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Country note**

Algeria

Summary

The Executive Director presents the country note for the programme of cooperation with Algeria for the period 2002 to 2006.

The situation of children and women

1. Algeria has undergone significant political and socio-economic developments since 1998. The Government has made the return to peace and stability its political priority which has been endorsed by the referendum on civil concord. Thousands of people have laid down their weapons and have been pardoned or amnestied. Violence has declined considerably and the security situation has improved, although it remains a matter of concern. Isolated acts of terrorism continue to target the population, in particular women and children. A new impetus has been given to the transition to the market economy, but the full impact of that process has yet to be felt. Algeria's economy is heavily dependent on oil revenues, and the country imports between 60 and 70 per cent of its food requirements. According to the National Economic and Social Council, over 20 per cent of the population are living below the poverty line. Although inflation has been brought under control (3.5 per cent in 1999), the erosion of personal purchasing power is worsening (15 per cent over the past two years in inflation-adjusted dinars). Unemployment remains at a

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^{**} 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.

high level (29 per cent of the active population, and over 55 per cent in the 20 to 24 year age group). This situation is likely to exacerbate poverty and exclusion.

- 2. The infant mortality rate has not varied significantly for a decade (between 32 and 36 per 1,000 live births). Neonatal mortality represents 50 per cent of that rate, reflecting the inadequacy of maternal health services and of perinatal and neonatal care. The other major causes remain respiratory infections and acute diarrhoea. Immunization coverage has increased, reaching a rate of 83 per cent in 1999. The rate varies significantly, between 48 and 95 per cent, from one *wilaya* (department) to another. No cases of polio have been reported since 1997. According to a national survey made in 1999, the maternal mortality rate is 140 per 100,000 live births. Protein-energy malnutrition is on the increase, rising from 9 per cent in 1992 to 13 per cent today.
- 3. With respect to education, the Government has made a priority of the reconstruction of over 500 schools destroyed by terrorism. The school enrolment rate has fallen slightly from 95 per cent in 1995 to 94 per cent in 1998 (91 per cent among girls as against 94 per cent among boys). Enrolment rates are below the national average in the *wilayas* in the south and in the highlands: in Ghardaia in the south, the rate is only two thirds that in Béjaia in the north. The quality of teaching is the subject of frequent criticism. The school drop-out rate is rising: in 1999, 20 per cent of the school-age population was not enrolled. A consensus has taken shape concerning the need for a wide-ranging reform of the educational system. Thirteen per cent of young people between the ages of 15 and 24 years, and 19 per cent of girls in the same age group are illiterate. In rural areas, 22.5 per cent of young people are illiterate, 71 per cent of them being girls.
- 4. Tens of thousands of children and women have been subjected to extreme violence as a result of the prevailing insecurity throughout the country. The institutions of the State and of civil society have taken action, with the support of UNICEF, to address this exceptional situation. A range of time-limited or long-term activities has begun in the field and a national action plan for the psycho-social support of children who have been victims of the violence is currently in preparation. Out of a total population of 31 million, 253,526 disabled children (from birth to 18 years of age) were registered in 1998. The number of children abandoned in institutional care is estimated at over 3,000 per year, whereas the admission capacity of orphanages is only 1,000 places. Data relating to juvenile delinquency, child abuse, drug addiction and prostitution among minors, and the employment of children, are generally inadequate and in some cases non-existent.
- 5. The scene has changed considerably over the past decade with regard to the media, particularly as a result of the emergence of a dynamic private press. Television and radio remain a State monopoly. Television is unquestionably the main news medium, and over 95 per cent of households own a television set. Another noteworthy feature is the presence in the field of numerous non-governmental organizations (NGOs) which are all potential forces for social mobilization. Data concerning the economic and social fields come from a number of sources. The various national institutions have their own regular data-collection systems and they also make use of surveys and studies. However, there is no machinery for the coordination and exchange of data between the various sectors concerned.

Lessons learned from past cooperation

- 6. Two shortcomings were identified in carrying out the 1998-2000 programme of cooperation. The first was related to the geographical spread of interventions which made it difficult to bring activities together and to evaluate their impact. The second was related to the definition of objectives and strategies which did not always rest on rigorously defined criteria or on a clearly established system of monitoring and evaluation.
- 7. Consequently, it is a question, on the one hand, of effectively decentralizing programmes and integrating them at an intrasectoral and intersectoral level, while, in particular, developing pilot projects in high-risk areas, thus enabling optimum use to be made of resources while reducing their dispersal. It is necessary, on the other hand, to better define indicators and the process of project planning and programming.

Proposed country programme strategy

- 8. The design and preparation of the 2002-2006 country programme, rests on an approach based on respect for and defence of children's and women's rights. In that spirit, the planning and programming exercise was conducted with the active participation of all partners from Government, specialized agencies, NGOs, universities and the country team, supported by the regional office. UNICEF has harmonized its programming cycle with those of the United Nations Development Programme and the United Nations Population Fund and has included its cooperation programme in the United Nations Development Assistance Framework (UNDAF). The country office has participated actively in the preparation and formulation of the Common Country Assessment (CCA).
- 9. The programme of cooperation will contribute to Algeria's efforts to reduce the impact of poverty and violence on children, infantile and maternal mortality, and geographical and gender-related disparities. The activities to which UNICEF will make its contribution will focus mainly on the most disadvantaged groups. The programme will also include targeted activities at the national level, in areas in which changes of policy have the potential to bring about a decisive improvement in the situation of children. Because of the slenderness of the available resources, the choice of such interventions will be a decisive factor. Consequently, the programme will be based on: (a) the development of initiatives at the local level, with community participation; (b) strengthening management at the national level; (c) strengthening advocacy and social communication; and (d) the development of a partnership for respect for, and the defence of, the rights of the child, based on a strategic alliance between the institutions of the State, community organizations, local communities and the United Nations system.
- 10. The *health and nutrition* programme will contribute to the attainment of the national objectives, in particular: national immunization coverage of 90 per cent for all vaccine-preventable diseases; the eradication of polio; the introduction of the strategy for the integrated treatment of childhood diseases (diarrhoea, acute respiratory infections and malnutrition); an increase in childbirth in an assisted environment; vitamin A coverage for all children under 2 years old; and the reduction of protein-energy malnutrition in under-5-year-olds. The contribution of

UNICEF to the attainment of these national objectives will be based on two complementary strategies: support for national maternal and infantile health and nutrition programmes, and the consolidation of their attainments; and local initiatives mainly aimed at populations and areas at risk, while promoting the development of strategies at the national level. The fight against HIV/AIDS will be strengthened, in particular through social communication activities and advocacy.

- 11. The *education* programme will contribute to the national efforts to promote accessible and high-quality education for all. It will be conducted, on the one hand, through research activities, advocacy and institutional capacity-building at the national level and, on the other, through intervention at the local level in disadvantaged regions. These interventions will enable school enrolment and dropout rates to be improved nationally, and will serve as pilot experiments and as models for innovative approaches. UNICEF will also contribute to the efforts of the Government in the framework of intersectoral interventions, in the field of school health and providing for the education of the disabled.
- 12. The *child protection* programme will contribute to improving the protection and well-being of children in difficulty. It will focus on psycho-social support for children traumatized by violence in their family and community environment, in the ten most seriously affected *wilayas*. UNICEF will provide technical and material assistance for such support and for national capacity-building in the field of trauma. It will focus also on strengthening the information system and the legal machinery for intervention and prevention. In addition, it will facilitate the implementation of pilot projects at the local level with a view to developing models for the support and social reintegration of disabled children, abandoned children and adolescents in difficulty.
- 13. The communication, monitoring and evaluation programme will focus on promotion of the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women, and on the establishment of a global and integrated programme for advocacy and social communication, monitoring and evaluation for child survival, development and protection. This will be accomplished through: the implementation of a national social communication plan; capacity-building for national institutions, NGOs and the community; the establishment of a national mechanism for the implementation and monitoring of both Conventions; and support for the regular analysis of the situation of children and women, in particular through national machinery for coordination and the exchange of data between the various sectors concerned. Finally, an integrated plan for monitoring and evaluation of the programme of cooperation will be developed for the regular monitoring and evaluation of that programme.
- 14. The cross-sectoral costs will be used for the funding of the following five posts: programme assistant, information technology assistant, supply assistant, programme secretary and programme driver, as well as to cover programme overheads.

Estimated programme budget

Estimated programme of cooperation, 2002-2006^a

(In thousands of United States dollars)

	Regular resources	Other resources	Total
Health and nutrition	1 350	800	2 150
Education	1 350	900	2 250
Child protection	1 300	1 300	2 600
Communication, monitoring and evaluation	1 028	0	1 028
Cross-sectoral costs	600	0	600
Total	5 628	3 000	8 628

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