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PROGRAMME DEVELOPMENT IN THE EAST ASIA AND PAKISTAN REGION

This document provides an overview of UNICEF programme co-operation in the East Asia and Pakistan region during 1987.

The UNICEF regional office has responsibility for UNICEF co-operation in the following countries and territories: Bangladesh, Brunei Darussalam, Burma, the Democratic People's Republic of Korea, the Territory of Hong Kong, Indonesia, Kampuchea, the Lao People's Democratic Republic, Malaysia, Pakistan, Papua New Guinea, the Philippines, the Republic of Korea, Singapore, Thailand, Viet Nam and the countries of the Pacific.



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I. REGIONAL OVERVIEW



1. Economic and political developments throughout the region during the year under review have had a varying impact on the situation of women and children and on the ability of Governments to deliver services to them. It is considered likely, however, that adverse impacts will increase in significance in the future.

A. Political developments

2. The political climate in most countries of the region continued to be as volatile in 1987 as in the previous year. In the Pacific, there were widespread repercussions from the two successive coups d'état in the Republic of Fiji, during the course of which the country severed its linkages with the Commonwealth and declared itself a republic. In the Philippines, five attempted coups d'état by disaffected troops were thwarted by loyalist units. However, the beginning-of-the-year ceasefire and subsequent peace negotiations with the Moro National Liberation Front were followed by disappointment when the peace talks collapsed, leading to renewed fighting. In the wake of political unrest in the Republic of Korea, the ruling party declared an eight-point package for constitutional reform, including freely-contested presidential elections. In Pakistan, there were riots in Karachi and widespread bombings in major urban centres. The presence of 3.2 million Afghan refugees placed an additional burden on the country. Bangladesh faced general strikes and political protests in July and November, while Malaysia experienced political instability leading to a clamp-down on opposition leaders both outside and within the ruling party.

3. There were ministerial changes at the top of the politico-administrative structures in countries such as the Democratic People's Republic of Korea, Indonesia, Malaysia, Pakistan, the Philippines, the Republic of Korea and Viet Nam. In Viet Nam, a new President and Prime Minister took office in April, marking both a generational and an ideological transition as profound changes in economic life start to take place. In the Marshall Islands and the Federated States of Micronesia, the United Nations trusteeship was ended and the Pacific nations entered "Compacts of free association" with the United States of America.

4. A settlement has not yet been reached in Kampuchea, but in August, the Phnom Penh authorities proposed a policy of national reconciliation, including talks with the United Nations-recognized coalition Government of Prince Sihanouk. Talks in Paris in November proved inconclusive, although they marked the first contact between the two major Kampuchean groups.

5. Several countries held general elections, with the ruling parties being returned to office in Indonesia and Papua New Guinea. In the Philippines, the referendum on the new constitution and the country-wide election of senators and representatives gave popular confirmation to President Aquino's policies. In Pakistan and the Republic of Korea, elections will be held in the latter part of the year.


6. In Thailand, commemoration of the sixtieth anniversary of King Bhumibol Adulyadej has permeated all aspects of social life and has led to restrained political interaction despite mounting pressure on a Government already well into its seventh year of operations.

B. Economic developments

7. The overall average annual growth rate for East and South-East Asia was a mere 1.6 per cent in 1985 and 1.7 per cent in 1986, a far cry from the over 4.0 per cent of the early 1980s when, in spite of the global recession, developing countries were relatively better off in Asia than in the rest of the world. In October, the crash of the New York stock market was echoed throughout the continent, with the stock exchanges in Tokyo, Hong Kong, Bangkok, Singapore and Seoul all taking severe losses. Only in Manila was there a moderate decline. Essentially, all countries had to produce substantially more to obtain similar, or often lower, revenues in the face of depressed commodity prices. Reduced export earnings usually meant higher trade and current account deficits, budget deficit financing, increased external debt and a much heavier burden of debt servicing than in the past. Thus, the process of satisfying the basic needs of the population, especially children and women, has become increasingly difficult and, in some cases, it may virtually cease.

8. None the less, some countries achieved remarkable progress. The gross national product (GNP) is projected to increase during 1987 by 4.4 per cent in Bangladesh, 10 per cent in the Republic of Korea, 7 per cent in Pakistan and 5.7 per cent each in the Philippines and Thailand. However, given the disparities in income distribution, the majority of the population is probably not benefiting from those increases, and the quality of life may even be declining. Furthermore, much of this increased wealth did not remain within the countries concerned, since debt service ratios have reached levels as high as 48 per cent in the Philippines and 29.5 per cent in Pakistan. Other countries in the region such as the Democratic People's Republic of Korea, the Lao People's Democratic Republic, Malaysia, Papua New Guinea, the Republic of Korea and Thailand are experiencing similar difficulties.

9. Among the leading developing countries of the region, the economic results for the year remained mixed and pointed to underlying problems that may take time to resolve. In the Republic of Korea, which has an estimated GNP per capita of \$2,300, there is concern about the increasing disparity of incomes, particularly in urban areas where some 4 million people are reported to be poor. In the aftermath of trade union strikes, a system of minimum wages is now being considered for implementation in 1988. In Malaysia, the GNP per capita has declined by 11.3 per cent over the last two years to a current \$1,631, resulting in sweeping cuts in social services spending. While still far behind the previous two countries, Thailand, with a per capita GNP of about \$930, has managed to maintain a balanced economy, although a rising debt servicing has led to caution in new borrowing. Papua New Guinea has experienced a serious economic downturn to about \$580 per capita due to high external debt, non-competitive exports and a severe decrease in the traditional Australian budget grant. The GNP per capita in the

Philippines has dropped to a mere \$550, and the country is suffering from a staggering external debt, although its productive base is slowly recovering. 

10. Among the region's middle-income countries, the case of Indonesia merits close attention. A combination of low oil prices, with dwindling dollar-denominated exports and rising yen-denominated imports, has led to a very serious economic crisis, as cogently reflected in the 31 per cent devaluation of the rupiah in September 1986. Inflation continued throughout 1987 at a compounded annual rate of 9 per cent, so that living standards are said to have declined to those prevailing in the late 1970s. With a debt-servicing ratio of over 40 per cent of exports, the 1987 retrenchment in Indonesian public expenditure is forecast to continue for several more years. However, this adverse impact will be mitigated somewhat by a new 1987 external loan of \$3.2 billion. In Pakistan, despite a sustained gross domestic product growth rate of 7 per cent per year, improvement of social conditions is impeded by a combination of high defence expenditure, low investment reflecting limited national savings, low social services implementation rate and overall infrastructural constraints.

11. Among lower-income countries of the region, Kampuchea, the Lao People's Democratic Republic and Viet Nam continue to be in the grip of economic stagnation, with very difficult monetary, currency exchange and reserves situations. In Burma, a disastrous rice harvest, dwindling oil production, speculation, sustained supply cuts, demonetization of 75 to 80 per cent of the currency and a still rising foreign debt have had a severely negative effect on the economy. The fuel shortages have literally paralysed the country. The Government has applied to the United Nations for the status of least developed country. The modest gains made in Bangladesh in the last two years were below plan targets, the achievement of which continue to be made difficult by economic losses due to flood and drought, an inadequate national resource base, unsatisfactory loan recovery rates and less than optimal utilization of foreign aid. In addition, it has been difficult to utilize fully the resources on hand due to bottlenecks in the banking system, which is said to maintain a liquidity close to 60 billion takas, and below optimum level disbursement of foreign aid estimated at \$1.4 billion in the current year.

C. Food supplies and natural disasters

12. Agricultural production, as a share of the national revenue, is expected to have decreased in Bangladesh, Papua New Guinea and Thailand. This is partly a result of natural disasters that have hit several countries. The following have all contributed to a reduced availability of food grains: floods in Bangladesh, where 1,000 people are reported to have died in the worst inundations in 40 years, and the Republic of Korea, where 600 are estimated to have lost their lives; drought in the Republic of Fiji, Kampuchea, the Lao People's Democratic Republic and north-east Thailand; typhoons and hurricanes in Viet Nam and Pacific countries such as Cook Islands, Tokelau and Vanuatu; and rains that damaged the wheat crop in Pakistan. Deficits are expected of 150,000 tons in Kampuchea, 94,000 tons in the Lao People's Democratic Republic and 100,000 tons in Viet Nam. In Bangladesh, the 1987 harvest will produce only 16.5 million tons, well short of the 20.7 million tons targeted for 1991. In Burma, the rice harvest is considered to be one of the

worst in many years. Thus, the reserve capacity of the region is threatened and may trigger increased levels of malnutrition among the poor, especially children.

D. Adjustment with a human face

13. Inevitably, the conditions summarized above have had a negative impact on the implementation of programmes for children and women in a number of countries. The tenets of adjustment with a human face, even if accepted in international forums, receive but transient attention in the face of very concrete economic pressures. Reduced revenues in Burma and Pakistan are expected to lead to further negative impacts on children and women. Overall social service allocations for 1987 were down by 37.1 per cent in Malaysia, while Indonesia, commended by the World Bank for its adjustment policies, still had to reduce the budget for health by 32 per cent and for education by 10 per cent. In Papua New Guinea, the fiscal crisis has led to an annual 5 per cent retrenchment of social services expenditure until 1991, which will inevitably have negative consequences in a country where a large percentage of the population lives mainly on barter, probably with an income of less than \$100 per year.

14. Nevertheless, in some countries the picture is less bleak. In the Philippines, social service allocations have increased from 18.3 per cent of the national budget in 1986 to 21.5 per cent in 1987, although in terms of purchasing power the increase may be somewhat less. In Thailand, social services have expanded, in both relative and absolute terms, as a proportion of the total national budget. The Republic of Korea plans full medical insurance with subsidies for the poor by 1989.


II. PROGRAMME PROGRESS AND TRENDS

A. Child survival and development priorities

Progress in universal child immunization

15. Most countries have made remarkable progress in their immunization programmes, although for the region as a whole, the coverage levels were still below 50 per cent. Countries such as the Democratic People's Republic of Korea, Malaysia, Pakistan and Thailand, which have already achieved high coverage levels for diphtheria, pertussis and tetanus (DPT), oral polio vaccine (OPV) and anti-tuberculosis (BCG) vaccine, have the potential to reach the goal of universal child immunization (UCI) even before the end of 1990. In other countries, such as Bangladesh and the Lao People's Democratic Republic, special efforts were continued to increase the present low coverage. Drop-out rates remain high between the first and the third doses of DPT, reflecting the problem of access to immunization services, and OPV, reflecting the failure of health service follow-up and/or weak community participation.



16. The following table shows 1986-1987 vaccination coverage for pregnant women and children below one year of age in 12 countries of the region: 

	BCG	DPT3 <u>a/</u>	OPV3 <u>b/</u>	Measles	TT2 <u>c/</u>
		(Percentage)			
Bangladesh	7.9	7.2	6.9	4.6	5.4
Burma	52.0	30.0	7.0	4.0	24.0
Democratic People's Republic of Korea	79.4	92.0	92.2	66.7	-
Indonesia	64.0	46.0	44.0	45.0	25.0
Kampuchea	54.0	37.0	38.0	54.0	2.7
Lao People's Democratic Republic	12.0	2-5	2-5	4.0	6.0
Malaysia	97.0	66.7	66.7	50.2	51.0
Papua New Guinea	71.0	39.0	31.0	25.0	-
Pakistan	79.0	63.1	63.1	45.4	23.0
Philippines	72.0	54.8	54.5	53.0	49.0
Thailand	85.0	68.0	68.0	44.0	50.0
Viet Nam	55.2	42.2	46.2	38.2	-

a/ DPT3 = Three doses of DPT vaccine.

b/ OPV3 = Three doses of OPV.

c/ TT2 = Two doses of tetanus toxoid.

17. In Bangladesh, intensification efforts began last year in 8 upazilas (districts), and during 1987 an additional 70 upazilas were added, while preparatory activities were under way for another 120 upazilas and 10 urban areas. In March 1987, the first joint review mission by the Government, the World Health Organization (WHO), UNICEF, the Swedish International Development Agency (SIDA) and the United States Agency for International Development (USAID) appraised the programme, noting both key potential problems and the remarkable support from upazila and union leaders. During the period under review, more than 900 district officials and mid-level managers and supervisors, 14,000 health and family planning staff and volunteers, and about 200 training facilitators and technicians took part in orientation and technical courses.

18. There was also progress in Burma, despite the various logistical constraints. The number of townships included in the accelerated immunization programme has been increased from 6 in fiscal year 1986-1987 to 142 in 1987-1988. Committees to supervise the programme have been established in 130 townships.

19. Impressive increases in coverage continued in Indonesia, where 44 per cent of children aged 3-14 months were given complete primary vaccination in 1986/1987, compared with only 26 per cent the year before. Major factors contributing to this

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increased coverage were the improved quality of training for vaccinators, more effective use of equipment and supplies, including vaccines, and the mobilization of community-based women's organizations such as the Family Welfare Movement and the 12 religious non-governmental organizations (NGOs) co-operating in a special child survival and development project.

20. The Ministry of Health in Kampuchea, in co-operation with UNICEF, is focusing attention on the immunization programme. Accelerated campaigns in Kandal province and Phnom Penh municipality resulted in coverages of over 85 per cent. Similar campaigns were started in Kompong Speu, Prey Veng and Svay Rieng. Training activities were also accelerated, with more than 5,800 village volunteers trained or retrained. In the Lao People's Democratic Republic, an intensified accelerated programme, which began in the municipality of Vientiane and Savannaketh province, is expected to expand to 56 districts in all 17 provinces. In Viet Nam, BCG coverage reached 55 per cent, DPT3 42 per cent, OPV3 46 per cent and measles 38 per cent.

21. In consultation with the National Institute of Health in Pakistan, an accelerated programme for the immunization of all married women of child-bearing age with tetanus toxoid is under discussion. Already by mid-1987, the coverage of pregnant women had matched the 17 per cent achieved for the whole of 1986. The coverage of infants immunized also increased remarkably, so that by the end of 1986, 41 per cent of infants had been fully immunized as compared with 23.6 per cent in the previous year. This coverage was further increased to 48 per cent during the first six months of 1987.

22. Thailand has made impressive progress towards the achievement of UCI. Cluster surveys, conducted in 1987 and representing 17.1 million inhabitants in 25 provinces, showed coverage rates of eligible infants of 87 per cent for BCG, 72 per cent for DPT3, 70 per cent for OPV3 and 48 per cent for measles. In addition, 53 per cent of women of child-bearing age received TT2. Such high coverage levels have resulted in a marked decline in the incidence of immunizable diseases, particularly poliomyelitis. The Ministry of Public Health is considering declaring poliomyelitis-free zones, province by province.

Oral rehydration therapy (control of diarrhoeal diseases)

23. Although most countries have established national programmes for diarrhoeal disease control, the morbidity and mortality levels due to diarrhoea have remained high. Only Malaysia, the Philippines and Thailand have reached self-sufficiency in the production of oral rehydration salts (ORS). In countries where ORS is not produced or where production shortfalls occurred, UNICEF provided ORS packets to bridge the gap between supply and demand. Sodium citrate is gradually being substituted for bicarbonate in the formulation of the salts.

24. Apart from the promotion of oral rehydration therapy (ORT), efforts to reduce the incidence of diarrhoeal diseases through health education and provision of clean water and environmental sanitation were carried out in a number of countries. In Thailand, the linkages between these activities were strongly emphasized.



25. In Bangladesh, a total of 29.7 million half-litre packets of salts were produced through the combined efforts of the Government and the private sector. Of this number, 11.2 million packets were manufactured from supplies and raw materials provided by UNICEF. In Burma, the Bureau of Pharmaceutical Industries has reached 96 per cent of its 480,000-packet monthly production target for June 1987. UNICEF also provided 900,000 packets of ORS for the control of diarrhoeal diseases (CDD) in the eight most densely-populated provinces of the Lao People's Democratic Republic.

26. Support for the CDD campaign in West Java, Indonesia, included the UNICEF-assisted training of 14,755 cadres to serve a population of about 6.6 million and the extension of USAID technical expertise to improve communication activities. UNICEF funded a diarrhoeal disease incidence survey of children under the age of five in the squatter settlements in Port Moresby, Papua New Guinea, and continued to supply half a million ORS packets annually.

27. A case management survey conducted in the city of Cebu, Philippines, indicated a lower than expected rate of ORS use despite the high rate of use of both anti-diarrhoeal drugs and home-produced fluids. As a result, the CDD programme was broadened to include the promotion of ORT, breast-feeding, proper weaning practices and measles immunization, as well as the provision of clean water and sanitation facilities. In Thailand, a 1986 survey showed that access to ORS had increased to 70 per cent and usage to 25 per cent, while broader CDD measures, as indicated above, were already operational.

28. A 1987 national review of the Pakistan CDD programme disclosed that 72 per cent of the parents interviewed knew about ORS and that 48 per cent had used it. The country actually produced 30 million litres of ORS in 1986, although its installed capacity is 120 million litres per year. To strengthen information and education activities, an Urdu version of the Diarrhoea Dialogue newsletter will be issued, and UNICEF has agreed to underwrite the production costs for two years.

Other child survival and development and primary health care activities

29. The promotion of child and survival development (CSD) activities is not only a priority goal, but also a central concern of the primary health care (PHC) system in the region to ensure that service delivery can be effected by the community and supported by the health infrastructure. UNICEF has continued to strengthen the health infrastructure at the community level, while supporting family involvement in health management and increasing demand for PHC services. Other PHC activities, including the training of health workers and volunteers, are being implemented in many countries in the region. For instance, UNICEF co-operation in Indonesia is focusing on the establishment of posyandu (integrated service posts) in all villages. So far they have been established in 31,000 villages, an effort that entails the training and retraining of thousands of volunteer cadres who can potentially accelerate CSD, particularly the motivation of parents to accept immunization for their children. Volunteers are also the core of Thailand's PHC network which now covers 92 per cent of the country's villages. The Government, in co-operation with UNICEF and WHO, is conducting a comprehensive assessment of the programme.

30. Child growth monitoring continued to spread gradually throughout the region. Along with the CDD programme, breast-feeding was encouraged by promoting the adoption and enforcement of codes to regulate the marketing of breast-milk substitutes (see paras. 38 and 39 below).

31. Maternal and child health (MCH) services, including birth spacing, were strengthened through the training of peripheral health workers and traditional birth attendants (TBAs). In Bangladesh, the production of training materials for TBAs and family welfare visitors had been completed, and refresher training for the latter is now under way. In Burma, in addition to the training of more than 900 auxiliary midwives, a new category of health worker was developed, and in a pilot project, over 500 community leaders were trained as health guides to support the expanded programme of immunization (EPI), ORT, nutrition and environmental sanitation. In Indonesia, more than 2,000 TBAs will have been trained, and 2,500 retrained, by late 1987 using a curriculum improved according to the recommendations of a major survey undertaken during the year. "Mothers awareness" training for improved self-antenatal care and child survival is also in progress, as well as the orientation of more than 1,000 doctors and midwives. In Kampuchea, various training courses and other activities designed to develop a PHC approach are being carried out with UNICEF support. In the Lao People's Democratic Republic, special emphasis was given to strengthening MCH services in Vientiane municipality and five other provinces, which cover two thirds of the country's population. In co-operation with Save The Children Fund, training was also provided for 900 TBAs and 63 assistant doctors and auxiliary nurses working in six provinces. In Pakistan, on the other hand, the emphasis was on curriculum revision for in-service training of TBAs and the development of programme strategies for improved utilization of their services by the community.

32. A key intervention in several countries, notably Bangladesh, Burma, Kampuchea and the Lao People's Democratic Republic, was the provision of essential drugs that is crucial to the strengthening of PHC, particularly in the rural areas. Support was also given for the production and distribution of health education materials in Indonesia and Kampuchea where CSD literature was completed for rehydration, immunization, nutrition and education (RINE) training in schools and hospitals throughout the country. In addition, to guard against blindness caused by vitamin A deficiency, the distribution of vitamin A capsules continued on a semi-annual basis to children aged six months to six years in Bangladesh and through the RINE centres in Kampuchea.

33. UNICEF assistance was also crucial in malarial control and eradication in endemic areas such as Kampuchea and the Lao People's Democratic Republic, where UNICEF provided funds for the training of provincial laboratory chiefs and the purchase of equipment and chloroquine powder. UNICEF also supplied essential drugs, sprayers and insecticides and supported health education to destroy vector breeding sites in an effort to control the spread of haemorrhagic dengue fever, a mosquito-borne disease that has seriously increased in a number of countries, including Kampuchea, the Lao People's Democratic Republic and Thailand.





B. Nutrition

34. Nutrition interventions have been carried out within the PHC system. The Indonesian family nutrition improvement programme reached about 60 per cent of children under five years of age on a regular basis, and community participation is increasing rapidly as a result of effective social mobilization. Nevertheless, the quality of the service needs continuing attention. The number of integrated RINE centres doubled in rural Kampuchea and increased by 57 per cent in the capital city, thereby linking rehabilitation to nutrition education, especially the feeding of enriched rice porridge to children. There, as in Indonesia, special attention was given to training, including the development and revision of materials.

35. A review is under way in Bangladesh to assess the feasibility of a community-based nutrition programme. Meanwhile a target of 20 child nutrition units is being achieved gradually in rural health complexes.

36. Nutrition rehabilitation and supplementary feeding programmes were supported in Burma through 23 hospital units for severely malnourished children. The essential linkages with the child nutrition centres and the basic health centres are now being advocated to enable a systematic follow-up of discharged children.

37. Nutrition education activities incorporating traditional approaches received priority attention throughout the region. In Burma, they are being revised as part of the urban PHC project. In the Philippines, training focused on the front-line workers and the use of audio-visual modules on PHC. In Indonesia, the involvement of religious leaders was found to have considerably heightened the community awareness of CSD issues.

38. The promotion of breast-feeding received a stimulus in the Philippines with the adoption of the National Code for Marketing of Breastmilk Substitutes. After six months of consultations involving industry, consumers, Government and NGOs, regulations and guidelines have now been issued requiring monitoring and further promotion. In Bangladesh, much of the activity concentrated on women's colleges. National versions of the code have already been adopted in Malaysia and Thailand, but in Pakistan, its adoption has not yet been advocated successfully.

39. Normally linked to nutrition surveillance, growth monitoring continued to be an important concern in the region although coverage is still relatively low. The concept of growth, as distinguished from improved nutritional status, was not often well understood in many countries such as Bangladesh, Pakistan, Papua New Guinea, the Philippines and Thailand. In Bangladesh, the "teaching aids at low cost" scale is being introduced in a pilot project for possible widespread replication. The Indonesian programme is carried out through the rapidly expanding posyandu, which was established in November 1986 as the national strategy for Indonesia's Decade for Children. It is designed to increase the early 1987 coverage of 13 million to 20 million children, or 85 per cent of Indonesian children under five years old by March 1988. In Thailand, about 36 per cent of pre-schoolers were reached in the surveillance programme, which entails quarterly weighing. Burma's programme is restricted by the still limited coverage of the MCH network. In Kampuchea, nutrition surveillance is carried out only in the RINE centres. Pakistan now has a

modified growth chart that will be used in the PHC system, and it is hoped that monitoring will gradually be established. In the Democratic People's Republic of Korea, a pilot survey of the nutritional status of children under six years old is being carried out, and a national surveillance system is being established with UNICEF assistance.

40. Iodine deficiency disease control programmes were being implemented in many countries as well. Lipiodol injections were used for high-risk population groups in Bangladesh, Burma, Indonesia, Pakistan and Viet Nam, although this treatment is regarded as an expensive intervention entailing possible risks of overdose. Iodized oil capsules are being tried on a pilot scale in Burma and Thailand, although Burmese children under the age of five found the capsule too large to swallow. The long-term solution of choice, salt iodation, was widely practised in many countries. Targeted distribution was used in the Philippines to protect families in Northern Luzon. Iodation plants were established in Bangladesh, Indonesia and Thailand. In the Lao People's Democratic Republic, the first plant will handle 40 per cent of national salt production. However, major difficulties remain in Bangladesh, where the relevant legislation has yet to be enacted, and in Burma, where the lack of incentives for private producers is exacerbated by problems of quality control and distribution.

41. Family food production received increasing attention as a household food security strategy. Systematic activities were started in Papua New Guinea, while the expansion phase was initiated in Pacific countries such as the Federated States of Micronesia, the Republic of Fiji, the Marshall Islands, Palau and Tuvalu. Over 12,000 gardens were established in Negros Occidental province in the Philippines, where the food production efforts were also extended to 10 cities. Bio-intensive gardening technology is being promoted on a small scale in Kampuchea, while direct family consumption was the emphasis of the expanded programmes in Indonesia. Bangladesh has integrated family food production into the area development and social services and women in development projects, which include nutrition education linked to income generation.

42. Many countries were concerned about nutrition within the context of economic adjustment strategies. In Bangladesh and the Philippines, this was manifested in the livelihood projects for poor families. The income-generating projects on fresh-water fish production in Kampuchea and rice milling in the Lao People's Democratic Republic are intended to improve household food security. Training in food and nutrition planning was undertaken in Indonesia, and guidelines for the inclusion of nutrition in agricultural curricula were tested in some Pacific countries. Thailand uses nutrition-related indices as a component of the quality of life indicators, and it is hoped that these will be taken into account in future development policy and planning.





C. Water supply and environmental sanitation

43. Several countries registered improvements in rural water supply and sanitation activities, although they are behind schedule in a few others. In Bangladesh, an estimated 2.5 million people are benefiting from the 88 per cent target achievement in the sinking of deep and shallow tubewells, while nearly 70,000 families, representing 86 per cent of the target, bought the water-seal latrine units produced by the programme. The Government financial allocation increased by some 300 per cent compared to the previous year. In Indonesia, the target for installation of water and sanitation facilities was achieved almost 100 per cent. In the Lao People's Democratic Republic, implementation also accelerated by 50 per cent over 1986. Construction of latrines increased, and a latrine construction manual was published, emphasizing improved techniques in the use of local materials. However, progress in sanitation, health education and related support activities for CSD still leaves much to be desired.

44. The village water supply programme in Kampuchea progressed, emphasizing the training of local staff in mechanical drilling techniques as well as in the gradual introduction of labour-intensive manual digging methods in selected alluvial areas. A UNICEF-built central base was completed which included a warehouse, a soil-testing laboratory, a garage maintenance workshop, a classroom and a fuel tank. About 600 wells were either drilled or rehabilitated. A sociological survey was undertaken to redefine the current approach to household sanitation and hygiene, and a joint UNICEF/Government mid-term evaluation conducted in June set the targets at the end of 1988. In Pakistan, an evaluation of the major findings of the Water Assessment Team resulted in a new strategy and the formulation of clearer policy guidelines for water and sanitation programmes. In the Philippines, following the promulgation of the medium-term national development plan, the water and sanitation programme was adjusted to favour depressed areas, while the sectoral budget was reduced by over 50 per cent and reallocated mainly to health.

45. In Burma, partly as a result of current transportation difficulties and an unsteady fuel supply, rural water supply coverage only increased from 21 per cent in 1981 to 25 per cent in 1986, while in the urban areas it has remained at 35 per cent since 1981. However, rural household latrine coverage increased from 17 per cent in 1982 to approximately 25 per cent in 1987. In Thailand, it was estimated that by the end of 1986, 71 per cent of the population had clean water and 51 per cent had a latrine. The focus of rural water supply remains the installation of giant rain-water storage jars. To prevent haemorrhagic fever, 2,040 villagers were trained in the proper maintenance of these water jars and other sanitary facilities.

46. Efforts were also being made in countries such as Bangladesh, Pakistan and Thailand to improve the home and community environment through education in order to complement the delivery of latrines and potable water and thus ensure a positive impact on child mortality and morbidity. Particular emphasis is given to food hygiene and the maintenance of a clean kitchen and home surroundings.

D. Education

47. For many countries in the region, the global goal of attaining 75 per cent literacy by the year 2000 is well within reach. Illiteracy has almost been eradicated and the universalization of primary education has been substantially improved in the Democratic People's Republic of Korea, Indonesia, Malaysia, the Philippines, the Republic of Korea and Thailand.

48. Aware of the critical role education plays in a country's development and well-being, Burma, Kampuchea and the Lao People's Democratic Republic have persistently endeavoured to make education available to all. The main focus of past UNICEF assistance in such countries was on the production of textbooks and teaching aids, the improvement of the professional skills of teachers and other educational personnel and the rehabilitation of the educational infrastructure. There is now growing emphasis on increasing the capacity for self-reliance even when the challenge is still to maintain the proper balance between quality and quantity in the delivery of education for all. In the Lao People's Democratic Republic, the Government proclaimed an educational reform and adopted guidelines for the development of education to the year 2000. In Pakistan, UNICEF is supporting the Government in reforming its formal primary education system and in developing a national non-formal education programme. Burma continued to investigate the causes of its high drop-out rate in order to design pilot solutions and to reach present drop-outs to offer them learning services.

49. UNICEF has also supported national educational development activities in the region through technical co-operation between developing countries. UNICEF co-operated with the United Nations Educational, Scientific and Cultural Organization (UNESCO) and the International Development and Research Centre in a regional workshop on young child education in which UNICEF and government counterparts from Indonesia, Malaysia, the Philippines and Thailand participated. A similar meeting of international experts in young child education was held in the Democratic People's Republic of Korea which helped generate interest in CSD-related issues. UNICEF also funded a pre-primary and primary education study tour of Australia and Thailand by policy level and technical officials from the Democratic People's Republic of Korea; in Thailand, educators from the Democratic People's Republic of Korea were trained in the production of low-cost visual aids.

50. Some innovative educational activities were undertaken in 1987. In the Lao People's Democratic Republic, a pilot food gardening activity was added to the teacher-training programme to encourage self-reliance in meeting nutritional needs and improving living conditions. A school-based, in-service cluster teacher-training programme was introduced in Bangladesh. In Thailand, for the first time, the primary education curriculum has incorporated a component on children's rights to make learning more enjoyable for young children. In Indonesia, a credit scheme to enable poor families to participate in non-formal education was extended to all UNICEF target districts through the banking system.

51. Growing efforts to forge links between education and the survival and health of children also made headway. In Vanuatu, a UNICEF-assisted project has integrated health and nutrition into the primary school curriculum. Bangladesh has



mobilized the education sector in support of EPI/UCI and further developed CSD-related materials through curriculum renewal. A major part of UNICEF support for primary education in Thailand was the reorientation of teachers towards CSD and the use of primary schools as entry points for improving PHC which is aimed at preparing children to become future leaders in community self-help health activities. The teacher-child-parent approach to the school health and nutrition project in the Philippines overcame the initial difficulties in incorporating health topics into the curriculum and gained positive results in bringing the information home to parents.

52. Special efforts continued in a number of countries to overcome the educational disadvantage traditionally suffered by girls and women. In Bangladesh and Pakistan, for example, female literacy is especially low compared to male literacy although regional variations are striking in all countries of the region. In Bangladesh, several NGOs are engaged in literacy activities, although the Government has yet to formulate a national non-formal mass education programme. UNICEF must continue efforts in these areas with government and non-government counterparts, local community organizations and the target groups themselves.

E. Early childhood development

53. Better child care and development services characterized the year in many countries of this region. Countries such as Indonesia, Malaysia, the Philippines, the Republic of Korea, Thailand and especially Viet Nam have taken renewed steps towards improving and balancing the quality of their child care and development services. With the recognition that the primary responsibility for early development rests with parents and other family members, all of the programmes included instruction on early stimulation for participating mothers and others who care for young children. Indonesia and Thailand exemplified the role of village women's organizations in integrating child growth and development.

54. In the Republic of Korea, parent groups attended a series of lectures on child stimulation and development and were also visited in their homes by trained local health centre personnel. In Indonesia, the Philippines and Thailand, handbooks were developed and used to train village cadres/leaders to help mothers initiate early learning activities for their children under six years old. UNICEF provided toys, playthings and teaching aids that were both low cost and culturally acceptable. Future programming should consider how and when to transfer responsibility to the community and thus phase out UNICEF support.

55. A number of countries such as Kampuchea, Malaysia and Viet Nam provide care and development for the young child in institutionalized centres. In 1987, a considerable portion of UNICEF support in this field went towards upgrading physical facilities, enhancing mental stimulation activities and improving monitoring systems. Malaysia appeared to be successful in initiating better monitoring of child-care centres through licensing regulations. Clearly, however, the long-term development effects of attending a day-care centre, where a child is liable to spend more time with child minders than with his or her own parents and family, must be examined. A growing trend among many rural communities in the

region is for separate age-specific early stimulation activities to be developed, catering to children from less than one year old to school age.

F. Women's activities

56. Many countries in the region have included plans for women's activities in their long-term national plans. In Thailand, the Sixth National Economic and Social Development Plan (1986-1991) includes women as an important human development resource in their own right, with emphasis on the elimination of all discriminatory practices. In the Philippines, a Bureau for Women's Welfare was created, the National Commission on Women was reorganized and the role of women was included in the National Development Plan (1987-1992). In Pakistan, the Sixth Development Plan (1983-1988) aims to improve basic living standards for women, with a special focus on increasing women's literacy, economic productivity and access to preventive medical care.

57. UNICEF continued to support several programmes directly benefiting women, such as income-generating activities, female education and support to NGOs. Income-generating projects are currently ongoing in Indonesia (revolving funds for income-earning groups), Kampuchea (fish ponds, pig raising, silk weaving and sewing co-operatives), the Lao People's Democratic Republic (textile and milled-rice production), Pakistan (training in sewing, knitting and embroidery) and the Republic of Korea (skills training and machine embroidery). In Thailand, revolving funds were provided to 10,600 women in village groups. In Bangladesh, the Grameen Bank project made further progress, gaining 72,144 new landless women members. UNICEF supported the training of 8,780 landless women leaders and 805 female Bank workers and project staff as well as 189 in-country exchange visits for landless women. Although about \$15.2 million in credit was extended, the repayment rate was sustained at close to 100 per cent.

58. Female education was strengthened in many countries, especially in Pakistan, where the emphasis was on upgrading women's literacy and educational centres. In Bangladesh, various types of learning centres for girls and women received support, including the Grameen Bank centres. In Kampuchea and Thailand, reading materials for neo-literate women were published, while in Indonesia, eradication of women's illiteracy through non-formal education activities continued to be a major area of assistance. In Burma, the current UNICEF country programme includes, for the first time, projects aimed specifically at women as a beneficiary group.

59. Publications concerning women were produced in a number of countries. In Indonesia, the Government published a statistical study on the situation of women covering such areas as the female labour force, literacy and educational attainment, participation in political bodies and government services, etc. In Kampuchea, the Women's Association printed 22 easy readers on health and agricultural topics chosen jointly by village women and the Government with UNICEF assistance. A 1988 women's health calendar based on 13 national health messages was also produced. In the Lao People's Democratic Republic, the Women's Union published journals emphasizing women's education and the EPI campaign, while in Pakistan an NGO newsletter is being published with UNICEF support in order to highlight women's issues.



60. There were some constraints reported, however, in other countries in the implementation of projects for women. In Burma, the integration of women in development activities is not yet fully endorsed. In Bangladesh, the day-care centres and NGO projects require closer monitoring and supervision, while in Indonesia, the drive for the enhancement of female literacy is hampered by female full-time employment.

G. Urban services

61. UNICEF response to the rapid pace of industrialization, urbanization and the consequent increase of urban poor in the East Asia and Pakistan region has not been uniform in all countries. Some Governments still give low priority to children in urban areas because they are assumed to be better off than their rural counterparts. In reality, however, they may be worse off. For example, immunization coverage in Manila is lower than in the rural provinces of the Philippines. Likewise, the infant mortality and malnutrition rates are higher in urban slums than in some rural areas. The rapid economic development in the region is based on labour-intensive industries which has meant that in many countries the poor have merely been transferred from rural to urban areas. UNICEF now supports urban projects in nine countries and is expanding its role of assisting countries to cope with the rising tide of poverty in the urban environment.

62. In Indonesia, the kampung (urban, usually low-income settlement or village) services programme has developed the policies, methods, procedures and materials needed to support expansion on a nation-wide scale. Currently, the programme reaches 150,000 children between the ages of 0 and 4 years old and half a million women in seven major cities. The new Government in the Philippines has established a Presidential Commission on the urban poor, and UNICEF has seized the initiative to expand the urban basic services programme based on PHC activities in several cities and the organization of intersectoral councils to improve services for the poor.

63. In Pakistan, a national seminar on urban development and management, sponsored by UNICEF and opened by President Zia-ul-Haq, endorsed the basic services approach and strengthened co-operation among the ministries concerned. NGOs and community organizations that grew out of the Baldia project in Karachi are working closely with the Municipal Corporation and have already reached an estimated 6,000 families with soakpits, established 130 homeschools and served thousands of children through PHC. The UNICEF magazine in Bangladesh devoted an entire issue to children of the urban poor, a move signifying a major step in advocacy. Pilot projects in five mid-sized cities and the water and sanitation project in Chittagong are progressing satisfactorily.

64. Thailand has received supplementary funds to support activities in cities other than the capital, which made possible the expansion of coverage from 5 to a total of 10 cities. All the urban projects for the year were evaluated, and the improvements proposed have been initiated. The PHC programme in Bangkok was further strengthened, and pilot pre-schools were started in a few municipal schools to encourage regular budgetary support. Burma has initiated an urban PHC programme

in Rangoon which is expected to extend to other cities. The urban projects in Viet Nam have been interrupted by personnel and funding problems, requiring adjustments in the new programme of co-operation. The urban projects in the Republic of Korea were also evaluated, and programming for new projects and policy implementation is under way.

H. Children in difficult circumstances

65. Because of the range and magnitude of the problems of children in difficult circumstances in the region and the relatively recent policy development in this area, assistance is still limited in comparison to the requirements. Although it is difficult to assess the extent of the problem, some major areas of intervention have been identified, namely the Afghan, Kampuchean and other refugee children; street children, particularly in the Philippines; exploited working children in nearly all the developing countries of the region; and numerous abandoned and disabled children, many of whom are in orphanages and perhaps others still uncared for.

66. In most countries, the emphasis has been on preventive measures such as MCH, immunization, PHC and community-based social development. However, many country offices also provide some assistance to NGOs and government welfare agencies which care for disabled or orphaned children. In the territory of Hong Kong, for instance, support was given to publish a manual for parents of children with speech problems. Similarly, in the Philippines, UNICEF supports a very rapidly expanding network of NGOs and government agencies through a supplementary-funded project for street children.

III. REGIONAL SERVICES

A. Planning and programming

67. Country programming preparations in the countries of the region were the most important in many years. Nine countries (Bangladesh, Kampuchea, Malaysia, Pacific Islands countries, Pakistan, Papua New Guinea, the Philippines, the Republic of Korea and Viet Nam) will present their recommendations to the 1988 Executive Board. The regional office fully supported all preparatory steps through both programming and issue-specific missions and attendance at review meetings. The programming process involved a thorough review of the current situation of children in these countries, the past experience of UNICEF-assisted programmes and the proposed goals for the forthcoming assistance cycle. It also led to an improvement of the managerial procedures of the country offices while showing the strength of most field offices and providing a good opportunity for on-the-job training. A review of these experiences is planned by the regional office.

68. The development of the information base designed to strengthen future monitoring and enhance the decision-making process was further improved. Programme profiles were prepared comparing the characteristics and scope of UNICEF-assisted activities across countries, and country data, including subnational breakdowns,





was computerized. A draft roster of mainly Asian training and research institutions of relevance to UNICEF policies and areas of co-operation was released for further development by users at the country level. In Indonesia, a full-fledged trial of Information Resources Management methodology was carried out, an activity closely followed by the regional office with further expansion possibilities in mind. The regional office, in conjunction with the Association of South-East Asian Nations (ASEAN) parliamentarians meeting held at Jakarta, Indonesia, in June, prepared and published a booklet entitled "An overview of children and mothers in ASEAN countries". The third edition of the 1987 Atlas of Children in National Development was released for circulation. Initiated in 1980 in co-operation with the United Nations Economic and Social Commission for Asia and the Pacific (ESCAP), it now contains about 100 tables and over 250 maps showing the geographical variations of relevant social indicators in most of the countries of the region.

69. Support to regional institutions included assistance for the publication of four initial issues of the first Asia-Pacific Journal of Public Health, which is published quarterly by the Asia-Pacific Academic Consortium for Public Health and contains a section on MCH. A 10-year training programme of co-operation with ESCAP on PHC and social development planning was terminated. Follow-up co-operation will now be based on the analysis of social indicators for children and women, for which initial preparatory action has been taken. PHC activities with a CSD focus continued to be supported at the ASEAN Training Centre for Primary Health Care Development in Bangkok. Co-operation with the United Nations Centre for Regional Development (UNCRD) on social development and urban affairs was also maintained and is due for evaluation during 1988. A research project on the use of essential drugs for children with regard to acute respiratory infections and diarrhoea management was initiated with the International Organization of Consumers Unions based in Penang, Malaysia.

70. During the year, study tours to foster exchange of experience in the region also gained momentum through UNICEF support. A total of 16 such tours, involving senior government officers from 12 countries, benefited from exchange of information in the areas of water and sanitation, nutrition, women, street children, urban slums, childhood disability, childhood development and child care programmes, goitre control, mental health, programme communications for health and formal and non-formal education.

71. The advisory capacity of the regional office was considerably strengthened by the arrival in early 1987 of the PHC and management and evaluation advisers. This was particularly useful in view of the numerous country programming exercises undertaken during the year. The advisers' presence also contributed towards meaningful participation in several major events organized by headquarters and other United Nations agencies, leading to improved co-ordination and information in the fields of nutrition, acquired immune deficiency syndrome (AIDS), PHC, environment, women, etc. The regional office also played an active role in the financing and organization of the First International Tropical Pediatrics Congress and the Asian Congress of Medicine, both of which were held in Bangkok during the last quarter of the year.

B. Programme communication and training

72. Programme communication and training activities in the region were supported through missions to Bangladesh, Burma, Thailand and Viet Nam and through regular reviews of country communication and training plans and operations. An evaluation of assistance for training in Indonesia was carried out with the support of the regional office. One advisory mission was made outside the region to help the UNICEF country office in Egypt to develop programme communication for oral rehydration activities.

73. Significant assistance was also provided to the Staff Development and Training Section at headquarters for the development of training modules, and the regional staff served as resource persons for a series of staff development workshops in Pakistan.

C. Regional services for primary health care

74. Support was provided to PHC on a regional basis through missions to Bangladesh, the Lao People's Democratic Republic and the Philippines which emphasized the achievement of UCI through the PHC infrastructure. Collaboration continued with the ASEAN Training Centre for Primary Health Care Development.

75. A major advocacy effort to promote CSD included manpower and financial support to the First International Congress of Tropical Pediatrics held in Bangkok in November 1987, as well as attendance at various meetings of health professional groups, especially those convened by WHO.


D. Nutrition services

76. The regional office supported ongoing nutrition programme activities through missions to Bangladesh, Indonesia, Kampuchea, the Philippines and Thailand. A related input was the evaluation of nutrition projects in the Republic of Korea. In addition, country programme preparation in Bangladesh, Pakistan, Papua New Guinea and the Philippines was supported through advisory missions and participation in programme previews.

77. A regional workshop analysed the recent experiences with UNICEF-supported family food gardening activities in Kampuchea, the Lao People's Democratic Republic, the Pacific countries, the Philippines and Viet Nam. A participant from Bangladesh also took part. The workshop arrived at a consensus on appropriate strategies for family food gardening in relation to household food security. As a result, initiatives were intensified, including support to national workshops in Kampuchea and the Pacific Island countries and a new programme in Bangladesh.

78. Programme officers responsible for nutrition were convened for a regional consultation from which concrete proposals emerged for future assistance in nutrition. These proposals were incorporated in a presentation to a global meeting of UNICEF nutrition officers in Nairobi which formulated policy recommendations.



79. Nutrition was further assisted through support for a symposium on the epidemiological aspects of nutrition held during the Fifth Asian Congress on Nutrition. Contributions were also made to the development of global training packages through presentations to and participation in the regional workshop on emergency assistance held at Bangkok in June and the workshop on early childhood growth and development held in Pakistan in late September. 

E. Regional urban advisory services

80. Advisory services were provided for urban programme expansion in Bangladesh, Pakistan and the Philippines, the initiation of a new urban PHC project in Burma and urban project evaluations in the Republic of Korea and Thailand. UNICEF also supported a UNCRD Expert Meeting on Shelter and Urban Services in Metropolitan Regions in Nagoya, Japan, in January, an interregional workshop on going to scale with urban basic services in India, a regional workshop on area-based social development in Thailand and a national seminar on urban development and management in Pakistan.

F. Supply operations

81. Regional supply and logistics operations remained on a high level, with a slight decrease in the number of purchase orders, but about the same total value and number of line items. Procurement services were also provided to countries outside the region such as Brazil, China, India, Maldives, Mongolia, Nepal, Nigeria, Rwanda, Sierra Leone, Sri Lanka and the United Republic of Tanzania. Furthermore, at Copenhagen, a number of stockpile items were bought within the region, in close collaboration with the UNICEF Procurement and Assembly Centre.

82. Shipping and logistics continued to play an important role. Bangkok (for the Lao People's Democratic Republic) and Singapore (for Kampuchea) are still vital locations for the storage and trans-shipment of UNICEF supplies.

83. Assistance was provided to the New Delhi regional supply section by evaluating and recommending certain structural changes for improved efficiency in procurement and shipping services.

84. Training and briefing of UNICEF staff was another important feature of supply-related operations. In this regard, the regional office provided extensive support to the first UNICEF-assisted inter-country emergency management workshop for 18 staff members involved in emergency operations, which was held in co-operation with the Asian Centre for Disaster Preparedness at the Asian Institute of Technology, at Bangkok, for two weeks in June. Furthermore, in-service training continued throughout the year, with special emphasis on preparations for increased utilization of computer equipment.

85. At mid-year, the posts of Senior Regional Supply Officer and Regional Procurement Officer were merged into one international post. The reduced manpower has clearly affected the nature and quantity of the services that can be rendered.

G. External relations

86. A symposium on child survival, population and development for parliamentarians from five of the six countries of ASEAN brought a new dimension to strategic alliances for CSD in the region. The symposium, held in June at Jakarta, was opened by H.E. President Soeharto and adopted an "Agenda for action for ASEAN's children" to stimulate greater national and local involvement of parliamentarians in children's issues and programmes. Four ministers of national Governments and the Executive Director of UNICEF were among those who addressed the symposium. Observers from China, India and Sri Lanka were also present. Goodwill Ambassador Liv Ullmann also spoke to the gathering on her first visit to Asia. By the end of the year, follow-up included a national-level workshop for parliamentarians in Thailand and an invitation by the House of Representatives in the Philippines for UNICEF to make a presentation of its policies and programmes.

87. The UNICEF/Press Foundation of Asia component of the communication project funded by the Government of Norway made steady progress throughout the year. Project workshops for media personnel were held in Indonesia, Malaysia, Papua New Guinea, the Philippines and Thailand. Resource books on CSD issues, aimed at larger numbers of media personnel, were being published for Indonesia, the Pacific Islands countries and Papua New Guinea. A separate project component, focusing on audio-visual communication and in partnership with Worldview International Foundation, began operations in Bangladesh, in liaison with the country office.

88. Greeting card sales throughout the region generally saw a marked increase over the previous year, a tribute to the extra efforts made by many staff, volunteers and the regional sales development programme. Several organizational difficulties remained, however, as the Greeting Card Operation (GCO) sought significantly higher performance in the region's small but high-potential markets. Several design and management issues were addressed successfully at a one-week workshop held in Thailand in February and attended by staff from headquarters and the two Asian regions.

89. In only its second year of operations, the Hong Kong Committee for UNICEF found a more permanent home, organized several successful fund-raising ventures, increased GCO sales sixfold (to 60,000 cards in 1986) and held a successful children's art competition, which led to reciprocal arrangements for a similar competition in Thailand.

90. Visits by authors, media personnel and National Committee representatives continued to be supported by regional and country offices, although at a slightly reduced level compared to 1986. Interaction with several NGOs was maintained. Two UNICEF Goodwill Ambassadors made trips to the region. Mr. Peter Ustinov paid a successful visit to Thailand in October and Ms. Liv Ullmann went to the Philippines and the Territory of Hong Kong, following her attendance at the ASEAN parliamentarians meeting mentioned above.

91. Throughout the year, the use of video technology increased rapidly, a development which included the production of a 40-minute video on children in the Lao People's Democratic Republic, which was co-ordinated by the regional office.



H. Inter-agency co-operation

92. During 1987, UNICEF participated in several inter-agency meetings on women in development organized by ESCAP and/or UNESCO. A newsletter on women in the Asia and Pacific region included updated relevant information on UNICEF-related activities in Asian countries. Several ESCAP publications on women in development were distributed to UNICEF country offices in Asia, as were publications from other agencies. Information was also exchanged with the United Nations Development Fund for Women which recently posted a representative in Bangkok.

93. Collaboration with WHO was strengthened by the arrival of the Regional PHC Adviser in March, permitting timely consultation and joint activities. Thus, UNICEF was represented at the regional EPI meeting at Dhaka in June, the interregional meeting on AIDS at Sydney in July and the WHO Regional Committee Meeting at Pyongyang, Democratic People's Republic of Korea, in September. Other WHO meetings attended by regional staff included the inter-country meeting on CDD at New Delhi and the UNICEF/WHO meeting on MCH/nutrition programmes at Geneva, both held in January.

94. Co-ordination with ESCAP and the United Nations system included attendance at the forty-third session of the Commission in April and representation at several inter-agency task forces on water, integrated rural development, women and youth as well as at the interministerial committees on population, industry and human settlements and statistics. In addition, the regional office participated in the seminar on the United Nations Decade of Disabled Persons and the training seminar on population projections. The office in Hanoi represented the regional office at the twenty-fifth plenary session of the Interim Mekong Committee held in that city. The UNESCO Adviser to UNICEF carried out support missions in a number of countries in the region.
