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FOR ACTION

RECOMMENDATION FOR FUNDING FOR A SHORT-DURATION COUNTRY PROGRAMME\*\*

Lao People's Democratic Republic

SUMMARY

The present document contains a recommendation for funding from general resources and supplementary funds for the country programme of the Lao People's Democratic Republic with a duration of one year to support activities that will lead to the preparation of a full-length country programme. The Executive Director recommends that the Executive Board approve the amount of \$1,040,000 from general resources, subject to the availability of funds, and \$1,523,000 in supplementary funds, subject to the availability of specific-purpose contributions, for the year 1997.

\* E/ICEF/1996/18.

\*\* The figures provided in the present document are final and take into account unspent balances of programme cooperation at the end of 1995. They will be contained in the "Summary of 1996 recommendations for general resources and supplementary funding programmes" (E/ICEF/1996/P/L.43/Add.2).

BASIC DATA  
(1994 unless otherwise stated)

Child population (millions, 0-15 years)	2.2
U5MR (per 1,000 live births)	138
IMR (per 1,000 live births)	94
Underweight (% moderate and severe)	40
MMR (per 100,000 live births) (1990)	650
Literacy (% male/female) (1995)	69/44
Primary school enrolment (net % male/female) (1993)	75/61
Primary school children reaching grade 5 (%) (1992)	53
Access to safe water (%)	45
Access to health services (%) (1985)	67
GNP per capita (1994)	\$320

One-year-olds fully immunized against:

tuberculosis:	69 per cent
diphtheria/pertussis/tetanus:	48 per cent
measles:	73 per cent
poliomyelitis:	57 per cent

Pregnant women immunized against:

tetanus:	34 per cent
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THE SITUATION OF CHILDREN AND WOMEN

1. In 1991, the Government of the Lao People's Democratic Republic signed the Declaration of the World Summit for Children and acceded to the Convention on the Rights of the Child. The Lao People's Democratic Republic has participated actively in the International Conference on Population and Development, the World Summit for Social Development and the Fourth World Conference on Women, and is preparing for membership in the Association of South-East Asian Nations in 1997.

2. A World Bank analysis of 1992-1993 survey data showed that even with positive trends, such as virtual universal land ownership, almost 50 per cent of the population live in poverty and warned that economic growth may be taking place at the expense of social equity.

3. The infant mortality rate declined from 117 per 1,000 live births in 1990 to 94 in 1994; the under-five mortality rate remained approximately the same, as did the maternal mortality rate. With the population spread thinly through rural mountainous terrain, the delivery of services is difficult owing to limited infrastructure. However, immunization coverage improved through outreach services, with coverage for three doses of combined diphtheria/pertussis/tetanus vaccine increasing from 22 per cent in 1991 to 53 per cent in 1995. Chronic malnutrition (stunting) affected 47 per cent of children under five years of age, unchanged since 1984. Severe malnutrition was 11.7 per cent.

4. Malnutrition is attributed to illnesses, lack of health and nutrition information, and food insecurity. While breast-feeding is almost universal, supplementary feeding is introduced too early. With 95 per cent of the population deficient in iodine and 65 per cent seriously so, the Lao People's Democratic Republic is one of the most severely affected countries in the world. Vitamin A deficiency is less severe but country-wide.
5. While enrolment of school-age children rose from 60 to 70 per cent from 1990 to 1995, rural girls, particularly of ethnic minorities, have lower enrolment and higher drop-out rates. Only 44 per cent of women are literate, compared with 69 per cent of men. The numbers of out-of-school youth are increasing, and continuing education opportunities are limited.
6. Regarding child rights protection issues, internal migration of young people to urban areas in search of work is increasing. There is some trafficking of children for sexual exploitation and child labour. HIV/AIDS prevalence is escalating, especially in border provinces. The problem of unexploded ordnance (UXO) affects 12 of the country's 17 provinces, and 44 per cent of the victims are children.
7. Although overall Government structure and systems are still weak, implementation capacity at the province level is often strong. District capability is limited by a lack of transport, trained personnel, infrastructure and funds.

#### PROGRAMME COOPERATION, 1992-1996

8. The expanded programme on immunization (EPI) became the lead priority for the country programme, and by the end of 1994, coverage rates for all six antigens had doubled over 1993 levels. In 1995, EPI-Plus was introduced, with the additions of vitamin A supplementation, the promotion of oral rehydration therapy (ORT) and hygiene education to the outreach package, and additional mid-decade goals were tackled progressively. The Government promulgated a decree requiring iodization of edible salt. The Baby-Friendly Hospital Initiative target was expanded, and a Government decree was issued on the marketing of breast milk substitutes. The efforts of the Lao Women's Union (LWU), private pharmacists, teachers and health workers were organized to reach more rural households with ORT promotion and expand access to oral rehydration salts (ORS). A safe motherhood initiative was launched.
9. The water and sanitation programme achieved coverage targets through building implementation capacity and mobilizing substantial community contributions. The mid-decade goal of 51 per cent coverage for safe water was achieved, and latrine coverage reached 32 per cent, exceeding the goal of 22 per cent.
10. The basic education programme improved access and quality of primary education in rural and minority districts in eight provinces by upgrading untrained and unqualified teachers. Student learning and attendance was improved through more systematic monitoring and supervision which, in turn, led to increased parental support for school improvement. Coordination with the World Bank, the Asian Development Bank and Save the Children Fund (United Kingdom) focused on training district pedagogical advisers and upgrading the curriculum and pedagogy for teacher training.

11. In women's development, the social mobilization capacity of LWU was critical to success in EPI. It was also crucial for the development of village credit schemes to improve food security, reduce women's labour, assist income generation and enhance family health protection, enabling access to essential drugs and treated mosquito bed-nets for malaria prevention.

12. The advocacy and communications programme was instrumental in stimulating the community mobilization required for the introduction of treated bed-nets and the intersectoral initiative for marketing locally produced ORS. A system was developed for monitoring the mid-decade goals, including a multiple indicator cluster survey.

13. UNICEF cooperation expanded to include children in especially difficult circumstances generally and child trafficking in particular. UNICEF and the United Nations Development Programme (UNDP) jointly sponsored a UXO Trust Fund in 1995, and the Government and UNICEF are developing an initiative in UXO community awareness. UNICEF is also supporting the design of the Government component of the three-year Greater Mekong regional HIV/AIDS project under the umbrella of the Joint United Nations Programme on HIV/AIDS (UNAIDS). The United Nations/Lao People's Democratic Republic country strategy note (CSN) was finalized with the Government in 1996, and sector coordination groups involving the resident United Nations agencies (the Food and Agriculture Organization of the United Nations, UNDP, the Office of the United Nations High Commissioner for Refugees, the World Health Organization and UNICEF) have begun work.

#### Lessons learned

14. The 1995 mid-term review of the country programme indicated that a sharper programming focus was required. The follow-up focus on specific goals with a combined strategy mix, i.e., service delivery, capacity-building and advocacy and mobilization, and an emphasis on the provincial level, contributed to an increase in national coverage in EPI and water and sanitation programmes. The provincial and district zonal strategy for EPI succeeded in reaching remote villages, including those where health facilities are accessible but under-utilized. The leadership of the Provincial and District Commissions for Mothers and Children promoted multisectoral approaches and interministerial coordination, which were critical in reaching remote villages.

15. Many village households paid for portions of the cost of water supplies, latrines, school construction and textbooks. This opens the way for the development of community participation through, for example, parent/teacher and water supply user groups.

RECOMMENDED PROGRAMME COOPERATION, 1997

Estimated expenditure

(In thousands of United States dollars)

General resources

Health and nutrition	655
Basic education	240
Women's development	10
Advocacy and communications	35
Planning and monitoring	40
Programme support	<u>60</u>
Subtotal	<u>1 040</u>

Supplementary funding

Health and nutrition	573
Basic education	610
Women in development	<u>340</u>
Subtotal	<u>1 523</u>
Total	<u>2 563</u>

16. In an effort to optimize the planning and use of external aid resources, UNICEF, in coordination with other United Nations agencies and with the support of the Government, will continue its support to the present programme for an additional year to facilitate harmonization with the programme cycles of other United Nations agencies.

17. This "bridging" programme will continue efforts to achieve those mid-decade goals not yet met, e.g. EPI, vitamin A and education; to consolidate achievement of goals such as universal salt iodization; to incorporate recommendations of 1996 evaluations into the women's development and water supply and sanitation programmes; to gain experience with new initiatives and partnerships in HIV/AIDS and children in especially difficult circumstances; to develop a programming framework based on the Convention on the Rights of the Child; and to utilize the umbrella of the CSN for the formulation of the new country programme.

Health and nutrition

18. Efforts will continue to achieve and sustain 80 per cent immunization coverage of infants and women of child-bearing age. EPI-Plus outreach will be expanded to cover 75 per cent of the rural population. House-to-house promotion strategies for maternal and child health (MCH) services will be tested in four pilot provinces to cover children and women who underutilize available health facilities. A replicable community health package based on coordinated delivery of MCH services through traditional birth attendants and health volunteers will be developed further. Support will be maintained for policy development related to revolving drug funds, and salt iodization will be monitored.

### Water supply and sanitation

19. Cooperation will continue with the Ministries of Health and Education, NGOs and other institutions through the installation of 1,400 borehole water supply systems, 300 dug wells, 200 rainwater jars, 30 gravity-feed water supply systems, 30 spring water protection systems, 14,000 low-cost family latrines, and water and sanitation facilities for 100 primary schools. Hygiene and environmental education will focus on the control of diarrhoeal diseases; community participation in planning, installation, operations and maintenance will be developed; and evaluation tools will be developed to measure the impact of water and sanitation interventions.

### Basic education

20. The teacher upgrading project will cover about 1,000 untrained teachers and 30,000 students of 200 schools in rural ethnic minority districts in nine provinces. School clusters will be strengthened to sustain teacher development and effective school-based management activities. Another 450 teachers will be covered by teacher upgrading activities, and 100 schools will be upgraded with community participation. Community-based early childhood development (ECD) and family development activities will be developed as part of the non-formal education project in 10 communities in Houaphan Province. Health and nutrition, HIV/AIDS and gender and development will be integrated into formal and non-formal curricula.

### Women's development

21. Capacity-building of LWU staff will focus on upgrading the quality of gender analysis and planning skills to sustain family welfare activities, incorporate gender issues into national development priorities and accelerate implementation of the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination Against Women. The empowerment of women in household decision-making, family food security and income generation will reach 400 rural communities, or approximately 40,000 families, and credit assistance will be linked more effectively with non-formal education/ECD. Priority will be given to the sustainability of community and family actions for improved health through revolving drug funds, malaria prevention and safe motherhood interventions.

### Advocacy and communications

22. Upgrading the communication capacities of the country's national and regional media will continue, with a focus on programming for children and reaching ethnic minority populations. Relations will be developed with the Young Pioneers and Buddhist clergy, who are newly emerging communication partners. The advocacy strategy will highlight and promote child rights and address child protection issues.

### HIV/AIDS and children in especially difficult circumstances

23. The Lao People's Democratic Republic component of the six-country, Greater Mekong regional HIV/AIDS project, also assisted by the Netherlands National Committee will come into full implementation in close collaboration with UNAIDS and focus mainly at the subnational level. Child protection issues will be addressed further, e.g. migration and trafficking issues affecting rural girls and women, as well as UXO community awareness activities.

Planning and monitoring

24. Collaboration will continue with the National Statistics Centre and other agencies on the development of a system on social indicator monitoring, especially with respect to the World Summit for Children goals, and will support the overall country programme planning process.

Programme management

25. UNICEF will develop further its relationship with the National Commission for Mothers and Children, particularly in regard to the latter's role with respect to implementation of the NPA and the Convention on the Rights of the Child. Joint UNICEF/Government annual programme planning will be stressed, along with strengthening potential for subsequent joint monitoring and coordination of the new country programme. A portion of general resources will be allocated for staffing and operations support to the programme. Additional project support costs, including technical assistance and personnel, are included in the supplementary-funded components of the programme.

**LAO PEOPLE'S DEMOCRATIC REPUBLIC**

**Table: Linkage of Programme Budget and Staff Costs 1997**

(1) PROGRAMME SECTION/AREAS AND FUNDING SOURCES	(2) PROGRAMME BUDGET, 1997 (In thousands of US dollars)				(3) POSTS										(4) STAFF COSTS (In thousands of US dollars)								
	GR	FSF	NSF	TOTAL	EXISTING POSTS						SUBTOTAL				TOTAL POSTS	IP	LOCAL	TOTAL					
					D2L7	D1/L6	P/L5	P/L4	P/L3	P/L2	IP	NP	GS										
<b>GENERAL RESOURCES</b>																							
Health and Nutrition	655			655				0	1					1			1	2	124	8	132		
Basic Education	240			240				1						1			2	3	137	20	157		
Women's Development	10			10										0			1	1		6	6		
Advocacy and Communication	35			35										0			0	0			0	0	
Planning & Monitoring	40			40										0			0	0			0	0	
Programme Support	60			60										0			4	5			40	40	
<b>TOTAL GR</b>	<b>1,040</b>			<b>1,040</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>1</b>	<b>8</b>			<b>11</b>		<b>261</b>	<b>74</b>	<b>335</b>		
<b>SUPPLEMENTARY FUNDING</b>																							
Health and Nutrition		310	573	883				1	1					2			2	2	261	52	313		
Water Supply and Sanitation		1,027		1,027				1	0					1			2	4	137	30	167		
Basic Education		0	610	610										0			1	2		16	16		
Women in Development		0	340	340										0			0	1		12	12		
Advocacy and Communication		140		140					1					1			1	2	137	12	149		
		0	0	0										0			0	0		0	0		
		0	0	0										0			0	0		0	0		
<b>TOTAL SF</b>		<b>1,477</b>	<b>1,523</b>	<b>3,000</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>2</b>	<b>0</b>	<b>4</b>	<b>6</b>	<b>5</b>	<b>15</b>			<b>26</b>		<b>535</b>	<b>122</b>	<b>657</b>		
<b>TOTAL GR &amp; SF</b>				<b>4,040</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>3</b>	<b>0</b>	<b>6</b>	<b>7</b>	<b>13</b>						<b>796</b>	<b>196</b>	<b>992</b>		
<b>(5) ADM. AND PROGRAMME SUPPORT BUDGET</b> (Proposed, 1997)				152																			
Operating costs				733																			
Staffing				4923				1	2	1	4	1	14				19		527	161	688		
<b>(6) GRAND TOTAL (GR + SF + ADM)</b>								0	0	1	5	4	0	10	8	27	45		1,323	357	1,680		
<b>(7) number of posts and staff costs:</b>																							
- At the beginning of previous programme																					0	N/A	N/A
- At the beginning of proposed programme (1997)																					0	N/A	N/A
- At the end of proposed programme																					0	N/A	N/A

Abbreviations: GR = general resources; FSF = funded supplementary funding; NSF = new supplementary funding; SF = supplementary funding; IP = International Professional; NP = National Professional; GS = General Service; ADM = administrative.