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FOR ACTION

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

#### Congo

## SUMMARY

The present document contains a recommendation for funding from general and other resources for the two-year country programme of the Congo to support activities for which the country programme is in preparation. The Executive Director recommends that the Executive Board approve the amount of \$1,878,000 from general resources, subject to the availability of funds, and \$5,000,000 from other resources, subject to the availability of special-purpose contributions, for the period 2001 to 2002.

\* E/ICEF/2000/14.

\*\* The figures provided in the present document are final and take into account unspent balances of programme cooperation at the end of 1999. They will be contained in the "Summary of recommendations for programmes funded from general and other resources" (E/ICEF/2000/P/L.27).

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## Basic data (1998 unless otherwise stated)

Child population (millions, 0-18 years)		1.5
U5MR (per 1,000 live births)		108
IMR (per 1,000 live births)		81
Underweight (% moderate and severe)		17
MMR		-
Literacy rate (% male/female) (1995)		83/67
Primary school enrolment (% net, male/female) (1995)		59/53
Primary school children reaching grade 5 (%) (1995)		55
Access to safe water (%) (1996)		34
Routine EPI immunization provided by the Government (%) (1995)		-
GNP per capita	US\$	680
One-year-olds fully immunized against:		

Pregnant women immunized against:

diphtheria/pertussis/tetanus

Tuberculosis

poliomyelitis

measles

Tetanus 30 per cent

## THE SITUATION OF CHILDREN AND WOMEN

- 1. The recent civil war lasted from December 1998 to December 1999, with a few brief periods of respite. It was therefore not possible to conduct an analysis of the normal situation in the country. However, it was possible to gather information through a number of targeted surveys, information exchanges and interviews with victims of the conflict. In addition to the significant decline in socio-economic growth noted in previous years, there has been a marked weakening of the situation of children and women in the areas of health, nutrition, education and psychological well-being.
- 2. Children have paid a heavy toll in the form of pathologies related to the badly damaged ecological environment and infectious diseases. Malaria is the leading cause of mortality, accounting for 23 per cent of hospitalization cases. Diarrhoeal and respiratory diseases are the second leading cause of morbidity and mortality among children under five years old. The incidence of tuberculosis (11 per cent among children) has risen in conjunction with HIV/AIDS (the fourth leading cause of death among children under five years old). The vaccination rate has fallen sharply, and malnutrition has worsened. Severe and moderate emaciation has risen from 4.8 per cent to 34.9 per cent in conflict zones, while kwashiorkor has affected both children and adults. In non-conflict zones, the most common form of malnutrition is chronic malnutrition, which affects 15.3 per cent of children in rural areas.

29 per cent 23 per cent

18 per cent

21 per cent

- 3. Dysfunction among social and family structures and within the production system has had a negative impact on the physical and mental development of young children and adolescents, many of whom were forcibly recruited by armed militia groups. Despite the lack of reliable data, all the empirical evidence indicates a marked increase in the number of children in need of special protection measures, especially in Brazzaville and Pointe Noire.
- 4. With regard to education, the steady fall in school attendance observed since the beginning of the 1990s has continued (the primary-school gross attendance rate declined from 126 per cent in 1990 to 78.5 per cent in 1998). The rate has fallen further as a result of the various wars. Following the World Conference on Education for All, the country had set itself the goal of raising the nursery-school enrolment rate from 3 per cent to 10 per cent. Instead, the rate has fallen, to 0.4 per cent. The literacy rate is estimated to be 26 per cent, but there is reason to fear that the situation will deteriorate, given the fact that literacy campaigns have been halted and in view of the high student drop-out rates (62 per cent of children drop out of school before reaching the fifth year of the primary cycle).
- 5. The overall fertility rate is 5.9 per cent. Women generally have their first child between 13 and 18 years of age. The fact that sexual relations generally begin at an early age (17 per cent begin at 13 years of age and 65 per cent before the age of 15), combined with the effects of sexual violence and prostitution, exposes girls and women still further to the risk of contracting HIV/AIDS.
- 6. An evaluation conducted in 1995 estimated the availability of safe water to be 52 per cent in urban areas and 11 per cent in rural areas. Given the deterioration of the situation since that time, it is clear that a large part of the population is at great risk of contracting water-borne diseases.
- 7. The level of psychological damage inflicted is considerable. The number of deaths (estimated at 18,000), the number of internally displaced people (around 810,000), and other abuses resulting from the civil war have left deep psychological scars that may take a very long time to heal.

#### PROGRAMME COOPERATION, 1999-2000

- 8. The 1999 cooperation programme was implemented within a context of acute humanitarian crisis. It was adjusted to reflect the new situation by means of a revision of the country-programme management plan, carried out in March 1999. Special emphasis was given to the provision of emergency humanitarian assistance to populations in distress, especially to women and children in the country's four southern regions (Pool, Bouenza, Niari and Lekomou), while the regular programme was implemented in the rest of the country.
- 9. Immediately after the war broke out, UNICEF intervened in camps of displaced persons, distributing provisions, essential medicines and other necessary aid. As soon as the security situation allowed, essential equipment was provided to displaced persons returning home, and health centres were rehabilitated. These interventions, carried out together with government

departments, the World Health Organization (WHO), the European Union, the International Committee of the Red Cross, French Government aid, Médecins sans frontières and the International Rescue Committee, notably made it possible to halt a cholera epidemic in January 1999 and to save the lives of thousands of severely malnourished children and women.

- 10. Following the signing of the ceasefire accords, UNICEF helped the Government to organize National Immunization Days against polio, with a vitamin A supplement also being provided. All regions benefited from the three phases of the campaign, which achieved vaccination rates of 82 per cent, 94 per cent and 81 per cent respectively among the 538,000 children targeted. With the aid of joint funding from UNICEF and the European Union, the Rotary Club, WHO, the United States Agency for International Development (USAID) and the company Exxon, all displaced children were systematically immunized against measles and freed of parasites upon their return. Pacified regions were provided with the basic equipment needed to resume routine immunization activities.
- 11. In the area of education, 230 school supplies kits were distributed to primary schools in Brazzaville and Pointe Noire, and then to the pacified regions, thus benefiting 25,000 school students. UNICEF provided 5,000 benchtables and, in partnership with the communities, rehabilitated nine Brazzaville primary schools. A counselling centre for traumatized children was rehabilitated and equipped, and around 100 hundred people received training in psychotherapy. Lastly, continued efforts were made to improve the data-collection system, with the training of 236 school statisticians and preparation of the national report on Education for All.
- 12. Activities designed to monitor the situation of children and women focused on early and high-risk pregnancies and the evolution of vaccination, enrolment, and nutrition rates. Due to the lack of security, however, the data collected are often partial or not very reliable. The intense media campaign surrounding the tenth anniversary of the Convention on the Rights of the Child strengthened advocacy for the rights of children and women, and preparation of the report on the Convention was recently resumed. The Convention on the Prohibition of the Use, Stockpiling, Production and Transfer of Anti-personnel Mines and on their Destruction is currently being studied with a view to its ratification.
- 13. Two inter-agency "flash" appeals were launched, for the period from July to December 1999 and for the year 2000. At the end of March 2000, UNICEF had collected 1,115,335 dollars of the 2,000,000 dollars requested (56 per cent) for 1999, and 636,222 dollars of the 3,500,000 requested (18 per cent) for 2000. These funds, which came from donors such as the Governments of Canada, the United States, Luxembourg and Norway, helped to improve living conditions (housing, health care, nutrition) in camps of displaced persons, to provide resettlement assistance for those returning to their home regions, and to facilitate reintegration of unaccompanied and traumatized children.
- 14. Despite the highly precarious security situation, and thanks to the remarkable dedication of its staff, UNICEF never stopped providing on-site humanitarian assistance, throughout all the different crisis situations. Of the activities planned and budget in 1999, 91 per cent were implemented and 83 per cent of objectives were achieved (annual review of programmes).

15. Together with other humanitarian agencies, and with the support of the Humanitarian Assistance Coordination Office, UNICEF has conducted a vigorous advocacy campaign, based on the two conventions, with a view to promoting an approach based on the rights set out in those conventions.

## LESSONS DRAWN FROM PREVIOUS COOPERATION

- 16. The distinction between the notions of the emergency programme and the regular programme tends to become somewhat blurred in a context where UNICEF must permanently adapt to a rapidly changing situation. Whereas the areas of intervention remain the same, priorities, speed of reaction and the ability to react all change. Two complementary approaches will be used: while continued efforts will be made to assist the process of reconstruction, a high degree of emergency preparedness will also be maintained.
- 17. Partnership operations have been active and fruitful. Thanks to non-governmental organizations (NGOs) and local associations and communities, it has been possible to provide humanitarian assistance more rapidly and more directly to populations hard to reach by public transport alone. Regular dialogue among agencies and with the Government has made it possible to share information and minimize unnecessary actions.
- 18. The organization of immunization campaigns against polio (even in insecure regions) and the resumption of school activities have been key achievements in the process of national reconciliation and reconstruction. These actions have demonstrated the necessity and importance of developing networks of community development officials, with a view to ensuring that programmes become firmly established and to providing a more effective response to changes in the situation.

## RECOMMENDED PROGRAMME COOPERATION, 2001-20002

## Estimated annual expenditure

(In thousands of United States dollars)

General resources	2000	2001	<u>Total</u>
Health, water and sanitation	350	350	700
Nutrition	65	65	130
Education (ECCD-SGD)	240	240	480
Protection of children and women	70	70	140
Monitoring and evaluation	110	110	220
Cross-sectoral costs	104	104	208
Subtotal	939	939	1,878

# Supplementary funds

Health, water and sanitation	1 000	1 000	2 000
Nutrition	300	300	600
Education (ECCD-SGD)	650	650	1 300
Protection of children and women	150	150	300
Monitoring and evaluation	150	150	300
Cross-sectoral costs	<u>250</u>	250	<u>500</u>
Subtotal	2,500	2,500	<u>5,000</u>
Total	3,439	3,439	<u>6,878</u>

# Preparation of the country programme

19. The 2000-2001 programme was developed in conjunction with the Government, the agencies of the United Nations, the NGOs and the organizations of civil society, based on the recommendations of the annual reviews, the conclusions of the preparatory meetings held with governmental partners, the different merits of the various partners, and the results of a number of studies and surveys conducted during the past cycle. Implementation of the programme occurs within the context of a complex transitional phase, as the country begins to move away from war and to resume normal life. The aim of construction and rehabilitation actions is to restore the process of sustainable development.

#### Goals and objectives of the country programme

20. The programme will be directed at: (a) the promotion and monitoring of the two conventions as essential tools for the improvement of the living conditions of children and women and the promotion of a culture of peace, tolerance, equality and democracy; (b) the provision of special protection to children and women who are victims of armed conflicts and their direct and indirect consequences; and (c) the strengthening of basic social sectors, while maintaining a high degree of emergency preparedness.

# Links with national and international priorities

21. The programme takes into account national priorities as defined in the recent Economic and Social Development Programme (PDES) 2000-2002, which includes the National Health Development Plan (PNDS). The programme is also based on the selection and implementation of a minimum package of nutritional measures, which will be integrated into a national nutrition policy. Immunization activities - including the eradication of polio - will conform to the objectives and recommendations of the inter-country meetings of the epidemiological group on the immunization programme. The education programme will help the Government restore conditions for quality universal basic education, with a view to following up on the recommendations of the Dakar World Education Forum (April 2000). The planning, follow-up and evaluation programme will help the Government to evaluate and update the country's Plan of Action for Children (PANE).

#### PROGRAMME STRATEGY

- 22. The programme will emphasize a participatory approach involving a broad spectrum of partners. Restoration of democratic institutions (constitution, elections) will be used to develop advocacy, with a view to strengthening the legal foundations of these democratic rights, as well as the resources and institutions needed to guarantee them. Priority will be given to strengthening the various levels of governance, the training and mobilization of civil society, and cooperation with United Nations agencies. Assistance in the form of equipment and other inputs will continue to be provided for the rehabilitation and reopening of basic social services. Social mobilization, gender and equity questions, and the participation of beneficiaries will be integrated into the programme. In order to maximize the programme's impact, efforts will be made to achieve greater geographical convergence.
- The health, water and sanitation programme seeks to: (a) increase the vaccination rate to at least 60 per cent by 2002, in order to help control measles and wipe out neonatal tetanus; (b) ensure that all children less than five years of age receive annual immunization against poliomyelitis, in an effort to help eradicate the disease; and (c) rehabilitate and equip at least 8 per cent of destroyed or damaged health centres, with a view to ensuring that children and women have permanent access to a minimum package of quality services related to safe motherhood and the survival and growth of the child. The main interventions will be as follows: (a) at a national level, to give fresh impetus to immunization activities through the supply of vaccines, the gradual strengthening of decentralized capacities for vaccine storage and the improvement of injection safety; (b) in a targeted fashion, and in conjunction with WHO and with bilateral and multilateral cooperation agencies, to revitalize the health system in relation to the provisions of the Bamako Initiative and the rationalization of care within integrated health centres; (c) to strengthen prevention against HIV/AIDS, based on social mobilization within communities and schools. Regular resources will be allocated for the rationalization of health centres, training activities and programme support. Other resources will be used to rehabilitate and equip 50 health centres, as well as to provide support for other activities.
- 24. The water and sanitation component will aim to: (a) strengthen hygiene information, awareness-raising and education activities; and (b) create a healthy environment in schools and health facilities, especially through the installation of drinking-water outlets and appropriate latrines. At a strategic level, activities will be integrated with interventions under the health and education components. The main partners for the programme will be government technical departments, NGOs, associations and communities. General resources will be used to provide drinking-water and latrines to at least 10 health centres and 20 schools in Brazzaville and in 2 rural regions, as well as to fund training, monitoring and evaluation activities. Depending on the availability of other resources, the interventions will be gradually and rapidly expanded throughout the rest of the country.
- 25. The <u>nutrition programme</u> will help reduce the prevalence of malnutrition to less than 5 per cent and improve household food security. Interventions will focus on: (a) strengthening nutritional supervision and care of patients by

supplying the appropriate treatment foods and measuring equipment, as well as through staff training; (b) at a national level, promoting the hospital initiative "friends of babies," both at health facilities and in the community; (c) institutionalizing the provision of vitamin A supplements within minimum nutrition packets to integrated health centres and to communities; and (d) promoting household consumption of iodized salt. The main partners will be government technical departments, NGOs, associations and communities, WHO, and the World Food Programme (WFP). General resources will be used to strengthen nutritional supervision and promote micro-nutrients throughout the country. Other resources will be used to fund training activities and purchase materials, treatment products and equipment.

- The programme on education/early childhood care for survival, growth and development (ECCD-SGD) will help restore the minimum conditions necessary for increasing access to quality basic education. The main strategy will be to develop partnerships, together with the United Nations Educational, Scientific and Cultural Organization (UNESCO), the Food and Agricultural Organization (FAO), and the WFP, with the aim of transforming schools into welcoming environments. Around 80,000 children will be targeted by this strategy, and special emphasis will be placed on: (a) reintegration of excluded children (including child soldiers), with a 10 per cent reduction in the drop-out rate; (b) development of an infant early-learning programme targeting 20,000 children; (c) implementation of education for peace programmes, both at and outside school; and (d) strengthening of data-collection and data-processing capacities through the training of 100 school statisticians. With the help of general resources, aid will be provided to 15,000 children in the 2 main cities and 2 rural regions. Other resources will be used to reach 100,000 children in 2 additional cities and 6 additional rural regions.
- 27. The <u>protection of children and women</u> programme will support multifaceted actions designed to help reduce potential risks to women and children and to improve their status. The strategy essentially aims to strengthen the entire system for the protection of the rights of children and women, through the direct involvement of those concerned in the design and implementation of measures needed to guarantee and improve their physical and moral well-being. Promotion of the Convention on the Rights of the Child, the Convention on the Elimination of all Forms of Discrimination against Women and the PANE, as well as regulation of the importing of iodized salt and breast-milk substitutes will take place within a context of increased advisory and follow-up activities and with a view to integrating these actions into the country's legislative and educational provisions.
- 28. The monitoring and evaluation programme is designed to help give fresh impetus to routine data-collection activities and to the conducting of targeted studies and surveys (particularly concerning child soldiers). The Integrated Plan for Monitoring and Evaluation (PISE) will be brought up to date, with a view to taking greater account of indicators concerning the legal protection of children and women and providing data disaggregated by age, gender and district. The process already initiated with the regional office and headquarters (Evaluation, Policy and Planning Division), aimed at strengthening the use of quality indicators, will be pursued in order to evaluate more effectively the results and effectiveness of the programme. Certain indicators that cannot be

obtained by routine data collection will be taken into account within the framework of the multiple indicator cluster survey (MICS). This updated database will serve as a support tool for the preparation of the consolidated inter-agency appeal and for the development of the Common Country Assessment. Particular attention will be given to emergency preparation.

29. The <u>cross-sectoral costs</u> component will aim to improve the operational, logistical and management capacities of the overall country programme. The goal will be to ensure that objectives are attained while improving management efficiency and quality, notably by employing expertise and resources adapted to the context of the implementation of the cooperation programme. Regular resources will be used primarily to finance the costs of programme support staff, as well as the corresponding materials and equipment. Other resources will be employed to obtain complementary expertise and additional logistical support, notably with a view to increasing decentralization of activities (opening of a sub-office in Pointe Noire) and strengthening the support provided to the Government for the development of new programmes.

# Collaboration with other partners

30. The partnership initiated with the NGOs, communities and bilateral and multilateral cooperation agencies will be reinforced. UNICEF will support the inclusion in the network of local NGOs and youth groups, with a view to improving their capacities for negotiation and intervention. The interim programme will also offer an opportunity to launch a national partnership for children and women. At the same time, UNICEF will increase its support for the coordination and harmonization of future programme cycles of United Nations agencies.

## Programme management

31. The Government will coordinate the programme through the Ministry in charge of the Plan. Planning, execution and monitoring of the various projects will be managed jointly with the government departments, NGOs and associations concerned. Project and operations administrators, a well as partners, will receive training in administrative procedures, including the management of foreign-currency aid. The programme will establish regional offices, in order to facilitate access to remote regions. UNICEF will continue to develop its contacts with donors, both local (embassies, private sector) and international. The Government will be requested to make its contribution to the UNICEF budget. The 20/20 initiative will also be promoted and supported.

## **TABLE** LINKAGE OF PROGRAMME BUDGET AND STAFFING/STAFF COSTS

	PROGRAMME BUDGET				POST	ΓS <u>a</u> /					STAFF COSTS <u>b</u> /						
PROGRAMME SECTION/AREAS AND FUNDING SOURCE	RR	FOR	NOR	TOTAL	D2/L7	7 D1/L6	6 P/L5	P/L4	P/L3 F	P/L2	IP	NP G	S	TOTAL	IP	LOCAL	TOTAL
REGULAR RESOURCES:																	
HEALTH, WATER & SANITATION NUTRITION EDUCATION/ECCD-SGD	700 000 130 000 480 000			700 000 130 000 480 000	0 0 0	0 0 0	0 0 0	1 0 0	0 0 0	0 0 0	1 0 0	1 1	0 0 0	2 1 1	332 915 0 0	80 711 60 155 76 032	76 032
PROTECTION OF CHILDREN AND WOMEN MONITORING & EVALUATION CROSS-SECTORAL COSTS	140 000 220 000 208 000			140 000 220 000 208 000	0 0 0	0 0	0 0	0 0 0	0 0	0 0	0 0	1	0 0 3	0 1 4	0 0	80 711 163 019	0 0 80 711 163 019
TOTAL RR	1 878 000			1 878 000	0	0	0	1	0	0	1	5	3	9	332 915	460 628	793 543
OTHER RESOURCES:																	
HEALTH, WATER & SANITATION NUTRITION EDUCATION/ECCD-SGD		0 0 0	2 000 000 600 000 1 300 000	2 000 000 600 000 1 300 000	0 0 0	0 0 0	0 0 0	0 0 0	0 0 0	0 0 0	0 0	0	1 0 1	1 0 1	0 0	66 912 ( 37 500	0 0
PROTECTION OF CHILDREN AND WOMEN		0	300 000	300 000	0	0	0	0	0	0	0	1	0	1	0	76 032	76 032
MONITORING & EVALUATION CROSS-SECTORAL COSTS		0	300 000 500 000	300 000 500 000	0	0 0	0	0	0 0	0 0	0		0 0	0 0	0		0 0
TOTAL OR		0	5 000 000	5 000 000	0	0	0	0	0	0	0	1	2	3	0	180 444	180 444
TOTAL RR & OR	1 878 000	0	5 000 000	6 878 000	0	0	0	1	0	0	1	6	5	12	332 915	641 072	973 987
														ı	Т		
SUPPORT BUDGET		Ope Staf	rating costs	467 486	0	0	1	1	1	0	3	3	7	13	1 032 312	508 635	1 540 947
GRAND TOTAL (RR + OR + SB)					0	0	1	2	1	0	4	9 12	2	25	1 365 227	1 149 707	2 514 934
														I			
		nt progra	ımme cycle	e cycle (indicative or	ly)						4	5 9 9 12		18 25	1 365 227	1 149 707	2 514 934

RR = regular resources.
OR = other resources.
FOR = funded other resources.

NOR = new other resources. = international Professional.

NP = national Professional.
GS = General Service. SB = support budget

Each post, regardless of its funding source, supports the country programme as a whole. Excludes temporary assistance and overtime. <u>a/</u> <u>b</u>/