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Country note**

Equatorial Guinea

Summary

The Executive Director presents the country note for Equatorial Guinea for a programme of cooperation for the period 2002-2006.

The situation of children and women

1. Equatorial Guinea consists of a mainland region and five islands. The capital, Malabo, is on the largest island, more than 250 kilometres from the mainland area. The population, an estimated 460,000 inhabitants, is very young, with 49.5 per cent under 18 years of age; women account for 51.2 per cent. Since 1994, thanks to the exploitation of petroleum deposits, the economy has expanded rapidly, as shown by the spectacular growth in gross domestic product (GDP) from \$380 per inhabitant in 1995 to \$1,110 in 1998. However, further efforts are required to ensure equitable distribution of the growing GDP to the population as a whole. In 1997, the National Economic Conference concluded that 40 per cent of public expenditure should be allocated to the social sector under the Medium-Term Development Strategy. To date, no initial reports under the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women have yet been submitted and no satisfactory system exists for compiling statistics on the situation of children or women.

* E/ICEF/2001/2.

** An addendum to the present report containing the final country programme recommendation will be submitted to the Executive Board for approval at its second regular session of 2001.



2. Although infant mortality and under-five mortality rates decreased significantly between 1994 and 1998 (from 120 to 111 and from 240 to 171 per 1,000 live births, respectively), the situation of children remains highly precarious. The main causes of under-five mortality are malaria (37.7 per cent), diarrhoeal diseases (15.9 per cent), acute respiratory infections (13.7 per cent) and measles (1.9 per cent). In 1996, immunization coverage was 81 per cent (triple doses of diphtheria, tetanus and whooping cough); current problems in the health system point to a likely decrease in that figure. The maternal mortality rate is estimated to be 352 per 100,000 live births. About 60 per cent of deliveries take place at home, usually in the absence of qualified personnel. A study carried out in five district hospitals in 1998 by the Ministry of Health showed that 25 per cent of deliveries involved young women less than 19 years old. HIV/AIDS seroprevalence — estimated to be 1.7 per cent in 1992 — rose to 3 per cent in 1996, with women accounting for 67 per cent of cases (Ministry of Health/European Union). Risk factors include lack of public awareness about means of prevention and poverty, which causes some young women to have casual sexual relations with men. 15.4 per cent of the population — including 65 per cent girls — suffer from iodine deficiency (the mainland region being the most affected). Only 26 per cent of the population consume iodized salt. Approximately 20 per cent of the rural population and 53 per cent of the urban population enjoy access to potable water. The Multiple Indicator Cluster Survey (MICS) will allow such data to be updated.

3. In 1998, the net school enrolment rate was 81 per cent, with the private sector playing a significant role. The public education system suffers from poorly trained staff, the small number of schools (often dilapidated and ill-equipped), as well as the scarcity of educational materials, which partly explain the high drop-out, repetition and late entry rates at the primary level (9.3, 27 and 45.5 per cent respectively). Heavy domestic chores, the pressure of traditional practices and low family incomes explain why still only 24 per cent of girls complete primary education. Pre-school (non-formal) education coverage increased from 10.2 per cent in 1990 to 43.3 per cent in 1998, but in view of the lack of budgetary resources, its future remains in question.

4. Regarding the situation of women, current legislation is not always in conformity with the Convention on the Elimination of All Forms of Discrimination against Women. Moreover, in most cases, family questions are still regulated by customary law, which sometimes discriminates against women and children, particularly in respect of questions related to dowry, separation, divorce and child custody. The poverty afflicting many families occasionally leads parents or guardians to seek or accept paid work for their children. The petroleum sector has attracted a massive influx of foreign labour — single men for the most part — which has resulted in an increase in prostitution, including child prostitution.

5. This updated account of the situation of children and women is based on an analysis of the current situation using rights/gender-based approaches and the Common Country Assessment (CCA) elaborated in 1999. The MICS — the results of which are expected in early 2001 — will allow such data to be refined and supplemented.

Lessons learned from recent programme experience

6. The 1999 annual review highlighted the lack of conformity of legislation with the two Conventions, the shortcomings in implementation and monitoring, and the inconsistencies between certain customary law practices and the Conventions. It is thus necessary to strengthen mechanisms not only to improve the implementation and monitoring of the Conventions, but also to raise awareness of these instruments among the population and the authorities. Certain special events, such as the commemoration of the Day of the African Child, have helped raise overall public awareness of children's and women's rights.

7. Given the burden of poverty on families and communities, the concept of voluntary participation is often questioned by the beneficiaries themselves. It was partly for this reason that some projects incorporating a non-remunerated community contribution have failed to attain their objectives. This grass-roots reaction could also explain the decrease in non-formal pre-school education coverage as well as the erratic functioning of water point management committees. Conversely, the high rate of coverage (95 per cent) achieved during national polio immunization days — thanks in particular to concerted international cooperation at all levels to mobilize human, financial and material resources, as well as to the strong mobilization of communities — demonstrates the eagerness of such communities to contribute actively to their own development. In future, it would thus be necessary to emphasize more participatory approaches involving the direct participation of beneficiaries in the identification of poverty eradication strategies.

8. Overall, the projects encountered difficulties in finding counterpart funds. Partners also had difficulty adapting to administrative programme-management and follow-up procedures. The heavy centralization of public services has also continued to affect certain activities. A committee for the coordination, monitoring and follow-up of projects has been established in order to tackle those problems; that committee is to be strengthened.

Proposed country programme strategy

9. The rapid rise in revenue from petroleum exploitation requires the elaboration of a new type of programme which would help, inter alia, to promote the equitable distribution of the new wealth in the interests of children and women. The national Medium-Term Development Strategy (1997-2001) for the social sectors and the CCA provide a frame of reference for the elaboration of the new cooperation programme. This programme is also part of the new momentum relating to the preparation of the United Nations Development Assistance Framework (UNDAF). The current cooperation programme has thus been reduced by two years in order to synchronize the cycles of the United Nations agencies as of 2002; a mid-term review will thus not be held. The consensus achieved during the programme orientation strategy meeting, attended by the Government, UNICEF and other stakeholders, was consistent with the Global Movement for Children and the UNICEF medium-term plan, as well as with the "Vision of the African Child in West and Central Africa".

10. The aim of the cooperation programme is to contribute to the promotion and realization of children's and women's rights. In view of the limited resources

available to the programme, its principal objectives between now and 2006 are to assist in: (a) achieving close harmonization between national laws and the two Conventions, and strengthening the monitoring of their implementation; (b) improving access to and quality of basic health and education services in seven districts; and (c) strengthening mechanisms for monitoring the situation of children and women, as well as measures to help children with special protection needs.

11. In tandem, the country programme will support nationwide projects as well as those confined to a target area comprising the seven districts covered by the previous cooperation programme. These seven districts had been selected on the basis of reliable social and economic indicators, high poverty level and low involvement of other international development partners. These criteria remain valid. In order to ensure sustainability, the new cooperation programme would continue certain former cooperation activities in the field of primary health care, immunization, education for girls and early childhood development. At the same time, the programme's contribution in certain priority or emerging fields — such as promotion of human rights, prevention of HIV/AIDS and improvement of the quality of education — will be strengthened. The programme will accord particular attention to monitoring the situation of children and women and to follow-up and evaluation of the implementation of such activities.

12. Strategies to be adopted will include national capacity-building at all levels, and development of the partnership between Government, civil society, UNICEF and all other stakeholders, with a view to creating new alliances and consolidating existing ones. Particular attention will be accorded to communication to encourage behavioural change and implementation of a rights-based approach, for example through the identification of gender-based disparities and discrimination, and of the most vulnerable groups. Advocacy for efficient allocation of resources to priority social sectors will also be strengthened. Support for the delivery of services will primarily involve the fields of health, education and water and sanitation in the seven target districts, inter alia through quality enhancement, community participation — especially of young children and adolescents — and use of appropriate technologies. The Government will also receive support for furthering the decentralization of public services under the coordination of national and regional planning bodies.

13. The *programme for the promotion and monitoring of the implementation of children's and women's rights* will help to: facilitate the implementation of the two Conventions; strengthen mechanisms for monitoring the situation of children and women, in particular the most vulnerable groups; and develop activities targeted at groups of children with special protection needs. Activities will also be undertaken to promote the gradual harmonization of national laws with the Conventions, to strengthen the capacities of the judiciary, the police and local authorities, and to promote behavioural changes among traditional authorities, communities and families. A comprehensive plan for follow-up and assessment of the country programme will also be implemented. Indicators for monitoring emergency preparedness will be proposed. The programme — with the collaboration of other United Nations agencies — will help reinforce the national system for compiling and analysing social statistics. It will also facilitate the identification of vulnerable groups and priority activities and strengthen advocacy for better allocation and utilization of the State budget to improve basic social services. In the second phase

of the programme, better targeted and more specific activities for children with special protection needs will be developed.

14. The objectives of the *child survival and development programme* are to: help to reduce infant mortality from 111 to 89 per 1,000 live births and maternal mortality from 352 to 280 per 100,000; and, in accordance with national objectives, to increase the net school enrolment rate from 81 to 86 per cent and the rate of completion of basic education for girls from 24 to 34 per cent, and to reduce the repetition rate from 27 to 22 per cent and the rate of school drop-outs from 9 to 4 per cent. At the national level, the programme will support: development of national health and basic education policies with the close collaboration of all partners involved; eradication of poliomyelitis and strengthening and maintenance of routine immunization coverage; efforts to combat iodine deficiency; and prevention of HIV/AIDS, particularly among adolescents. Within the limits of available resources, the programme will provide support for activities in the selected districts, including staff training and improved access to upgraded basic education and health services. Particular attention will be accorded to: integrated coverage for early childhood diseases; early detection of high-risk pregnancies; promotion of the "School — a child's best friend" initiative; school enrolment of girls; strengthening of water point management bodies; and encouragement of local participatory approaches directly involving communities, families, young people and women.

15. The cross-sectoral costs will help strengthen programme coordination mechanisms and cover some staff and operational costs for the various projects. Coordination of the country programme will be provided by the Ministry of Planning and Economic Development. At the level of the seven selected districts, operations will be coordinated by decentralized structures of the Ministry of the Interior responsible for decentralization.

Estimated programme budget

Estimated programme cooperation, 2000-2006^a

(In thousands of United States dollars)

	General resources	Supplementary funds	Total
Promotion and follow-up of implementation of children's and women's rights	1 635	442	2 077
Child survival and development	824	858	1 682
Cross-sectoral costs	810		810
Total	3 269	1 300	4 569

^a These are indicative figures only which are subject to change once aggregate financial data are finalized.