

UNITED NATIONS CHILDREN'S FUND (UNICEF)

Support to NEPAD

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Child Protection

Extensive work has been initiated in African countries to improve data collection on issues related to child protection. Databases on specific child protection issues have been developed or improved, and indicators for monitoring child protection have been developed in several countries. Disaggregated protection indicators are being included in the national *DevInfo* system.

Monitoring and reporting on child recruitment and other grave violations of children's rights has been strengthened in Burundi, Cote d'Ivoire, DRC, Somalia, and Sudan, following the submission of reports by the Secretary-General to the UN Security Council Working Group on the implementation of Resolution 1612.

Activities to follow up on the UN Study on Violence Against Children are ongoing with UNICEF support. At least seven countries in Eastern and Southern Africa region (ESAR) organized national launches of the study. 16 countries in Western and Central Africa Region (WCAR), and at least three countries in ESAR have developed plans of action to address violence against children.

Legal reform on child protection progressed in several Africa countries through new laws on child trafficking, child protection, sexual offences and domestic violence, protection of children at risk and family law on early marriages.

New data from Djibouti show a decrease in Female Genital Mutilation/Cutting (FGM/C), while in Benin, Ethiopia and Senegal, further communities and regions have abandoned the practice and/or declared themselves FGM/C-free. A new national strategy for the abandonment of FGM/C was adopted by Eritrea. In Senegal, an evaluation has been undertaken of UNICEF-supported community-led social change that has led to over 2,000 communities abandoning FGM/C.

Bilateral cooperation was enhanced between many countries within the framework of the fight against child trafficking, including efforts towards the adaptation to a national context of the UNICEF guidelines for the protection of children victims of trafficking. UNICEF support to national surveys on child labour has strengthened the evidence base in several countries. Capacity of civil society partners on the protection of children has been strengthened through courses, workshops and the development of training materials.

The progress in peace processes in Burundi and Uganda has created opportunities for the release and reintegration of large numbers of children associated with armed groups.

UNICEF helped in 2006 to demobilize and reintegrate thousands of children affected by war in Burundi, Côte d'Ivoire, Sudan and other countries. In Liberia, 92 per cent of some 10,000 demobilized children were supported through skills training, enrolment in formal education, and other means.

Direct UNICEF technical and financial support to tracing systems and reintegration programmes has led to the reunification of thousands of children separated from their families in Liberia, Sudan, Zimbabwe and other countries.

The number of countries implementing programmes to prevent the sexual abuse and exploitation of women and children, as part of emergency response, increased to 38. UNICEF has supported capacity-building on multisectoral approaches to prevent and respond to sexual violence in four countries. In Darfur, a training programme was completed for 2,736 African Union (AU) soldiers on child rights and child protection.

Many countries made progress in their legislative and policy frameworks with regard to justice for children. UNICEF has contributed to greater use of diversion and alternatives to detention for children in a number of countries, including the use of child-friendly courts and support for special interview rooms and police units sensitive to child victims of abuse.

In Ethiopia and Nigeria, UNICEF is working with the government and other partners on formulating new standards and policies for the care of vulnerable children. Lesotho and Zambia finalized national guidelines for residential care and minimum standard of care for childcare facilities.

In several countries, UNICEF and its partners are assisting the government in the design of new or modified social welfare programmes that focus on the poorest families and orphans and vulnerable children (OVC). In terms of social protection, a National Social Action Policy was validated and endorsed in Burkina Faso. UNICEF also supported the development of a social protection strategy for the provision of sustainable protection mechanisms in Ghana and the implementation of a conditional cash transfer system for OVC that also promotes access to relevant social services, especially health care and education. The National Plans of Action on OVC were validated in Guinea and Benin.

Birth registration coverage increased throughout WCAR, and 11 countries in ESAR reported on achievements towards universal registration.

Community-based actions for the protection of children were strengthened through community-based bodies and capacity building. These mechanisms are supporting expanded response to OVC, promoting increased reporting on violence and abuse of children and providing a linkage with government response structures.

Basic Education and Gender Equality

A joint position paper was published by the AU, UNECA, NEPAD and UNICEF in 2004,

entitled *the Young Face of NEPAD: Children and Young People in the New Partnership for Africa's Development*. Since the development of this position paper, UNICEF's Eastern and Southern Africa Office (ESARO) has been networking with NEPAD's senior education advisor regarding basic education issues. As a result, ESARO Education Section was invited to major NEPAD events in 2004/2005, during which NEPAD's Basic Education Programme was elaborated. In 2005, representatives of NEPAD and UNICEF met with the SADC secretariat in Gaborone to discuss modalities for SADC collaborating with UNICEF and NEPAD on basic education. The meeting established a link between the SADC secretariat, UNICEF and NEPAD on basic education. However, this link has not been broadened into an intervention, as the positioning of education within the SADC programme requires clarification due to the major changes taking place in SADC in 2005/2006.

Within NEPAD, UNICEF ESARO is also networking with other units besides education, as UNICEF is a member of the Gender Task Force of the NEPAD Secretariat and contributes to the Working Group on Gender and Education. A 60-member Gender Task Force is at the disposal of the Regional Economic Communities, the NEPAD Secretariat, the AU and its organs, including the Pan-African Parliament, to provide sector-specific gender expertise required at institutional and programmatic levels. The Gender Task Force will assist with monitoring the implementation of the AU Heads of States Declaration on Gender Equality. Through the NEPAD Advisor on Gender, Parliamentary Affairs & Civil Society Organizations (CSO), the Gender Task Force is working to link UNICEF with the Emergency unit of the NEPAD Secretariat, which is committed to supporting countries in conflict and post conflict situations. Another NEPAD directorate UNICEF is networking with is that on Information and Communication Technologies (ICT). This directorate is working on the *NEPAD e-Schools Initiative* which was launched in 2005. Four countries, that is, Uganda, Ghana, Lesotho and Kenya have one demonstration high school. This directorate works with UNICEF Education in the countries where the initiative is being demonstrated.

The partnership with NEPAD is in its infancy, and UNICEF needs to invest more time, personnel and strategic planning to accelerate and strengthen the partnership.

Health

Africa makes up just over 10% of the world's population, yet accounts for almost 50% of the world's under-five mortality. Around 5 million African children under five years of age lose their lives every year. While child mortality in the African region is slowly reducing at an average rate of 0.6% per year, African countries need to speed up this trend and reduce mortality by 8.2% annually if Millennium Development Goal (MDG) 4 (Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate) is to be achieved by 2015.

UNICEF's work on health is guided by the AU "Joint Strategic Framework for Reaching the MDGs on Child Survival in Africa" and the "UNICEF Rollout plan in Africa in achieving health related MDGs" which aims to accelerate child survival efforts within

African countries. These documents are joint UNICEF, WHO, WB and UNFPA products developed at the request of the AU and will be formally submitted for approval by the AU in 2007.

The key thrust of the AU framework (supported by UNICEF, WHO and WB) is to scale up a limited number of high-impact and low-cost interventions that could lead to up to 60% reduction in under-five mortality. These priority child survival interventions are:

- Newborn care following the life cycle approach and continuum of care;
- Infant and young child feeding, including micronutrient supplementation and deworming;
- Provision of maternal and childhood immunization and promotion of new vaccines;
- Prevention of mother-to-child transmission (PMTCT) of HIV;
- Prevention of malaria using insecticide-treated nets (ITNs) and intermittent preventive treatment of malaria (IPT);
- Management of common childhood illnesses applying the Integrated Management of Childhood Illness (IMCI) strategy;
- Management and care of HIV-exposed or infected children.

The main elements of UNICEF's work on health can be summarized as follows:

1. The immediate focus of UNICEF in sub-Saharan Africa will be on getting results for children and women by supporting countries to achieve the health-related MDGs at the national level. Building internal capacity at country, regional and global levels and becoming better at assessing, accessing and strengthening external capacity will be an urgent priority.
2. UNICEF supports strengthening the evidence base for integrated community-based approaches that support the provision of basic services and address the continuum of care from mother to child, including multi-sectoral programmes (nutrition, WASH, health and HIV, as well as education and child protection) to reduce mortality and morbidity.
3. Measuring results is critical to ensuring effective targeting of resources; UNICEF will play a greater role as a knowledge resource on the situation of women and children.
4. UNICEF will focus on building strategic partnerships and needs to be far better at leveraging resources through these partnerships in support of improved health outcomes for women and children.
5. Families and communities are key actors in the production of better health for children and women. This will require UNICEF to regain momentum in effective support to programme communication for effective behavioral change and advocacy strategies.