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Short-duration country programme document

Cuba

Summary

The short-duration draft country programme document for Cuba is presented to the Executive Board for discussion and approval. The Board is requested to approve the aggregate indicative budget of \$632,000 from regular resources, subject to availability of funds, and \$1,300,000 in other resources, subject to the availability of specific-purpose contributions, for 2007.

* E/ICEF/2006/18.



The situation of children and women

1. In 2005, the second report on the Achievement of the Millennium Development Goals in Cuba was issued. According to the United Nations Development Programme (UNDP) classification, the country achieved the following Goals: Goal 2, achieve universal primary education; Goal 3, promote gender equality and empower women; and Goal 4, reduce child mortality. Work is progressing to achieve the following Goals within the expected time frame: Goal 1, eradicate extreme poverty and hunger; Goal 5, improve maternal health; and Goal 6, combat HIV/AIDS, malaria and other diseases. The following two have potential for achievement: Goal 7, ensure environmental sustainability; and Goal 8, develop a global partnership for development.

2. According to the 2001 situation analysis for the 2002-2006 programme of cooperation, Cuba has maintained and, in some instances has improved, basic indicators related to children, who constitute one of the highest priorities of social policies in the country. Two examples of improved indicators are the infant and under-5 mortality rates. In 2005, Cuba achieved the goal of elimination of iodine deficiency disorders (IDD) and has guaranteed its sustainability. HIV/AIDS prevalence among young people aged 15-24 declined from 0.07 percent in 2001 to 0.05 percent in 2003. As for vertical transmission, there are 17 children who are HIV positive, 0.32 per cent of all seropositive cases. The maternal mortality ratio increased from 34.1 to 37.3 per 100,000 live births. The blockade imposed by the United States of America upon Cuba has been reinforced with recent additional measures, affecting children, adolescents and families.

3. Iron deficiency anaemia continues to be the most extended nutritional deficiency for the following groups, in decreasing order: children under 2, reproductive-age women and pregnant women. Recent local and regional studies have shown a reduced frequency of incidence; nevertheless, it is still considered a health problem. The subgroup of children 6 to 11 months old shows the highest prevalence of mild anaemia, at 42.6 per cent. In addition, studies on the nutrition of pregnant women have reported that 28 per cent of them suffer from anaemia during the third quarter of pregnancy, and 12 per cent have insufficient weight gain.¹

4. Acute diarrhoeal diseases and acute respiratory infections, prevailing diseases during childhood, have shown a significant reduction as a cause of mortality in all ages. However, they are still one of the primary causes of morbidity for all age groups, with greater incidence occurring in children under 1.

5. Mortality caused by accidents for all age groups is lower than the rates prevailing in 2002 at the beginning of the current cycle of cooperation. Among children under 1, there has been a reduction of 50 per cent, while among children aged 5-14, there has been a reduction of 35 per cent. Despite the downward trend, accidents continue to be the primary cause of death for children and young people under 19 and are mainly due to traffic accidents and immersion drowning.

6. On the other hand, the population, especially children, has become more exposed to the risks of severe hydro-meteorological phenomena (hurricanes, flooding, drought) in the last several years. In spite of the country's strength in prevention and the mitigation of loss of life, six hurricanes during 2002-2005 and a

¹ Institute of Food and Hygiene Nutrition, 2003.

prolonged drought affected the population, especially children, in most of the country.

The country programme, 2007

Summary budget table*

(In thousands of United States dollars)

<i>Programme</i>	<i>Regular resources</i>	<i>Other resources</i>	<i>Total</i>
Integrated early childhood care (0-5 years)	249	550	799
Basic education for children (6-11 years)	141	350	491
Adolescent development and participation (12-18 years)	132	300	432
Programme support	110	100	210
Total	632	1 300	1 932

* The value of the other resources ceiling is the same as that established annually in the 2002-2006 master plan of operations.

Reasons for the short-duration programme

7. Because programme cycles among the United Nations agencies in Cuba are to be harmonized beginning in 2008, UNICEF Cuba developed a bridging programme for 2007. The Common Country Assessment/United Nations Development Assistance Framework is being elaborated this year, and UNICEF will present the new programme of cooperation for 2008-2012 to the Executive Board in 2007.

Goals, key results and strategies/relationship to national and international priorities

8. The 2005 mid-term review (MTR) completed with the cooperation of the Government, confirmed that the strategy of Decentralized Cooperation, undertaken in partnership with UNDP, has continued to strengthen, and was extended to the five eastern provinces in 2005. The strategy has significantly maximized the impact of UNICEF cooperation in the country.

9. As a result of the agreements achieved with the Government on the MTR, the programme of cooperation was adjusted to add two projects: the promotion of the rights of children and adolescents; and risk prevention and management. This inclusion of both projects reflects an increased focus on these issues.

10. The UNICEF medium-term strategic plan for 2006-2009 and the Millennium Development Goals are in complete alignment with the Government's national priorities, and are therefore part of the lines of action jointly identified with the Government to be addressed by the programme of cooperation.

Programme of cooperation components

11. Within the life cycle framework maintained from the previous country programme, several new objectives are proposed, with concrete results expected for 2007.

12. The **integrated early childhood care programme** (0-5 years) will contribute to the following expected results:

(a) In emergency situations resulting from natural disasters, especially in the most vulnerable territories, support to evaluation activities and food and nutrition interventions reaching pregnant women and mothers with children 0-5 years of age will ensure that 70 per cent of the families in those areas have a greater capacity to respond to different hydro-meteorological events;

(b) Anaemia in children under 5, especially children under 12 months of age, will be reduced through the expansion of the iron fortification activities implemented in previous years, and in 2007, milk fortification will be introduced for all children under 12 months of age (approximately 120,000 children in the whole country);

(c) Zinc supplementation will be given to children under 12 months of age who are at increased risk of suffering from prevailing childhood diseases. Approximately 120,000 children up to 12 months of age will improve their nutritional status with zinc intake.

13. The **development of children programme** (6-11 years) will contribute to the following expected results:

(a) Local initiatives, such as sport and cultural activities that promote the right to healthy recreational activities for primary schoolchildren and the availability of facilities, will be developed in the eastern provinces identified by the Government as having greater vulnerability;

(b) In 2005, Cuba achieved the goal of sustained elimination of IDD, and the country guarantees its sustainability. In 2007, support will be provided for the strengthening of the salt iodization surveillance system as well as of the implementation of a programme for hygiene and nutrition education in primary schools;

(c) New partnerships will be developed (with the National Institute of Sports, Physical Education and Recreation, the Cuban Red Cross) to coordinate actions for the prevention of immersion drowning;

(d) Support will be given to risk-preparedness activities for coping with natural emergencies and to post-emergency rehabilitation activities in the areas of education and water and sanitation, so that emergency preparedness and response capacities are improved in the provinces most affected by those phenomena.

14. The **adolescent development and participation programme** (12-18 years), in line with the MTR recommendations, will incorporate a project on risk prevention and management and will support the Government in achieving the national plan of action goals, including the prevention of violence against, and mistreatment, of children.

15. In 2007, the programme will aim to achieve the following results:

(a) Adolescents will participate in the evaluation of the 2002-2006 programme of cooperation and in the formulation of the 2008-2012 programme through the convening of at least two Meetings of Adolescents. These activities will involve, in particular, the young people currently taking part in the adolescent-friendly services initiative and other aspects of the country programme;

(b) Adolescents will be equally involved in emergency-preparedness activities, which will be especially designed to promote adolescent participation in prevention and in the development of first-aid skills. In addition to emergency-preparedness for natural disasters, the programme will also highlight accidents, the primary cause of mortality of this age group, involving adolescents in prevention and the reduction of high-risk behaviours.

Major partnerships

16. The ongoing preparation of the UNDAF opens wide opportunities in 2007 for collaboration among United Nations agencies and for joint programming in several areas, such as food security and prevention, and preparedness and support for recovery from natural disasters. The Food and Agriculture Organization of the United Nations, the World Food Programme, UNFPA, UNDP and the World Health Organization are the most important potential partners for these joint activities, which will complement the good joint programming experiences already under way, especially the collaboration with UNDP in the Programme for Local Human Development.

Monitoring, evaluation and programme management

17. The 2007 programme will maintain the activities established in the Integrated Monitoring and Evaluation Plan for 2002-2006. These will include field visits, periodic reviews of the country programme internally and with national counterparts, and an annual review at year-end, culminating in a final evaluation. Provided that agreement is reached during 2006 on implementation in Cuba of *DevInfo*, the system of indicators for monitoring the targets of the Millennium Development Goals and of *A World Fit for Children*, activities in 2007 will include *DevInfo*'s operationalization. This will involve incorporating appropriate indicators into the system and will include the introduction of gender-related indicators for which the country already has official statistics.
