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FOR ACTION

RECOMMENDATIONS FOR ADDITIONAL GENERAL RESOURCES
TO FUND THE APPROVED COUNTRY PROGRAMMES IN THE
AMERICAS AND CARIBBEAN REGION*

SUMMARY

The present document contains recommendations for additional general resources to fund the approved country programmes in the Americas and Caribbean region for which the balances of approved general resources are not sufficient to fund the programmes up to the approved programme periods. The Executive Director recommends that the Executive Board approve additional general resources in the following amounts, totalling \$1,509,000, to achieve the objectives of the country programmes as originally approved by the Board.

<u>Country/programme</u>	<u>Amount</u> (United States dollars)	<u>Current programme cycle</u>
Mexico	432 000	1990-1995
Venezuela	1 077 000	1991-1995

Annual funding requirements of the two countries are provided in the table.

* In order to meet documentation deadlines, the present document was prepared before aggregate financial data were finalized. Final adjustments, taking into account unspent balances of programme cooperation at the end of 1994, will be contained in the "Summary of 1995 recommendations for general resources and supplementary funding programmes" (E/ICEF/1995/P/L.10 and Add.1).

I. MEXICO

1. The country programme for Mexico for the period 1990-1995 was approved by the Executive Board in 1990 with available general resources of \$1,400,000 annually (E/ICEF/1990/P/L.15). The annual planning level was increased to \$1,540,000 in 1992. Additional general resources in the amount of \$1,848,276 were approved by the Executive Board in 1994 to meet programme requirements through 1995 (E/ICEF/1994/P/L.32). Because of further opportunities to accelerate implementation, the planning level was increased again in 1994 to \$1,600,000. These adjustments have permitted the Government and UNICEF to make dramatic progress towards achievement of the mid-decade goals, particularly those related to child health. Additional general resources in the amount of \$432,000 are being requested to continue programme activities through 1995 for completion of activities in the country programme.

2. As elections were held in 1994, the preparation of a new country programme prior to the installation of a new national Government was not appropriate. With the installation of the new Government in late 1994, a programme preparation exercise is under way to prepare a country programme recommendation for the period 1996-2001 for presentation to the Executive Board in 1996.

3. The country programme for Mexico comprises the following programmes: child survival and development; backyard nurseries/community kitchens; children in especially difficult circumstances; education; support for social policies; and integrated development in selected areas. The programme is national in scope, but gives higher priority to poorer states, e.g. Oaxaca, Guerrero and Chiapas, which have lagged behind the nation as a whole, particularly in immunization, the control of diarrhoeal diseases (CDD), water supply and sanitation and local planning capabilities. Giving priority to poorer states serves the dual purpose of reaching more of the poor and further improving national averages for many child indicators. Overall, the programme is notable for Government commitment, at the Presidential level, to its success.

Child survival and development

4. The objective remains the further reduction of mortality and morbidity among children under the age of five years and the promotion of integrated approaches to child development. Programme components include the expanded programme on immunization (EPI); CDD; acute respiratory infections (ARI); maternal and child health; the Baby-Friendly Hospital Initiative (BFHI); and health promotion.

5. Mexico has achieved very high coverage for EPI and use of oral rehydration therapy (ORT). An objective is to maintain the high coverage for all EPI antigens and to improve coverage in lagging areas through UNICEF support to monitoring and supervision and, where necessary, cold-chain equipment. The virtual elimination of measles and neonatal tetanus are targets for 1995, requiring additional training and other support for mobile brigades in selected areas. Increasing ORT use to 80 per cent will require the development of materials, training and mobilization in indigenous languages.

6. ARI is the major cause of morbidity for children under five years of age and the most frequent illness of children presented for medical attention. The objective is to promote early identification and timely institutional consultation in 80 per cent of ARI cases, requiring more effective public health education, as well as training in prevention and case management for health care personnel in selected areas.

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7. Efforts to reduce maternal mortality will concentrate on the early identification of high-risk pregnancies, increased coverage of antenatal services and the improved training of midwives. The latter has been particularly effective in increasing the number of births attended by qualified health personnel and has considerable impact in disadvantage areas. Progress with the "health at home" initiative, which seeks to provide basic health education in disadvantaged areas, also has been linked with the presence of well-trained midwives.

8. The objective of BFHI is to certify all major hospital and maternity facilities as "baby- and mother-friendly" by the end of 1995, thus promoting widespread breast-feeding. Funds are required for training and the evaluation of participating institutions. Technical and financial support for the development and production of health education materials by the General Bureau of Health Promotion will be continued, with new emphasis on reaching indigenous populations. Child malnutrition persists as a major problem and will be emphasized in the next country programme. In 1995, UNICEF will support surveys and studies to assess and analyse the problem, as well as to develop more effective approaches to reduce child malnutrition.

Backyard nurseries/community kitchens

9. Training and technical support to the National Council of Volunteers will expand coverage of the low-cost, day-care system of "backyard nurseries" in selected municipalities. The target group is young children of poor working mothers. Working mothers also are served by a network of community kitchens organized by and for low-income women in urban areas. These centres also promote local women's organizations and provide education on health and nutrition for women and their children.

Children in especially difficult circumstances

10. The programme operates in 31 states and 77 municipalities and seeks to improve the situation of street children and working children; children of migrant families; indigenous children in extreme poverty; abused, neglected and abandoned children; and children with legal problems. The strategies include advocacy for child rights with policy makers and the public; research on the special problems of children in especially difficult circumstances; and training and supervision of community educators for the children, including the development of training materials.

Education

11. While primary enrolment rates are high, efforts now are being made to identify areas and population groups which require special attention so that access to primary education will become virtually universal. Special attention includes training for teachers and administrators, evaluation and improvement of the curriculum and some supply assistance. Support to pre-primary education in 10 priority states, where the objective is to increase coverage from an average of 3 to 20 per cent, includes technical assistance in curriculum development and financial support for monitoring and supervision.

12. UNICEF support also has been provided to the Plaza Sesamo ("Sesame Street") series, produced by the Children's Television Workshop and an affiliate studio, which is shown throughout Latin America. UNICEF provides technical assistance and advice on programme content.

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Social policies

13. UNICEF support for the development of social policies will continue to focus on three approaches: (a) technical and financial assistance to the National Solidarity Programme which is responsible for identifying the most vulnerable groups and reducing social disparities; (b) using the opportunities offered by the World Summit for Children and the national programme of action (NPA) so that the goals for children are high on the national agenda; and (c) dissemination of the Convention on the Rights of the Child as both a legal framework and for the promotion of public accountability. UNICEF has provided technical support in the development, implementation, monitoring and evaluation of the NPA. Implementation of the NPA is formally reviewed twice each year by a national commission chaired by the president. Government expenditure for social development has been analysed for its impact on programmes related to the NPA. UNICEF is supporting the development of guidelines for new municipal and other local initiatives to support achievement of the goals of the NPA. This will become increasingly important as efforts are concentrated on disadvantaged areas and population groups.

Child survival and development in Oaxaca, Guerrero and Chiapas

14. The three states of Oaxaca, Guerrero and Chiapas are among the poorest and have special needs because of their largely indigenous populations. The construction of potable water systems in rural areas, complemented by latrine construction and health education, serves as an important entry point for community development. This approach includes a strong component of community training in maintenance of the systems as well as promotion of hygiene. UNICEF has helped to introduce a monitoring system to measure progress and to identify priority locations based on indicators of morbidity and mortality related to diarrhoeal diseases.

15. The training of indigenous doctors and health staff in CDD and the management of ARI will continue, as will the training of traditional midwives in clean deliveries. UNICEF assistance also includes the production of media messages in indigenous languages, support to funding for supervision and the equipping of health centres.

II. VENEZUELA

16. The country programme for Venezuela for the period 1991-1995 was approved by the Executive Board in 1991 with available general resources of \$3,750,000 (E/ICEF/1991/P/L.21). In 1992, the annual planning level was increased from \$750,000 to \$1,000,000 because of the declining social and economic situation and opportunities to accelerate programme implementation. Hence, an additional \$1,077,000 in general resources is required for the remainder of the country programme period.

17. The Government initiated a process of economic adjustment in 1989, which led to a widening of social disparities. The deterioration in social services for a growing population living in poverty has led, in turn, to a deterioration in social indicators, particularly those for health, nutrition and education.

18. A new Government assumed office in February 1994. In response to the economic crisis, the Government established a short-term stabilization and recovery programme. The objectives of the programme are to re-establish the fiscal balance by 1995, to increase economic productivity and employment as well as social programmes for the lower-income groups, and to reform the health and education sectors.

19. In view of these important developments, preparation of a regular country programme for the period 1996-2000 has been postponed to 1995. The country programme recommendation will be presented to the Executive Board in 1996.

20. The programme of cooperation for the period 1991-1995 set objectives with targets for 1995 for the reduction of infant and maternal mortality and malnutrition, and for the expansion and enhancement of services for day-care and primary education. Because of political instability and Government reduction of social expenditure, results to date have been uneven. Infant mortality has dropped from 35 (in the late 1980s) to an estimated 20 per 1,000 live births in 1993. Immunization coverage has risen by 14 per cent since 1990, but still falls short of universal child immunization. The nutritional status of some children has declined. Primary school enrolment, which is high for both boys and girls, has remained relatively constant.

Advocacy and social mobilization

21. At the beginning of the programme, the cooperation centred on ratification of the Convention on the Rights of the Child, which was achieved in September 1990. Since ratification, UNICEF has provided technical and financial support for a review of Venezuela's national laws and judicial system to promote their compatibility with the Convention. Community education on the Convention has been supported through a formal agreement with the National Coordinating Commission of Non-governmental Organizations Working with Children, an umbrella organization for more than a 100 national and international non-governmental organizations (NGOs).

22. Public education on children's issues continues with organized support from the print and broadcast media, the Catholic Church, NGOs and the Government at national, state and municipal levels. These mobilization efforts have been unified under the theme, "Commitment to Life", which emphasizes child health issues. This network has given strong support to mobilization for a measles campaign and breast-feeding. Cooperation with the network will be strengthened through training and other activities to support achievement of the mid-decade goals.

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23. UNICEF supported the first national meeting of "Mayors as Defenders of Children", at which mayors committed themselves to developing local plans of action for children. UNICEF is providing technical and financial support for the development of municipal plans for children and women. This covers needs identification, problem analysis, budgeting, management and monitoring of municipal plans and their incorporation into state and national plans. Municipal- and state-level elections to be held in 1995 will provide an additional opportunity to place the problems of children and women on the political agenda. There is also a need to assess the potential of private sector support to programmes for children within Venezuela and to develop strategies to enhance that support.

Child survival

24. For 1995, the highest programme priorities are to increase immunization coverage, especially for measles, to at least 80 per cent; to improve CDD and the control of ARI and micronutrient malnutrition; and to promote breast-feeding through BFHI.

25. UNICEF support to immunization will cover the evaluation of the campaign against measles carried out in 1994; mobilization and education activities to increase the use of basic services; training of health promoters; technical and financial support for monitoring; and supply assistance. CDD activities will promote the use of ORT through public education and training. UNICEF assistance also will be provided for increasing local production of oral rehydration salts and for training in the early diagnosis and correct case management of ARI.

26. In order to achieve the 1995 goals UNICEF provides technical, financial and advocacy support for universal iodization of salt for human consumption, including salt exported to neighbouring countries. The impact of vitamin A fortification of wheat flour is being evaluated, and the technical and commercial feasibility of the fortification of other foods with vitamin A and other micronutrient is being explored.

27. All major hospitals and maternity facilities in the country should be able to achieve the "10 steps for promoting successful breast-feeding" by 1995. UNICEF will support the training of doctors, nurses and administrators in breast-feeding promotion and provide financial support for the certification process.

Education and child development

28. The focus in education and child development is on the expansion of non-formal day care, which includes nutrition and early childhood education in urban areas; expanding coverage and improving the quality of pre-school education; and higher-quality primary education, particularly in rural areas.

29. UNICEF assists in the design and implementation of training for day-care mothers, community promoters and teachers. Training includes health care, nutrition and early childhood stimulation. UNICEF also supports a national day-care monitoring system to improve supervision of the day-care programmes.

30. As the day-care home programme will undergo rapid decentralization during 1995, UNICEF support will strengthen the management capacity of the NGOs which will operate services and provide technical support to the recently created National Autonomous System of Integral Attention to Children.

31. UNICEF will continue cooperating with the Government in the improvement of rural basic education. Major activities will include training new teachers, producing new learning materials and documenting and disseminating programme

experiences. Venezuela is receiving substantial World Bank support for education reform, with the emphasis on improving the quality of primary education. The objectives are to raise the standard of basic education, especially in the relatively neglected rural areas; increase access; and reduce repetition and drop-out rates. UNICEF is providing technical support for incorporating basic health and environmental themes and eliminating gender bias in teaching materials and adapting curriculum to the needs of rural children. Technical support also is being provided for programme monitoring and an improved education information and statistics system.

Social policy and planning

32. The Government's short-term economic and fiscal programme combines the promotion of stability with combating the deterioration of social services. The ninth national development plan is currently under preparation by the Central Coordination and Planning Office of the Presidency. Since the term of the plan will coincide with that of the next country programme, UNICEF is providing technical and financial support for the planning process to ensure that the basic needs of the poorest children are not neglected and that the goals for children for 1995 and the year 2000 are addressed prominently. As part of this effort, a system for monitoring achievement of the goals is under development. The results of monitoring the goals will stimulate development and execution of state and municipal plans of action for children, especially with the use of indicators related to economic poverty.

33. UNICEF also will support evaluations of the impact of past and current economic and social policies on low-income groups and the development, in collaboration with the Government and NGOs, of a new analysis of the situation of children and women. The situation analysis will highlight crucial, unmet needs of children and women for planning the new period of cooperation and for advocacy and public education on children's issues.

Breakdown of annual funding requirements

(In thousands of United States dollars)

Country	Current programme cycle	Approved general resources funding a/	Additional funding proposed	
			1995	Total
Mexico	1990-1995	9 898	432	432
Venezuela	1991-1995	3 750	<u>1 077</u>	<u>1 077</u>
Total			<u>1 509</u>	<u>1 509</u>

a/ The amounts shown here include the actual balances carried over from the previous programme cycle.
