to children in their communities.

♦ **MAYORS:** An International Colloquium of Mayors in Dakar (8-9 January 1992), hosted by the Mayor of Dakar and UNICEF, launched the global initiative 'Mayors as Defenders of Children'. The initiative encourages mayors to develop municipal plans of action in line with NPAs and the goals of the World Summit for Children.



UNICEF/S. S. Blane

A carefree childhood should be the right of children everywhere.

Twenty mayors and municipal leaders from 16 countries and 36 of Senegal's 48 mayors adopted a Dakar Declaration and Plan of Action. On the eve of ICAAC (24 November), some 40 mayors from Canada, Italy, Nigeria and Senegal met again in Dakar to review their plans and express solidarity with the goals for African children.

In addition, for the Day of the African Child (16 June), mayors of numerous cities around the world issued proclamations drawing attention to the needs of African children. □

NATIONAL COMMITTEES

NATIONAL Committees for UNICEF, as principal partners in the industrialized countries, continued to promote a deeper understanding of the needs and rights of children through their ongoing work in support of the organization's objectives. They contributed more than 20 per cent of UNICEF resources, mainly through sales of greeting cards and private sector fund-raising. They also responded quickly to emergency appeals by providing additional funds, especially for Africa and former Yugoslavia. They worked with national and international NGOs, professional groups and local authorities to promote BFIU, and they expanded activities related to

the Convention on the Rights of the Child and World Summit follow-up.

♦ **EXCHANGE OF VIEWS:** Consultation between the UNICEF secretariat and National Committees was refined and strengthened by four meetings between UNICEF staff members and the representative Standing Group. Special consultations were also held with a broader group of National Committee chief executive officers to discuss such issues as the crises in Somalia and former Yugoslavia, and the restructuring process at the United Nations. The National Committees also continued to meet with secretariat staff at workshops in the areas of information,

fund-raising, greeting cards and education for development.

Special attention continued to be paid to the changing circumstances faced by National Committees in several Central and Eastern European countries. For example, a planning and coordination meeting was held in Sofia in December.

The broader community of Committees sought means to assist in establishing new National Committees, or to sustain existing Committees during the period of transition. Means were also explored to help create Committees in the newly industrialized countries in Asia. □

NON-GOVERNMENTAL ORGANIZATIONS

NGOs played a major role in ensuring that goals for children in the 1990s figured prominently on the agendas of major international conferences held during the year. They made substantive contributions to UNICEF's Agenda 21, the International Conference on Nutrition and ICAAC.

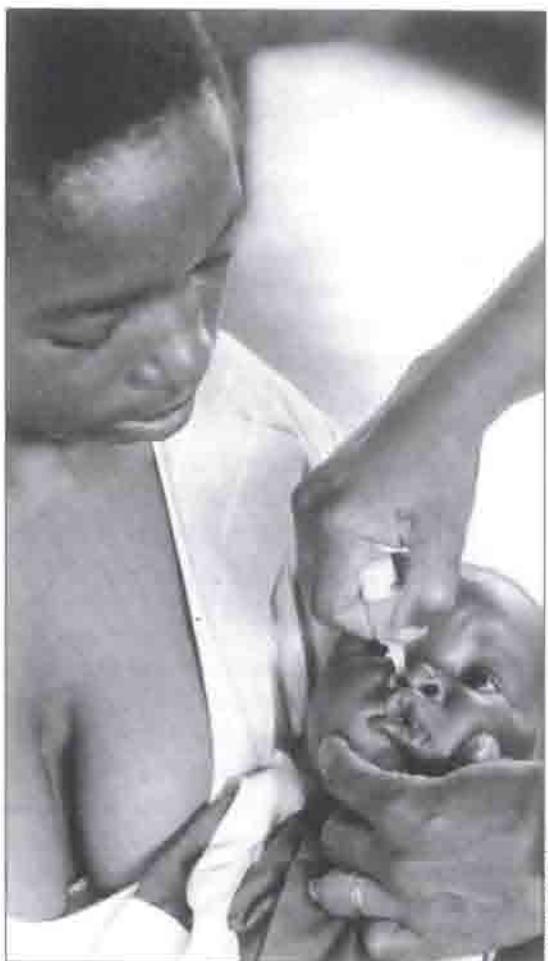
UNICEF also worked closely with NGO groups and coalitions to reduce gender disparities in education; promote healthy lifestyles among youth; involve young people in health and development programmes; and protect children caught in armed conflict situations.

◆ **CENTRAL AND EASTERN EUROPE:** The NGO/UNICEF Coordinating Committee on Activities for Children in Eastern and Central Europe was created in 1991 and has become an effective means of coordinating responses to the needs of children in this region as well as support for the formation of new indigenous NGOs. A capacity-building seminar for NGOs from the three Baltic States was organized by the International Federation of University Women (Tartu, Estonia, 4-12 October). Participants from 17 Central and Eastern European countries attended a regional seminar on family-based alternatives to prevent child abandonment (Sofia, 28 September-2 October). The seminar in Bulgaria was jointly organized by Defense for Children International, the International Catholic Child Bureau, the International Social Service and UNICEF.

◆ **AFRICA:** International and African NGOs generate some 30 per cent of the aid to African countries. They were well-represented at ICAAC in Dakar, where they restated their desire to work with governments on NIPAs in order to fulfil the goals of the World Summit for Children.

◆ **GLOBAL:** As mentioned, UNICEF continued its work with the NGO Group on the Convention on the Rights of the Child, helping to create national coalitions for children's rights and developing an information network linking organiza-

tions which work on behalf of children. UNICEF expanded its long-term collaboration with the Rotary International PolioPlus programme to the field of education. It also continued to work with the Junior Chamber International on control of diarrhoeal diseases (CDD), especially in Latin America. □



Rotary International has raised more than US\$240 million for polio eradication worldwide – an outstanding example of dedication to the cause of children.

FUND-RAISING

FUND-RAISING efforts concentrated on reaching targets commensurate with the UNICEF medium-term plan 1992-1995. Efforts were also made during the year to encourage a general mobilization of international resources for NPAs, in particular for African countries.

Special efforts were made to encourage multi-lateral agencies, international financial institutions, the European Community and NGOs to channel funding through UNICEF in support of NPAs.

♦ **COST-SHARING:** A joint project agreement was signed with the African Development Fund and Bank in an effort to broaden the funding base for NPAs. The agreement includes joint project identification, project preparation, appraisal, implementation, supervision and post-evaluation in member States. It also includes cost-sharing in all but the implementation phase. Collaboration

with other development banks was also strengthened.

In 1992, contributions to general resources amounted to some US\$545 million. Adding the contributions from supplementary funded programmes and emergencies, the total exceeded US\$900 million for the first time in UNICEF history.

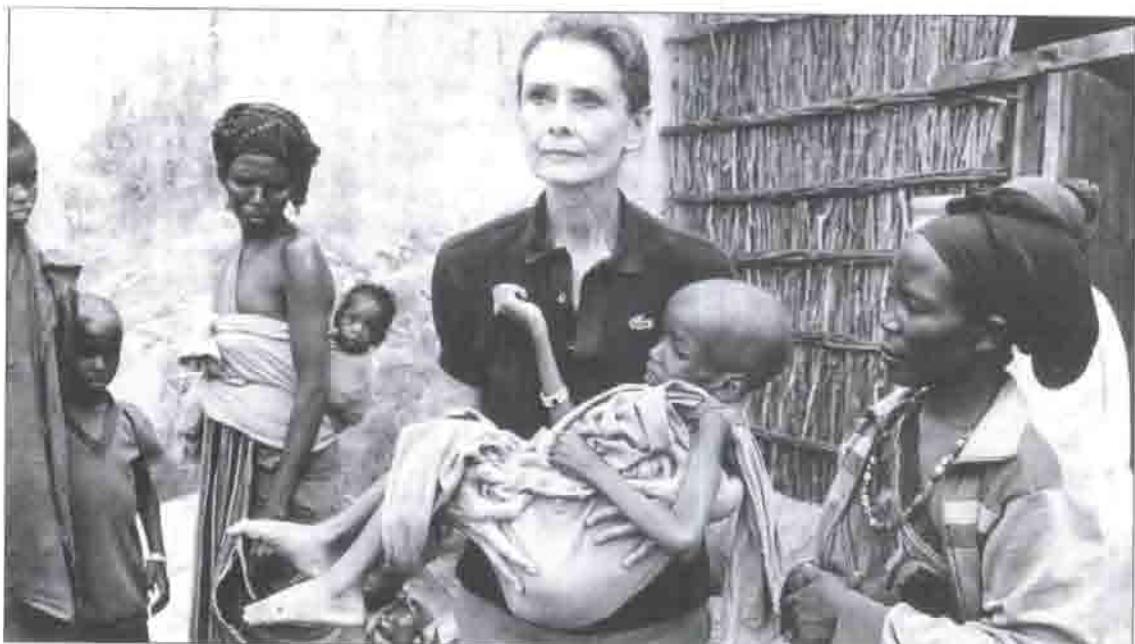
♦ **BUDGET CONCERN:** While donors responded generously to a large number of complex emergencies and did not reduce their support for supplementary programmes, it is of some concern to UNICEF that supplementary funding did not keep pace with the medium-term plan's projections.

UNICEF's debt relief initiative expanded during the year to bring the total funds generated in local currencies to US\$9.4 million. This compares with a US\$2 million total in 1991. □

PUBLIC ADVOCACY

UNICEF Goodwill Ambassadors, Special Representatives and other celebrity spokespersons continued to generate major public support for children in need through print and broadcast interviews, speeches and appearances at special events.

♦ **AUDREY HEPBURN:** The sad news of the death of Goodwill Ambassador Audrey Hepburn on 20 January 1993 was deeply felt around the world. An Audrey Hepburn Memorial Fund has been established to benefit specific projects for children in especially difficult circumstances in



In a television tribute to Audrey Hepburn's tireless work for UNICEF her son cited her unshakable determination to bring to all children, everywhere, the gifts of "health, hope, tenderness and life."

Africa. Ms. Hepburn's last overseas visit for UNICEF was her trip to Somalia in late September, which generated very extensive press coverage from interviews and press conferences in London and Nairobi.

◆ **GOODWILL AMBASSADORS WORLDWIDE:** Tetsuko Kuroyanagi's visit to Ethiopia in July raised more than US\$1 million for projects there.

Roger Moore attended several National Committee events, including the UNICEF partnership campaign with the city of Kiel in Germany, fund-raisers in the United Kingdom and the United States, and the Global Forum at UNCED in Rio de Janeiro.

Sir Peter Ustinov, Liv Ullmann, Youssou N'Dour, Sir Edmund Hillary, Imran Khan and Julio Iglesias appeared as advocates for UNICEF at National Committee events, and Cicely Tyson spoke at the September dinner of the Business Council for the United Nations Ambassadors.

◆ **TELEVISION APPEALS:** Other personalities supporting UNICEF with television appeals included Renato Aragao, Juan Luis Guerra, Edward James Olmos, Franco de Vita and Xuxa. Mexican television host Raul Velasco produced extensive reports on UNICEF in Central America for his weekly Sunday show, and US newsman Bryant Gumbel hosted a ground-breaking week of Africa-based Today shows prior to ICAAC.

◆ **THE DAY OF THE AFRICAN CHILD:** Celebrated annually on 16 June, the Day inspired a range of activities in 14 countries outside Africa. It also gave a push to the finalization of NPAs and



Goodwill Ambassador Tetsuko Kuroyanagi was welcomed by children when she visited Ethiopia for UNICEF.

UNICEF/UNP

At a ceremony in New York to honour publisher John Johnson (left) were Mrs. Mario Cuomo (centre) and the late Lawrence E. Bruce, former President of the US Committee for UNICEF.



implementation of the Convention on the Rights of the Child within Africa. Heads of State, first ladies, foreign ministers, religious leaders, associations of artists and intellectuals, the media and thousands of children in 42 African countries were involved in advocacy.

Mrs. Boutros-Ghali, Mrs. Mario Cuomo and Mrs. David Dinkins chaired a week-long programme of activities for the Day of the African Child in New York City and at the United Nations. These activities included an interfaith religious service, a series of film screenings by African directors, a photographic exhibit, and an educational-cultural event for 650 schoolchildren and teachers.

John Johnson, publisher of *Ebony* and *Jet*, was presented with the Africa's Future award by the US Committee for UNICEF at a diplomatic reception hosted by Chemical Bank.

◆ **'WEEK OF TRANQUILLITY':** The effort to establish 1-7 November as a week of tranquillity in former Yugoslavia involved extensive use of the media to galvanize public opinion and advocacy by Goodwill Ambassadors Liv Ullman, Audrey Hepburn and Sir Peter Ustinov. Liv Ullman wrote a special appeal letter for National Committees, encouraging international assistance. Audrey Hepburn taped television and radio spots calling for active support for the week throughout the conflict area, and Sir Peter did a series of radio and television appeals in five languages for use internationally. □

GREETING CARD AND RELATED OPERATIONS

GCO contributed US\$82.2 million to UNICEF general resources during the 1991 season – a US\$5.6 million (7.3 per cent) increase over the previous year, and the strongest return in GCO history.

The result was especially significant against the background of a global recession, a postal strike in Canada, and difficult economic and political circumstances in Central and Eastern Europe, each of which had a negative impact on sales volume. Gross proceeds in dollar terms also suffered from the strengthening of the United States dollar.

The consolidated net income of US\$82.2 million for 1991 included as net operating income: US\$61 million from the sale of greeting cards and other products; US\$31 million from GCO-supported private sector fund-raising activities; and US\$0.9 million from special fund-raising events, less US\$10.7 million for exchange rate adjustments, transfer of a special operating account, accounts receivable write-offs and prior years' adjustments.

Based on provisional results for the 1992 season, the consolidated net income is expected to be US\$87 million – an increase of US\$4.8 million or 5.8 per cent over 1991. This increase is a tribute to the efforts of many thousands of volunteers and staff of National Committees, UNICEF field offices and other sales partners in 145 countries.

♦ **INTERNAL MANAGEMENT REVIEW:** GCO conducted a year-long internal management review and adapted its organizational structure to better assist National Committees and field offices in raising money from the private sector. In addition to its work in the industrialized countries, it identified 31 developing countries with private sector fund-raising potential.

♦ **DIRECT MAIL:** With GCO support, National Committees and field offices were able to expand or initiate direct mail programmes. New appeals were launched in Australia, Belgium, Brazil, Germany, Hong Kong, Japan, Mexico, the Netherlands, New Zealand and the Republic of Korea. Direct-mail materials included the publications 'Review of the Year' and 'Chance for a Child', and fund-raising kits on country programmes in Bolivia, China, Ethiopia and Mali. Another fund-raising kit, 'Children: Innocent Victims of War' was distributed for emergency appeals.

♦ **FUND-RAISING DEVELOPMENT PROGRAMME:** The aim of the Programme is to help National Committees and field offices boost their

private sector fund-raising and build donor constituencies. During the year, the Programme acquired 125,000 new donors, including 27,000 with monthly pledges. Ten National Committees and three field offices in 15 countries have so far benefited. For a total investment of US\$3.4 million since 1991, the Programme has already generated returns of US\$8.4 million.

A Central and Eastern European National Committees Development Programme was initiated in 1992 to help those countries develop their capacity in advocacy, information dissemination, sales network expansion and donor constituency building.

♦ **WORKSHOPS:** Six regional greeting card workshops were held during the year, together with a fund-raising workshop for National Committees in Torremolinos (Spain).

♦ **SPECIAL EVENTS:** A special events manual was prepared and distributed to more than 30 National Committees and field offices. GCO reviewed more than 100 proposals for special events, directed projects with fund-raising potential to National Committees and field offices and provided implementation support. The 1992 Danny Kaye International Children's Awards television broadcast in the Netherlands (September) was hosted by UNICEF Goodwill Ambassadors Roger Moore and Audrey Hepburn. Children from 23 countries participated in the recorded programme, which was broadcast in more than 20 countries for advocacy and fund-raising. Danny's daughter, Dena Kaye, introduced film segments from her trip to UNICEF-assisted projects in Latin America.

♦ **EXHIBITS AND PROMOTIONS:** Over 20 different exhibitions were planned and developed in the Americas, Africa, Asia and Europe. These included 'Children of the Rainforest', installed at UNCED in Rio de Janeiro; 'A Future – Every Child's Right', for ICAAC in Dakar; and a variety of other thematic displays for international conferences on children, water and the environment, acute respiratory infections and AIDS. □

R ESOURCES

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UNICEF FINANCES, 1991-1993

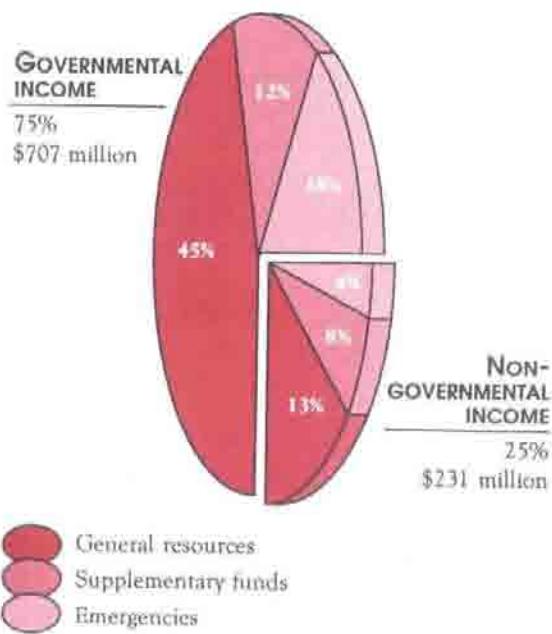
INCOME

UNICEF derives its income from voluntary contributions from governmental and non-governmental sources.

Total income for 1992 was US\$938 million (compared to US\$807 million for 1991). This includes US\$204 million in contributions for emergencies (US\$136 million in 1991).

UNICEF INCOME BY SOURCE 1992

Total income: \$938 million



The 1992 income was divided between contributions for general resources (58 per cent), supplementary funds (20 per cent) and emergencies (22 per cent). General resources are available for cooperation in country programmes approved by the Executive Board, as well as programme support and administrative expenditures.

General resources income includes contributions from 117 Governments; net income from the sale of greeting cards; funds contributed by the public (mainly through National Committees); and other income.

UNICEF also seeks supplementary funds from governments and intergovernmental organizations to support projects for which general resources are insufficient, or for relief and rehabilitation programmes in emergency situations, which, by their nature, are difficult to predict.

As a result of pledges at the United Nations Pledging Conference for Development Activities in November 1992, and pledges made subsequently, UNICEF income for general resources in 1993 is expected to total US\$545 million, which would represent a decrease of less than 1 per cent from 1992.

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UNICEF INCOME 1991-1993

\$1,200 (in millions of US dollars)



■ Emergencies
■ Supplementary funds
■ General resources

CONTRIBUTIONS TO SUPPLEMENTARY FUNDS FROM INTERGOVERNMENTAL ORGANIZATIONS

(in thousands of dollars)

AGI/UNDP	400.0
IFC	4,729.5
IDB	3,075.0
OPEC Fund	1,000.0
Total	9,204.5

EXPENDITURES

THE Executive Director authorizes expenditures to meet recommendations approved by the Board for programme assistance. The pace of expenditure depends on the speed of implementation in any country.

In 1992, total UNICEF expenditures amounted to US\$932 million (1991 US\$755 million), summarized in US\$ millions as follows:

	1991	1992
Cash assistance for project personnel	99	127
Training costs and local expenses	194	265
Supply assistance	298	352
<i>Subtotal programme expenditure</i>	591	744
Programme support	86	92
Administrative services	75	86
Write-offs and other charges	3	10
<i>Total expenditures</i>	755	932

The bar chart on this page shows expenditures (excluding write-offs and other charges) for 1991 and 1992, and estimated 1993. The bar and pie charts on page 63 show programme expenditures by sector in 1988 and 1992, by amount and proportion respectively.

FINANCIAL PLAN AND PROSPECTS

BASED on pledges made at the 1992 Pledging Conference and recent trends, UNICEF expects some reduction in government contributions to general resources for 1993. This is due to several major government donors reducing their contributions and to the increase in the value of the United States dollar. After 1993, as the global recession ends, UNICEF hopes these major donors will be able to increase their contributions to previous levels. For supplementary funded programmes, UNICEF expects to maintain and expand upon its current level of contributions from governments. In addition to income generated from the sale of products by Greeting Card and Related Operations (GCO), UNICEF is encouraging the non-governmental sector, through National Committees and NGOs, to further expand their important contributions. The benefits of other forms of fundraising are also being examined.

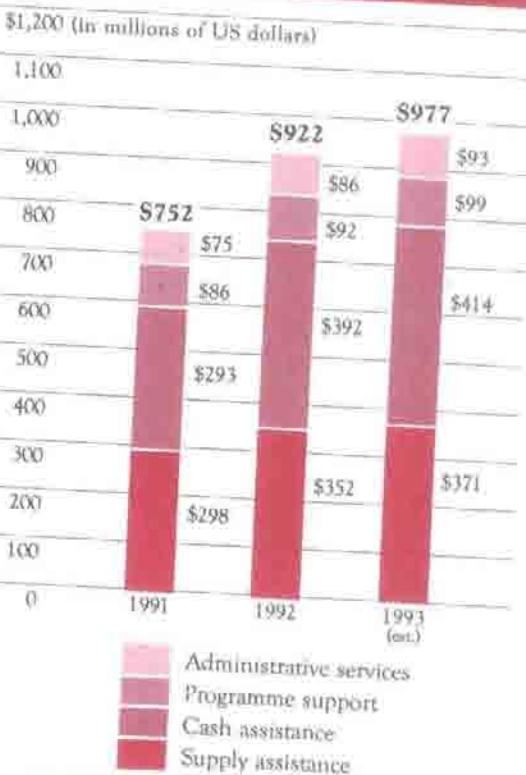
UNICEF currently supports programmes in 137 countries. At the 1993 regular session of the Executive Board, proposals for new or extended multi-

year programme cooperation in 41 countries will be submitted. Assistance for the proposed new projects would amount to US\$427 million from UNICEF general resources and US\$682 million for projects deemed worthy of support if supplementary funds are forthcoming. The duration of the projects ranges from two to five years. Programme recommendations from general resources for all countries are being proposed at the 1993 Executive Board session, and are shown in the table on page 44. A financial medium-term plan covering the years 1993-1996 will also be submitted to the Executive Board.

BUDGET ESTIMATES

◆ **ADMINISTRATIVE AND PROGRAMME SUPPORT BUDGET**: The revised budget for the biennium 1992-1993 and the proposed budget for the biennium 1994-1995 are designed to strengthen the organization's operational capacity to achieve the programme goals and strategies for the 1990s. The proposals result from extensive reviews and discussions held both in the field and at headquarters to ensure that the needs of the organization are well understood and that the budget proposals appropriately address them.

UNICEF EXPENDITURES 1991-1993



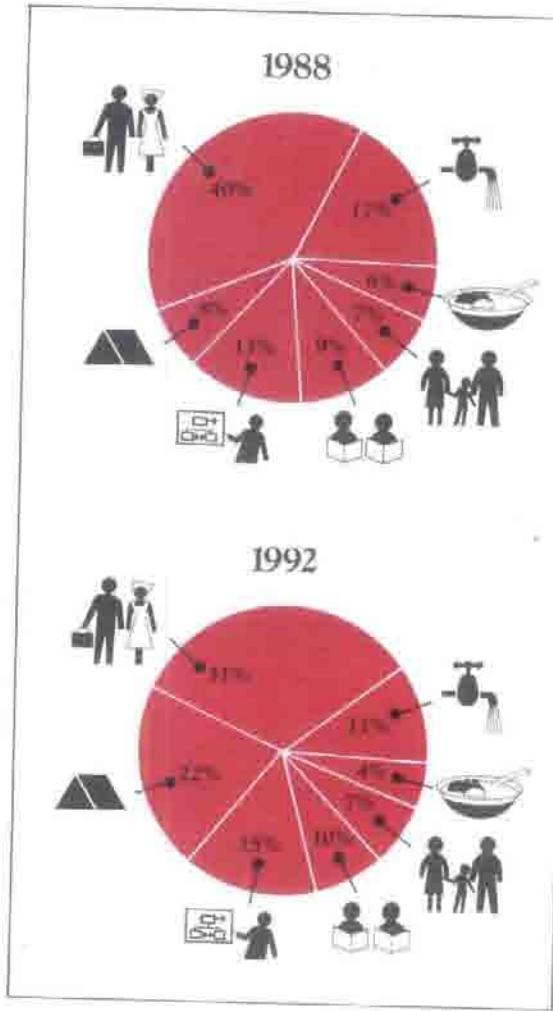
UNICEF EXPENDITURES ON PROGRAMMES BY SECTOR 1988/1992



♦ **REVISED BUDGET FOR 1992-1993:** UNICEF is requesting a supplementary budget of US\$3.9 million in the current biennium. Of this, US\$3.4 million is for additional funds approved by the 1992 Executive Board for activities in Central and Eastern Europe. The remaining US\$0.5 million is for other miscellaneous mandatory increases. This supplementary budget is proposed within the context of a comprehensive financial plan that demonstrates that not only is the additional budget affordable within the latest income estimates but also that the budget overhead ratio for the biennium has actually decreased, from 10.1 per cent to 9.8 per cent.

♦ **PROPOSED BUDGET FOR 1994-1995:** In 1991, the Executive Board requested UNICEF, in consultation with a reference group comprised of Board members, to carry out an in-depth analysis of the structure and format of budget documents; the criteria for determining core and project posts; and the criteria for determining the grade levels of UNICEF representatives and other senior-level posts. Various proposals from this study, approved by the Board at its 1992 session, were considered in preparing these budget estimates. The Budget Planning and Review Committee found the cri-

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1992 GOVERNMENTAL

Contributions to UNICEF general resources are shown at right; additional contributions are shown in parentheses.

Asia

Afghanistan	35.0	Indonesia	10.0	Laos People's Democratic Republic	Philippines	215.9
Bangladesh	9.3	Japan	7,300.0	Maldives	Singapore	10.0
Bhutan	6.1	Korea, Democratic People's Republic of	24,430.0	Malaysia	Sri Lanka	16.3
Brunei Darussalam	100.0	China	37.2	Myanmar	Thailand	275.8
China	725.0	Korea, Republic of	600.0	Pakistan	Viet Nam	9.7
India	3,694.3					

Oceania

Australia	4,214.4	Fiji	4.7	New Zealand	161.7	464.3
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Europe

Albania	0.1	France	11,310.8	Liechtenstein	6.9	Romania	5.1
Austria	2,667.9	Germany	1,048.9	Luxembourg	856.9	San Marino	2.2
Belarus	4.7	Greece	281.0	Malta	15.3	Spain	2,630.9
Belgium	454.5	Holy See	2.0	Monaco	13.2	Sweden	81,663.7
Bulgaria	1,969.7	Hungary	47.1	Netherlands	16,592.4	Switzerland	72,437.5
Czechoslovakia	1.4	Iceland	142.8	Norway	11,548.8	United Kingdom	13,521.0
Denmark	97.5	Ireland	428.9	Poland	35.1		17,289.3
Finland	17,285.0	Italy	460.0	Portugal	40.0		
	23,316.8	United States of America	47,008.5				
	29,082.3						

North America

Canada	22,875.7	United States of America	42,616.9	83,744.0
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teria for determining core versus project posts very helpful in streamlining the categorization of these posts.

As desired by the Executive Board, this budget reflects an attempt to 'downsize' New York headquarters. On the other hand, modest growth, primarily of project posts, is being recommended for field offices.

With the objective of promoting the development, utilization and building of national capacity, as well as enhancing sociocultural sensitivity in UNICEF-assisted programmes, UNICEF continues to strengthen its national capacity in field offices. Among the new professional posts proposed in the budget, approximately 95 per cent are for national professionals.

CONTRIBUTIONS (in thousands of US dollars)

Contributions for supplementary funds and emergencies are shown in colour, at left.

Latin America and the Caribbean

Bahamas	0.5	Colombia	451.8	Honduras	39.0	Saint Lucia	2.6
Barbados	2.0	Cuba	45.1	Jamaica	0.8	Saint Vincent and the Grenadines	0.8
Belize	17.5	Dominican Republic	90.0	Mexico	283.9	Suriname	1.0
Bolivia	3.0	Ecuador	25.3	Nicaragua	0.5	Trinidad and Tobago	8.8
Brazil	100.0	El Salvador	24.6	Panama	25.0	Venezuela	114.7
Chile	76.1	Guatemala	30.0	Paraguay	2.0		

Middle East and North Africa

Algeria	60.0	Iraq	1,555.3	290.3	Morocco	70.0	Turkey	100.0
Cyprus	1.0	Israel	12.3		Oman	50.0	United Arab Emirates	
Djibouti	1.0	Jordan	14.8		Qatar	100.0	Yemen	200.0
Egypt	20.4	Kuwait	46.0		Saudi Arabia	1,000.0		65
Iran, Islamic Rep. of	50.0	Libya	150.0		Tunisia	74.1		

Sub-Saharan Africa

Benin	2.0	Côte d'Ivoire	55.6	Mauritania	6.4	Tanzania	4.4
Botswana	9.4	Ethiopia	49.3	Mauritius	7.5	Zambia	10.1
Burundi	4.6	Kenya	10.9	Nigeria	1,744.9	Zimbabwe	9.4
Central African Republic	9.6	Lesotho	2.4	Sierra Leone	30.0		
		Mali	20.7	Swaziland	2.4		

A number of staff continue to work at sub-national levels, away from the capital cities of developing countries. Some 882 staff members, including 346 professionals, work in 128 offices at the district and provincial levels of developing countries. This has been noted, particularly by a multi-donor evaluation team of independent external evaluators, as UNICEF's strong advantage,

compared to other United Nations organizations, for delivering basic social services at the grass-roots level.

This budget is being proposed at a time of much debate concerning the restructuring of the United Nations, particularly its operational activities. The multi-donor evaluation group argues for the preservation of UNICEF's decentralized programme

Non-governmental contributions provide money and volunteers for both regular UNICEF programmes and relief efforts for child victims of armed conflict. Besides ensuring delivery of food, medicines and warm clothing, UNICEF supports immunization in warring areas to protect young children.



UNICEF/92/1208

planning and implementation structures, and for control and accountability of its financial resources.

The proposed budget of US\$445.6 million represents an annual growth in real terms of 2 per

cent from the 1992-1993 revised budget. However, as a global inflation rate in US dollars of approximately 4 per cent has been included in the budget, the annual rate in real terms is 2 per cent. The overhead ratio is 11.7 per cent.

LIQUIDITY PROVISION

UNICEF works with countries to prepare programmes so recommendations can be approved by the Executive Board in advance of major expenditures on these programmes. UNICEF does not hold resources to cover fully the costs of these recommendations in advance, but depends on future income from general resources to cover expenditures. The organization does, however, maintain a liquidity provision to cover temporary imbalances between cash received and disbursed, as well as to absorb differences between income and expenditure estimates.

UNICEF maximizes planned general resources programme expenditures based on the requirements of the liquidity provision and on the level of projected general resources contributions. □

INFORMATION RESOURCES MANAGEMENT

SPECIFICATIONS were prepared for the 'next generation' standard computerized field office system in order to support programme management more specifically and improve synchronization with headquarters systems.

The central financial and accounting systems project is nearing completion, and systems to be implemented in early 1993 include: administrative budget management on minicomputer, spe-

cial services agreement registration, personal advances and recovery, electronic payments and general ledger registration. Work has started on evaluating the United Nations integrated management information system with a view to its future adoption.

Some 30 field offices installed local area networks (LANs) to share text and data-processing applications through personal computers. □

HUMAN RESOURCES MANAGEMENT

At the end of 1992, UNICEF had 6,288 staff members assigned to 207 locations in 115 countries worldwide. The staff comprised 1,257 international professionals (563 core, 694 non-core); 54 government-sponsored; 799 national professional officers (204 core, 595 non-core); and 4,178 general service staff (1,391 core, 2,787 non-core). Of this total, 35 per cent of the international professionals are women, and 65 per cent are professionals from developing countries. At present 82 per cent serve in field locations.

♦ **PLANNING:** A revised structure for human resources planning was announced during the year, and the organization should soon have the capacity to:

- » forecast medium- to long-term human resources requirements;
- » prepare existing staff to meet those needs through training and redeployment;
- » proactively search global labour markets for expertise, where necessary.

1992 NON-GOVERNMENTAL CONTRIBUTIONS

(in thousands of US dollars)

Countries and areas where non-governmental contributions exceeded \$10,000
(figures include net proceeds from greeting card sales)

Algeria	188.4	Hong Kong	951.8	Romania	249.8
Angola	236.7	Hungary	148.8	Russian Federation	225.1
Argentina	769.0	Iceland	30.8	Rwanda	10.1
Australia	3,954.1	India	1,046.9	San Marino	34.2
Austria	2,449.2	Indonesia	164.0	Saudi Arabia	91.8
Bahrain	106.9	Iran, Islamic Rep. of	952.9	Senegal	126.2
Bangladesh	34.0	Iraq	20.5	Sierra Leone	11.3
Barbados	27.7	Ireland	695.8	Singapore	374.4
Belgium	6,750.6	Israel	10.7	Spain	17,635.5
Benin	14.7	Italy	29,473.9	Sri Lanka	14.6
Bolivia	90.2	Jamaica	22.3	Sudan	436.0
Brazil	3,624.3	Japan	20,486.0	Sweden	2,404.2
Bulgaria	50.2	Jordan	46.2	Switzerland	15,149.3
Burkina Faso	16.7	Kenya	119.2	Syria	234.7
Cameroon	25.1	Korea, Republic of	357.5	Tanzania	108.1
Canada	12,781.5	Lebanon	101.3	Thailand	53.8
Central African Republic	23.0	Libya	81.4	Togo	10.9
Chad	11.4	Luxembourg	859.6	Trinidad and Tobago	25.8
Chile	102.2	Madagascar	14.9	Tunisia	100.5
China	60.6	Malawi	10.1	Turkey	1,575.7
Colombia	453.7	Malaysia	88.1	Uganda	19.7
Congo	14.1	Mali	19.8	United Arab Emirates	74.0
Costa Rica	30.9	Malta	10.9	United Kingdom	9,509.6
Côte d'Ivoire	55.6	Mauritania	17.8	United States of America	32,063.8
Cuba	72.2	Mauritius	71.0	Uruguay	173.7
Cyprus	224.9	Mexico	521.4	Venezuela	89.3
Czechoslovakia	79.2	Monaco	41.5	Yemen	23.0
Denmark	1,682.9	Morocco	235.2	Yugoslavia (former)	562.0
Djibouti	17.9	Mozambique	49.3	Zaire	184.2
Dominican Republic	76.0	Myanmar	106.8	Zambia	33.8
Ecuador	281.2	Netherlands	27,172.1	Zimbabwe	46.1
Egypt	73.2	New Zealand	404.2	Contributions from UN Staff	95.3
El Salvador	19.8	Niger	23.4	Contributions under \$10,000	86.9
Ethiopia	127.1	Nigeria	290.7	TOTAL	279,104.8
Finland	4,799.7	Norway	1,677.1	600 fiscal period adjustment	12,974.0
France	24,203.8	Oman	47.7	Less: Costs of 600*	(61,471.9)
Germany	42,395.7	Pakistan	98.4	Net available for UNICEF assistance	230,605.0
Ghana	35.6	Panama	22.5	*Cost of producing cards and brochures, freight, overhead, adjustments.	
Gibraltar	20.5	Paraguay	62.2		
Greece	2,389.5	Peru	229.3		
Guatemala	46.8	Philippines	191.1		
Guinea	19.9	Poland	211.9		
Guinea-Bissau	11.1	Portugal	1,590.6		
Honduras	23.2	Qatar	40.0		

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♦ **DIRECTORY:** Professional staff profiles were placed in a computerized directory to give a more accurate picture of available talents and skills and to establish a relatively objective basis for forward-looking strategies in career development, training and rotation. The directory will facilitate talent searches and recruitment and will help staff members plan their career paths.

♦ **RECRUITMENT:** There were more external appointments of women than men during the year. Women led men 55.1 per cent to 44.9 per cent in external recruitments, while men took 57.7 per cent of the internal placements to women's 42.3 per cent.

♦ **EMERGENCIES AND STAFF SAFETY:** An unprecedented number of emergencies placed

enormous demands on UNICEF staff in 1992. The effectiveness of the organization's response was in part due to the rapid deployment of existing staff and consultants, and the aggressive recruitment of specialists to cope with the particular needs of each situation.

As the safety of staff members and their families is of paramount concern to the organization, the Executive Director proposed the appointment of a Security Coordination Officer to oversee their

security. The officer would be stationed at headquarters to advise offices on security issues, monitor conditions worldwide, and coordinate evacuations or other precautions in rapid response to threatening situations.

◆ **TRAINING:** Some 36,000 person-days of training were completed during 1992. This represented an average of six training days per staff member – the most for any United Nations agency. □

SUPPLY MANAGEMENT

FOR the Supply Division, 1992 was the most challenging year yet. The man-made emergencies in Iraq, especially in the Kurdish north, and in Somalia, the Sudan and former Yugoslavia demanded immediate and repeated deliveries of large quantities of medical supplies from the Copenhagen warehouse. These demands, when superimposed on the regular programme supplies to the more than 120 countries where UNICEF is working, meant that on many occasions the warehouse was required to work evenings and weekends. The procurement staff rose to the challenge of keeping the warehouse stocked, in addition to purchasing for direct delivery to UNICEF-assisted programmes.

The total value of purchases made in 1992 rose to more than US\$370 million, from US\$304 million in 1991. The value of essential drugs purchased jumped by US\$8 million to US\$61 million, largely to meet emergency demands. UNICEF continued to fully support the expanded programme on immunization, with the value of vaccines purchased rising to US\$62 million from

US\$32 million in 1991. Although the majority of these purchases are still made in industrialized countries, efforts to buy indigenous products from developing countries showed continuing improvement, and purchases from those countries increased to more than US\$100 million, compared to US\$89 million in 1991.

UNICEF Supply Division also offers a purchasing service to governments, NGOs and other United Nations agencies. The most significant action in this area was the conclusion of an agreement with the Government of Romania to purchase and arrange for the delivery of all the drug requirements of that country. The drugs and other medical supplies are financed from a World Bank loan to the Romanian Government for supporting and improving the country's health infrastructure. This Procurement Services programme is expected to continue for at least the next two years. Procurement Services agreements to supply the essential drug needs of rural Tanzania, financed by the Danish International Development Agency, continued for the seventh successive year. A number of other countries also continued to benefit from UNICEF purchasing services complementary to the UNICEF-assisted programmes.

The extended office premises in Copenhagen were officially opened last year by the Prime Minister of Denmark in the presence of UNICEF Executive Director James P. Grant and UNDP Administrator William H. Draper III. The larger premises are shared with the Inter-Agency Procurement Services Office of UNDP, and this marks a major step towards coordinated purchasing within the United Nations system. The complex houses 150 UNICEF and 56 UNDP staff members, with the UNICEF warehouse and packing facility supported by approximately 80 contracted workers. □



GLOSSARY

- ACCO: Administrative Committee on Coordination
Afghan Gulf Programme for the United Nations Development Organizations
AIDS: acquired immunodeficiency syndrome
ARI: acute respiratory infections
BFHI: baby-friendly hospital initiative
BRAC: Bangladesh Rural Advancement Committee
CDD: control of diarrhoeal diseases
CIS: Commonwealth of Independent States
CSD: child survival and development
DOHA: Department of Humanitarian Affairs (United Nations)
EAPRO: East Asia and Pacific Regional Office (UNICEF)
EEC: European Economic Community
EPI: expanded programme on immunization
ESARO: Eastern and Southern Africa Regional Office (UNICEF)
FAO: Food and Agriculture Organization of the United Nations
GCRS: Greeting card and related operations (UNICEF)
HIV: human immunodeficiency virus
IADB: Inter-American Development Bank
IDDs: iodine deficiency disorders
IFAD: International Fund for Agricultural Development
ILO: International Labour Organization
IMF: International Monetary Fund
IMR: infant mortality rate
MCSP: maternal and child health
MENARO: Middle East and North Africa Regional Office (UNICEF)
NGO: non-governmental organization
NPA: national programme of action
OAU: Organization of African Unity
OECD: Organisation for Economic Co-operation and Development
OPEC: Organization of Petroleum Exporting Countries
ORS: oral rehydrating salts
ORT: oral rehydrating therapy
PEN: primary environmental care
PMNCH: protein-energy malnutrition
PHC: primary health care
SARO: South Asia Regional Office (UNICEF)
SAARC: South Asian Association for Regional Cooperation
ACCRO: The Americas and Caribbean Regional Office (UNICEF)
TBAs: traditional birth attendants
UBS: urban basic services
UCI: universal child immunization
U5MR: under-five mortality rate
UNCED: United Nations Conference on Environment and Development (Earth Summit)
UNDP: United Nations Development Programme
UNESCO: United Nations Educational, Scientific and Cultural Organization
UNPF: United Nations Population Fund
UNHCR: United Nations High Commissioner for Refugees
UNCF: United Nations Children's Fund
UNDF: United Nations Development Fund for Women
USAID: United States Agency for International Development
WASH: water and sanitation
WCARO: West and Central Africa Regional Office (UNICEF)
WFP: World Food Programme
WHO: World Health Organization

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