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Short-duration country programme document

Bolivarian Republic of Venezuela

Summary

The short-duration draft country programme document for Venezuela is presented to the Executive Board for discussion and approval. The Board is requested to approve the aggregate indicative budget of \$600,000 from regular resources, subject to the availability of funds, and \$1,890,000 in other resources, subject to the availability of specific-purpose contributions, for the year 2008.

* E/ICEF/2007/13.



The situation of children and women

1. The Bolivarian Republic of Venezuela has 27 million inhabitants; of these, 10 million, or 37 per cent, are children and adolescents. The population is predominantly urban (88.4 per cent), and is mainly concentrated in five cities (40 per cent) that occupy 1 per cent of the national territory. Some 2.2 per cent of the population is indigenous, and there is an important Afro-descendant group on which there are no statistics.

2. During the last three years, the economy has shown a sustained growth of more than 10 per cent (the highest in Latin America in 2006), mainly due to an increase in the nominal prices of crude oil. With a gross national product (GNP) of \$182 billion, the Bolivarian Republic of Venezuela is a middle-income country. The country maintains a social investment of approximately 10 per cent of its GNP and 40 per cent of national expenditure, of which 70 per cent is designated for education, a pension system and health. Even though the GNP per capita is \$5,119 (2005), poverty indexes are high (39.7 per cent, 2006) and gaps in income distribution persist, as indicated in the Gini coefficient of 0.491. The country ranks number 27 in the list of the most unequal countries of the world.

3. Since 1999, the country has been undergoing profound political, social, juridical and institutional changes. The legal framework and institutional structure of the powers of the State have been under constant review and expansion. In foreign policy, including trade, stronger relationships with countries outside Latin America and the Caribbean are being developed. Social policies have been diversified with the appearance of the Government's "social missions" – programmes that serve as alternative modalities for public management of the reduction in social gaps. Regarding children, the State has ratified the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women. During the last seven years, the country created an ample legal framework for the protection of women and children, starting in 2000, with the approval of the Organic Law for the Protection of the Child and Adolescent (*Ley Orgánica para la Protección del Niño y del Adolescente*).

4. The Bolivarian Republic of Venezuela shows good progress in achieving the Millennium Development Goals, mainly in the reduction of extreme poverty, primary education for all, access to drinking water, sanitation networks, and gender equity in education. The main challenges are the reduction of maternal mortality; prevention of HIV/AIDS; and improvement of the quality of health services and basic education, paying special attention to providing school access to adolescents. There is a need to develop information systems, and to undertake relevant and credible evaluations that highlight disparities and help to guide public management and investment in children.

5. The child mortality rate is 15.5 deaths per 1,000 live births (2005), of which 60 per cent are neonatal deaths and 11.8 per cent relate to chronic malnutrition. The prevalence of exclusive breastfeeding to 6 months is considered to be low (7 per cent in 1998). Maternal mortality has stagnated during the last several years, at a ratio of 59.9 per 100,000 live births (2005). HIV/AIDS is the sixth-highest cause of mortality among youths 15-24, yet there is no reliable information on prevalence. Of the people who receive antiretroviral treatment, 3 per cent correspond to vertical

transmission. The number of HIV cases among boys and girls 0-14 is 593 (2006), with girls making up 56.6 per cent.

6. Urban and domestic violence affects women and children. Urban violence has contributed to an increase in child mortality (among children over 10 years old), reaching acute proportions among youths and becoming the principal cause of death in male adolescents aged 15-19. In 2005, a total of 4,583 boys, girls and adolescents met a violent death, a third of them through homicide. This increase is associated with a weak protective environment, a low school enrolment among adolescents (30.6 per cent) and the fact that a quarter of adolescents and youths do not study or work. Public institutions working for the rights of women and children have drawn attention to domestic violence. During 2004 the telephone hotline of the National Women's Institute received 2,895 calls, 65 per cent of which related to domestic violence against women, and over half of which also affected children and adolescents.

The country programme, 2008

Summary budget table

<i>Programme</i>	<i>(In thousands of United States dollars)</i>		
	<i>Regular resources</i>	<i>Other resources</i>	<i>Total</i>
Implementation of child rights	245 000	940 000	1 185 000
Knowledge-generation and information	205 000	600 000	805 000
Cross-sectoral costs	150 000	350 000	500 000
Total	600 000	1 890 000	2 490 000

Reasons for this short-duration submission

7. The United Nations Development Programme (UNDP), the United Nations Population Fund (UNFPA) and UNICEF have agreed to extend the 2002-2007 cycle for one year in response to the request received from the Government to have more time to review and approve the priorities of the Common Country Assessment and United Nations Development Assistance Framework so that they will correspond to the Social and Economic Strategic Development Plan of the Nation 2008-2013, presently under preparation.

Goals, key results and strategies/relationship to national and international priorities

8. The objectives and strategies approved for the 2002-2007 cycle will be maintained, and the recommendations presented jointly with the Government during the midterm review (MTR) will be incorporated. Therefore, during 2008, the public policies approach will be highlighted, as will the generation of knowledge in strategic-intervention areas that contribute to the fulfilment of the goals and targets of the Millennium Declaration, the Millennium Development Goals and the UNICEF medium-term strategic plan, and to the implementation of the

recommendations of the Committee on the Rights of the Child and the United Nations Secretary-General's Study on Violence against Children.

Programme components

9. As recommended in the MTR, it was agreed to maintain the following programme components: implementation of the rights of the child and the generation and dissemination of knowledge.

10. The **implementation of rights of the child** component will strengthen the approach of public policies and investment in children at the national and local levels, based on human rights and gender equity, giving priority to the most excluded segments of children and adolescents in peri-urban and border areas, as well as indigenous and afro-descendant peoples. This component will be developed through two projects: integral protection and the promotion of the rights of women and children, and public policies and social investment in children.

11. The following are the expected results: (a) a child rights protection system, emphasizing prevention and care regarding violence, including for adolescents; (b) an education system that incorporates values of non-discrimination of indigenous and afro-descendant peoples; (c) a public health system that implements the strategy "trio for life" (breastfeeding, immunization and birth registration).

12. The **generation and dissemination of knowledge** component will continue to be developed in two projects: communication and social mobilization, and monitoring and evaluation. This component is centred on the situation of the child and the promotion of the rights of women and children, including the strengthening of national information systems, and monitoring and evaluation. The following are the expected results: (a) a communication and social mobilization strategy designed and implemented with the participation of strategic partners; (b) updated and available information for decision-making and for monitoring and policy evaluation, especially in education, health, teen pregnancy, HIV, child labour, violence against children and issues related to adolescents.

Major partnerships

13. Joint programmes with United Nations agencies, including UNDP, the Pan American Health Organization/World Health Organization, UNFPA, the United Nations Development Fund for Women, the Food and Agriculture Organization of the United Nations and the Joint United Nations Programme on HIV/AIDS will continue to be promoted. Partners will include universities, non-governmental organizations, civil society organizations, churches and the private sector. The Government entity in charge of the coordination of the cooperation efforts will be the Ministry of Planning and Development. Work plans will be developed and implemented with the Ministry of Education, Ministry of Health, Ministry of Culture, Ministry of Popular Participation and Social Development, Office of the Ombudsman, Supreme Court of Justice, National Assembly, Ministry of the Interior and Justice, National Council for the Rights of Children and Adolescents, National Women's Institute, National Statistics Institute and district governments and selected municipalities.