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Medium-term strategic plan for the period 2002-2005*Summary*

The medium-term strategic plan (MTSP) for the period 2002-2005 combines a reinforced results-based management approach and a human rights-based approach to programming. Building on the lessons learned from the implementation of the medium-term plan (MTP) for the period 1998-2001 (E/ICEF/1998/13 and Corr.1), the new plan establishes five organizational priorities, more clearly defines objectives and indicators, and strengthens the strategic use of the evaluation function. The MTSP was developed through a widespread consultation process, involving both junior and senior staff from headquarters and regional and country offices.

Chapter I outlines the role of the MTSP in the management of UNICEF and briefly describes organizational priorities. Chapter II describes a vision for the children of the world and the role of UNICEF. Chapter III analyses the global situation, describes the organizational context and outlines the lessons learned from the MTP for the period 1998-2001. A brief outline of the guiding principles used in the development of the MTSP is included in chapter IV. Chapter V describes in detail the five organizational priorities of UNICEF: girls' education, integrated early childhood development, immunization "plus", fighting HIV/AIDS, and improved protection of children from violence, exploitation, abuse and discrimination. Chapter VI outlines the strategies that UNICEF will use to pursue the organizational priorities: programme excellence; effective country programmes of cooperation; partnerships for shared success; influential information, communication and advocacy; and excellence in internal management and operations. Chapter VI also discusses the implications of the MTSP organizational priorities for country programmes of cooperation.

* E/ICEF/2001/12.



Chapter VII discusses the resource implications of the MTSP. Funding targets and strategies, which emphasize the crucial role of regular resources in maintaining the integrity of multilateral cooperation for children and in producing results for children, are also laid out in chapter VII. Chapter VIII discusses the monitoring, reporting and evaluation implications of the MTSP. For the first time, a plan is proposed for the evaluation of the MTSP. Chapter IX describes the financial medium-term strategic plan. Chapter X contains the recommendation. The annexes provide additional details on targets, indicators, core intervention areas and partnership frameworks, and on regional sub-emphases.

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Abbreviations

ADEA	Association for the Development of Education in Africa
AGEI	African Girls Education Initiative
AIDS	acquired immunodeficiency syndrome
ARI	acute respiratory infection
CCA	Common Country Assessment
CDC	Centers for Disease Control and Prevention
CPR	country programme recommendation
CSO	civil society organization
DAC	Development Assistance Committee
DfID	Department for International Development (United Kingdom)
ECD	early childhood development
EFA	education for all
FAWE	Federation of African Women Educationalists
FLS	Financial and Logistics System
FRESH	Focus Resources on Effective School Health
GAVI	Global Alliance for Vaccines and Immunization
HIB	Haemophilus influenzae type B
HIV	human immunodeficiency virus
ICC	Inter-agency Coordinating Committee
ICPD	International Conference on Population and Development
ICRC	International Committee of the Red Cross
IFRC	International Federation of the Red Cross
ILO	International Labour Organization
IMCI	Integrated Management of Childhood Illness (initiative)
IMIS	Integrated Management Information System
IMEP	Integrated Monitoring and Evaluation Plan
IOM	International Organization for Migration
MNT	maternal and neonatal tetanus
MTR	mid-term review
MTSP	medium-term strategic plan
NGO	non-governmental organization
OECD	Organisation for Economic Cooperation and Development

OMP	Office Management Plan
ORS	oral rehydration salts
PLWHA	Person living with HIV/AIDS
PPTCT	Prevention of parent-to-child transmission (of HIV/AIDS)
PROMS	Programme Management System
PRSP	Poverty Reduction Strategy Paper
RBM	Roll Back Malaria
SCF	Save the Children Fund
SIA	supplemental immunization activities
SIP	sector investment programme
SWAP	sector-wide approach
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNDAF	United Nations Development Assistance Framework
UNDP	United Nations Development Programme
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNGEI	United Nations Girls' Education Initiative
UNHCHR	Office of the United Nations High Commissioner for Human Rights
UNICEF	United Nations Children's Fund
UNHCR	Office of the United Nations High Commissioner for Refugees
VCT	voluntary counselling and testing
VCCT	voluntary and confidential counselling and testing
WFFC	World fit for children
WFP	World Food Programme
WHO	World Health Organization

I. Introduction

1. The medium-term strategic plan (MTSP) is the UNICEF corporate plan for the period 2002-2005. The MTSP provides the framework for UNICEF activities in programmes, partnerships, alliances, advocacy and internal operations at headquarters and in regional and country offices for the next four years. It serves three main functions. First, it provides an outline of the role in and contribution of UNICEF to the promotion of the draft *World fit for children* (WFFC), the final declaration of the forthcoming General Assembly Special Session on Children, for the first four years of that agenda, and for the long-term development agenda of the Millennium Declaration and the International Development Targets. Second, the MTSP describes UNICEF organizational priorities and objectives for the next four years, as well as the strategies and financial base necessary to meet those objectives. Finally, by clearly defining what UNICEF seeks to achieve and how it will achieve it, the MTSP serves as a tool of accountability for UNICEF to all its stakeholders.

2. UNICEF will play both an operational and a catalytic role in the promotion of the draft WFFC, the Millennium Declaration and the International Development Targets. Through its programmes of cooperation, the organization will directly contribute to achieving results for children. Programmes and projects for service delivery, capacity-building and empowerment are the vehicles for producing results. Through its alliances, partnerships, advocacy, monitoring, research and policy analysis at all levels, UNICEF will also influence actions of a much larger group of actors for children, including Governments, non-governmental organizations (NGOs), international organizations and private sector bodies. The MTSP describes how UNICEF will play both the operational and catalytic roles over the next four years.

3. Based on the analysis by the Secretary-General of the situation of children worldwide a decade after the World Summit for Children ("We the children: End — decade review of the follow-up to the World Summit for Children", A/S-27/3), and based on its own comparative advantage, UNICEF has identified five priority areas where it can make the biggest impact on the lives of children, in support of the Millennium Declaration, the International Development Targets and the draft WFFC: girls' education; integrated early childhood development (ECD); immunization "plus"; fighting HIV/AIDS; and improved protection of children from violence, exploitation, abuse and discrimination.

4. UNICEF will pursue these organizational priorities not only through programmes of cooperation, but also through alliances, partnerships, advocacy, monitoring, research and policy analysis at all levels. The organization will use its global presence, its country programme capacity and its voice to help change the world with children. In pursuing these priorities, UNICEF will put children at the heart of every agenda and find effective ways to ensure that children's voices are heard. Following the principle of mainstreaming emergency operations, the five organizational priorities will be pursued in both regular and emergency programmes. UNICEF will pursue these priorities in a manner consistent with the spirit and the longer-term perspective provided by the Millennium Declaration, the International Development Targets, the draft WFFC, the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women. UNICEF views the two Conventions as complementary.

5. The MTSP for the period 2002-2005 serves as an instrument of accountability for the organization to its stakeholders by strengthening its longstanding commitment to results-based management. Results must ultimately be seen as the progressive realization of the rights of the child; in this way, the MTSP combines results-based management with the more recent commitment of UNICEF to a rights-based approach to programming for children and women. Having described its organizational priorities and the objectives that it will seek to achieve, UNICEF will report systematically on results achieved against the five organizational priorities, and on the constraints faced. In the everyday practice of development cooperation, results for children are achieved through partnerships between many organizations. UNICEF will report on results for which it can be held accountable within the context of such partnerships. The annual report of the Executive Director (Part II) to the Executive Board will focus on results achieved against the five organizational priorities.

6. Achieving results, as well as continued strengthening of UNICEF internal systems to achieve those results, will be contingent in large measure on adequate growth of UNICEF income, especially regular resources. The UNICEF fund-raising target continues to be \$1.5 billion per annum by 2005, with a target of 7 per cent annual growth in regular resources income over the MTSP period. A steady real growth in regular resources income is required if UNICEF is to maintain its universal presence, build capacity in new areas and maintain its lead role as the impartial advocate for the world's children and catalyst for constructive change for and with children.

7. The MTSP has been developed based on the principles, concepts and tools endorsed by the Executive Board in the UNICEF mission statement (E/ICEF/1996/AB/L.2), the multi-year funding framework (MYFF) (E/ICEF/2000/5), the report on "Emerging issues for children in the twenty-first century" (A/AC.256/3-E/ICEF/2000/13), and the principles expected to be approved by the General Assembly in the draft WFFC. The goals of the draft WFFC are not fully finalized, but their general direction is broadly agreed to, and they correspond closely to the priorities expressed in the Millennium Declaration, the International Development Targets, the World Education Forum Framework for Action and the Declaration of Commitment of the United Nations Special Session on HIV/AIDS.

8. The MTSP was developed through a wide process of participation. In addition to the global management team and the regional management teams, three groups played central roles in its development: an inter-divisional taskforce representing all headquarters divisions and offices and chaired by the Division of Evaluation, Policy and Planning; a network of regional office focal points; and, for the first time, a sounding board of 15 country office-based staff below the level of representative.

II. The UNICEF vision

9. UNICEF is guided by a vision of the world where leaders commit to use their power and influence to assure, for every child, the rights and opportunities to grow to adulthood in dignity, security and self-fulfilment. In such a world, the best interests of the child, non-discrimination, the participation of children, and their survival and full development are the basic principles of governance. The Convention on the Rights of the Child guides law, attitudes, policies and

programmes for children. Governments, private bodies and civil society focus their efforts on achieving social and economic development and human rights for all, through striving to reach the goals of the Millennium Summit and the International Development Targets.

10. In such a world, childhood is a time of loving and playful learning. Families are assisted in their role as teachers and protectors of their children. They have the time, knowledge and commitment to foster the development of positive attitudes and behaviour in their children. Societies accept the collective responsibility to expose every child to the knowledge, skills and education needed to survive, grow and develop. This is a world where the safety and well-being of each child are priorities, where gender, religion and ethnicity are differences that enrich the world, and where children are taught to respect each person's dignity.

11. In order to achieve these aims, all sectors of society need to be committed and hold themselves accountable for taking actions on behalf of children. This should include a broad range of partners, including the entire United Nations system, Governments, international financial institutions, NGOs, religious groups, the private sector, the media, the general public, families and, not least, children themselves. This requires the mobilization of potential partners well beyond existing coalitions for children to include new and hitherto unlikely partners. Only with a broad-based and diverse partnership dedicated to the cause of children will it be possible to build — together with children — a better world.

12. UNICEF recognizes that the rights, equality and empowerment of women are particularly important in the creation of healthy families, communities and nations, and as positive models of development for girls and boys. UNICEF is therefore committed, as described in its mission statement, "to promote the equal rights of women and girls and to support their full participation in the political, social and economic development of their communities". UNICEF is the passionate driving force behind this vision and will continually strive to inspire solutions, mobilize resources and turn the spotlight on critical issues as it works with partners to make vision and principles come alive for children.

III. Context and lessons learned

A. Global context and lessons learned

13. Reviews of the implementation of the Plan of Action of the World Summit for Children, within the context of the Convention on the Rights of the Child, have been conducted over the last two years in over 135 countries, covering at least three quarters of the world's children. The Report of the Secretary-General to the General Assembly Special Session on Children ("We the children: End-decade review of the follow-up to the World Summit for Children", A/S-27/3) draws on these national end-decade reviews and other sources to produce a comprehensive overview of the situation of children 10 years after the World Summit. The end-decade reviews permit us to make comparisons and draw conclusions about the road forward. They reveal both strengths and weaknesses in international and national efforts on behalf of children, as well as opportunities and threats.

14. Substantial progress has been made over the last decade towards the goals of the World Summit for Children, especially in the reduction of under-five mortality and some forms of micronutrient deficiency, and in higher school enrolment. The Convention on the Rights of the Child has increasingly come to influence how nations, societies and individuals view and act towards their children. Ratification of the Convention is now almost universal, and the process of translating it into national legislation and administrative action is advancing. Perhaps the most significant opportunity that must be seized is the increasing acceptance of a human rights-based approach to development. The Millennium Summit Declaration, as well as the declarations of other major international conferences and special sessions of the General Assembly, have embraced the notion that social development is fundamentally about the progressive realization of human rights. For UNICEF, this adoption of the language and practice of human rights is the perfect complement to the UNICEF Executive Board adoption in 1996 of the mission statement based on the Convention on the Rights of the Child.

15. At the same time, there continue to exist severe threats to the realization of the rights of the child, and some old threats have returned to haunt children. The major goals of the World Summit have not been met at the global level, and although some goals have been achieved in some countries, most of the supporting goals have not been reached either. Progress towards the goals has often been most rapid in countries that were already better off a decade ago. Progress has also been achieved where a technical solution was available for easy and widespread use. Progress has been slower with regard to goals requiring major behavioural change or a mixture of complementary interventions. Natural and human-made disasters have wreaked havoc disproportionately among the poorest and weakest citizens. Poverty has remained persistently high, despite some progress. The financial crisis in Southeast Asia in the late 1990s demonstrated how fragile even the greatest advances in reducing poverty can be. In some countries, progress towards World Summit and other internationally agreed goals has been halted or even reversed. In parts of Africa, for example, under-five mortality and poverty have increased over the last decade, largely due to HIV/AIDS. A disturbing trend has been the widening of disparities both between and within countries.

16. Over 10 years after the World Conference on Education for All, the number of school-age children who are not in school has fallen, yet almost 120 million children, over half of them girls, are not in school. One child in four fails to complete five years of basic schooling. The poor quality of education is a major problem in many countries, and contributes to low enrolment and to children dropping out early. Many schools are not child friendly, much less gender sensitive, either in their facilities or in their practices.

17. Though important progress has been made towards the elimination of polio and maternal and neonatal tetanus (MNT), overall immunization rates have essentially stagnated over the last 10 years at around 75 per cent, and 10 million children die every year from easily preventable diseases and malnutrition. Three to five million of these deaths could be prevented by a combination of immunization and vitamin A supplementation alone. Roughly one third of all deaths of children under five are related to malnutrition, including micronutrient deficiencies; millions more lives are permanently blighted by malnutrition.

18. Policies, programmes and support to families and communities for the development of the young child are still fragmented, undermining potential synergies and complementarities. Policy makers, programme managers, fieldworkers and parents need to take an integrated view of the development of the young child. Such an integrated view of ECD would help ensure the rights and well-being of children in their earliest years, encompassing not only good quality basic services — which have been the traditional focus — but also good care practices in the family, a safe environment and supportive policies.

19. HIV/AIDS has spread rapidly over the last decade, killing 22 million people and leaving at least 13 million orphans. The HIV/AIDS pandemic now threatens the lives and well-being of children on all continents and brings with it a host of social and epidemiological evils, some of which — like tuberculosis — had been on the verge of disappearing forever. Life skills for young people, especially adolescents, are central to halting the further spread of the pandemic, as are knowledge and prevention of HIV.

20. Every year, millions of children are victims of violence, abuse and neglect, and exploitation, and are separated from their primary caregivers. The International Labour Organization (ILO) cites 250 million children working worldwide, with 50 to 60 million children under 11 years of age working in hazardous conditions. Of these, 300,000 are child soldiers. In conflicts over the past decade, more than 2 million children have been killed, more than 6 million injured or disabled, over 1 million orphaned or separated from their parents, and an additional 10 million exposed to severely traumatic experiences. A million children are said to enter the sex trade every year; over 15 million children have lost their mother or both parents to AIDS. Over 11 million children are institutionalized in prisons, schools and orphanages; an unknown number of children suffer violence and abuse within the family, in their communities and in institutions. Some 150 million children worldwide are disabled, and most face some form of discrimination and neglect, including in the exercise of their right to education.

21. The underlying causes of these violations of the rights of the child are deep-rooted and complex. Social and behavioural factors that permit such abuses tend to mirror and reinforce failures in education and other basic services, and in the justice system. Child protection often relates to deliberate harm or neglect, with most abuses being clandestine and a considerable part taking place within the family. Many abuses violate local standards but go unpunished. Others stem from traditional practices which are tacitly or overtly accepted by the surrounding society, or benefit private interests. Information on these issues is rarely collected, and may be politically sensitive.

22. Stemming from this analysis, UNICEF has identified five priorities where it is both essential to build on (or regain) the initiative generated by the World Summit for Children and the ratification of the Convention on the Rights of the Child, and where UNICEF believes it is possible to generate the political will and the supporting partnerships and alliances needed to make a difference. UNICEF will dedicate its core efforts over the next four years to promoting girls' education, integrated ECD, immunization and micronutrient interventions, HIV/AIDS prevention, and child protection.

B. Organizational context and lessons learned

23. In recent years, reform initiatives undertaken by UNICEF, the United Nations in general and Governments have improved the organization's ability to work for results. Since the approval in 1996 by the Executive Board of the mission statement, UNICEF has adopted a more holistic perspective on the survival, development and protection of children. This perspective emphasizes the importance of the conditions and support that children and their families require at critical stages of a child's life for survival, healthy growth, learning and adequate preparation for adulthood. The rights-based approach to programming for children and women has encouraged a stronger focus on disparity reduction and reaching the unreached, the most disadvantaged and the most vulnerable, and has highlighted the need for participation and sustainability. At the same time, experience has shown the benefits to children of the empowerment and equal participation of women in families and communities. A child-focused, rights-based approach, with gender at the core, recognizes that the status of women and the extent to which they are able to exercise their rights is a fundamental element of the guarantee of human rights and is essential to the achievement of the rights of children in general, and of the girl child in particular. In this context, UNICEF recognizes the need to define more clearly the results it seeks to achieve with the resources at its disposal.

24. This change in perspective complements and forms part of the overall United Nations reform initiative, which has led to greater clarity of the roles of various bodies, and has facilitated improved cooperation at headquarters and in the field. The change is also compatible with the Millennium Declaration, the International Development Targets and the declarations of other major international summits and conferences since the 1990s.

25. The medium-term plan (MTP) for the period 1998-2001, as contained in document E/ICEF/1998/13 and Corr.1, represented a significant shift towards strategic management for UNICEF. It had several drawbacks, however. It contained a statement of priorities which was applied primarily to programmes, but was not mainstreamed in the work of UNICEF as a whole. These priorities were both wide-ranging and quite loosely defined. When the annual report of the Executive Director (Part II) was reformulated in line with Executive Board decision 1999/7 of 22 January 1999 to focus on aggregate achievements against MTP priorities, these weaknesses, and the lack of clearly defined targets against which to measure progress, became more fully apparent. The need to strengthen the use of evaluation has also been evident, as has the need to reinforce the contribution of UNICEF of a child-centred perspective to global debates on economic and social policy.

26. Despite these problems, significant progress has been made, recognized by the Executive Board, in providing annual reporting with a stronger focus on results and analysis of progress and partnerships based on more systematic and analytical reporting from the country and regional levels. Experience has been gained in setting better objectives in programmes of cooperation, and in reporting selectively on lessons learned and key results, with more careful attribution among partners. UNICEF is defining and will soon implement a more strategic approach to evaluation.

27. Internal analysis of experience has reconfirmed the robustness, relevance and flexibility of the country programme as a basis for UNICEF cooperation with

programme countries, and its compatibility with the Common Country Assessment (CCA) and United Nations Development Assistance Framework (UNDAF) process and such national policy instruments as sector-wide approaches (SWAPs) (see document E/ICEF/2001/10). Streamlining of the country programme exercise is taking place to further improve these linkages. The country programme, based on the local situation analysis, will continue to be central to UNICEF work under the MTSP, guided by the organizational priorities of the plan. (The linkages between the country programme and the MTSP organizational priorities are explained in more detail in chapter VI.) Reviews of experience also underline the principle of mainstreaming emergency operations into regular programming, including the inclusion of emergency preparedness in the situation analysis and the country programme plans of operation.

IV. Guiding principles of the medium-term strategic plan

28. UNICEF must establish its organizational priorities, define objectives, define the criteria of success for its work, strive to achieve its objectives, systematically monitor progress (or the lack of it) and evaluate its work so it may learn how to maintain relevance, effectiveness and efficiency: this is results-based management. But results must be defined in terms of the sustained realization of the rights of children and women, and all actions by UNICEF at all phases of the programme process and in all sectors must focus on the respect, protection and fulfilment of the rights of children and women: this is the human rights-based approach to programming.

29. The concept of the life cycle, as elaborated in “Emerging issues for children in the twenty-first century” (E/ICEF/2000/13), implies that UNICEF should pursue three outcomes for all children:

(a) A good start to life — nurturing, care and a safe environment that enables them to survive, and be physically healthy, mentally alert, emotionally secure, socially competent and able to learn;

(b) Assurance that all children have access to and complete a good quality basic education; and

(c) For adolescents, the opportunity to develop fully their individual capacities in safe and enabling environments that empower them to participate in, and contribute to, their societies.

30. Using the life cycle of the child promotes both results-based management and the human rights-based approach to programming by identifying those crucial stages in the life of the child where interventions will have the greatest impact for child survival, growth and development. The five organizational priorities cover the phases of the life cycle of the child from before birth to adolescence (see table 1).

Table 1
Links between the life cycle and the five organizational priorities

	<i>A good start to life</i>	<i>Basic education</i>	<i>Adolescent development and participation</i>
Girls' education	<ul style="list-style-type: none"> – School readiness (social, emotional, intellectual, nutritional, health) – Educated mothers – Early gender socialization 	<ul style="list-style-type: none"> – Focus on access to and completion of quality education; child-friendly, gender-sensitive schools 	<ul style="list-style-type: none"> – A quality basic education as the foundation of adolescent development and participation – Many adolescents are in primary school
Integrated ECD	<ul style="list-style-type: none"> – Integrated ECD policies, services and practices, including early gender-sensitive socialization, are the foundation for a good start to life 	<ul style="list-style-type: none"> – School readiness (social, emotional, intellectual, nutritional, health) 	<ul style="list-style-type: none"> – Integrated ECD policies, services and practices are the foundation for development and participation in later years – Many adolescents, especially females, are “forced” or “non-voluntary” parents or caregivers to younger children
Immunization “plus”	<ul style="list-style-type: none"> – Protection from vaccine-preventable diseases and micronutrient deficiencies, with life-long benefits 	<ul style="list-style-type: none"> – Prevention of disabilities via immunization and micronutrient supplementation improves learning chances – Health-promoting schools 	<ul style="list-style-type: none"> – Prevention of disabilities via immunization and micronutrient supplementation improves chances for development and participation – MNT immunization for adolescent girls
HIV/AIDS	<ul style="list-style-type: none"> – Prevention of parent-to-child transmission of HIV 	<ul style="list-style-type: none"> – Education for HIV prevention and coping – Impact of HIV/AIDS on education systems, participation and learning 	<ul style="list-style-type: none"> – Focus on 10- to 19-year-olds in HIV prevention – Focus on development of life skills generally – Interventions with male adolescents and boys for prevention through behaviour change
Child protection	<ul style="list-style-type: none"> – Young children, especially girls, need protection from sexual and domestic violence, and from discrimination in access to services 	<ul style="list-style-type: none"> – Protection from discrimination in access to and quality of education – Education that promotes rights; child-friendly, gender-sensitive schools 	<ul style="list-style-type: none"> – Protection of adolescents from harmful forms of participation in community life, e.g., in worst forms of child labour, and from discrimination when they try to participate in community life

31. In pursuing results for children, UNICEF must always be guided by values inscribed in the Convention on the Rights of the Child, namely the survival and development of the child, the best interests of the child, non-discrimination and the right of the child to participate and be listened to, in accordance with her or his evolving capacities, and by the principles of the Convention on the Elimination of All Form of Discrimination against Women. These principles imply a commitment to peace building; poverty reduction through empowerment of women; investment in children; and disparity reduction through emphasis on reaching the most vulnerable, the most marginalized and the most deprived children and women. The right of children to participate in decisions that affect them directly, and to be listened to, in accordance with their evolving capacities, is relevant to all children, but perhaps especially to adolescent children. In a great many settings, UNICEF will promote results for children through adolescent development and participation.

32. The right of women to participate in decisions that affect them is also central to the realization of the rights of children. UNICEF will work with others to support women's participation and empowerment at the community level and within families, particularly in the most marginalized communities. UNICEF will advocate for and support programmes to end violence against women, particularly within the family, as a contribution to healthy child development and child protection.

V. Organizational priorities

33. During the MTSP for the period 2002-2005, UNICEF will focus its efforts on achieving results towards five organizational priorities:

- (a) Girls' education;
- (b) Integrated ECD;
- (c) Immunization "plus";
- (d) Fighting HIV/AIDS; and
- (e) Improved protection of children from violence, exploitation, abuse and discrimination.

34. These five priorities have been selected not only because their realization will contribute directly to the fulfilment of many rights of children, but also because their realization can leverage even greater results in terms of other rights and developmental outcomes. For example, education is not only a right of every child; its pivotal role in securing other rights and developmental outcomes, both for this and for future generations, is well documented around the globe. Achieving and sustaining results in all five organizational priorities will create a dynamic for helping families and whole societies to break the cycle of poverty and impaired human development, and thus contribute to the International Development Targets and the goals of the Millennium Declaration and the draft WFFC.

35. The five organizational priorities are also interlinked. Progress towards one can contribute to progress in one or more of the other priorities. In many cases, the same programme or activity can simultaneously promote two or more priorities. Prevention of HIV/AIDS transmission, for example, is inseparable from good education and improved child protection. Prevention of micronutrient deficiencies through immunization "plus" will contribute to better ECD and to education later in life.

Table 2

Overlapping issues in the organizational priorities**Links between girls' education and:**

<i>Integrated ECD</i>	<i>Immunization "plus"</i>	<i>HIV/AIDS</i>	<i>Child protection</i>
<ul style="list-style-type: none"> – School readiness – School hygiene/latrines 	<ul style="list-style-type: none"> – MNT vaccination of adolescent girls in schools 	<ul style="list-style-type: none"> – Focus on gender issues and empowerment of girls in decisions about sexuality, addressing male behaviour and beliefs in HIV/AIDS education – Education for HIV prevention and coping 	<ul style="list-style-type: none"> – Child-friendly, gender-sensitive schools – Education as empowerment – Education as prevention for child labour – Education as part of post-emergency recovery, including social reintegration of child soldiers and children affected by armed conflict

Links between integrated ECD and:

<i>Girls' education</i>	<i>Immunization "plus"</i>	<i>HIV/AIDS</i>	<i>Child protection</i>
<ul style="list-style-type: none"> – School readiness – School hygiene/latrines 	<ul style="list-style-type: none"> – Micronutrient deficiencies – Prevention of vaccine-preventable diseases 	<ul style="list-style-type: none"> – Prevention of parent-to-child transmission of HIV 	<ul style="list-style-type: none"> – Prevention of child abuse and neglect

Links between immunization "plus" and:

<i>Girls' education</i>	<i>Integrated ECD</i>	<i>HIV/AIDS</i>	<i>Child protection</i>
<ul style="list-style-type: none"> – MNT vaccination of adolescent girls in schools 	<ul style="list-style-type: none"> – Micronutrient deficiencies – Prevention of vaccine-preventable diseases 	<ul style="list-style-type: none"> – Injection safety 	<ul style="list-style-type: none"> – Prevention of disabilities which would give rise to need for special protection measures

Links between HIV/AIDS and:

<i>Girls' education</i>	<i>Integrated ECD</i>	<i>Immunization "plus"</i>	<i>Child protection</i>
<ul style="list-style-type: none"> – Focus on gender issues and empowerment of girls in decisions about sexuality, addressing male behaviour and beliefs in HIV/AIDS education – Education for HIV prevention and coping 	<ul style="list-style-type: none"> – Prevention of parent-to-child transmission 	<ul style="list-style-type: none"> – Injection safety 	<ul style="list-style-type: none"> – Care and protection of children orphaned or made vulnerable due to HIV/AIDS – Discrimination against PLWHA and orphans – Prevention of sexual exploitation of children, including trafficking

Links between child protection and:

<i>Girls' education</i>	<i>Integrated ECD</i>	<i>Immunization "plus"</i>	<i>HIV/AIDS</i>
<ul style="list-style-type: none"> – Child-friendly, gender-sensitive schools – Education as empowerment – Education as prevention for child labour – Education as part of post-emergency recovery, including social reintegration of child soldiers and children affected by armed conflict 	<ul style="list-style-type: none"> – Prevention of child abuse and neglect 	<ul style="list-style-type: none"> – Prevention of disabilities which would give rise to need for special protection measures 	<ul style="list-style-type: none"> – Care and protection of children orphaned or made vulnerable due to HIV/AIDS – Discrimination against PLWHA and orphans – Prevention of sexual exploitation of children, including trafficking

36. These organizational priorities have been selected not only because of their worldwide importance and potential impact on children's lives, but also because UNICEF has comparative advantages in these areas, which arise from its mandate as the world's premier organization for children and from years of experience and accumulated expertise. This is particularly the case in immunization "plus", where UNICEF has been a leading agency for two decades. Other areas of UNICEF comparative advantage include the organization's global presence; a mandate from the General Assembly as the world's voice for children; designated responsibility from the Secretary-General to be the lead agency in the United Nations Girls' Education Initiative; a clear responsibility among the UNAIDS co-sponsors for issues touching on children; and a unique position as an agency whose practical experience runs the gamut from project implementation at community level to national and international formulation of legal, economic and social policy, as well as a lead position in ensuring that essential supplies, such as vaccines, are made readily available to children.

37. The five organizational priorities will guide UNICEF regular and emergency programmes, in line with the principle of mainstreaming emergency programmes. They will also provide the focus for UNICEF alliances, partnerships, advocacy, monitoring, fund-raising, research and policy analysis activities in both programme and industrialized countries. In the latter, the 37 National Committees for UNICEF will take the lead in advocacy and alliance-building at the country level, while monitoring, research and policy analysis will be carried out through networks linking the UNICEF Innocenti Research Centre in Florence with universities and other research institutes.

38. The targets set for each organizational priority (below and in annex I) are deliberately ambitious, and UNICEF will not be able to reach these targets alone. On the contrary, reaching the targets will take the sustained efforts of many partners, and UNICEF will cooperate closely with existing partners and build new alliances. In this way, the organization has a crucial catalytic role in inspiring, stimulating and prompting others to act for and with children. In order to reach the targets of the MTSP, UNICEF must act as communicator, facilitator, researcher and policy analyst. The main partners and partnership frameworks for each organizational priority are presented in greater detail in the matrices in annex I.

A. Organizational priority number 1: girls' education

Rationale

39. Education for girls is central to the fulfilment of developmental outcomes for present and future generations of children. The social benefits of girls' education include lower infant and maternal mortality, better nourished and healthier children, increased family incomes, later age of marriage, reduced fertility, greater opportunities and life choices for women (including empowerment to protect themselves against HIV/AIDS), and greater participation of women in political, social and economic decision-making. Girls' education is an investment that serves as a way to achieve education for all children, for early childhood care and education and adolescent well-being. Girls' education provides a mechanism for families, communities and societies to escape from poverty on a massive scale. Primary education should be free and compulsory.

40. The guiding principles of the MTSP emphasize the need to target those who are most likely to be excluded or marginalized with respect to educational access, quality or achievement. Globally, and in pockets in every country, girls are disadvantaged in the education system in terms of access, quality, relevance and the treatment they receive in the classroom and schoolyard. Boys and girls can experience the same learning activity very differently, and there is need for gender analysis at every point of UNICEF work. Children experience discrimination in various other dimensions in addition to gender, such as ethnicity, language, disability and rural-urban residence. Unfortunately, when a child is female, this usually places her at a double disadvantage.

41. Especially in countries with low enrolment ratios, getting girls into schools will be a major factor in getting all children into school. Weaving together interventions that address access with those that address quality will help fulfil the need to find excluded and at-risk children, especially girls, get them into school, and ensure that, rather than drop out, they stay, learn and achieve in a safe and protective environment. Experience also shows that working towards the attainment of quality education for girls has a positive impact on educational opportunities and outcomes for boys as well as other excluded groups. Therefore, a focus on girls' education is in itself a strategy for achieving quality education for all.

UNICEF medium-term targets for the period 2002-2005

42. A long-term goal of UNICEF is that all children have access to and complete an education of good quality. The targets set forth in the MTSP are an interim step towards this goal, the goals of the Millennium Summit, and the International Development Targets. UNICEF will focus its resources in three areas: reducing the number of girls out of school, improving quality, and ensuring progress in learning achievement. Specifically:

(a) By 2005, all countries with a girls' net enrolment rate of less than 85 per cent in 2000 will have in place and implemented policies, procedures and practices that have reduced the number of out-of-school girls by at least 30 per cent;

(b) By 2005, policies, procedures and mechanisms to promote effective quality learning in child-friendly, gender-sensitive schools will be in place and implemented in at least 50 countries; and

(c) By 2005, at least 20 countries will have identified learning outcomes in literacy, numeracy and life skills, and built capacity towards ensuring gender parity in achievement in basic education.

Core interventions

43. Success in terms of access, quality and learning achievement will require greater resource allocation and political, behavioural and technical change. Interventions will focus on three main areas.

Ensuring that girls get into school

44. In particular, it will be necessary to identify excluded and at-risk girls and introduce or reintroduce them to education. While the nature and scope of interventions supported by UNICEF will depend on the local situation, typical interventions that UNICEF will support include the following:

(a) Establishing school and community mechanisms to find excluded and at-risk girls and get them into school. This may include school mapping, early childhood education, the establishment of multi-grade or cluster schools, service delivery towards the creation of a girl-friendly environment (such as having schools close to home and schools with separate latrines for girls and boys), and programmes that make schools child friendly, gender sensitive, safe, healthy and protective;

(b) Providing technical and policy assistance to Governments and communities to support increased access for those children who are hardest to reach and/or who suffer most from any kind of discrimination, including in situations of instability;

(c) Developing programmes to eliminate cultural, social and economic barriers to the education of girls. These programmes will include social mobilization activities and advocacy in favour of girls' education; policy analysis to identify and develop policy measures to overcome key barriers to educational access (e.g., the costs to families of fees, uniforms, books); and, in some cases, targeted provision of essential educational supplies;

(d) Supporting countries in the development and implementation of targeted actions to reduce the gender gap while increasing enrolment and attendance; and

(e) Assisting all countries to prepare for and respond to conflict and other crises so that affected children can fulfil their right to basic education in safe, stable and child-friendly environments. This will include rapid assessment of educational needs, provision of essential supplies and materials, support to curriculum and teacher development, community mobilization and support to the reconstruction of education systems.

Ensuring that girls stay in school

45. Depending on the local situation, UNICEF can:

(a) In cooperation with its counterparts, review the gender dimensions in education to identify key gender issues and the extent and nature of discrimination;

(b) Provide support to make education systems more gender sensitive at all levels, giving special attention to the nature of the school environments, teaching and learning processes and educational content;

(c) Build capacity, strengthen partnerships and support countries in intersectoral programmes for basic education, for example, the campaign to Focus Resources on Effective School Health (FRESH); and

(d) Continue to advocate for a comprehensive view of quality education, including support to child-friendly school initiatives within gender-sensitive education systems.

Ensuring that girls complete their basic education having acquired fundamental skills and achieved nationally predetermined outcomes in literacy, numeracy and life skills

46. Successful completion of basic education will increase the likelihood that girls will move on to the next stage of education, thereby empowering them to be active participants in society. UNICEF-supported interventions may include the following:

(a) Developing and supporting reforms that improve the learning and achievement of girls, with particular attention to the gender dimensions of quality education; and

(b) Increasing programmatic attention to the education of adolescent girls, including through addressing gender disparity in the transition from primary to the next stage of education, and from school to work.

47. Different country situations will demand different responses from UNICEF. In countries where primary school enrolment is very low, there may be an emphasis on increasing access to education. In other countries, the primary focus may well be on closing the gender gap or reducing discrimination against various social groups with low enrolment or attainment rates. In still other countries, the emphasis may be on the quality of education for those already in school. In countries that are in or just emerging from armed conflict, the emphasis may be on provision of basic school supplies and measures to re-open schools. Partnerships and advocacy at all levels in favour of girls' education are integral to achieving these aims. The United Nations Educational, Scientific and Cultural Organization (UNESCO) will be a primary partner.

48. At all levels, gender sensitization of education systems and personnel will be of paramount importance to guarantee ownership, gender mainstreaming and sustainability. Significant attention will also be paid to partnership, advocacy and mobilization at the local level, given the key role of families and communities in defining how to introduce change.

B. Organizational priority number 2: integrated early childhood development

Rationale

49. A good start to life is the foundation for ensuring children's rights. There is a well-established body of evidence that choices made and actions taken by parents and society in the earliest years of childhood have a powerful and long-lasting influence on the progress of individual children, and on the wider progress of nations. Quality care and protection in these years are key to avoiding death, disease, stunted growth, trauma, malnutrition and developmental delays, while ensuring healthy growth, self-esteem and the ability to learn. These in turn are central to school readiness, further learning, effectiveness of school-based programmes, and future ability of children to contribute as parents, economic actors and citizens. Investing in young children will bring long-term social change and sustained realization of children's rights.

50. A particular focus in ECD strategies needs to be on children under three years of age. This is the most critical period for brain development, which affects progress

in forming cognitive, language, social and emotional skills. It is the time when young children face the greatest risks to their survival, health status and emotional and physical growth. There is also need to support women's health, nutrition and psychosocial well-being, including during pregnancy and lactation, as part of a focus on women's rights and empowerment. Survival, growth and development in early childhood are strongly linked to the survival, health, education and well-being of women, as well as to their age at childbirth and their nutritional status prior to pregnancy.

UNICEF medium-term targets for the period 2002-2005

51. UNICEF will contribute to the International Development Targets and goals of the Millennium Summit by pursuing the following targets during the period of the MTSP:

(a) In all countries, support the development of comprehensive ECD policies to ensure the survival, growth and social, emotional and cognitive development of all young children, with special emphasis on children under three years of age, leading to a substantial reduction in mortality, disease burden and malnutrition and to prevention of developmental delays;

(b) In 80 to 100 countries with high child and maternal mortality and morbidity rates, and/or large internal disparities in these rates, support the implementation of comprehensive and convergent programmes to deliver nutrition, child and maternal health, water, sanitation, hygiene-related services and commodities, as well as early childhood care and early learning programmes;

(c) In all countries where birth registration is not almost universal, promote more effective birth registration systems, ensuring equitable registration rates for girls and boys, with particular focus on the registration of children in highly disadvantaged groups and families or in geographic areas with the worst social indicators;

(d) In all countries, increase the knowledge and consistent practice among families and communities of critical behaviour for the care and support of young children and pregnant and lactating women, including: infant and child feeding; psychosocial care and early learning; prevention of discrimination, including awareness of early gender socialization practices, neglect, abuse and violence against both children and women; home health and hygiene practices; prevention and appropriate treatment of common illnesses (such as diarrhoea, acute respiratory infections (ARIs) and malaria) and malnutrition; care for girls and women; and good management of water resources; and

(e) Increase participation by young children in appropriate community or group child care, incorporating health, hygiene, nutrition, psychosocial and early learning dimensions, with particular attention to children in poverty, with disabilities or affected by HIV/AIDS and conflict.

Core interventions

52. Integrated ECD is an approach to effectively coordinate all priority actions at the institutional and policy level, by facilities and within families and communities for meeting the rights of the young child. The survival, growth and development of young children depend on three main factors: the quality of family care; effective

access by families to good quality basic services, as well as to adequate livelihoods; and the wider community and policy environment that supports these.

53. The targets, core interventions and strategies for the ECD organizational priority in the MTSP build on well-established UNICEF strengths in supporting the access of families and communities to information and services that benefit young children. They also, however, reflect the need for a more comprehensive approach, which promotes and, where appropriate, directly supports actions at the institutional and policy levels, while recognizing that families and communities provide the front line of care for children. This approach seeks to strengthen family capacities to care for children, especially those who are most vulnerable. It needs to respond to the critical issues affecting ECD: gender equality; the survival, rights and status of women; the safety of the physical environment that surrounds a young child; and the protection and participation of the child and the caregiver.

54. The MTSP will support the most effective combination of both national and local interventions in five key components of ECD, focusing on the care of the child and the mother, effective access to basic services, and the community and policy environment: health; nutrition; water and environmental sanitation, including hygiene improvement; psychosocial care and early learning; and child protection. UNICEF attention and support in several of these areas will also be provided under other MTSP organizational priorities. These will cover measures for child protection, prevention of HIV transmission, immunization and micronutrient intervention, which will also contribute to the survival, growth and development of young children.

55. The five key components of ECD and the factors affecting them will be examined in each country through regular situation analyses of young children and in CCAs. The exact content of the integrated ECD programmes and UNICEF support will be defined at national or local levels, based on needs and capacities.

Care practices, knowledge and attitudes

56. Programming for an integrated approach to ECD will also need to be based on a sound understanding of current care practices, knowledge and attitudes among families and communities of how existing services are accessed and used, and of how to promote changes in behaviour where appropriate. This will be gained through situation analyses and participatory research, with the involvement of families and communities as partners. Disparities in access to basic services and barriers to their utilization, and discrimination against young children and families based on gender, disability and ethnicity must also be understood and addressed. Promoting the expanded and responsible role of men in childcare will be a key strategy in many cases, as will the promotion of the equal participation of women in household decision-making.

57. Based on this understanding of household child-care practices, service access and behaviour patterns, strategies will be tailored to support and strengthen existing care practices where appropriate, to support families in changing care practices when necessary, and to promote specific skills among families, parents, service providers and communities. Such strategies will enable informed decisions to be made by caregivers in the best interests of young children, including for good quality care, nutritional and hygiene practices, and for preventing and managing the leading child killer diseases, which globally include diarrhoea, acute respiratory

infections, malaria, measles and HIV/AIDS, with malnutrition as the major underlying factor. Strategies should reinforce positive existing household practices and also empower families to demand improved quality of basic services, including health, clean water and sanitation, and early childhood education, and to make best use of them.

Basic services and commodities

58. UNICEF cooperation under the MTSP in the 80 to 100 countries with high child and maternal mortality rates and low service access among families — and/or with large internal disparities in these rates — will support a number of core interventions at the national or district levels for the delivery of child and maternal health, nutrition, water, sanitation and hygiene-related services and commodities, as well as support to early childhood care and early learning programmes. This may include assistance to training and other forms of capacity development, micro-planning, participation, community monitoring, logistics and other aspects of delivery capacity for these services. UNICEF will build on its strengths and experience in support of basic service interventions and the availability of supplies to families, within the broader framework of an integrated approach to the needs of the young child.

The policy environment

59. At the level of national policy, UNICEF support to integrated ECD will include:

(a) Support for the review and strengthening of comprehensive national policies for ECD, covering at least the five key elements of ECD and including the development of appropriate regulations, legislation, standards and communication initiatives;

(b) Support for the further development of indicators and data collection and analysis, disaggregated by age and gender, for the monitoring of key elements of young child survival, growth and development where these are still weak (e.g., for emotional and cognitive development);

(c) Support for the documentation and evaluation of experience, using participatory methods, and the results-based assessment of different approaches and interventions for ECD, as a basis for future guidance, tools and strategies;

(d) Attention, through these national ECD policies, to ensure linkages and integration in the design and delivery of basic services in support of young children across sectors, including at local levels of government and in communities;

(e) Promotion of the inclusion in national development plans, Poverty Reduction Strategy Papers (PRSPs) and SWAPs of such key ECD elements as: standards for woman- and child-friendliness; regulations for group, foster, residential and institutional care; incorporation of cross-sectoral approaches to prevent malnutrition, disabilities, developmental delays and poor hygiene; priority attention to the most disadvantaged, including young children affected by HIV/AIDS, disabilities, conflict and emergencies; participation and empowerment of families and communities; support for changing practices that undermine children's rights; and reinforcement of good care and behavioural practices, including psychosocial care and early learning;

(f) Advocacy with counterparts and other partners for adequate levels of national and international public spending on priority programmes for the survival, development, protection and participation of young children, including basic services identified under the 20/20 Initiative, and support to livelihood enhancement and safety nets among the poorest households;

(g) Advocacy to strengthen birth registration systems with particular focus on highly disadvantaged groups, and support to systems review and partnerships for expanding the timely registration of births; and

(h) Analysis and advocacy, and support to actions to ensure affordable access by families to essential commodities and services for ECD, including basic medicines, micronutrient supplements, iodized salt, impregnated bed nets for the prevention of malaria, low-cost water and sanitation systems, and access to quality early childhood education programmes.

60. A range of communication approaches and various media will be used as a crosscutting strategy for the three dimensions of the integrated ECD approach. "Facts for Life" provides basic material for developing the substance of communication in different countries. Country-specific strategies will also promote and develop capacity in communities and appropriate behaviour for improved child care and support to families, through training and other assistance to community-based caregivers and extension workers, local group initiatives (e.g., for home visiting), and "triple A" processes of assessment, analysis and action. Support will be directed particularly to local groups, service providers and networks most likely to be effective in reaching and working with families.

61. In many countries, the Integrated Management of Childhood Illness (IMCI) initiative, the Bamako Initiative and a range of community-based health, nutrition, water and sanitation, and early childhood education programmes already provide a basis of institutional experience for these elements of an integrated approach to ECD.

C. Organizational priority number 3: immunization "plus"

Rationale

62. UNICEF is committed to the international development goals of one third reduction of the infant and under-five mortality rates by 2010, and two thirds reduction by 2015, and to the draft WFFC goals dealing with the reduction or elimination of specific diseases and nutritional deficiencies, as well as to the related goals of the Millennium Declaration and the International Development Targets. To these ends, UNICEF will continue to promote the worldwide use of affordable technologies, especially preventive health care technologies like immunization and micronutrient supplementation. Immunization and vitamin A supplementation are easily achievable, high-impact public health interventions. Most, if not all, children can be reached with these interventions, even under very difficult conditions such as emergencies. Immunization and micronutrient supplementation are excellent economic investments, contributing to better health and to poverty reduction.

63. Immunization "plus" refers to the delivery of a set of essential and cost-effective maternal and child health interventions. The exact content of this package needs to be defined at the national level and often also at local level, based on needs

and the capacity of the system to deliver the services. The absolute minimum content is safe immunization with all available cost-effective vaccines and vitamin A capsule supplementation, the latter in areas where vitamin A deficiency is a public health problem.

64. Immunization “plus” emphasizes the strengthening of health systems, sector-wide planning and coordination, with interventions in nutrition, malaria control and birth registration. Immunization “plus” also links with community-based activities to help communities and families improve child-care practices. In this way, immunization “plus” is linked to integrated ECD.

65. Sustaining high levels of immunization requires a strong health care system able to provide quality and affordable services on a regular basis to all segments of the population. Where necessary, however, immunization campaigns may supplement (but not replace) routine immunization services. Such campaigns might be needed, for example, to control disease outbreaks or to accelerate the eradication of a disease.

UNICEF medium-term targets for the period 2002-2005

66. The following targets reflect UNICEF core commitments and competencies to support the achievement of international goals:

(a) By 2003, every UNICEF-assisted country will have a multi-year plan outlining required activities and resources and will monitor its implementation and resource mobilization using Inter-agency Coordinating Committee (ICC) or equivalent mechanism. By 2005 the following goals will be achieved:

- 80 per cent immunization coverage in every district for each antigen in at least 80 per cent of countries, in a sustainable way;
- Global certification of polio eradication;
- Measles mortality reduction by half;
- Elimination of maternal and neonatal tetanus;
- Of those countries where vitamin A deficiency is a public health problem, increase by 100 per cent the number of countries achieving 70 per cent coverage of children under the age of 5 with vitamin A supplements twice annually; and
- Maximization of safety of immunization injections in all UNICEF-assisted countries;

(b) Ensure global vaccine and vitamin A supply security, specifically:

- Sustaining an uninterrupted, long-term supply to low-income countries through reliable, long-term forecasting and secure, stable funding;
- Maximizing safety of immunization injections in all UNICEF-assisted countries;

(c) Affirm immunization as a global public health service and as a requirement for children to attain their right to health, and ensure by 2003 that every UNICEF-assisted country is implementing communication strategies to increase and

sustain demand, as well as government, health care community and civil society support for immunization “plus” services; and

(d) By 2003, every UNICEF-assisted country will have identified populations not reached by immunization “plus” services, including the urban poor and populations with no or very limited access to health services, and will have started implementing strategies, including communication, to reach them with an appropriate package of essential life-saving interventions. In conflict or emergency areas, UNICEF will ensure, as a minimum, timely and safe provision of measles vaccine and vitamin A supplements.

Core interventions

67. UNICEF support to immunization “plus” will be coordinated at global, regional and country levels with partners in the Global Alliance for Vaccines and Immunization (GAVI) and the Vitamin A Global Initiative. Especially in the field of programme development and country support, a strong partnership with the World Health Organization (WHO) is essential.

68. To support organization-wide action to reach immunization “plus” targets, the main focus at global and regional levels will be to: (a) develop joint strategies with partners; (b) provide programme guidance to country offices; (c) monitor and evaluate performance and quality of programmes and disseminate best practices; (d) work with country offices, WHO, donors, the vaccine industry and other partners to obtain accurate vaccine forecasts, improve timeliness of funding from Governments and donors, and ensure an uninterrupted flow of vaccines and vitamin A to low-income countries; (e) advocate the need to expand and sustain support to immunization programmes; and (f) assist country programmes to mobilize resources for immunization “plus”. The core interventions of country programmes are as follows.

Support sustainable immunization services, including vitamin A supplementation

69. The highest priority is to ensure sustainable immunization services that regularly reach all children with all appropriate vaccines and vitamin A supplements, as part of the overall commitment to strengthen primary health care systems.

70. At national level:

(a) Strengthen government capacity to develop quality multi-year plans and annual work plans (in which UNICEF support will be included) that respond to local needs and national priorities;

(b) Monitor implementation of immunization “plus” by reinforcing ICC or an equivalent government-led coordination mechanism and using a set of standardized performance indicators (to measure results, quality and disparity reduction);

(c) Ensure that adequate investment in immunization and vitamin A supplementation is made, by advocating increased government budgetary allocations (e.g., by expanding the Vaccine Independence Initiative (VII) or through debt relief) and longer-term commitments from donors when external support is needed;

(d) Create and sustain demand for immunization services and vitamin A supplementation;

(e) Ensure that immunization “plus” services are managed in line with nationally agreed SWAPs and reformed health systems and contribute to delivery of basic health services. Performance and quality of functions essential to immunization programmes should be monitored;

(f) Assist Governments in identifying and mapping population groups not reached by immunization services, and design and monitor ways to reach them;

(g) Improve vaccine and vitamin A capsule management to reduce wastage, avoid stock-outs and enable better forecasting. The quality and performance of the cold chain at all levels should also be monitored;

(h) Improve injection safety through introduction of auto-disable syringes in all countries by 2003 (WHO/UNICEF/United Nations Population Fund (UNFPA)/International Federation of the Red Cross (IFRC) statement on injection safety), and support their correct use and safe disposal;

(i) Advocate the introduction of appropriate new vaccines, in particular vaccines against hepatitis B, *Haemophilus influenzae* type B (HIB) and yellow fever;

(j) Promote birth registration to create a platform for reaching all children, and maintain a system of follow-up, including reduction in the number of drop-outs;

(k) Advocate and provide technical support to achieve sustained, adequate vitamin A and other micronutrient intake, either through supplementation or through food fortification.

71. At subnational level:

(a) Strengthen capacity of local governments and communities to manage and monitor delivery of expanded immunization “plus” services using an appropriate mix of service delivery activities, including identification of reasons for low coverage, use of surveillance data to target interventions, and micro-planning activities by local and district teams;

(b) Assist in strengthening health worker skills (interpersonal communication and health service-related skills, gender sensitivity) through relevant supportive interventions, including training, capacity and competency development, and supervision;

(c) Support innovative mechanisms to bring immunization and other health and nutrition services to hard-to-reach communities; and

(d) Seek operational linkages with other programmes and community-based activities (e.g., IMCI, Roll Back Malaria (RBM), birth registration) to promote appropriate child care practices, increase demand for immunization and maximize delivery of services.

Accelerate disease control to reduce child mortality

72. While services that regularly reach every child and woman form the backbone of controlling vaccine-preventable diseases, supplementary activities will be necessary to prevent outbreaks and rapidly decrease mortality. For all accelerated

disease control activities, UNICEF will ensure that they are in line with national priorities; are included and coordinated within the framework of multi-year plans for immunization “plus” and ICC consultation; contribute to strengthening of regular services; make use of interventions that maximize impact on long-term child survival; combine interventions whenever desirable and possible, especially vitamin A supplementation; ensure communication and social mobilization is undertaken and supportive of all immunization “plus” interventions; and make special provision for the safety and quality of interventions. The following are specific supplemental interventions for accelerated disease control and eradication.

73. *Polio eradication.* At the global level, UNICEF will monitor global vaccine availability and, in consultation with WHO and vaccine suppliers worldwide, ensure that there is sufficient vaccine supply to meet the goal of polio eradication. UNICEF will support advocacy and programme communication, micro-planning and logistics for national immunization days. In all high-risk countries and eight polio-endemic countries (Afghanistan, Angola, the Democratic Republic of Congo, Ethiopia, Nigeria, Pakistan, Somalia and the Sudan), UNICEF will work to ensure there are sufficient financial and human resources to achieve polio eradication. Since many of these countries are in or just emerging from situations of armed conflict, measures such as the negotiation of humanitarian ceasefires may be necessary to reach all children.

74. *Maternal and neonatal tetanus elimination.* In countries where MNT has not yet been eliminated, UNICEF, in close collaboration with its partners, will assist in the development of national MNT elimination plans within the context of overall health plans, support high-risk districts in developing micro-plans for supplemental immunization activities and for strengthening routine services, and ensure the quality, including safety, of supplemental immunization activities. Clean birthing practices will also be promoted, particularly in high-risk districts. UNICEF will assist WHO in monitoring progress towards MNT elimination.

75. *Measles mortality reduction.* In countries where measles mortality is high, and with a focus on the 20 countries accounting for roughly 85 per cent of the world’s measles mortality, UNICEF will support the development and implementation of plans for rapid measles mortality reduction, as part of their overall immunization service development plan. In the case of measles outbreaks, UNICEF will recommend and support vitamin A capsule supplementation of children under five in affected areas. In emergencies, UNICEF will ensure that children are protected against measles and provided with vitamin A supplements.

76. *Other vaccine-preventable diseases.* UNICEF will support activities to reduce vaccine-preventable diseases in accordance with national and regional priorities, such as yellow fever and epidemic meningitis emergency preparedness and control activities in Africa. Headquarters and regional office staff will participate in international standing committees on such diseases.

Immunization and vitamin A in emergencies

77. During emergencies, routine immunization services may become disrupted, leaving the youngest and most vulnerable children unprotected. This is especially true if population displacement occurs. In addition, emergencies have a disproportionate effect on disadvantaged population groups, whose pre-emergency vaccination rates and nutritional status are often below the national average. Thus,

ensuring the provision of appropriate immunization and vitamin A supplementation services is one of the core commitments of UNICEF during emergencies. Immunizing women of childbearing age against tetanus is also important in such conditions. UNICEF will work to re-establish routine immunization services in line with national protocols as quickly as possible after the situation stabilizes.

D. Organizational priority number 4: fighting HIV/AIDS

Rationale

78. HIV/AIDS has emerged as the single most important threat to the fulfilment of children's and women's rights in sub-Saharan Africa, and increasingly in other regions of the world. Even regions where prevalence is still relatively low have millions of infected and affected people. The history of the pandemic indicates that, once a relatively low level of prevalence is reached (around 2 per cent), the number of people infected with HIV is likely to grow rapidly. No region is safe. The HIV/AIDS pandemic exacerbates many of the interlocking problems that affect children, including poverty, malnutrition, discrimination, inadequate access to basic social services, armed conflict, gender inequities and the sexual exploitation of girls and women. The pandemic also depletes and stretches capacities at all levels — within government services, communities and families — which are key to ensuring the protection and fulfilment of children's rights. The rationale for an aggressive response to HIV/AIDS is based not only on an appreciation of the threat that HIV/AIDS constitutes to children, but also on the recognition that HIV infection is preventable and that effective technologies and interventions exist to halt the epidemic and provide care, protection and support for those affected and infected. The challenge in the medium term is to mobilize the leadership, commitment, popular participation and resources.

UNICEF medium-term targets for the period 2002-2005

79. Contributing to the achievement of the commitments agreed at the United Nations Special Session on HIV/AIDS, the medium-term aim of UNICEF is to "support and strengthen the capacities of individuals, families, communities and nations to prevent HIV infection and ensure protection and care for children and young people infected and affected by HIV and AIDS". More specifically, UNICEF will support actions to: (a) prevent new infections among young people; (b) prevent parent-to-child transmission of the HIV virus; (c) expand access to care and support for children and their families living with HIV and AIDS; and (d) expand care, protection and support for children orphaned or made vulnerable by HIV and AIDS. Seeking these results for children, UNICEF will intensify its advocacy and programming efforts to ensure the achievement of the following medium-term objectives:

(a) By 2005, ensure that all UNICEF country programmes have conducted a gender- and age-disaggregated assessment and analysis of the HIV/AIDS situation and its actual or potential impacts on children and young people, and have developed country programme strategies and actions to respond to HIV and AIDS, guided by the global strategy framework;

(b) By 2005, ensure that national policies and strategies have been approved and action plans are being implemented to reduce the risk and vulnerability of young

people, with special attention to the vulnerability of young girls and the involvement of male adolescents in prevention of HIV infection, in countries with emerging, concentrated and generalized epidemics;

(c) By 2005, ensure that national policies, strategies and action plans are under implementation to prevent parent-to-child transmission of HIV in all countries affected by HIV/AIDS; and

(d) By 2005, ensure that national policies, strategies and action plans are developed and implemented to ensure protection and care for children orphaned or made vulnerable by HIV/AIDS in all countries affected by HIV/AIDS.

Core interventions

80. Global mobilization and regional and country-level action will be focused on intensifying programming in four key areas.

Preventing HIV infection among young people

81. Contributing to the achievement of the International Conference on Population and Development (ICDP)+5 goal of ensuring that, by 2005, 90 per cent of young men and women aged 15 to 24 have access to the information, education and services necessary to develop the life skills required to reduce their vulnerability to HIV infection, UNICEF supports actions to:

(a) Break the silence surrounding HIV and AIDS, address stigma and discrimination, and build participation in the response to HIV and AIDS;

(b) Ensure that all children and young people are informed about HIV/AIDS and have life skills learning opportunities to reduce their vulnerability and enable them to avoid risky behaviour;

(c) Promote and expand access to youth-friendly, gender-sensitive health services to enable young people's access to confidential HIV testing and counselling, to information, education and counselling, and to sexual and reproductive health services, including access to condoms and the treatment of sexually transmitted diseases;

(d) Scale up and sustain communication and social mobilization initiatives promoting HIV/AIDS awareness and healthy lifestyles, encourage intergenerational communication, and promote peer and adult solidarity, respect and support for young people;

(e) Increase the proportion of young girls staying in school, and strengthen the capacity of schools to respond to the HIV/AIDS pandemic;

(f) Reduce the vulnerability of children and young people, especially girls, at particularly high risk of HIV infection, e.g., street children, injecting drug users, sexually exploited children, children in prisons and institutions, and children and young people living in contexts of violence and conflict;

(g) Empower women and girls to protect themselves from HIV infection, promote responsible male partnership and participation, and address the gender inequities, violence, discrimination and unequal power relations that fuel the epidemic; and

(h) Ensure that young people are central to planning, implementation and monitoring of actions which involve and affect them.

82. The prevention of HIV infection among young people, by reducing their vulnerability and risk to HIV infection, will form the core of the UNICEF global response to the HIV/AIDS pandemic and will be a priority in all regions.

Preventing parent-to-child transmission of HIV

83. Guided by the United Nations Special Session on HIV/AIDS Declaration of Commitment to reduce the proportion of infants infected with HIV by 20 per cent by 2005, UNICEF supports actions to:

- (a) Prevent HIV infection among women of childbearing age;
- (b) Strengthen family and community support for women and their partners to prevent HIV infection and access services to prevent parent-to-child transmission;
- (c) Expand access to Voluntary and Confidential Counselling and Testing (VCCT) to enable pregnant women and their partners to know their status and be supported in decisions related to their own and their child's health;
- (d) Improve antenatal care to assure the good health and nutritional well-being of women and to ensure safe delivery;
- (e) Increase access and use of anti-retroviral drugs for the prevention of vertical transmission of HIV;
- (f) Provide counselling and advice for the appropriate feeding of infants born to HIV-positive mothers; and
- (g) Improve the health and nutritional status and well-being of parents and infants living with HIV/AIDS.

84. The prevention of parent-to-child transmission of HIV will be a particular concern in those regions and countries where HIV prevalence is already high.

Providing care for children and parents living with HIV and AIDS

85. UNICEF will support actions to expand care and support for children, young people and parents living with HIV/AIDS through:

- (a) Strengthening and better integrating: the care and support for persons living with HIV/AIDS components within current health system strengthening initiatives, especially the IMCI initiative; nutritional support programmes; youth friendly health services; and prenatal and postnatal care services (including prevention of parent-to-child transmission of HIV/AIDS) for women and their partners;
- (b) Facilitating country access to essential drugs and supplies required for identifying and monitoring HIV status and managing AIDS; and
- (c) Strengthening home-based care programmes, nutritional and psychosocial support and family skills in the care and support for HIV-positive children and young people.

86. The care for children, young people and parents living with HIV and AIDS will be a particular concern in those regions and countries where HIV prevalence is already high.

Ensuring protection, care and support for orphans and children in families made vulnerable by HIV/AIDS

87. Seeking to ensure that all children realize their right to grow up in caring, protective families, or family-like environments, and to promote alternative care solutions that are guided by the best interests of the child, UNICEF will, depending on the local situation, support actions to:

(a) Introduce policies and legislation to define standards of protection and care for orphans and vulnerable children based on the best interests of each child and their rights to family life, i.e., fostering and adoption, inheritance and property rights, and community-based care; and ensure that children's rights to a family, or a family-like environment, are fulfilled, including developing ways and means to ensure that recourse to institutions is a last resort, a temporary/transitional form of care until a family environment is found;

(b) Ensure access to essential quality social services for children (health, nutrition, education, welfare and information); and ensure that orphans and children affected by HIV/AIDS are treated on an equal basis with other children;

(c) Strengthen and support community capacity to identify and monitor vulnerable households and to provide for orphans and vulnerable children in a supportive environment under the care and protection of a responsible adult, i.e., community-based vulnerability monitoring, leadership orientation and community facilitation, support for community initiatives, and home-based care and support; and

(d) Ensure special measures to protect orphans and vulnerable children from violence, abuse, exploitation and discrimination.

88. The protection, care and support for orphans and children in families made vulnerable by HIV/AIDS will be a particular concern in those countries where HIV prevalence is already high.

89. The principal vehicle of UNICEF for supporting the fight against HIV/AIDS is the country programme. At country office level, UNICEF actions will include some or all of the following:

(a) Support to situation analyses and policy studies, including a gender perspective, to deepen understanding of the factors driving the epidemic, their consequences and opportunities for action;

(b) Support to advocacy to mobilize understanding, commitment and action;

(c) Improvement of the quality and use of information in designing, monitoring and reporting on the response to HIV/AIDS;

(d) Support for the establishment of policies, standards and legislation to enable an expanded response;

(e) Strengthening of essential services (health, nutrition, education, welfare, information and community facilitation);

(f) Developing information, communication and social mobilization interventions to achieve the targets for prevention, care and support;

(g) Developing partnerships with non-governmental and civil society partners to support community-based action; and

(h) Ensuring that local actors have access to state-of-the-art information on research and scientific developments, programmatic and technical guidance, and information on operational experiences, including best practices.

90. At the regional and global levels, emphasis will be placed on advocacy, the development of programming and technical guidance, partnership development, resource mobilization, knowledge acquisition and networking, and staff development.

E. Organizational priority number 5: improved protection of children from violence, abuse, exploitation and discrimination

Rationale

91. Protection is a universal imperative, integral to the survival and development of children. Violence, abuse and neglect, exploitation and discrimination are a threat throughout the life cycle of children and an obstacle to their growth and development. In the past, UNICEF country programmes of cooperation have tended to respond to child protection issues through programmes that reached a relatively small number of children. The challenge now is to develop programme interventions that can be taken to scale, including advocacy for legal and social policy reform. This will have implications for the way UNICEF plans and designs child protection programmes.

92. The focus of this MTSP priority is to further build UNICEF capacity to consistently respond to child protection issues. Country offices will incorporate these issues in their country programmes and at the same time mainstream child protection concerns within each programmatic area. The ultimate impact — though not necessarily within the span of this MTSP — will be a decrease in the incidence of violence against children, the elimination of the worst forms of child labour, the provision of family and community-based care for all children without primary caregivers, and increased protection for children in armed conflict. Children without primary caregivers include those orphaned by HIV/AIDS and other causes, separated children in unstable environments, and institutionalized children, including children in detention. Children who have been trafficked or involved in child labour may also lack primary caregivers. Discrimination based on race, colour, sex, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status makes children more vulnerable to violence, abuse, neglect and exploitation. Combating discrimination is inherent in all UNICEF work. UNICEF will also broaden its knowledge base of child protection issues in countries where it does not have programmes of cooperation, in full consultation with National Committees.

UNICEF medium-term targets for the period 2002-2005

93. By the end of the MTSP period, every UNICEF country office will have a solid knowledge of the child protection situation. This will inform programming,

which includes the integration of child protection concerns within national policies, laws, regulations and services, in the medium and long term. To these ends, UNICEF will pursue the following targets in this MTSP period:

(a) Identify indicators to document and analyse the impact on children of violence (including gender-related violence and armed conflict), abuse, neglect, exploitation, absence of primary caregivers, and discrimination affecting children as a basis for programmatic interventions;

(b) Work with Governments to adopt or revise national standards on the protection of children deprived of their liberty or in foster, residential and institutional care, in conformity with international standards;

(c) Support countries to take practical and legal measures towards the elimination of child trafficking, the sexual exploitation of children, forced and bonded child labour, and the use of children in armed conflict; and

(d) Develop, fund and implement interventions (including research and communication for behaviour change) for the reduction of physical and psychological violence against children, whether in the family, the community, in schools and other institutions, or in the form of harmful traditional practices.

Core interventions

94. Child protection means addressing and preventing violence, abuse and neglect, exploitation and discrimination affecting children. Violence and abuse issues include physical, sexual and psychological violence against children within the family, in schools, in communities and in state and non-state institutions; gender-related violence and female genital mutilation; children affected by armed conflict; and children in conflict with the law. In the area of exploitation of children, UNICEF will concentrate its efforts on the worst forms of child labour, which go beyond economic exploitation to forced labour, trafficking, recruitment for armed conflict, prostitution and pornography, hazardous work and illicit activities like drug trafficking.

Ensuring a solid knowledge base to inform programme interventions, and using it to “break the silence”

95. Child protection information needs to be systematically gathered to ensure effective programming. To that end, by 2005, in each country, UNICEF will have solid knowledge of the child protection situation, which will inform programmes to integrate child protection concerns within national policies, laws, regulations and actions, in the short, medium and long term. UNICEF will build its capacity, and that of its counterparts, to establish and maintain effective national, local and community-based systems to monitor critical child protection issues. These systems will raise awareness of families, communities and authorities and empower them to prevent abuses. As one major intervention, by 2005, a global overview of violence against children, based on national reviews, will be prepared.

Promoting, advocating and supporting the implementation of laws, policies and programmes that protect children from violence, abuse and neglect, exploitation and discrimination

96. Based on a review of existing laws and regulations to be carried out with its governmental and non-governmental partners, UNICEF will advocate that these laws and regulations are compatible with the Convention on the Rights of the Child, the Convention on the Elimination of All Forms of Discrimination against Women and other relevant international standards. UNICEF will promote the design and implementation of policies and the commitment of government to improve the protection of children and women.

Preventing violence, abuse and neglect, exploitation and discrimination of children

97. UNICEF will seek primarily to prevent the occurrence of violence, abuse and neglect, exploitation of and discrimination against children. However, parents, families or other primary caregivers form the first line of protection for children. Their capacity to do so should be supported while ensuring that protective family-based or community-based care for children without primary caregivers is promoted and supported.

Identifying and implementing programme interventions that will stop the violence, abuse and neglect, exploitation and discrimination and that will mitigate the impact of those violations on children

98. UNICEF will advocate and support programme interventions aimed at stopping the violence, abuse and neglect, exploitation and discrimination of children. UNICEF will identify and implement recovery and reintegration programmes for those affected.

VI. Strategies for achieving the organizational priorities

99. UNICEF will pursue the five organizational priorities at country, regional and headquarters locations, using five broad strategies:

- (a) Programme excellence;
- (b) Effective country programmes of cooperation;
- (c) Partnerships for shared success;
- (d) Influential information, communication and advocacy; and
- (e) Excellence in internal management and operations.

100. Detailed strategies will be further developed by offices based on local situations and the offices' functions and responsibilities.

A. Programme excellence

101. Programme excellence in UNICEF combines results-based management with the rights-based approach to programming. The aim is to make optimal use of

UNICEF human, financial, information and physical resources to improve the lives of children in a sustained and measurable manner. UNICEF will pursue programme excellence at country, regional and global levels as a way of pursuing the five organizational priorities.

Rights-based approach to programming

102. The rights-based approach to programming will guide the development and implementation of UNICEF country programmes of cooperation. This approach entails the application of child and human rights principles, such as universality and non-discrimination, the best interests of the child, indivisibility and interdependence of rights, to all areas of programming for children and women. UNICEF will expose and help rectify disparities and all forms of discrimination against children and women. It will identify key issues of exclusion and disparity as central concerns for advocacy and policy dialogues. Using the rights-based approach to programming will involve the deployment of recently developed analysis tools included in the most recent Programme Policy and Procedure Manual. UNICEF interventions will focus on disadvantaged populations and children and adolescents at risk.

103. Gender concerns will be mainstreamed throughout the country programmes with a focus on activities to empower girls and women. In addition, UNICEF will advocate for legal reforms and adoption of policies and programmes that will raise the status of girls and women both in the family and in society.

104. An important component of rights-based programming is the right to participation. Over the years, UNICEF has gained experience in participatory community development programmes, which have great impact and lead to empowerment and sustainability. Community-owned, managed and monitored systems ensure informed decision-making and accountability. The promotion and facilitation of participation will continue to be an essential component of country programme strategies. UNICEF will also promote participation of children, according to their age and capacities, in development programmes, as well as the participation of women. Participation of children will be sought in the planning and implementation of UNICEF-supported programmes.

Results-based management

105. Results-based management requires that the organization establish clear objectives, define the expected results at the outset, agree on performance indicators, and allocate its scarce resources — human, financial, information and supplies — towards the achievement of those objectives. UNICEF will monitor and review progress regularly, make timely readjustments when needed, and share best practices among countries. All these steps are needed to achieve results for children and women. These steps are required whether one is talking of the UNICEF operational role in programmes and projects or of its catalytic role in inspiring and promoting the actions of others on behalf of children.

106. The key strategy for a broad-based strengthening of UNICEF capacity to advance its performance — towards the organizational priorities and in all of its actions — is to ensure that effective results-based management practices function throughout the organization. Based on assessments of recent experiences with results-based management, UNICEF will focus on two core elements that have proven effective:

(a) *Clearly defined annual objectives.* Building on the technical guidance introduced during the MTP for the period 1998-2001, UNICEF will ensure that staff are given opportunities to develop their capacities and competencies in the setting of objectives. Regional offices will continue to support country and area offices in defining clear and realistic annual objectives to articulate the advances that will be made towards overall priorities; and

(b) *Timely awareness of performance status.* Increased awareness of operational and programme performance will be advanced through training in the generation of Programme Manager System (PROMS)-based management reports, broadening the application of quality assurance monitoring practices developed by some offices and regions during the 1998-2001 MTP, and through the advances in programme monitoring and evaluation described in chapter VIII.

107. Programme excellence demands that UNICEF seek to achieve improved protection, respect and fulfilment of the rights of the child, in a sustained and measurable fashion. One pitfall in results-based management is that organizations sometimes seek to achieve visible results in the short run, while ignoring such issues as participation, consensus-building and sustainability, which are essential for sustained achievement of results in the medium-to-long term. UNICEF must pursue its objectives with a long-term perspective in mind.

B. Effective country programmes of cooperation

108. The country programme of cooperation remains at the core of UNICEF work and will be the primary means of pursuing the five organizational priorities of the MTSP. When preparing new country programmes of cooperation, UNICEF country teams and partners will review the five organizational priorities in depth as part of the ongoing situation analysis of children and women, and in the wider context of the CCA. Based on this, UNICEF will discuss with the Government its most appropriate role and form of cooperation for each organizational priority. These discussions will take into account the nature and severity of problems affecting children in each area, as well as the rights and role of women, UNICEF available resources and organizational experience, national policies and priorities, the goals of the UNDAF, and the expected contributions of United Nations, bilateral and international partners. Early warning, vulnerability analysis and emergency preparedness will form part of the country programme exercise.

109. A strategic results matrix containing specific targets and strategies relating to the five organizational priorities, and any additional priorities identified and agreed with partners through the country programming process, will be instituted at country level in 2002 and adopted as part of country programme recommendations in 2003.

110. Country programmes of cooperation approved by the Executive Board before the launch of the MTSP will include in their mid-term reviews (MTRs) consideration of the situation of children in each of the MTSP priority areas. Where appropriate, the review process will consider mid-term modifications to the programme of cooperation to strengthen attention to the MTSP priorities.

111. Country programmes are expected to broadly reflect the organizational priorities, while responding to specific issues affecting children in the country. The MTSP will also guide the UNICEF biennium support budget based on Office

Management Plans (OMPs). The 7 per cent regular resources set-aside fund will be used to further strengthen programme cooperation in organizational priority areas, where needed.

112. The MTSP will also guide the development of biennial OMPs in regional offices and at headquarters. Regional offices have a critical role in providing technical support to country offices and oversight of their performance. Regional office capacity to fulfil their accountabilities in these areas will be addressed in their OMPs and through the budget process. Improvements in internal management and operations in country offices will be reflected in country programme and annual management plans. All UNICEF regional offices have designed their budgets and planned activities for the 2002-2003 biennium taking fully into account the five organizational priorities. Likewise, a number of country programmes to be submitted for approval to the Executive Board defined their objectives and goals around the five organizational priorities.

C. Partnerships for shared success

113. UNICEF can achieve greatest advances by working closely and effectively with partners. Partnerships allow UNICEF to gain greater leverage from the resources entrusted to it, and thus facilitate progress towards the five organizational priorities. With its partners in the Global Movement for Children, UNICEF will work to create a world where every child's right to dignity, security and self-fulfilment is achieved. UNICEF will work to broaden partnerships and deepen its cooperation with national and international organizations, United Nations agencies, bilateral agencies, civil society organizations, community-based organizations, local authorities, the private sector, cultural and opinion leaders, the media, communities, and children and young people themselves, as agents of change.

114. In industrialized countries, the 37 National Committees for UNICEF will take the lead in developing partnerships with the private sector and civil society, in order to raise funds for UNICEF programmes and advocate for children's rights in both their own countries and elsewhere. The National Committees act as the voice of UNICEF, working alongside other child rights organizations, Governments and the media to raise awareness of children's issues and to campaign on important areas of concern.

115. In programme countries, UNICEF will build partnerships through the country programme of cooperation to achieve results for children. UNICEF will promote analysis and support goals relating to the rights of children and women within the CCA and UNDAF, and continue its engagement in SWAPs and in policy discussions through such national development frameworks as PRSPs.

116. Both globally and at country level, UNICEF will collaborate with Governments and partners in the country through:

- (a) Development of alliances capitalizing on the comparative advantages of individual partners so that the partnership has influence and achieves results far beyond the capabilities of the individual partners;
- (b) Promotion of cost-effective interventions for scaling up that are related to MTSP priorities, for example, advocating for increased capacities in the private

sector for food fortification and commercialization of insecticide-impregnated bed nets;

(c) Joint advocacy with UNICEF National Committees and others to advance common objectives within a broad agenda for children and to raise the profile of children's rights; and

(d) Public and private sector partnerships to generate resources for children and to create understanding and cooperation within the private sector to address its social responsibilities. In conformity with existing practice, UNICEF will not form partnerships with private organizations that neglect or harm the rights of the child.

117. At the global level, UNICEF will strengthen partnerships broadly to raise the profile of children's rights, influence global development discussions and raise resources for children. UNICEF will maintain its capacity to provide world-class, impartial analysis of social and economic policies and trends and to provide advice on the development of child-friendly social and economic policies, in order to build a world fit for children.

118. Partnerships will increasingly be with children themselves, in line with their evolving capacities and with the Global Movement for Children's emphasis on changing the world with children. Participation by children, especially adolescents, will form an important part of programming by UNICEF offices in many countries, particularly in the development of the country programme. Specific partners and partnership frameworks for each organizational priority are mentioned in annex I.

D. Influential information, communication and advocacy

119. As part of its efforts to promote the five organizational priorities, UNICEF will use information, communication and advocacy to influence the actions of others. UNICEF will generate information on the situation of children and women, with particular emphasis on information related to the five priorities. UNICEF will disseminate this information widely in order to advocate respect, protection and fulfilment of children's and women's rights. Improved collection and use of information on the situation of children and women, as well as on the status of UNICEF programmes of cooperation, will serve as the basis for UNICEF actions.

Information

120. In an effort to improve the effectiveness of its own and others' actions for and with children, UNICEF will document and share its extensive experience in the implementation of policies, programmes and projects related to the five organizational priorities. UNICEF will keep abreast of the latest advances in development and policy and, where appropriate, employ this knowledge and the lessons learned from others to improve its own programmes.

121. UNICEF will continue to support situation analyses for children's and women's rights as a core contribution to national efforts, and as a common basis for discussions of plans of action and programmes of cooperation. All situation analyses will focus on the national situation with respect to the five organizational priorities, plus any other locally relevant variables. The situation analyses will also provide an in-depth, specialist contribution to CCAs, SWAPs, PRSPs and reports to the Committee on the Rights of the Child and the Committee on Elimination of All

Forms of Discrimination against Women, thus creating mutually reinforcing processes for monitoring and advancing the fulfilment of the rights of children and women.

122. UNICEF will support the development of indicators and data collection tools to allow consistent and comparable ongoing monitoring of the situation of children and women. UNICEF will support refinements to multiple indicator cluster survey (MICS) modules and related capacity-building activities, and will assist countries to undertake MICS during 2004 and 2005, so that they can report in 2005 and 2006 on progress towards the targets of the MTSP and the draft WFFC, the Millennium Declaration goals and International Development Targets related to children and women.

123. UNICEF will support initiatives to create global access to data on the situation of children and women. A particular focus in data collection and analysis will be on disparities and discrimination, by including data disaggregated by gender, geographic location, poverty status, culture/ethnicity and other locally relevant categories, building on regional and global experiences.

124. Through recent and planned improvements in its information systems, UNICEF is increasingly in a position to acquire and use up-to-date and accurate information on the status of its programmes and resources. Improved information and information use will permit better management of UNICEF resources. The organization will develop a comprehensive information management strategy to guide information collection and use, and to help guide investments in all forms of information technology.

Communication

125. UNICEF will shape a corporate communication strategy built around the five organizational priorities, continue to build strong partnerships in the mass media, and set and monitor communication standards for the organization. It will develop an outreach strategy to encourage respect for and promote and protect children's and women's rights. This will be done through conveying core UNICEF messages through a variety of media, managing crisis communication and reporting to the public on UNICEF efforts and results for children, in order to build a broader support base and further strengthen the position of UNICEF as the world's leading children's rights organization.

126. UNICEF will develop integrated communication campaigns based on and in support of the five organizational priorities. These campaigns will position the issues of children and child rights in the public domain and help enlarge the constituency of support for child rights and the Global Movement for Children. UNICEF communication efforts will enhance the visibility and credibility of the organization, thereby creating a favourable climate for fund-raising, especially for regular resources. Increased attention will be devoted to audience research to strengthen the organization's knowledge of the most effective media and forms of presentation to communicate with key audiences. Programme communication to promote behavioural change — both to promote positive and reduce harmful behaviour — will continue to be at the core of UNICEF programme and communication work.

Advocacy

127. UNICEF will advocate that all actors respect, protect and fulfil children's and women's rights. This advocacy will be based primarily on the five organizational priorities of this MTSP, taking into account an analysis of local problems, best practices and the experience of UNICEF and others. UNICEF will use its unique mandate and wide network of contacts, based on its reputation and expertise, to advocate with Governments, intergovernmental organizations, civil society organizations, development organizations, the private sector and influential individuals. UNICEF will advocate through targeted mass communication and international and national meetings and forums. UNICEF will seek to engage an ever-wider range of groups and individuals whose actions can improve children's lives.

128. UNICEF will provide a rights-based and economic rationale for why specific policies should be adopted for children and women, and evidence-based advice on how they can be carried out. In pursuit of the five organizational priorities, UNICEF will argue that poverty reduction starts with children, and will advocate via such processes and forums as PRSPs, CCA/UNDAFs, Comprehensive Development Frameworks, the Heavily Indebted Poor Country Initiative, and SWAPs, for improved investments in children via strengthened basic social services for all.

129. UNICEF will continue to raise national and international awareness of children's and women's rights, promote the advancement of children's and women's rights in national and subnational legal reforms, and, where necessary, promote better enforcement of laws to protect children and women. UNICEF will use its voice to confront discrimination and expose disparities, and advocate for children's voices to be heard and taken into account.

130. In order to support UNICEF assessments of legal, social and economic trends and provide an evidence-based rationale for policy, the capacity for legal, economic and social policy analysis will be maintained at headquarters and regional levels, and enhanced where resources allow. Particular attention will be devoted to strengthening linkages between programme activities, research, monitoring and evaluation, and advocacy and communication. Technical guidance and assistance from regional offices will strengthen the capacity of country offices in evidence-based policy advocacy, with particular emphasis on issues related to the MTSP priorities.

E. Excellence in internal management and operations

131. To maximize the potential for achieving the five priorities and to strengthen overall performance, UNICEF has identified several very effective internal activities that will receive particular attention during the MTSP.

Organization and coordination

132. Achievement of each of the five organizational priorities will require significant collaboration among many partners and within UNICEF. Staff will be given the opportunity to develop their capacities and competencies in the five organizational priorities, including skills in promoting intersectoral collaboration among partners.

133. Advances will also be made in coordinating the linkages between UNICEF-supported programme activities, research, monitoring and evaluation, and advocacy. Staff training and other forms of capacity and competency development, technical guidance and assistance from regional offices will ensure that pilot activities and innovative interventions in country programmes are undertaken to advance national and global policy considerations.

134. UNICEF country, regional, headquarters and global management teams will be the primary vehicles for ensuring internal collaboration and coordination, with a focus on organizational priorities. The recent restructuring of the Programme Group in headquarters — including the creation of inter- and intra-divisional multidisciplinary teams — will strengthen the linkages between strategic planning, programme guidance, information management and policy analysis, while reinforcing the independence of the evaluation function.

Human resource capacity

135. Actions to strengthen human resource capacity will include the redistribution of some posts, the definition of MTSP-related staff competencies, and attention to the competency profiles in the recruitment of new staff. UNICEF staff competency development will be directed to the organizational priority areas, with particular attention to gender issues in education, policy development and advocacy, and integrated cross-sectoral programming. Small country offices will be supported with technical assistance from regional offices and the development of intercountry networks, as appropriate to each priority and region.

136. More broadly, UNICEF will strengthen human resource capacity through: (a) development of competency profiles for recruitment, training and appraisal; (b) organization-wide use of revised staff planning, development and performance assessment; and (c) analysis of recruitment practices, career development, staff rotation and succession planning, including a commitment to gender balance and a broad representation of nationalities.

137. Human resource capacity enhancement will ensure an enabling environment for staff to achieve MTSP priorities. Services to staff will be further improved, and existing policies will be reviewed and new ones adopted to enhance quality of work and life of staff.

Information and communications technology management

138. Investments made over the period of the 1998-2001 MTP resulted in the development and deployment of a set of integrated resource management systems, along with a solid information and communications technology (ICT) infrastructure. UNICEF is now in a position to draw benefits for programme and operational purposes. The focus over the current MTSP will be on further developing and leveraging the integrated databases and the ICT infrastructure.

139. Almost all UNICEF offices worldwide are now connected to the Internet and the Intranet, giving staff access to studies, statistics, research papers, best practices and other relevant information on issues related to children, as well as to internal policies, procedures, programme and operational information for decision making, reporting, monitoring and oversight.

140. The ICT infrastructure provides the foundation for UNICEF to manage and utilize information in support of the MTSP organizational priorities, both internally and externally, with partners. The use of technology for collaborative work practices and knowledge sharing will be gradually adopted (subject to funding availability) and will provide strategic value in support of and in promoting organizational priorities. Transaction and infrastructure systems will continue to evolve and, with business process simplification, will facilitate efficient and effective usage. All the foregoing implies a change in methods of working and sharing of information, and ongoing refinement of work processes and governance structure.

Supply management

141. Effective and affordable supplies are critical to the achievement of organizational priorities. UNICEF will support capacity and competency development, provide guidance to support national efforts to assess supply requirements and availability, and work to mobilize partnerships and additional resources to address unmet needs. Improvements in the global availability of vaccines, basic drugs, affordable school supplies and other priority commodities will be advanced through participation and, where required, formation of alliances with potential users and producers of unmet supply requirements, and through participation in product development and distribution.

142. UNICEF will make use of the global expansion of qualified producers and improved communications to enhance the efficiency and effectiveness of its supply operations. During the MTSP period, UNICEF will strengthen country and regional capacity for specification development, market assessment, procurement negotiations and contracting. These advances will also support the existing UNICEF commitment to procurement from developing countries and the timely delivery of supplies in emergency situations.

Funds management

143. Building on the establishment of the global financial system, financial operations in field offices will become more effective and efficient, and administrative processes will be streamlined. Particular consideration will be directed to the needs of emergency field operations to ensure that core controls can be quickly established and maintained.

144. During the MTSP period, UNICEF will enhance staff capacity to utilize the financial system's reporting facilities to strengthen their analysis and application of system-based information. UNICEF will issue revised procedures and manuals, with attention to clarity and ease of comprehension by field staff. Existing training programmes for senior and mid-level staff in field and headquarters locations will be modified to expand coverage of financial management topics.

VII. Resource implications and fund-raising strategy and targets

A. Resource implications

145. Pursuing the five organizational priorities will have important implications for UNICEF financial resources, human resources, supplies and information.

Implications for financial resources

146. The success of the MTSP will depend in large part on a regular and predictable growth of UNICEF income, especially regular resources income. Shortfalls in income, especially regular resources, will result in failure to achieve some or all of the organizational priority targets, and will put in danger the organization's ability to maintain and make quality improvements in its internal systems. A 7 per cent annual growth rate in regular resources will provide a stable base for vibrant country programmes of cooperation which can expand into new, sometimes experimental, areas of programming such as integrated ECD and HIV/AIDS prevention. This will enable UNICEF to maintain a viable support structure and absorb inflationary cost increases. This is the minimum regular resources funding level required as a base for UNICEF to receive additional "other resources" and deliver the desired results against the organizational priorities. The additional regular resources to be mobilized will be allocated to country programmes in accordance with the policy approved by the Executive Board. Within country programmes, regular resources will be allocated on a priority basis to the five organizational priorities, as outlined in chapter VI.

147. Regular resources are essential to preserve the impartial and multilateral character of the organization. They are the core of country programmes of cooperation, since they are allocated based on need and long-term objectives through the regular resources allocation formula approved by the Executive Board, rather than on the basis of special interests. Regular resources are the seed money that grows deep-rooted networks of knowledge, experience and partnerships for children. Thanks to these resources, UNICEF has enormous strengths in staff, processes, knowledge and systems, and over the years, regular resources have made it possible to link these strengths with, and build on, external strengths and partnerships in virtually every country and area where UNICEF works.

148. Regular resources give UNICEF a global vantage point from which problems are seen clearly, experience is gained and shared, and actions and programmes are launched. Regular resources make it possible for UNICEF to respond quickly to changing priorities as well as emergencies, yet at the same time ensure a long-term planning perspective. Regular resources give UNICEF staying power, longevity, continuity and the ability to constantly renew its efforts, to meet new challenges in a rapidly changing world. Regular resources make UNICEF far more than any "charitable" organization and make possible a human-rights approach that puts children at the centre of all actions and concerns, without exception or compromise. Regular resources are a benchmark of commitment to children's rights.

149. The funding targets laid out below reflect UNICEF estimates of its ability to raise regular and other resources in the next four years, and to manage these funds effectively to produce or leverage results for children. Year 2000 programme expenditures on the new organizational priorities are shown in table 3a.

Table 3a
Year 2000 programme expenditures by MTSP organizational priority
(In millions of United States dollars)

	<i>Actual 2000 programme expenditures</i>			
	<i>Regular resources programme expenditure</i>	<i>Other resources programme expenditure</i>	<i>Total programme expenditure</i>	<i>% programme expenditure</i>
Integrated ECD	154	139	293	33
HIV/AIDS	20	10	30	3
Immunization "plus"	66	195	261	30
Girls' education	58	73	131	15
Child protection	32	46	78	9
Other programme expenditures	31	61	92	10
Total	361	524	885	100

150. Programme expenditure is projected to grow at an overall annual growth rate of around 7 per cent. Much of the growth in programme expenditure will be in the organizational priority of HIV/AIDS, where annual expenditure is expected to grow to around \$169 million by 2005. Programme expenditures on girls' education and child protection are expected to grow at roughly the same rate as overall expenditure. In integrated ECD and immunization "plus", the rate of growth of programme expenditure is expected to be less than the overall growth rate, though still positive.

Table 3b
Projected year 2005 expenditures by MTSP organizational priority
(In millions of United States dollars)

	<i>Projected programme expenditure for 2005</i>	
	<i>Amount</i>	<i>% expenditure</i>
Integrated ECD	326	27
HIV/AIDS	169	14
Immunization "plus"	289	24
Girls' education	193	16
Child protection	121	10
Other programme expenditures	108	9
Total	1 206	100

Note: These levels of programme expenditure assume that the funding target of \$1.5 billion per annum by 2005 is reached.

151. The remaining \$294 million (i.e., the difference between the funding target of \$1.5 billion and the projected expenditure of \$1.206 billion in table 3b) is the expected value of the support budget.

Implications for human resources

152. With respect to human resources, UNICEF regional offices and most of its medium-size and large country offices are already well staffed in the organizational priority areas of girls' education, immunization "plus" and, to a lesser extent, child protection. However, many UNICEF offices have only limited capacity in HIV/AIDS and integrated ECD, or have capacities in only some parts of these complex intersectoral priorities. As outlined in chapter VI, a combination of redistribution of posts and personnel, creation of new posts and hiring of new personnel, learning and competency development, recourse to short-term assistance, and intersectoral team building will be needed to address the MTSP priorities in an effective fashion, especially child protection, integrated ECD and HIV/AIDS. These organizational priorities in particular will require that UNICEF acquire staff capacity in such hitherto neglected fields as cognitive and psychosocial development, behaviour change and development of life skills. Small country offices will require continued support from regional offices and intercountry networks.

Implications for supply resources

153. Meeting the priorities of the MTSP will require UNICEF to maintain its leadership in procurement and management of essential supplies for children. The role of UNICEF in facilitating long-term forecasting, production planning and procurement for vaccines and vitamin A supplements may have to be extended to certain essential drugs and/or HIV/AIDS-related drugs and supplies. UNICEF will also have to assist national counterparts with capacity development in supplies management and in-country logistics.

Implications for information resources

154. Effective programme management, as well as credible participation in partnerships and alliances for children and policy advice on children, will require continued leadership by UNICEF in the collection of information on children and women, and a sustained effort to put such information to good use. UNICEF will have to become more effective in knowledge acquisition and information management.

B. Fund-raising strategy and targets

155. At the global level, the five organizational priorities will guide UNICEF resource mobilization efforts. There will continue to be an emphasis on securing predictable growth in regular resources income. The MTP for the period 1998-2001 set a target of 7 per cent annual growth in overall income to reach a total income of \$1.5 billion in 2005. The total income actually received for 1998-2000 has exceeded the target set for these three years. It is recommended that the same funding target of \$1.5 billion by 2005 for total income be maintained in the MTSP.

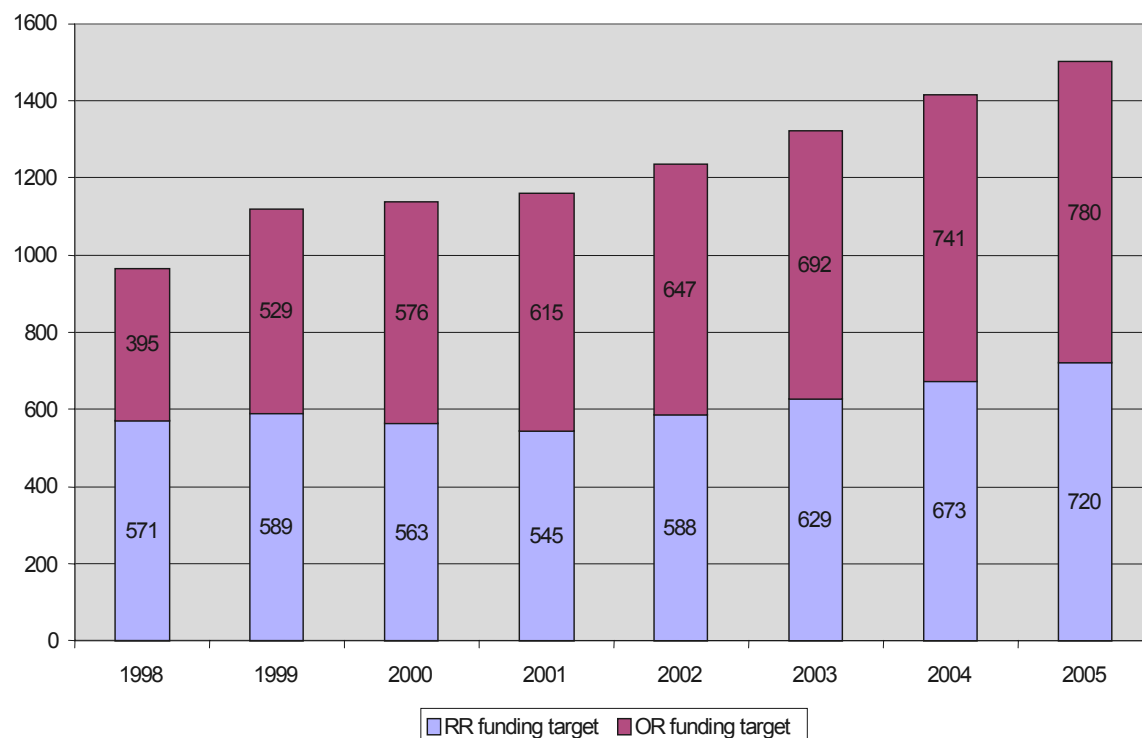
156. The regular resources income for 1998-1999 met the funding targets. However, the regular resources income for 2000 has fallen well short of the targets, by 12 per cent. As a result, regular resources now constitute 49 per cent of total resources, instead of 59 per cent as projected in the MTP. The decline in regular resources income, both in absolute terms and in proportion of total resources, is of major concern, for the reasons outlined above.

157. After carefully reviewing regular resources income prospects for 2001, a funding level of \$545 million for regular resources is projected for 2001. For 2002-2005, the funding targets for these resources must grow at an annual rate of 7 per cent over 2001 to a level of \$720 million in 2005.

Table 4

**Funding targets for regular resources and other resources
(1998-2001, actual and estimates)**

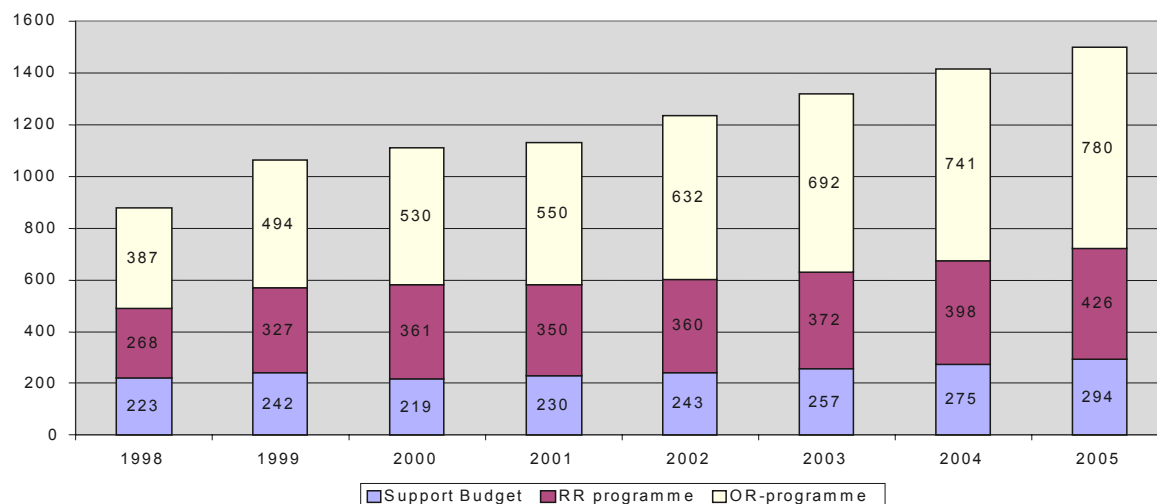
(In millions of United States dollars)



158. UNICEF continues to follow a more cautious approach, with income projected to grow 3 per cent annually for this plan period. If the funding target of \$1.5 billion by 2005 is met, it is estimated that the projected levels of regular resources and other resources for programme and support budgets will be as in table 5 below.

Table 5
Projected expenditure for support budget, regular resources programme and other resources programme, if funding targets are met (1998-2001, actual and estimates)

(In millions of United States dollars)



159. It is expected that around one third or more of overall UNICEF income will continue to come from the private sector, the majority through the efforts of the 37 National Committees for UNICEF which will continue to pioneer innovative ways to maximize regular resources contributions.

160. The resource mobilization strategy adopted by the Executive Board in decision 1999/8 of 22 January 1999 will continue to guide UNICEF efforts. The objectives of UNICEF fund-raising efforts, as contained in document E/ICEF/1999/5 and Executive Board decision 1999/8, remains to:

(a) "Increase general (i.e., regular) resources, making them more assured and predictable and improving burden-sharing among donors, while maintaining the voluntary nature of contributions to UNICEF";

(b) "Explore thematic, multi-country approaches based on the MTSP priorities in addition to the traditional other resources contributions"; and

(c) Encourage early indication and commitment of planned contributions for emergency programmes for the year based on the consolidated appeals from the Office of the Coordinator for Humanitarian Assistance, the establishment of framework agreements and provision of funding with maximum flexibility."

161. With respect to the first objective, UNICEF will utilize the annual pledging event and other forums to highlight the importance of regular resources income, both from Governments and from the private sector. In turn, the ability of UNICEF to raise regular resources depends largely on its ability manage its funds effectively, produce or leverage results for children, and report credibly on results. UNICEF will continue to refine and improve its results reporting through the annual report of the Executive Director (Part II).

162. With respect to the second objective, over the past MTP period, thematic funding has increased and has been received for all organizational priorities. Contributions based on themes and clear results areas are expected to continue to grow, with the creation of global mechanisms to achieve specific results, such as GAVI and the Global Fund for HIV/AIDS and Health. While UNICEF remains sanguine that donor Governments will provide increased amounts of regular resources, discussions with some donors (both government donors and National Committees) have indicated that, while they are unable to further increase their regular resources contributions, they could make additional, untied contributions available for specific MTSP organizational priorities. Such relatively unrestricted contributions have only the conditionality that the funds must be used for one organizational priority and not commingled with regular resources. While urging Governments to prioritize regular resources contributions, UNICEF also highly prizes contributions for specific organizational priorities without imposing any further restrictions or conditions on their use.

163. Given the slow growth in regular resources, UNICEF will also need to explore with donors the possibility of obtaining other resources funding for some activities that traditionally would have been funded from regular resources. An example are the funds provided by the United Kingdom Department for International Development (DfID) for capacity-building in emergencies and the flexible funds to be provided in the partnership arrangement under finalization with the Government of the Netherlands. It is foreseen that there will be a need to strengthen organizational capacity in various aspects of the MTSP priority areas, beyond provisions in the biennial support budget.

164. With respect to the third objective, four donors have responded positively to the need for early and flexible funding on the basis of the consolidated appeal document, and UNICEF will continue its dialogue with donors to expand the current number of six donors with which it has signed framework agreements that cover emergency contributions.

VIII. Monitoring, reporting and evaluation

165. The monitoring and evaluation of, and reporting on, the MTSP will focus on the five organizational priorities and will build on progress made in, and lessons learned from, implementing the MTP for the period 1998-2001. At country level, the monitoring and review of the implementation of country programmes of cooperation will be strengthened based on existing mechanisms, such as the annual and mid-term reviews. An increasing number of countries will hold joint programme-level reviews with partners in the context of sector investment programmes (SIPs), SWAPs and MTRs, in the wider context of MTRs of the UNDAF.

166. Regional offices will continue to exercise their quality assurance and advisory support functions for country programmes and will ensure that the MTSP priorities are taken into account in situation analyses and country programme design. The Regional Management Team will provide a forum for regular discussion of trends, implementation issues, organizational learning across countries and any multi-country initiatives in MTSP priority areas.

167. UNICEF headquarters and regional offices will conduct annual OMP reviews through self-assessment and formation of technical review teams to examine results

achieved and difficulties encountered. Cross-divisional and cross-regional issues, such as information acquisition, networking and internal communications, will also be addressed during the review.

168. UNICEF will further develop and integrate systems — PROMS, the Financial and Logistics System (FLS) and the Integrated Management Information System (IMIS) — to enable up-to-date monitoring of programme implementation, staff resources and financial status. The recently revised Programme Information Data Base (PIDB) system will be used to monitor allocations and expenditures against each of the five organizational priorities. UNICEF will enhance its information management and dissemination through the Internet, Intranet, document management and databases.

A. Reporting

169. UNICEF will further strengthen existing mechanisms to report on results achieved against the MTSP priorities, constraints faced, partnerships formed and lessons learned. All annual reports will be analytical, rather than descriptive, and will focus on the five organizational priorities.

170. The country office annual reports will continue to analyse the full range of UNICEF cooperation and will use a matrix to summarize main activities, key results, constraints and partnerships formed in each of the five MTSP organizational priorities and in any other country programme activities. The annual reports will also provide a brief update of the situation of children and women and status of key indicators in each of five organizational priorities. Regional analysis reports will focus on regional trends, strategies and factors affecting progress in the five organizational priorities and agreed regional sub-emphases in the regional OMPs. Changes arising from the MTR will continue to be reported to the Executive Board by the regional directors in their annual reports on MTRs and major evaluations. Headquarters divisions will structure their OMPs to reflect the contributions of each unit to the MTSP priorities and will report on progress against the OMPs to the Executive Director annually.

171. Part II of the annual report of the Executive Director will be built on the country office annual reports, regional analysis reports, and headquarters divisional OMP implementation reports. It will report, at the aggregate level, on the main actions taken, results achieved, constraints encountered, lessons learned and partnerships for each of the MTSP organizational priorities, in conformity with Executive Board decision 1999/7 of 22 January 1999. The report will include a summary results matrix for each of the five organizational priorities and will report in greater depth on a selection of indicators for MTSP targets every year. It will track UNICEF expenditure against the organizational priorities, with the target that, by 2005, UNICEF will spend 90 per cent of its programme budget on the five priorities. The report will also cover a few additional areas, which represent priorities across a number of countries or in specific regions, or are of special interest to the Board. The UNICEF Annual Report to the general public will also be organized around the five organizational priorities.

B. Evaluation

172. Evaluation will focus more on the country programme level (lessons learned) and on strategic governance of the organization as a whole. It will look at the rationale, effectiveness and administrative efficiency and economy of all activities undertaken or supported by UNICEF. UNICEF will thus enhance accountability and performance in terms of managing for results for children.

173. UNICEF will develop an evaluation policy, in line with established international standards (Development Assistance Committee (DAC) of the Organization for Economic Cooperation and Development (OECD), United Nations and professional associations). Standards will be developed for quality assurance of project evaluations undertaken by country and regional offices, and UNICEF will also develop guidelines and tools for Integrated Monitoring and Evaluation Plans (IMEP) and country programme evaluation. The evaluation plan for the duration of the MTSP will cover key themes and topics of strategic significance. Its implementation will, in some cases, involve partnerships with other United Nations agencies and/or governmental or non-governmental organizations. Findings will be stored in an online electronic database accessible to all UNICEF staff. Thematic summaries of lessons learned and learning workshops will be part of the dissemination of evaluation results.

174. Country programme evaluation will be strengthened. During the first two years of the MTSP, UNICEF will develop basic principles and methodologies and conduct a limited number of field tests, taking into account previous work on the subject. From the third year of the MTSP, regional offices will assume responsibilities in this regard.

175. The organizational priorities of the MTSP will guide the selection of thematic evaluations to be undertaken at country, regional and especially global levels. Such evaluations will be conducted with an emphasis on programmes, strategies and policies. UNICEF will participate in joint evaluations with other partners in such areas as basic education and humanitarian assistance. Topical evaluations will address a variety of crosscutting themes as well as UNICEF institutional effectiveness.

176. A special effort has been made to formulate the MTSP so that organizational priorities express the strategic intents pursued from an institutional perspective and so that indicators serve as benchmarks for the assessment of organizational performance. At the end of the third year of the four-year period, an MTR of MTSP implementation will assess progress made in organizational priorities. MTRs of country programmes and major evaluations will also inform the review. Lessons learned from the review will inform the development of the next MTSP.

IX. Financial medium-term strategic plan for the period 2002-2005

A. Performance in the year 2000 compared with the previous medium-term financial plan

177. Figure I and table 6 provide a comparison between the actual 2000 results, the planned 2000 financial activities and the prior year's results.

Income: regular resources

178. Total regular resources income was \$563 million, \$26 million less than the amount of \$589 million received in 1999 and projected in the financial MTP for the year 2000. During 2000, the United States dollar increased in value compared to European currencies, which reduced total regular resources income by \$35 million compared to the plan. However, this reduction was partially offset by a \$9 million increase from some donors who contributed more than estimated in the plan. The decline in regular resources income, which for the first time dropped to under 50 per cent of total income in 2000, is of deep concern to UNICEF. Regular resources are the foundation of UNICEF country programmes and make it possible to respond quickly to changing priorities as well as emergencies, while at the same time ensuring a long-term planning perspective. It is, therefore, crucial to reverse this declining trend in order to safeguard the essence of the organization and its capacity to deliver critical assistance to children, and to meet the programme targets in the MTSP.

179. Regular resources income from Governments for 2000 was \$343 million. This was \$3 million more than projected in the MTP and \$1 million less than received in 1999. The \$3 million increase over the MTP represents the difference between an increase in contributions equivalent to \$9 million and a loss of \$6 million resulting from the negative impact of a strong United States dollar. Looking at the trend over the past few years, regular resources income from Governments appears to have stagnated.

180. Regular resources income from the private sector (National Committees for UNICEF, including sales of greeting cards and other products, and NGOs) was \$165 million, \$44 million less than projected in the MTP and \$42 million less than the record income in 1999. This shortfall is largely due to lower-than-projected gross proceeds (about \$13 million) and the unfavourable impact of a strong dollar (\$23 million). The latter comprises a reduction of about \$12 million due to the negative impact of a strong dollar on gross proceeds from cards and product sales, and about \$11 million as a result of exchange rate losses and allowances for exchange rate fluctuations on outstanding receivables. Other income sources contributed \$55 million to regular resources; \$15 million more than the MTP projections and \$17 million more than the amount recorded in 1999.

Income: other resources

181. Total other resources income was \$576 million, \$53 million (10 per cent) more than MTP projections and \$47 million (9 per cent) more than the actual income in 1999. Regular contributions were \$377 million, \$14 million (4 per cent) more than projected in the MTP. Contributions for emergencies of \$199 million were \$39

million (24 per cent) more than the MTP projections and \$2 million (1 per cent) higher than the amount received in 1999. Contributions for emergencies included about \$49 million for the South-eastern Europe Humanitarian Operation (Albania, Bosnia and Herzegovina, Croatia, the Federal Republic of Yugoslavia (including Kosovo) and the Former Yugoslav Republic of Macedonia); \$24 million for Mozambique; \$21 million for the Sudan; \$16 million for Ethiopia; \$10 million for Somalia; \$8 million for Angola; \$7 million each for East Timor, Eritrea and Madagascar; \$6 million for Burundi; and \$5 million each for the Democratic Republic of Congo and Sierra Leone.

Total income

182. Total UNICEF income for 2000 was \$1,139 million. This was \$27 million more than the 2000 MTP projection and \$21 million more than total income in 1999 — an increase of about 2 per cent over both the MTP and last year's income. The source of this increase is other resources contributions.

Expenditures

183. Regular resources programme expenditures in 2000 were \$361 million. This was \$9 million less than the planned level and \$34 million more than 1999. Support budget expenditures for 2000 were \$219 million. This represents a savings of \$25 million (\$6 million was due to the increase in the recovery costs for programmes funded from other resources) compared to the MTP projection.

184. Other resources programme expenditures for the year were \$524 million. This was \$28 million more than the MTP estimate and \$33 million more than 1999. Total expenditures in 2000, including write-off of pledges and other items, were \$1,110 million, \$4 million less than the MTP projections and \$46 million more than the 1999 level.

Cash balances

185. The 2000 year-end cash balance (less \$97 million in trust funds for procurement services and other activities) was \$427 million. This was \$49 million less than projected in the MTP and \$26 million less than the actual in 1999. (See figure V for information on cash balances from 1996-2000 (actual) and 2001-2005 (planned).)

186. The regular resources cash balance at the end of 2000 was \$105 million. This consisted of \$96 million in convertible currencies and about \$9 million in non-convertible currencies. The convertible regular resources cash balance is \$41 million less than the level in 1999 and \$40 million more than the minimum liquidity guideline of \$56 million. The 2000 other resources cash balance was \$322 million, \$1 million more than the MTP.

187. In addition to income and expenditures, movements in non-cash assets and liabilities on the balance sheet also affect year-end cash balances. Increases in assets reduce cash balances; increases in liabilities increase cash balances. Accounts receivable are the largest non-cash asset on the UNICEF balance sheet, with an increase of \$77 million in regular resources.

188. Inventories consist of the Supply Division warehouse and Private Sector Division (PSD) stock. The Supply Division uses inventory to meet the requirements

for standard supply and equipment items for UNICEF programmes and also for procurement services, particularly essential drugs. At the end of 2000, inventories totalled \$31 million, \$5 million more than the amount in 1999.

189. Contributions for following years received in advance appear as a liability on the UNICEF balance sheet. At the end of 2000, contributions received in advance for other resources totalled \$8 million.

190. The net effect on regular resources cash balances of all changes in non-cash assets and liabilities was to decrease cash by \$33 million. For other resources, the net effect on cash balances of all changes in non-cash assets and liabilities was to decrease cash by \$22 million.

B. Proposed financial medium-term strategic plan

191. A comparison of the financial MTSP to last year's financial MTP is shown in table 6. Total planned programme expenditures for 2002 through 2003 are higher than in last year's financial MTP due to increased other resources income forecast compared to last year's financial MTP.

Income projections for 2002-2005

192. Table 7 shows income projections from various sources for the period 2002-2005. These projections are set for planning purposes and do not imply a commitment by individual donors, since all contributions to UNICEF are voluntary. They are in United States dollars using the September 2001 United Nations rates of exchange.

193. The financial plan forecasts total income for 2002 of \$1,198 million is 3 per cent higher than the 2001 income forecast of \$1,160 million. This projected increase is mainly due to the proceeds from a one-time legacy, estimated at \$30 million, which UNICEF expects to realize in 2002. The plan also forecasts total income of \$1,195 million for 2003, almost the same level as 2002, and an increase of about 1 per cent annually during 2004 and 2005. UNICEF actual average annual growth in total income for the five years preceding the plan was 3 per cent.

Regular resources income

194. Table 7 shows the various sources of regular resources income. The breakdown is as follows:

(a) *Government contributions.* About 66 Governments pledged or indicated tentative pledges to UNICEF at the second pledging event held during the first regular session of the Executive Board in 2001. Pledges/indications for 2001 regular resources amounted to \$343 million, the same as total regular resources income for 2000. Over 80 per cent of Governments that pledged in their own currencies maintained the same level of contribution as in 2000, while 12 Governments increased their contributions by 7 per cent or more. However, the strength of the United States dollar has had an adverse impact on government contributions, which are mostly pledged and received in currencies other than the United States dollar and may continue to do so in the future. As a result, the \$340 million projected for 2001 is about 1 per cent lower than the previous year, while the forecast for 2002 is

at the same level as 2000. The MTSP forecasts an average annual growth of about 3 per cent for the period 2003-2005.

(b) *Private sector contributions.* The projections reflect a revised estimate of the PSD work plan (E/ICEF/2001/AB/L.1), which was approved by the Executive Board at its first regular session of 2001 (decision 2001/5 of 24 January 2001). Net income from the private sector includes proceeds from the sale of greeting cards and other products, and private sector fund-raising. The financial plan forecasts that UNICEF will record private sector income of \$170 million in 2001 and \$210 million in 2002, and that this will increase to \$215 million by 2005.

(c) *Other income.* Other income consists mainly of interest income and includes gains/losses as a result of exchange rate movements and other miscellaneous items. Other income is forecast to be an average \$35 million a year throughout the plan period.

Other resources income

195. UNICEF receives contributions for other resources for programmes and for emergency relief. Table 11 shows the forecast of these contributions separately. The 2002 financial plan forecasts a 1 per cent decrease in total other resources income in 2002, and no growth during the period 2003-2005.

Liquidity

196. To meet liquidity requirements, the UNICEF liquidity policy recommends a minimum year-end regular resources convertible cash balance equal to 10 per cent of projected regular resources income. This financial plan sets planned regular resources expenditures at a level that ensures the requirement can be met.

197. Programmes funded from other resources are normally fully funded before implementation begins. Therefore, the cash balance for other resources is higher than for regular resources. The year-end cash balance can vary widely depending on the timing of the receipt of funds and the implementation of programmes. For example, if large cash contributions are received late in the year, the year-end cash balance will be high because most of the spending on the related programmes will occur in the following year. This financial plan assumes that the other resources cash balance will increase by about 5 per cent annually during the period 2002 to 2005.

Projected programme expenditures

198. At the beginning of 2001, there was an unspent balance of approved regular resources programme commitments of \$901 million planned for implementation from 2001 through 2005. Regular resources programmes proposed to the Executive Board in 2001 amount to a preliminary figure of \$667 million. The final programme recommendations are summarized in the programme "round up" document (E/ICEF/2001/P/L.73). The plan provides for the preparation of \$424 million of regular resources programme proposals for the approval of the Executive Board in 2002. If future, if information about projected income shows levels different from the plan, the scale of programme preparation will be adjusted accordingly.

199. The 2002-2005 level of planned spending is in line with the goal of maximizing programme expenditures while maintaining regular resources liquidity.

The estimated yearly phasing of expenditures on approved, new and future programme recommendations is shown in Table 8. The plan proposes regular resources programme expenditures of \$335 million in 2002, \$15 million less than the amount planned for 2001. Planned programme expenditures are \$335 million for 2003, \$342 million for 2004 and \$350 for 2005.

200. The unspent balance of programme cooperation from other resources was \$538 million at the end of 2000. The financial plan forecasts that other resources programme expenditure will be in line with the expected income levels for 2002 through 2005.

201. Based on income projections in the plan, total programme spending for 2002 and 2003 are forecast at \$925 million each year. The financial plan forecasts total programme expenditures to increase to \$932 million in 2004 and \$942 million in 2005. However, actual spending will depend on achieving the levels of contributions expected in the present plan. The current financial plan forecasts the support budget to grow by 6 per cent in 2002, 4 per cent in 2003 and 3 per cent annually for the period 2004-2005.

Assets and liabilities

202. As explained above, movements in non-cash assets and liabilities affect year-end cash balances. Line 4 in tables 9, 10 and 11 shows the forecasted effect of these movements. In 1990, the Executive Board approved a capital asset fund to be used for field office accommodation and staff housing (E/ICEF/1990/13, decision 1990/26. At the end of 2000, about \$15 million remained to be spent from the fund. Estimated spending from the fund is \$5 million for the period 2002-2005.

203. Income, expenditure and liquidity are summarized in table 9, with a breakdown of regular resources in table 10 and other resources in table 11. Figures II through V show actual and forecasted financial information by source of funds.

Trust funds

204. Trust funds are earmarked resources entrusted to UNICEF from various sources, including Governments, other United Nations organizations and NGOs, mainly to cover the cost of procurement of supplies and services undertaken by UNICEF on behalf of others. They also include financing provided by sponsors to cover the costs of Junior Professional Officers. As per Regulation 5.3 of the UNICEF Financial Regulations and Rules, trust funds are not considered UNICEF income and are recorded separately and distinguished from funds that are part of income and are spent for programmes approved by the Executive Board.

205. In the past, trust funds for non-procurement services activities have been fairly limited, accounting for just a few million dollars. This changed quickly with the emergence of the oil-for-food programme in Iraq in 1997. The total amount of funds that UNICEF administers for this project alone, since its inception in 1997, is \$409 million, and disbursements and obligations in the year 2000 accounted for \$115 million. The total amount expended from trust accounts other than procurement services in 2000 was \$137 million, up from \$34 million in 1999. The level of activity for the trust accounts is expected to continue to increase in future. This increase is associated with the \$750 million committed by the Bill and Melinda Gates Foundation to GAVI, which will be matched with funds from other

contributors, and increasing numbers of agreements being funded from World Bank International Development Association loans. In 2001, the first financial flows will begin for UNICEF-implemented projects funded by the World Bank in Bangladesh and Yemen, as well as the first supply deliveries and cash grants to recipient countries from the Vaccine Trust Fund Account at UNICEF. Table 12 reports on trust fund activity in 2000 and projects what may be received and disbursed during the MTP period.

X. Recommendation

206. The Executive Director *recommends* that the Executive Board approve the following draft recommendation:

The Executive Board

1. *Welcomes* the medium-term strategic plan (MTSP) (E/ICEF/2001/13) as a flexible framework for UNICEF action covering the period 2002-2005, which reaffirms the centrality of the UNICEF country programming approach, recognizing national ownership in the process;
2. *Notes* the inclusion in the plan of funding targets and the emphasis on further strengthening of results-based management and the rights-based approach to programming for children and women, within a life cycle approach;
3. *Approves* the organizational priorities for action set forth in the plan;
4. *Endorses* the strategies proposed for use in pursuit of those organizational priorities;
5. *Approves* the MTSP as a framework of projections for 2002-2005 (summarized in table 5 of document E/ICEF/2001/13), including the preparation of up to \$424 million in programme expenditures from regular resources to be submitted to the Executive Board in 2002 (shown in table 8, item 3, of document E/ICEF/2001/13). The amount is subject to the availability of resources and to the condition that estimates of income and expenditure made in this plan continue to be valid;
6. *Requests* the Executive Director to assess progress towards the five organizational priorities in the MTSP in part II of the annual report to the Executive Board;
7. *Further requests* the Executive Director to take into account, in the implementation of the plan, the comments made by Board members as reflected in the report on the present session.

Annex I

Priorities, targets, indicators, core intervention areas and partnerships

Organizational priority number 1: girls' education

Long-term international goals: (1) Eliminate gender disparities in primary and secondary education by 2005, and achieve gender equality in education by 2015, with a focus on ensuring girls' full and equal access to and achievement in basic education of good quality" (World Education Forum, Dakar, 2000); (2) Reduce the number of primary school-age children who are out of school by 50 per cent and increase net primary school enrolment or participation in alternative, good quality primary education programmes to at least 90 per cent by 2010. Eliminate gender disparities in primary and secondary education by 2005 and achieve gender equality in education by 2015, with a focus on ensuring girls' full and equal access to and achievement in basic education of good quality; Improve all aspects of the quality of education so that children and young people achieve recognized and measurable learning outcomes, especially in numeracy, literacy and essential life skills; Ensure that the learning needs of all young people are met through access to appropriate learning and life skills programmes; Achieve a 50 per cent improvement in levels of adult literacy by 2015, especially for women. (Agreed Text of WFFC) (3) Enrol all children in primary school by 2015; Make progress towards gender equality and empowering women by eliminating gender disparities in primary and secondary education by 2005 (UN-OECD-WBG-IMF International Development Targets); (4) Ensure that, by (2015) children everywhere, boys and girls alike, will be able to complete a full course of primary schooling at that girls and boys will have equal access to all levels of education; Promote gender equality and the empowerment of women ... (Millennium Summit Declaration)

<i>MTSP targets 2002-2005</i>	<i>MTSP target indicators</i>	<i>Core intervention areas</i>	<i>Partnership frameworks</i>
By 2005, all countries with a girls' net enrolment rate of less than 85% in 2000 will have policies, procedures and practices that have reduced the number of out-of-school girls by at least 30%.	Number of girls of primary school age not in school. Compensatory actions and policies and procedures in place and operational to reduce the number of girls out of school.	Organize and lead a dynamic global advocacy initiative that brings to bear a wide variety of partners and a full range of actions in support of girls' education, including leadership of the United Nations Girls' Education Initiative. Develop and promote system reforms and policies, community- and school-level mechanisms, and assessment and monitoring processes which extend learning to all children and improve educational quality in gender-sensitive, child-friendly schools. Assist countries in the development and implementation of affirmative action strategies to reduce the gender gap. Play a crucial role in mobilizing resources for girls' education through such mechanisms as budget reallocations and the engagement of new partners. Establish school and community mechanisms to find excluded and at-risk girls and get them into school.	Global Girls' Education Partnership UNGEI EFA Alliance National Governments Office of the Secretary-General AGEI and other regional girls' education strategies World Bank Partnership for Sustainable Strategies on Girls' Education

<i>MTSP targets 2002-2005</i>	<i>MTSP target indicators</i>	<i>Core intervention areas</i>	<i>Partnership frameworks</i>
By 2005, policies, procedures and mechanisms to promote effective quality learning in child-friendly, gender-sensitive schools will be in place in at least 50 countries.	Review that confirms the existence of: – Effective and gender-sensitive teaching and learning processes; – Gender-appropriate learning materials, curricula and learning outcomes; – Healthy, safe, inclusive, protective and gender-sensitive learning environments.	<p>Develop targeted programmes to eliminate barriers to the education of girls (cultural, social and economic).</p> <p>Promote greater accountability through community involvement and wider participation in governance and management of education.</p> <p>Provide technical and/or material support to Governments and communities to:</p> <ul style="list-style-type: none"> – Increase access for all unreached children to quality basic education, with a particular emphasis on girls, working children, children affected by HIV/AIDS, and children in conditions of crisis and instability; and – Expand the capacity of education systems and make them more flexible in meeting the learning and other needs of girls and other excluded children. <p>Undertake a review of gender equality in education to identify key gender issues and extent and nature of discrimination.</p> <p>Support the development of teacher education programmes, both in-service and pre-service, that ensure competent, gender-sensitive and effective teachers.</p> <p>Provide technical and/or material support to Governments and communities to:</p> <ul style="list-style-type: none"> – Make education systems more gender sensitive throughout, with special attention to the nature of school environments (particularly their safety and security), teaching and learning processes, and educational content; – Socialize both girls and boys in learning environments which are non-violent and encourage mutual respect, dignity and equality; and – Conduct relevant research to inform practice. <p>Build the capacity of regional and country office staff, and their government and NGO partners, in the development of rights-based approaches to programming in education.</p>	<p>International NGOs</p> <p>UNESCO and other UN agencies</p> <p>UNICEF NatComs</p> <p>Private sector</p> <p>Private foundations</p> <p>Media</p> <p>Children's organizations</p> <p>Teachers' organizations,</p> <p>Regional NGOs, e.g., FAWA</p> <p>See above</p>

<i>MTSP targets 2002-2005</i>	<i>MTSP target indicators</i>	<i>Core intervention areas</i>	<i>Partnership frameworks</i>
	<p>Adoption and implementation of policies and procedures to eliminate gender discrimination and exploitation of girls in school and ensure their safety and protection.</p>	<p>Build capacity, strengthen partnerships and support countries in intersectoral programmes for basic education, especially FRESH.</p> <p>Assist all HIV/AIDS-affected countries:</p> <ul style="list-style-type: none"> - To mitigate the impact of HIV/AIDS on their education systems and schools, learners and learning; and - To strengthen the role of schools both in HIV/AIDS prevention and in the care response to AIDS-affected children, families and communities (e.g., ensuring that no child is kept from school for reasons of cost or discrimination). <p>Assist countries in the identification of learning outcomes for primary schooling.</p>	
<p>By 2005, at least 20 countries will have identified learning outcomes and built capacity to ensure gender parity in achievement in basic education.</p>	<p>Increase in girls' primary education completion rate since 2000.</p> <p>Increase in girls' transition rate to post-primary education.</p> <p>Rate of attainment by girls and boys of nationally defined learning outcomes, including literacy, numeracy and life skills.</p>	<p>Develop and/or support changes that improve the learning and achievement of girls, with particular attention to the gender dimensions of a quality education.</p> <p>Develop the capacity of the system, the schools and communities to identify appropriate learning outcomes and measure learning achievement.</p> <p>Increase attention to the education of adolescent girls, through addressing gender disparity in the transition from primary to post-primary education, providing second-chance learning opportunities, using information technologies to increase participation and enhance learning, and mobilizing partners to increase the quality and availability of post-primary education.</p> <p>Devote adequate time and resources to the systematic professional development of UNICEF and counterpart capacity in promoting good quality girls' education.</p>	<p>EFA partners and follow-up mechanisms</p> <p>National Governments and CSOs</p> <p>Network on Education in Emergencies</p> <p>FRESH partners (WHO, the World Bank, UNESCO, Education International)</p> <p>UNAIDS and its co-sponsors</p> <p>ILO</p> <p>WFP</p> <p>Bilateral agencies</p> <p>Foundations</p> <p>ADEA</p>

Organizational priority number 2: integrated early childhood development

Long-term international goals: The MTSP ECD targets contribute to the following draft WFFC goals for 2010: the development and implementation of national ECD policies and programmes to ensure the enhancement of children's physical, social, emotional, cognitive and spiritual development; "reduction in infant and under-five mortality rates by at least one third"; "reduction in maternal mortality ratio by at least one third"; "reduction in child malnutrition among children under five years of age by at least one third, with special attention to children under two years of age"; and "reduction in the number of people without access to hygienic sanitation facilities and affordable and safe drinking water by at least one third". These goals also contribute to the 2015 International Development Targets and Millennium Development goals for reducing child mortality, improving maternal health, combating disease and — particularly by promoting school readiness — achieving universal primary education and gender equality; and to the World Education Forum 2010 goal of "expanding and improving comprehensive early childhood care and education, especially for the most vulnerable and disadvantaged children".

<i>MTSP targets 2002-2005</i>	<i>MTSP target indicators</i>	<i>Core intervention areas</i>	<i>Partnership frameworks</i>
In all countries, support the development of comprehensive ECD policies to ensure the survival, growth and social, emotional and cognitive development of all young children, with special emphasis on children under 3 years of age, leading to a substantial reduction in mortality, disease burden and malnutrition and prevention of developmental delays.	<p>All countries to review or develop and implement national policies that cover the essential components of integrated ECD (child and maternal health, nutrition, WES and hygiene, child protection, psychosocial care and early learning).</p> <p>Nationally accepted indicators and monitoring systems are identified, developed and tested for the assessment of psychosocial and cognitive development (in at least 6 countries, with work on indicators in further countries supported by other member agencies of the ECD Consultative Group).</p>	<p>Support the development and implementation of effective and comprehensive policies for ECD through country-specific situation analyses, CCA and expanded partnerships.</p> <p>Provide technical support and small-scale funding for the development and strengthening of regulations, standards, service delivery systems, integrated planning and coordination mechanisms, indicators and monitoring systems relating to ECD.</p> <p>Advocacy for inclusion in national development plans and budgets, PRSPs and SWAPs of investments to expand the coverage of: basic services, livelihood enhancement measures, safety nets and care interventions for ECD, based on child rights principles and with priority to the poorest households.</p>	<p>National Ministries of Planning and Development</p> <p>Sector-based Ministries NGOs</p> <p>Bilateral and UN agency partners, especially WHO, UNESCO, UNDP, the World Bank and other members of the UNDG</p> <p>NGO, civic sector groups such as Kiwanis</p> <p>ECD Consultative Group</p> <p>Bernard van Leer Foundation</p> <p>Private sector organizations</p> <p>UNICEF NatComs</p>

<i>MTSP targets 2002-2005</i>	<i>MTSP target indicators</i>	<i>Core intervention areas</i>	<i>Partnership frameworks</i>
<p>In 80 to 100 countries with high child and maternal mortality and morbidity rates, and/or large disparities in these rates, support the implementation of comprehensive and convergent programmes to deliver nutrition, child and maternal health, water, sanitation, hygiene-related services and commodities, as well as early childhood care and early learning programmes.</p>	<p>In all countries and among all population groups with high child and maternal mortality, contribute to:</p> <ul style="list-style-type: none"> – At least 60% of young children having access to affordable appropriate quality drugs and services for the treatment of common childhood diseases especially pneumonia, diarrhoea and malaria; – At least 60% of pregnant women and young children in malaria-endemic areas sleeping under insecticide treated bed nets and receiving intermittent preventive malaria treatment; – At least 60% of pregnant women using adequate antenatal services, skilled birth attendants, and having access to essential obstetric and neonatal care; – Reduction in the number of people without access to hygienic sanitation facilities and affordable and safe drinking water by at least one sixth; – The sustainable use of iodized salt by 90% of households worldwide; – Reduction in the prevalence of anaemia among women of reproductive age by 15%; – Elimination of Guinea worm disease. 	<p>Support basic services delivery, supply of and access to affordable commodities for health, education, nutrition, and community hygiene improvement, including: accessible safe water supply systems and sanitation facilities; full immunization; ORS; essential drugs and antibiotics; ante-helminthics; iodized salt; micronutrients; and treated bed nets.</p>	

<i>MTSP targets 2002-2005</i>	<i>MTSP target indicators</i>	<i>Core intervention areas</i>	<i>Partnership frameworks</i>
In all countries where birth registration is not almost universal, promote more effective birth registration systems, ensuring equitable registration rates for girls and boys, with particular focus on the registration of children in highly disadvantaged groups and families or in geographic areas with the worst social indicators.	Increase in the number of countries where at least 90% of children are registered by the age of one year.	Support to situation analysis and review of the current birth registration system, and advocacy for strengthening and increased focus on registering children among highly disadvantaged groups and families, where relevant.	National Ministries of public administration and home affairs Civil registrars Local government authorities and municipalities UN Division of Statistics UNFPA
In all countries, increase the knowledge and consistent practice among families and communities of key behaviour for the care and support of young children and pregnant and lactating women, including: infant and child feeding; psychosocial care and early learning; prevention of discrimination, including awareness of early gender socialization practices, neglect, abuse and violence against both children and women; home health and	<p>Percentage of families or caregivers, including fathers and adolescents, who adopt recommended practices for the care, early learning and stimulation, nutrition and healthy development of young children, both at home and by using available basic services in the community, to be measured by selective assessments of specific practices.</p> <p>Young child and maternal care includes: exclusive breastfeeding until six months; continued breastfeeding with adequate timely complementary feeding until 24 months; adequate provision of micronutrients, including the use of iodized salt; continued breastfeeding and use of ORT in case of diarrhoea; taking children for full immunization as scheduled; recognizing when children are too sick or malnourished to be treated at home and need to be taken for professional health care; adequate use of antenatal care (including micronutrients) and delivery by trained health care staff; adequate</p>	<p>Support to situation analysis and participatory research to assess and understand current key care practices and service utilization patterns, the attitudes, values and other factors underlying them, and the factors affecting access of poor families to essential commodities.</p> <p>Strengthen health and education systems to facilitate integrated and effective health, nutrition and child care in families, communities and early learning centres. Support to coordinated training and networking capacity among community-based child care providers, extension workers, home visitors and service providers. Contribute to parent education programmes, including strengthening the roles of men and boys in preparation for responsible fatherhood.</p> <p>Support hygiene improvement programmes that focus on the effective</p>	<p>National Governments</p> <p>Other UN agencies</p> <p>Bilateral agencies and private sector</p> <p>National media</p> <p>Communication professionals</p> <p>Social research institutions</p> <p>Local opinion leaders</p> <p>NGOs, including SCF</p>

<i>MTSP targets 2002-2005</i>	<i>MTSP target indicators</i>	<i>Core intervention areas</i>	<i>Partnership frameworks</i>
<p>hygiene practices; prevention and appropriate treatment of common illnesses (such as diarrhoea, ARI and malaria) and malnutrition; care for girls and women; good management of water resources.</p>	<p>care for pregnant women; safe disposal of faeces; hand washing; safe management of drinking water; ensuring that children and pregnant women sleep under bed nets in malarial areas; keeping home environment safe and clean; involvement of both parents in stimulating the child through talking, playing and other age-appropriate interactions; preventing accidents and avoiding situations where neglect or abuse could occur.</p> <p>Contribute to: at least 60% of young children receiving appropriate home care for the promotion of cognitive and psychosocial development and prevention and treatment of malnutrition, common childhood illnesses (malaria, diarrhoea, and pneumonia), exclusive breastfeeding, timely complementary feeding and improved hygiene practices.</p> <p>All programmes supported by UNICEF relating to early childhood to include components (e.g., national policies, services, data collection) for the prevention of discrimination, neglect, abuse and violence against both children and women, including in the home.</p> <p>Percentage of adolescents and women who have been involved in life skills programmes which include orientation for decision-making about parenting and family life, and knowledge about sexuality and reproductive health.</p>	<p>utilization of water and sanitation services.</p> <p>Support and contribute to the design and implementation of national and local programmes and policies to prevent discrimination, neglect, abuse and violence, with particular attention to violence against women and girls.</p> <p>Pilot the collection of information through existing household surveys on the extent of participation of women in household budget/expenditure decisions affecting health and child care, as reported by women.</p> <p>Empower women and adolescents to make informed decisions about child spacing, child bearing and child care, and to influence household decisions, including on the use of resources.</p> <p>Support the design and implementation of education, communication and other community-based interventions that will lead to the adoption of improved child care practices and increased service utilization.</p>	

<i>MTSP targets 2002-2005</i>	<i>MTSP target indicators</i>	<i>Core intervention areas</i>	<i>Partnership frameworks</i>
Increase participation by young children in appropriate community or group child care, incorporating health, hygiene, nutrition, psychosocial and early learning dimensions, with particular attention to children in poverty, with disabilities or affected by HIV/AIDS and conflict.	<p>Proportion of young children who participate in appropriate, good quality community or group child care, incorporating key elements of learning and healthy development.</p> <p>Number of countries with standards and guidelines for collective child-care provision in the private and public sectors and for child/women-friendliness in basic services.</p>	<p>Support to participatory assessment, analysis and action approaches that promote the physical, cognitive, social and emotional development of young children through community and group action.</p> <p>Support to coordinated capacity development and networking capacity among community-based child-care providers, extension workers, home visitors and service providers.</p>	<p>Consultative Group on Early Childhood Care and Development</p> <p>World Bank</p> <p>WHO</p> <p>Bilateral agencies</p> <p>Country and local ECD networks</p>

Organizational priority number 3: immunization “plus”

Long-term international goals by 2005: Ensure full immunization of children under one year of age at 90 per cent nationally, with at least 80 per cent coverage in every district or equivalent administrative unit; reduce deaths due to measles by half by 2005; eliminate maternal and neonatal tetanus by 2005; and extend the benefits of new and improved vaccines and other preventive health interventions to children in all countries. Certify by 2005 the global eradication of poliomyelitis. Achieve sustainable elimination of ... vitamin A deficiency by 2010 ... through dietary diversification, food fortification and supplementation.

<i>MTSP targets 2002-2005</i>	<i>MTSP target indicators</i>	<i>Core intervention areas</i>	<i>Partnership frameworks</i>
<p>By 2003, every UNICEF-assisted country will have a multi-year plan (MYP) outlining strategies and resource needs and will monitor its implementation and resource mobilization using ICC or equivalent mechanism. By 2005 the following goals will be achieved:</p> <ul style="list-style-type: none"> – 80% immunization coverage in every district for each antigen in at least 80% of countries, in a sustainable way; – Global certification of polio eradication; – Measles mortality reduction by half; – Elimination of maternal and neonatal tetanus; – 100% increase in the number of countries achieving 70% national coverage of vitamin A twice per year where national capsule distribution programmes need to occur. 	<p>Number and proportion of countries with updated MYP, annual plans of action and functioning ICC.</p> <p>Number and proportion of countries with immunization coverage by antigen (including TT2+ for pregnant women or child-bearing women) of at least 80% in all districts.</p> <p>Number and proportion of countries (where capsule distribution programmes are needed) with national vitamin A coverage of >70% twice per year for children under five years of age.</p> <p>Trend/share of domestic funding for vaccines and vitamin A supplements of the total funding needed for vaccines and vitamin A supplements.</p> <p>Number of polio cases per year.</p>	<p>Strengthen government capacity to develop quality multi-year plans and annual work plans (in which UNICEF support will be included).</p> <p>Monitor implementation of immunization “plus” strategies by reinforcing ICC or equivalent government-led coordination mechanism and using a set of standardized performance indicators.</p> <p>Advocate for increased government budget allotment, access to debt-relief mechanisms, and stable and longer-term commitment from donors.</p> <p>Ensure that immunization “plus” services are managed in line with SWAPs and reformed health systems, and contribute to overall delivery of basic health services.</p> <p>Strengthen capacity of local governments and communities to manage and monitor delivery of expanded immunization “plus” services using an appropriate mix of service delivery strategies.</p> <p>Use epidemiological surveillance to target and monitor the impact of interventions against polio, measles and MNT. Organize supplemental immunization activities (SIA) in collaboration with Governments and partners.</p>	<p>Government (multiple sectors and levels)</p> <p>NGOs</p> <p>Civil society organizations</p> <p>Communities</p> <p>Private sector</p> <p>GAVI partners, especially WHO</p> <p>Gates Foundation</p> <p>Vitamin A Global Initiative Partners</p> <p>Rotary International</p> <p>United Nations Foundation</p> <p>American Red Cross</p> <p>Safe Injection Network Partners</p> <p>UNFPA</p> <p>UNICEF NatComs</p>

<i>MTSP targets 2002-2005</i>	<i>MTSP target indicators</i>	<i>Core intervention areas</i>	<i>Partnership frameworks</i>
Maximization of safety of immunization injections in all UNICEF-assisted countries.	<p>Estimated measles mortality (determined by WHO methodology) per year.</p> <p>Number of countries that have achieved MNT elimination goal according to WHO criteria.</p> <p>Percentage of countries using auto-disposable syringes for all immunization activities.</p>	<p>Improve injection safety through introduction of AD syringes in all countries by 2003, and support their correct use and safe disposal.</p>	
Ensure global vaccine and vitamin A supply security (i.e., sustaining an uninterrupted, long-term supply to low-income countries).	<p>Percentage of countries with uninterrupted supply of vaccines and vitamin A for regular services, accelerated disease control activities and outbreak response.</p>	<p>At global level, work with countries, WHO, donor Governments and industry to improve global forecasts and availability of vaccines and vitamin A for developing country markets.</p> <p>At country level:</p> <ul style="list-style-type: none"> – Improve vaccine and vitamin A capsule management to reduce wastage, avoid stock-outs and enable better forecasting; and – Monitor the quality and performance of the cold chain at all levels. 	<p>Ministries of Health</p> <p>NGOs</p> <p>Civil society organizations</p> <p>Private sector GAVI partners, especially WHO</p> <p>Vitamin A Global Initiative partners</p>
Affirm immunization as a global public health good and as a right for all children and women, and ensure by 2003 that every UNICEF-assisted country is implementing communication strategies to increase and sustain demand, as well as government, health care community and civil society support for immunization “plus” services.	<p>Effectiveness of advocacy activities measured as trend in domestic and donor inputs to immunization and vitamin A.</p> <p>Proportion of caretakers with correct knowledge on frequency of visits needed to complete basic immunization series and vitamin A supplementation.</p>	<p>Provide specific support in the multi-year plan to multi-programme and multisectoral issues and to the communication and behaviour change components, in order to create and sustain demand for immunization and vitamin A supplementation.</p> <p>Seek operational linkages with other programmes and community-based activities to promote appropriate child-care practices, increase demand for immunization and vitamin A, and maximize delivery of services at community level.</p>	<p>Government (multiple sectors and levels)</p> <p>NGOs</p> <p>Civil society organizations,</p> <p>Communities</p> <p>Media</p> <p>GAVI partners, especially WHO</p>

<i>MTSP targets 2002-2005</i>	<i>MTSP target indicators</i>	<i>Core intervention areas</i>	<i>Partnership frameworks</i>
		Advocate for the introduction of appropriate new vaccines.	Vitamin A Global Initiative Partners Roll Back Malaria Partners UNICEF NatComs
By 2003, every UNICEF-assisted country will have identified populations not reached by immunization services, including the urban poor and populations with no or very limited access to health services, and will have begun implementing strategies, including communication, to reach them with an appropriate package of essential life-saving interventions. In conflict or emergency areas, ensure, as a minimum, timely and safe provision of measles vaccine and vitamin A supplements.	Proportion and number of countries (where specific strategies are needed) with solutions and plans of actions to reach hardest to reach. Immunization and vitamin A coverage in identified hard-to-reach populations, disaggregated as appropriate by geographical area, gender and socio-economic group. Immunization and vitamin A coverage in emergencies.	Assist Governments in identifying and mapping population groups not reached by immunization services, and designing and monitoring implementation of strategies to reach them with a cost-effective and high-impact set of interventions. Support innovative mechanisms with community monitoring and planning, sustainable outreach services and Child Health Days. Promote birth registration. In conflict or emergency areas, coordinate with partners' timely delivery of essential life-saving interventions to all children and women.	Government (multiple sectors and levels) NGOs Civil society organizations Communities Media GAVI partners, especially WHO Global Alliance to end VAD RBM Safe Motherhood Initiative

Organizational priority number 4: fighting HIV/AIDS

Long-term international goals: United Nations Special Session on HIV/AIDS Declaration of Commitment

- By 2003, establish time-bound national targets to achieve the internationally agreed global prevention goal to reduce by 2005 HIV prevalence among young men and women aged 15 to 24 in the most affected countries by 25 per cent and by 25 per cent globally by 2010, and intensify efforts to achieve these targets as well as to challenge gender stereotypes and attitudes, and gender inequalities in relation to HIV/AIDS, encouraging the active involvement of men and boys;
- By 2005, ensure that at least 90 per cent, and by 2010 at least 95 per cent, of young men and women aged 15 to 24 have access to the information, education (including peer education and youth-specific HIV education) and services necessary to develop the life skills required to reduce their vulnerability to HIV infection, in full partnership with young persons, parents, families, educators and health care providers;
- By 2005, reduce the proportion of infants infected with HIV by 20 per cent, and by 50 per cent by 2010, by ensuring that 80 per cent of pregnant women accessing antenatal care have information, counselling and other HIV-prevention services available to them, increasing the availability of and providing access for HIV-infected women and babies to effective treatment to reduce parent-to-child transmission of HIV, as well as through effective interventions for HIV-infected women, including voluntary and confidential counselling and testing, access to treatment, especially anti-retroviral therapy and, where appropriate, breast-milk substitutes and the provision of a continuum of care;
- By 2005, develop and make significant progress in implementing comprehensive care strategies to: strengthen family and community-based care, including that provided by the informal sector, and health care systems to provide and monitor treatment to people living with HIV/AIDS, including infected children, and to support individuals, households, families and communities affected by HIV/AIDS; and improve the capacity and working conditions of health care personnel, and the effectiveness of supply systems, financing plans and referral mechanisms required to provide access to affordable medicines, including anti-retroviral drugs, diagnostics and related technologies, as well as quality medical, palliative and psychosocial care;
- By 2003, develop and by 2005 implement, national policies and strategies to build and strengthen government, family and community capacities to provide a supportive environment for orphans and girls and boys infected and affected by HIV/AIDS, including by providing appropriate counselling and psychosocial support, ensuring their enrolment in school and access to shelter, good nutrition and health and social services on an equal basis with other children; and protect orphans and vulnerable children from all forms of abuse, violence, exploitation, discrimination, trafficking and loss of inheritance.

<i>MTSP targets 2002-2005</i>	<i>MTSP target indicators</i>	<i>Core intervention areas</i>	<i>Partnership frameworks</i>
<p>By 2005, ensure that all UNICEF country programmes have conducted an assessment and analysis of the HIV/AIDS situation and its actual or potential impacts on children and young people, and have developed country programme strategies and actions to respond to HIV and AIDS, guided by the global strategy framework.</p>	<p>Number of countries that have developed HIV/AIDS response strategies within CPR consistent with MTSP priorities.</p> <p>Number of countries that have reoriented CP strategies at MTR to respond to MTSP priorities.</p> <p>Number of regions that have developed regional strategies and work plans to strengthen intercountry and country-level action.</p> <p>Proportion of regular resources/other resources and total country programme budget dedicated to achieving medium-term HIV/AIDS priorities (minimum of 10% of UNICEF total resources).</p>	<p>Support the development and implementation of communication and social mobilization initiatives to combat stigma, discrimination and the gender inequities and rights violations that fuel HIV epidemics.</p> <p>Monitor trends in the HIV/AIDS epidemic, its impacts on children and the adequacy of national responses.</p> <p>Support the development of policies, strategies, legislation, action plans and partner coordination mechanisms to facilitate expanded action to prevent HIV among children and young people and to improve care and support for those affected.</p> <p>Expand the coverage and quality of essential services (health, education, welfare, information, community facilitation) and ensure children's and young people's access to these services.</p> <p>Develop information, communication and social mobilization strategies to achieve the goals of prevention, care and support.</p> <p>Develop partnerships with non-governmental and civil society organizations to support community-based action.</p> <p>Support the mobilization of financial and technical resources in support of the implementation of the child-focused components of the national HIV/AIDS response.</p>	<p>Governments</p> <p>National HIV/AIDS councils</p> <p>UNAIDS co-sponsors and secretariat</p> <p>Non-governmental and civil society organizations</p> <p>Faith-based organizations</p> <p>Donor Governments</p> <p>Foundations</p> <p>Young people's associations</p> <p>Associations of people living with HIV and AIDS</p> <p>Professional associations</p> <p>Regional resource institutions</p> <p>Intergovernmental bodies</p> <p>UNICEF NatComs</p>

<i>MTSP targets 2002-2005</i>	<i>MTSP target indicators</i>	<i>Core intervention areas</i>	<i>Partnership frameworks</i>
<p>By 2005, ensure that national policies and strategies have been approved and action plans are being implemented to reduce the risk and vulnerability of young people to HIV infection, in countries with emerging, concentrated and generalized epidemics.</p>	<p>Number of countries affected or vulnerable to HIV/AIDS that have established policies, strategies and action plans to prevent HIV infection among young people.</p> <p>Improved access to HIV/AIDS-related information and services for young people in at least 25 countries.</p> <p>Implement a global communication initiative on young people's "right to know" the facts about HIV/AIDS and how to prevent it and ensure its operationalization with the participation of young people in at least 25 countries.</p> <p>National policies, strategies and action plans developed and implemented to provide school-based life skills education for HIV prevention in at least 25 countries most affected or vulnerable to HIV.</p> <p>Capacities established to monitor and report on changes in young people's knowledge, attitudes and behaviour related to HIV/AIDS at global, regional and national levels.</p>	<p>Support national authorities and partners to assess and analyse the risks and vulnerabilities of young people to HIV infection and to develop appropriate policies, legislation, action plans and coordinate and partnership mechanisms to promote healthy lifestyles and prevent HIV infection.</p> <p>Ensure that all children and young people are informed about HIV/AIDS and are provided with life skills learning opportunities to reduce their vulnerability and enable them to avoid risky behaviour.</p> <p>Promote and expand access to youth-friendly health services to enable young people's access: to confidential HIV testing and counselling; to information, education and health services, including access to condoms and the treatment of STIs.</p> <p>Scale up and sustain communication and social mobilization initiatives promoting HIV/AIDS awareness and healthy lifestyles, to address stigma and discrimination, encourage inter-generational communication and promote peer and adult solidarity, respect and support for young people.</p> <p>Increase the proportion of young girls staying in school, and strengthen the capacity of schools to respond to the HIV/AIDS pandemic.</p> <p>Develop and support special actions to reduce the vulnerability of children and young people, especially girls, at particularly high risk of HIV infection, i.e., street children, injecting drug users, sexually exploited children, children in prisons and institutions, and children and young people living in contexts of violence and conflict.</p>	<p>Governments</p> <p>National HIV/AIDS councils</p> <p>UNAIDS co-sponsors and secretariat</p> <p>Non-governmental and civil society organizations</p> <p>Faith-based organizations</p> <p>Donor Governments and foundations</p> <p>UNICEF NatComs</p> <p>Young people's associations</p> <p>Associations of people living with HIV an AIDS</p> <p>Professional associations</p> <p>Regional resource institutions and intergovernmental bodies</p>

<i>MTSP targets 2002-2005</i>	<i>MTSP target indicators</i>	<i>Core intervention areas</i>	<i>Partnership frameworks</i>
By 2005, ensure that national policies, strategies and action plans are under implementation to prevent parent-to-child transmission of HIV in all countries affected by HIV/AIDS.	<p>Number of countries with national strategies and action plans under implementation.</p> <p>Number of countries with progress reports on national targets on the following 4 indicators:</p> <ul style="list-style-type: none"> – % of women accessing antenatal care services; – % of women accessing VCT services; – % of HIV+ women accessing ARV drugs to prevent MTCT of HIV; – number and percentage of health centres with upgraded ANC services, including VCT, infant feeding counselling and the availability of ARV for PPTCT. <p>National-scale PPTCT programmes supported by UNICEF in at least 25 affected countries.</p>	<p>Ensure that young people are central to planning, implementation and monitoring of actions which involve and affect them.</p>	<p>Governments</p> <p>National HIV/AIDS councils</p> <p>UNAIDS co-sponsors and secretariat</p> <p>Non-governmental and civil society organizations</p> <p>Faith-based organizations</p> <p>Donor Governments and foundations</p> <p>Young people's associations</p> <p>Associations of people living with HIV and AIDS</p> <p>Professional associations</p> <p>Regional resource institutions and intergovernmental bodies</p>

<i>MTSP targets 2002-2005</i>	<i>MTSP target indicators</i>	<i>Core intervention areas</i>	<i>Partnership frameworks</i>
By 2005, ensure that national policies, strategies and action plans are developed and implemented to ensure protection and care for children orphaned or made vulnerable by HIV/AIDS in all countries affected by HIV/AIDS.	<p>Number of countries with national policies, legislation, strategies and action plans in place and under implementation.</p> <p>National estimates of service coverage for children orphaned or made vulnerable by HIV/AIDS in place and being monitored.</p> <p>Disparities and priorities for action identified.</p> <p>National-scale programmes for children orphaned or made vulnerable by HIV/AIDS supported by UNICEF in at least 25 affected countries.</p>	<p>Introduce policies and legislation to define standards of protection and care for children orphaned and made vulnerable by HIV/AIDS, i.e., fostering and adoption, inheritance and property rights, community-based care and support and role of institutions.</p> <p>Ensure access to essential quality social services for children (health, nutrition, education, welfare and information).</p> <p>Expand the role of schools as community resource and care centres.</p> <p>Strengthen and support community capacities to identify and monitor vulnerable households and to provide for orphans and other vulnerable children supportive environments under the care and protection of a responsible adult (i.e., community-based vulnerability monitoring, leadership orientation, community facilitation, support for community initiatives, home-base care and support).</p> <p>Support participatory planning processes, including situation analyses, and monitoring mechanisms.</p> <p>Support capacity-building and skills upgrading of government, NGOs and community-based organizations in a human rights-based approach to programming for children orphaned and made vulnerable by HIV/AIDS.</p>	<p>Governments</p> <p>National HIV/AIDS councils</p> <p>UNAIDS co-sponsors and secretariat</p> <p>Non-governmental and civil society organizations</p> <p>Faith-based organizations</p> <p>Donor Governments and foundations</p> <p>Young people's associations</p> <p>Associations of people living with HIV and AIDS</p> <p>Professional associations</p> <p>Regional resource institutions and intergovernmental bodies</p> <p>UNICEF NatComs</p>

Organizational priority number 5: improved protection of children from violence, abuse, exploitation and discrimination

Long-term international goals: The child protection goals, as established in global conferences listed below, are to ensure respect and fulfilment of children's rights by Governments, persons in authority and other with influence or control over children's lives.

Violence against children: "Prevent and eliminate all forms of violence against women and girls" (Fourth World Conference on Women, Beijing, 4-15 September 1995); "National and international mechanisms and programs should be strengthened for the defence and protection of children, in particular, (...) sexually exploited children (...) refugee and displaced children, children in detention, children in armed conflict" (Declaration and Programme of Action, World Conference on Human Rights, Vienna, 14-25 June 1993). **Child labour:** "The main goal is the effective elimination of child labour. Priority should be given to immediate removal of children from the most intolerable (extreme) forms of child labour and to physical and psychological rehabilitation of children involved" (Oslo Agenda for Action, 1997). **Sexual commercial exploitation:** "Develop or strengthen and implement laws, policies and programmes (...) to prohibit the commercial sexual exploitation of children (Stockholm Agenda for Action, 1996). **Children without primary caregivers:** Orphans and children made vulnerable by HIV/AIDS: "By 2005, all countries have made significant progress in implementing national strategies and action plans to build family and community capacities to care for and support orphans and vulnerable children; take special measures to protect orphans and vulnerable children from abuse, exploitation, and discrimination" (United Nations Special Session on HIV/AIDS, June 2001). **Children in armed conflict:** "All States and other parties to armed conflict must respect fully their obligations to children affected by conflict under international human rights and humanitarian law" (The First International Conference on War-affected Children, Winnipeg, 10-17 September 2000).

<i>MTSP targets 2002-2005</i>	<i>MTSP target indicators</i>	<i>Core intervention areas</i>	<i>Partnership frameworks</i>
Identify indicators for, document and analyse the impact of violence, including gender-related violence and armed conflict, abuse, neglect, exploitation and discrimination affecting children as a basis for programmatic interventions.	<p>Impact indicators: Indicators established to measure progress made in:</p> <ul style="list-style-type: none"> (a) preventing/mitigating the effects of violence against children; (b) eliminating the worst forms of child labour; (c) providing family/community-based care for children without primary caregivers and in increasing protection for children in armed conflict. <p>Input indicators: (a) Number of UNICEF country offices (Cos) where situation analysis, country programmes and annual reports address the priority areas of child protection: violence against</p>	<p>Impact indicators: To establish child protection indicators in consultation with UN and NGO partners.</p> <p>Input indicators: (a) Technical support provided to each RO by HQ and to each CO by ROs, on how to incorporate child protection issues into country programme and CCA/UNDAP;</p> <ul style="list-style-type: none"> (b) Programme guidance issued on all child protection priority areas; (c) Support to situation analysis on child protection priority areas; (d) Development of key indicators, standards for performance measurement of child protection programmes, strategies and policies; (e) Technical assistance provided to ROs and COs on self-assessment/evaluation of child protection programmes; 	<p>Youth organizations</p> <p>NGOs</p> <p>Special Representative of the Secretary-General for Children and Armed Conflict</p> <p>UNHCHR</p> <p>UNHCR</p> <p>ILO</p> <p>World Bank</p> <p>WHO</p> <p>UNICEF NatComs</p>

<i>MTSP targets 2002-2005</i>	<i>MTSP target indicators</i>	<i>Core intervention areas</i>	<i>Partnership frameworks</i>
	children, exploitation/worst forms of child labour, children without primary caregivers and children in armed conflict; (b) RMTs include review of child protection issues.	(f) Technical support and capacity-building to establishment of national/local/municipal/community monitoring systems for each of those violations.	
Work with Governments to create or revise national standards on the protection of children not in the care of their family, including children in prison or other custodial care, foster care, residential and institutional care, in conformity with international standards.	Impact indicator: Number of institutionalized children. Input indicators: (a) Number of countries issuing laws, administrative directives on minimum standards for care of institutionalized children; (b) Countries where monitoring systems of compliance have been established.	Technical support to Governments towards implementation of international standards related to children in detention, including research and evaluation on alternatives to detention/institutionalization. Advocacy and social mobilization for the adoption of minimum standards. Financing and support to implementation, including technical assistance for drafting publication of standards, development of staff competencies and capacities. Assessment/evaluation of effective implementation of standards.	Youth organizations National media Professional organizations Trade unions ICRC NGOs National executive and legislative bodies Ombudspersons for children/human rights UNICEF NatComs
Support countries to take legal and practical measures towards eliminating trafficking of children, the sexual exploitation of children, forced and bonded labour of children, and the use of children in armed conflict.	Number of countries that established monitoring systems of those violations. Number of countries issuing laws, administrative directives to eliminate the worst forms of child labour. Ratifying international legal standards.	Advocacy, social mobilization and technical support for the establishment of national/local/community-based monitoring systems. Tech support/capacity-building for drafting legal and administrative provisions for elimination of those violations. Technical support/capacity-building for design of interventions to eliminate those violations.	Youth organizations National media NGOs Professional organizations Trade unions National executive/legislative bodies ILO IOM Ombudspersons for children

<i>MTSP targets 2002-2005</i>	<i>MTSP target indicators</i>	<i>Core intervention areas</i>	<i>Partnership frameworks</i>
Develop, fund and implement interventions (including research and communications for behaviour change) and programmes for the reduction of physical and psychological violence against children, whether in the family, the community, in schools and other institutions, or in the form of harmful traditional practices.	<p>Number of children who suffer from physical and psychological violence.</p> <p>Number of countries with national policies or legislation, and adequate enforcement capacities and programmes, for the prevention of discrimination, violence and abuse in the home and in schools, including as relates specifically to women and girls.</p>	<p>Support to the establishment of monitoring systems at national, local, municipal and community level.</p> <p>By 2005, national overviews of violence against children will have been prepared.</p> <p>By 2005, a global overview, based on national overviews, of violence against children will have been prepared.</p> <p>Reporting systems for protection against and monitoring of violence against women and girls.</p> <p>Raise community, civil society and media awareness, and promote family and community action to end discriminatory practices and violence in the home.</p>	<p>Youth organizations</p> <p>National media</p> <p>NGOs</p> <p>National executive and legislative bodies</p> <p>Ombudspersons for children/human rights</p>

Annex II

Regional sub-emphases

1. The multi-year funding framework, as contained in document E/ICEF/2000/5, allows for the MTSP for the period 2002-2005 to be based not only on organizational priorities that UNICEF will pursue through programmes, alliances, partnerships and situation analyses in all countries, but also on the development of “regional sub-emphases and strategies” (para. 35), depending on “more specific issues affecting children’s rights” in different regions. This annex briefly describes these regional sub-emphases, which are basically of two types: those that are areas of particular focus or emphasis within one of the existing five organizational priorities; and those that are a regional priority outside of the five organizational priorities. In both cases, these regional priorities have been developed in close consultation with regional offices and are based upon regional situation analyses.

Western and Central Africa region

2. The West and Central Africa region will work on areas of particular emphasis within the five organizational priorities. In education, particular attention will be paid to the issue of quality, especially for girls. Integrated ECD will be addressed through efforts to reinforce the health systems generally, and through the promotion of an integrated view of ECD, including health, nutrition, care, water and sanitation. As the region second most affected by HIV/AIDS, emphasis will be on prevention through behaviour change, prevention of parent-to-child transmission, and care for orphans and other affected children. Social and economic policy analysis and advice will complement traditional programmes and advocacy, and ensure that children’s rights are reflected in processes such as CCA/UNDAF, SWAPs and PRSPs.

Eastern and Southern Africa region

3. Eastern and Southern Africa is the region most seriously affected by HIV/AIDS. A large number of countries are at the same time affected by armed conflicts and/or natural disasters. Malaria is endemic in most countries, being the single most important killer of young children in the region. Malnutrition is a serious problem, including being a major contributing factor to mortality in the region.

4. Regional priorities for UNICEF in this region include HIV/AIDS and integrated ECD, with strong components of malaria prevention, reduction of MMR and low birth weight, water and sanitation, and nutrition promotion. Other priorities are basic education, with a focus on girls’ education; immunization, including polio eradication; child protection, with a clear focus on children affected by HIV/AIDS, conflict and sexual abuse; and protection of women, including domestic violence and harmful traditional practices. Therefore, all organizational priorities are covered. The high levels of conflict and natural disasters in the region mean that, in many cases, these priorities will have to be pursued through emergency preparedness and response strategies.

5. The HIV/AIDS pandemic in the region underlines the obligation to work with youth and to ensure the protection of orphans and other children made vulnerable by the pandemic. Eastern and Southern Africa is also the region with the weakest social services infrastructure and the highest levels of poverty. In this context, all country

programmes of cooperation have adopted a focus on community capacity development.

Americas and the Caribbean region

6. In the Americas and the Caribbean region, an essential regional sub-emphasis will be on adolescent development and participation as a crosscutting strategy to achieve children's rights. Similarly, disparity reduction will be a major programming theme across the five organizational priorities, reinforced by rigorous social and economic policy analysis and data collection. Emergency preparedness and response will be an important focus of programming.

7. The focus in education will be on access by disadvantaged minorities (e.g., ethnic and linguistic minorities, native peoples and rural area populations) as well as on the quality of education for all children, and the gender sensitivity of the school environment. In some countries, especially in the Caribbean, access by boys to education will receive attention. UNICEF will provide relatively little in direct support to immunization "plus" in this region, since established government systems generally work well. HIV/AIDS is a growing problem, and breaking the silence surrounding this issue will be a challenge, followed by education for prevention. Child protection issues will be an important focus within this region, especially on exploitation of children.

East Asia and the Pacific region

8. The East Asia and the Pacific region's sub-emphases will be on areas of particular focus within the five organizational priorities. Within girls' education, the focus will be on increasing the quality, efficiency and effectiveness of basic education, including the promotion of a second-chance education for adolescents and young women. Under immunization "plus", the focus will be on health system strengthening and the introduction of underused or new vaccines such as HiB, Hep B and Japanese B encephalitis. Within HIV/AIDS, it is expected that the focus will be on prevention of transmission of HIV and STIs among children and young people, and care and support to orphans and other affected children. Cross-border cooperation to address trafficking of children and women, and development of monitoring systems for child protection will be of particular concern. Emergency preparedness, water, sanitation and hygiene, nutrition, safe motherhood and rigorous socio-economic analysis of disparities and trends will be crosscutting strategies for the region.

South Asia region

9. The organizational priorities conform well to the regional situation in South Asia. The region will also pursue two regional priorities: maternal mortality reduction, and water quality and environmental sanitation. The regional sub-emphasis on maternal mortality is justified by the fact that half of the world's cases of maternal mortality occur in this region, which contains only one fifth of the human population. Most of these maternal deaths are avoidable; UNICEF will focus in this region on the underlying causes of maternal mortality, i.e., caste and ethnic discrimination, gender insensitivity, misconceptions and harmful practices before and during child-birth, violence against women, anaemia, and lack of access to good quality early obstetric care. Despite some progress in recent years, access to safe

water is still a problem for many millions in South Asia, and water quality has deteriorated for many millions of others who had received improved supplies. Furthermore, low levels of access to sanitation and poor hygiene practices have severe consequences. UNICEF will work in this region to address these issues.

Middle East and North Africa region

10. In the Middle East and North Africa region, UNICEF will work in several areas of particular emphasis within the five organizational priorities. These will involve various approaches, given the diversity of situations in the region. Learning achievement is a concern throughout the region, and particular attention is needed to gender sensitivity of the school environment and curriculum. For several countries, the emphasis will be on increasing enrolment and retention, especially for girls. Efforts to stem the spread of HIV/AIDS will address the problems of denial, public education for adults and young people, plus prevention of parent-to-child transmission in a few high-incidence countries. Protection efforts for children and women will target reform of legal systems and national policies. Special emphasis will continue for emergency preparedness, both programmatic and operational. With a range of adolescent issues emerging in all countries, young people's participation in decision making is an additional priority for this region. Maternal health will also be a subregional priority, involving strategy development to improve access to good quality maternal health services.

Central and Eastern Europe, the Commonwealth of Independent States and the Baltic States region

11. Innovative programmes to promote adolescent development and participation will figure prominently as a region sub-emphasis in the central and Eastern Europe, the Commonwealth of Independent States and the Baltic States region. Adolescent development and participation programmes will help determine how inclusive and child-friendly these societies will be in the future. Emphasis will be on building democratic and consultative institutions and mechanisms to ensure that the voice of youth is heard in social policy making circles, and on developing the positive potential of adolescents as citizens.

12. Country offices in the region will also pursue regional sub-emphases that are areas of particular focus within the five organizational priorities: salt iodization (integrated ECD); improved access to quality ECD opportunities (integrated ECD); ensuring universal access to quality education for all children, with a focus on minorities, the disabled and the poor (girls' education); reducing HIV infection among young people and ensuring all pregnant women have access to services for the prevention of parent-to-child transmission; reform of social protection policies and systems to promote family care, and social inclusion of minorities and those with disabilities (child protection); and development of national data collection systems to track exploitation, violence and abuse (child protection).

Industrialized countries

13. UNICEF presence in industrialized countries is ensured in large part by the 37 National Committees for UNICEF, whose mandate is to support UNICEF policies and programmes through advocacy, development education and fund-raising. The National Committees will promote the five organizational priorities through

advocacy with Governments, the general public, the media, academia, the private sector, young people, and NGO and other civil society partners in their own countries. The Geneva Regional Office, in collaboration with the Innocenti Research Centre in Florence and the Programme Group in New York, will work with regional intergovernmental institutions. UNICEF research and advocacy on the problems faced by children in industrialized countries will focus on access to quality education by the socially excluded (e.g., the poor, ethnic minorities and refugees), early childhood development and child protection. A regional focus will be on lifestyle problems, especially of adolescents, for example, substance abuse, mental health, teenage suicide, obesity and eating disorders, and the pervasive problem of alienation of young people from their families and societies. UNICEF and the National Committees will seek to ensure that Governments in industrialized countries provide information and report on all five organizational priorities.
