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PROGRAMME DEVELOPMENT IN THE SOUTH ASIA REGION

SUMMARY

The present document reports on and analyses major new trends and developments in UNICEF programme cooperation in the South Asia region during 1994.

The UNICEF regional office has responsibility for cooperation in the seven member countries of the South Asian Association for Regional Cooperation: Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan and Sri Lanka. In October 1994, responsibility for Afghanistan was transferred to another region.

CONTENTS

	<u>Paragraphs</u>	<u>Page</u>
I. INTRODUCTION AND OVERVIEW	1 - 5	2
II. CHILDREN'S AND WOMEN'S RIGHTS	6 - 8	3
III. GOALS AND STRATEGIES FOR THE DECADE	9 - 17	3
IV. COOPERATION WITH REGIONAL INSTITUTIONS AND NETWORKS AND UNITED NATIONS AGENCIES	18 - 23	4
V. SUPPORT TO COUNTRY PROGRAMMES	24 - 26	6
VI. TRENDS AND PROSPECTS	27	6

I. INTRODUCTION AND OVERVIEW

1. The South Asia region has maintained moderate economic growth for the past several years. Recent moves towards more open market economies in some countries are resulting in more rapid growth, but also are causing new problems. Despite its impressive natural and human resources, South Asia has the lowest per capita income of any region. Nearly one fifth of the world's population and almost one fourth of the world's children live in the region. One third of all young child deaths in developing countries occur in South Asia. The region has the world's highest illiteracy rate, particularly for women, although there are some encouraging exceptions. South Asia is also home to one half of the world's malnourished children.

2. UNICEF cooperation aims to combat this multifaceted poverty of income, education, nutrition, health and hygiene, as well as the weakness of social support systems, beginning with their effects on children. There is continuing progress as measured by most social indicators, but the pace of change must and can be accelerated, as has been demonstrated in recent years.

3. Parliamentary democracy is the norm across the subcontinent. Politically, the results of elections held in 1994 suggest that countries are moving away from systems dominated by single parties towards coalitions and consensus. There has been relative political stability in India, but the prolonged parliamentary stalemate in Bangladesh is beginning to affect the economy adversely. Pakistan continued to move towards political stability, and there were major changes of government in Nepal and Sri Lanka. The endemic conflict in Afghanistan, combined with chronic poverty, has resulted in a near total collapse of the social infrastructure and untold suffering for children and women. The rest of the region has not been totally free from problems such as militancy, ethnic and civil strife and political unrest, which detract from the attention and resources required for social development. However, South Asia did not suffer any extensive natural disasters in 1994, except for the not unusual drought and floods in the west of India and the consequences - ultimately more economic than anything else - of the outbreak of a plague-like disease in the Indian state of Gujarat.

4. Real per capita gross domestic product, adjusted for purchasing power, has increased in the region as a whole in recent years, led mainly by gains in Bangladesh and India. All countries in the region are facing rising public expenditures, mounting debt servicing costs, systemic constraints in absorbing and deriving full value from external aid to the social and economic sectors, the uncertainties of export-led growth and continuing inability to reduce heavy fiscal deficits. A cumulative consequence of these factors is double-digit inflation, which has an especially severe impact on those living in or close to poverty.

5. National averages mask wide and persistent differences in real household income. Given the high levels of income disparity within countries (e.g. in India, the poorest 40 per cent of households receive only 21 per cent of the total income), it is far from clear if poor households have benefited from the overall economic growth. In fact, evidence from surveys of household income and expenditure indicates that income distribution has continued to deteriorate across the region. In the spreading urban areas, the proportion of poor people is increasing steadily, with one fifth of the regions' poor living in towns and cities. Subject to varying definitions of poverty and different methods of measurement, it is estimated that well over 500 million people in South Asia (more than two fifths of the total population) live in poverty. In Bangladesh and Nepal, more than one half of the people live below the poverty line.

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II. CHILDREN'S AND WOMEN'S RIGHTS

6. Between August 1990 and December 1992, all seven member countries of the South Asian Association for Regional Cooperation (SAARC) ratified the Convention on the Rights of the Child. Pakistan sent its first report to the Committee on the Rights of the Child in 1992 and resubmitted it in 1994 in the light of the Committee's comments. The reports of Maldives and Sri Lanka were submitted during 1994. Bangladesh, Bhutan, India and Nepal are preparing their reports. The most promising development of the reporting process has been the increasing involvement of voluntary, political and professional groups, and of children themselves, in determining what needs to be done and, thus, the content of the reports. UNICEF has supported people's, especially children's, participation in this government-led process of review and reform.

7. Because of the situation of girls and women in South Asia, UNICEF is advocating strengthened links between the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women. The latter has been ratified, although with reservations in some cases, by all the countries except Pakistan, which expects to do so soon. This advocacy work is aided at regional, national and local levels by the SAARC Decade Plan of Action for the Girl Child. In addition, UNICEF is working to link child rights issues to the achievement of goals for children in the region.

8. During the period prior to the Fourth World Conference on Women, a common position by the regions's Governments and women's organizations has emerged, linking the condition of women's lives to their position in society. Based on a regional study, a workshop on "The girl child in difficult circumstances" was arranged, resulting in an analytical report and follow-up in terms of surveillance, advocacy and action-research. Within UNICEF, gender training was organized both at regional and country levels. More and more staff are being sensitized on gender issues.

III. GOALS AND STRATEGIES FOR THE DECADE

9. Despite problems of poverty, population growth and environmental depletion, South Asia remains on course towards the mid-decade goals for children, mainly because of the democratic changes under way in the region. UNICEF has supported the countries, individually through country programmes of cooperation and collectively through SAARC and non-governmental regional groups, to achieve the mid-decade goals as stepping stones towards the goals for the year 2000. Progress towards specific goals is described below.

10. Immunization coverage of 80 per cent or more is expected in all countries except Nepal and Pakistan, where the targets can be reached only with redoubled effort. The same applies to the targets for the elimination of neonatal tetanus, the reduction of measles deaths and cases, and the elimination of polio in selected areas. The elimination of polio in both India and Pakistan will be a challenge.

11. The target for vitamin A can be achieved with unprecedented effort in India. There will be near universal iodization of salt in all countries except Nepal, where additional resources will be required. Achieving 80 per cent use of oral rehydration therapy will be problematic in Bangladesh, India and Pakistan because of the wide gap between awareness and actual practice. The targets set for the Baby-Friendly Hospital Initiative are being achieved, although major challenges remain in Bangladesh and India.

12. Targets for access to safe drinking water supplies are likely to be achieved in all countries except Maldives and Nepal. Dracunculiasis (guinea worm disease) practically has been eliminated in India and Pakistan and, therefore, from the region.

13. The three most ambitious goals for the region are a reduction in protein-energy malnutrition (PEM), universal primary education and expansion of access to sanitation.

14. The prevalence of PEM is unacceptably high in all countries, although it is less widespread in Bhutan and Pakistan, and manageable in Maldives. In spite of the large amount of national resources being invested in programmes and projects to reduce PEM, there has been very little improvement. A regional nutrition initiative, based on experience gained from successful programmes in the region, will help to accelerate achievement of the goal for the year 2000.

15. In the area of primary education, while there have been significant breakthroughs in policies and programmes in some countries, overall progress towards the mid-decade goals is uneven. Coverage, as distinct from quality, remains historically high in Maldives and Sri Lanka and has reached high levels in several Indian states. A major challenge is to improve the reliability of basic data in several countries to reflect more accurately the situation on the ground. At the same time, innovative and successful initiatives abound in South Asia, often launched by voluntary agencies and linked, for example, to rural credit, workers' cooperatives, women's groups and community organizations. Local planning and community management, the proven responses to problems of access, relevance, retention and quality, increasingly are being explored in some countries.

16. Given the relatively modest mid-decade goals for sanitation, it is likely that they will be achieved, although only with considerable extra effort in India, Maldives and Nepal. Progress in this area will depend heavily on changes in attitude and behaviour. Increasingly, experience is showing that latrines constructed with government funds or external aid are not likely to lead to a social movement for sanitation. Viable alternatives specific to climate, terrain, culture and community have to be promoted, with a decision-making role for women and linked to reoriented systems of education, communication, public health and local governance.

17. Fortunately for South Asia, the development strategy of achieving social goals with a human rights perspective is not new and has been accepted in principle and legitimized through policies and plans. Thus, a community-based multisectoral approach to social goals that are relevant to children and women is included in country programmes in Bhutan and India. It is reflected clearly in the framework of the current programme of cooperation in Sri Lanka; the strategy also is explicit in the national programmes of action of Bangladesh, Maldives, Nepal and Pakistan. This strategic consensus was reinforced in the Colombo Resolution on Children (1992) and endorsed by the SAARC Summit held in Dhaka in 1993.

IV. COOPERATION WITH REGIONAL INSTITUTIONS AND NETWORKS AND UNITED NATIONS AGENCIES

18. Within the framework of the cooperation agreement signed in December 1993 by the UNICEF Executive Director and the SAARC Secretary-General, a number of collaborative activities have been identified for the period 1994-1995. In mid-1994, the SAARC Standing Committee and Council of Ministers approved a common format for members to use when reporting on children to the annual

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summit; they also agreed to establish or strengthen an interministerial Committee for Children to prepare the annual report. Preparations have begun for a workshop, scheduled for early 1995, to review the working of national laws and regulations related to the International Code of Marketing of Breast-milk Substitutes, and possibly to agree on a SAARC "model code". UNICEF advocacy with SAARC suggests a greater focus on poverty alleviation, with concurrent support for community organization, household economy and human development. Other items on the agenda of SAARC cooperation include an initiative on universal salt iodization, "mapping" of selected common problems and effective responses across countries (e.g. PEM, early marriage and child labour), and stimulating intercountry cooperation on using district-level computerized systems to monitor the changing situation of children and women.

19. An overriding concern, in cooperation with SAARC as well as regional professional associations, is implementation of the SAARC commitment to community-government partnerships to meet common agreed goals. In 1994, a work plan was elaborated to develop an operational strategy for achieving the goals through a rights-based approach. This will be followed by the provision of intercountry support for decentralized annual planning to achieve goals in a manner consistent with child rights.

20. In the non-government sector, a number of issues have been identified for cooperation with the South Asian Association for Women Studies, which was launched in November 1993 with UNICEF support. Support is provided for studies, training, advocacy and information exchanges among the countries on critical issues affecting girls and women in the region.

21. UNICEF helped to reactivate the South Asia Medical Association at a conference held in Kathmandu, Nepal, in April 1994, resulting in a commitment by members of the regions's medical profession to a decentralized health strategy that focuses on priority health problems ranging from acute respiratory infections to acquired immune deficiency syndrome. The report of the South Asia consultations in 11 interrelated fields, held during 1992, laid the foundation for expanding regional networks for children and women. This aim is closely related to communication for advocacy and resource mobilization, for which a number of major initiatives were undertaken in 1994. A regional workshop on development journalism was organized in October 1994 with the help of the Thompson Foundation. The South Asian-Nordic Network of Women Journalists - Women Watch - met in Copenhagen on the theme of "Violence against women". The regional newsletter "Links" was published bi-monthly, complementing the development journal "Future" and the documentation quarterly "Search". The regional office also assumed responsibility for coordination of the multimedia communications initiative on girls known as the "Meena" project. This has evolved over the year into a subregional initiative with demonstrated potential for wide dissemination throughout the region and even beyond.

22. At the regional level, UNICEF has productive working relationships with the United Nations Population Fund in the area of women's and family health; with the Office of the United Nations High Commissioner for Refugees in the Bhutan refugee camp in Nepal); with the World Health Organization on urban health and diarrhoea control; with the United Nations Educational, Scientific and Cultural Organization (UNESCO) on the International Institute for Educational Planning (IIEP) project on Innovations in Basic Education, the IIEP-UNICEF regional workshop on decentralized educational initiatives and the UNESCO South Asia Network on distance education); and with the International Labour Organisation on child labour. There also have been consultations or contacts with the United Nations Development Programme, the World Bank and the United Nations Economic and Social Commission for Asia and the Pacific on the SAARC goal of poverty reduction.

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23. At the country level, United Nations agencies are involved in the country programming exercise. In Bangladesh, a jointly supported analysis of the situation of children and women was published in 1994. The President of the Executive Board visited Bangladesh in 1994. In Pakistan, all agencies have worked closely on the elaboration of a country strategy note, which will guide future collaboration with the Government.

V. SUPPORT TO COUNTRY PROGRAMMES

24. During the year, the regional office supported health and nutrition activities in most of the countries of the region. In Bangladesh, support was provided for an evaluation of the immunization component of the programmes of the Bangladesh Rural Advancement Committee which are funded by UNICEF. Support also was provided for the development of health strategies for meeting the mid-decade goals. In India, the regional office provided support to efforts to mobilize voluntary agencies in states with low immunization coverage. In Nepal, the office provided advice for district-level microplanning, training for growth monitoring and a training workshop for health personnel. In Pakistan, the training of trainers of female village workers, the mobilization of voluntary agencies for a community-government partnership in health and the establishment of a South Asia Alliance on Nutrition and Human Rights were areas for which the regional office provided support. At the request of the Myanmar country office, the office provided assistance to develop the health and nutrition component of that country's programme of cooperation.

25. In the area of education, the regional office provided technical support for training workshops on multigrade teaching in Pakistan, participated in the UNESCO-UNICEF regional workshop on innovative projects in Bangladesh and collaborated with IIEP on regional training for decentralized initiatives.

26. The regional office also provided advice to UNICEF Bangladesh on the preparation of its country programme for the period 1996-2000, as well as to other countries that are in earlier planning stages of that process. The regional training committee was serviced by the regional office. An operations training workshop was conducted in Islamabad, Pakistan, in October.

VI. TRENDS AND PROSPECTS

27. Based on the strong national and subnational networks established through UNICEF country programmes, the aims of the Regional Office for South Asia are increasingly to focus on intercountry networking and collaboration with SAARC. Its role as a regional knowledge centre on child development, and its functions of support to the country offices and monitoring and constructive criticism of their activities, are by now well established. The policy and strategy framework for cooperation with SAARC and other regional bodies is in place. Attention will now focus on implementing agreed plans and strategies for achieving the goals for the decade and the rights of children and women.
