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Summary of mid-term reviews and major evaluations of country programmes

West and Central Africa region

Summary

The present report was prepared in response to Executive Board decision 1995/8 (E/ICEF/1995/9/Rev.1), which requested the secretariat to submit to the Board a summary of the outcome of mid-term reviews (MTRs) and major country programme evaluations, specifying, inter alia, the results achieved, lessons learned and the need for any adjustments in the country programme. The Board is to comment on the reports and provide guidance to the secretariat, if necessary. There was only one MTR, of the Benin country programme, in West and Central Africa during 2001. The five evaluations described in the present report were also conducted during 2001.

Country mid-term review

Benin

1. The objectives of the Benin MTR were to reinforce the country programme in the context of new national priorities and the new strategies of the UNICEF Medium-Term Strategic Plan (MTSP); evaluate programme implementation in accordance with objectives fixed by the master plan of operations (MPO); and reinforce the integration of new intersectoral dimensions (HIV/AIDS, adolescence and early childhood development). The methodology involved sectoral programme

* E/ICEF/2001/9.

reviews and review by working groups of existing evaluations and studies on five main themes: fundamental strategies of convergence and synergy; HIV/AIDS; early childhood; youth and behavioural change; and collaboration and partnership. A participatory workshop for children and young people was organized with members of Local Councils of Child Democrats to solicit their views on the country programme. Another workshop examined lessons learned and its recommendations were taken into account during a programme review that utilized a logical framework matrix to revise the different programmes. The MTR took place with the participation of UNICEF, the Government, other United Nations agencies, partners, donors and children.

The situation of children and women

2. Following the 2001 presidential elections, which permitted the consolidation of democracy, the new Government is preparing a Poverty Reduction Strategy Paper (PRSP) and a new five-year action programme. Benin has made progress, as indicated by a 43-per-cent reduction in child mortality, a 99-per-cent reduction in the number of cases of dracunculiasis and “vaccine independence” (100 per cent of vaccine costs have been borne by the national budget since 1999). Immunization rates are consistently high. The gross school enrolment rate of girls has increased by almost 10 per cent in two years. There has also been progress in the areas of safe motherhood (the rates of assisted births and prenatal consultations have risen by 60 per cent), access to safe drinking water and the fight against child trafficking. Benin has ratified International Labour Organisation Conventions (ILO) 138 and 182 and signed the optional protocols to the Convention on the Rights of the Child on children in armed conflict and on the sale of children, child prostitution and child pornography. The Government is taking steps to revise laws concerning the trafficking of minors.

3. Poverty rates have not changed in recent years, with approximately 30 per cent of the population living in poverty, and some areas remain problematic. Maternal mortality and morbidity rates remain high, with problems of early pregnancy and induced abortions. Community health, hygiene and sanitation practices are poor, and less than one fifth of the population has access to adequate means of sanitation. School retention rates, especially for girls, are low. Progress is needed in the fight against HIV/AIDS (the prevalence rate was 4.1 per cent in 1999), especially mother-to-child transmission of HIV.

Achievements and constraints

4. The country programme consists of programmes to support health, social and community development, as well as advocacy and communication and monitoring and evaluation. Half way through the country programme cycle, most objectives of the MPO are being met. The health development programme contributed to the revitalisation of the Bamako Initiative through support for the creation of health zones in the three programme convergence zones, the development of planning and management competencies and tools, and technical reinforcement of public health centres. The programme supported the adaptation of the Integrated Management of Childhood Illness approach to the needs of Benin and improved the quality of health care for women through the development of emergency obstetrical and neonatal procedures. It provided support to operational research for the prevention of vertical transmission of HIV from mother to child in 33 maternity hospitals in Cotonou. It

supported the national immunization programme and efforts to combat micronutrient deficiencies. The programme's objectives relating to water, hygiene and a healthy environment contributed to a 65-per-cent reduction in the number of cases of dracunculiasis between 1999 and 2001. It supported the drilling of 45 boreholes in endemic villages and the establishment of cisterns and latrines in almost one half of the schools supported by the education project, and trained teachers and members of parent-teacher associations in hygiene and sanitation improvement.

5. As part of the social development programme, the education project, through support to schools, aims to reduce the gap in attendance between boys and girls. The retention rate for girls is nearing the national average. In the programme's six target zones, the MPO objective of a 2-per-cent reduction in gender disparity has been reached, which is greater than the national average (by 0.9 per cent). Between 1998 and 2000, the gross enrolment rate for girls increased by 23 per cent in the six project zones, while the national average increased by only 11 per cent. In line with the MPO objectives, the project for children in need of special protection measures has supported the creation of 270 local village committees to fight child trafficking. From 1994 to 2000, almost 4,000 children and 81 traffickers were intercepted and arrested. Some 623 communicators, opinion leaders, teachers, social workers, legal personnel and members of local committees were trained in child rights. Public awareness activities on national and regional levels attracted attention to trafficking issues.

6. The community development programme concentrated on 30 villages (10 per cent of the number of villages originally planned), as a test for the reinforcement of community capacities. Villagers in these communities were taught literacy to enable them to acquire knowledge in village planning and 300 village planners were trained in community diagnosis and village planning. Local development plans were set up, and communities identified income-generation units to finance their plans.

7. Following the objectives of the advocacy programme, texts about child exploitation were published and lawyers trained on women's rights. The project helped to raise awareness about children and women's rights and launched the Global Movement for Children in Benin in April 2001. The communication project met its objectives by supporting the creation of 70 Local Councils of Child Democrats, involving 2,000 pupils and 50 moderators, and launching the "Voice of Children" campaign.

8. The monitoring and evaluation programme supported the establishment of a common database for the United Nations system within the framework of the Common Country Assessment (CCA), which will also be used as a national socio-economic database, known as "BenInfo". The programme also assisted in integrating data on sanitary and school cards in the programme convergence zones in order to harmonize monitoring tools.

9. Programme implementation was somewhat affected by the presidential elections in 2001. The heads of the Ministries collaborating with UNICEF (Health, Education and Social Protection) were changed following the elections. On the other hand, UNICEF seized opportunities through its involvement in the elaboration of the PRSP by constantly advocating for the 20/20 Initiative. Other opportunities were presented through the United Nations reform, the harmonization of programme cycles and the growing interest of the World Bank in social sectors. UNICEF was the lead agency for the preparation of the CCA and its database.

Assessment of programme strategies: lessons learned

10. At the national level, there has been a progressive realization of the impact of poverty and of the need for communities to take the initiative to fight poverty, resulting in a culture of integrated community development planning. However, programme structures were found to be very vertical. It is important that all actors implement programmes in a convergent manner, consolidating activities, reinforcing integrated follow-up mechanisms and developing coordinated programmes among United Nations agencies. Within the overall country programme, the community development programme's strategy of convergence and synergy has been developed sporadically because too many activities have focused on reinforcing community capacities in village planning, with a feeble impact. The effort deserves to be continued, but through consolidation with sectoral projects and support to the decentralization process in Benin.

11. HIV/AIDS is now recognized as a cross-cutting problem that concerns all age groups and social sectors. Nevertheless, there is little coordination of relevant training activities for adolescents. On the other hand, there have been promising experiences in the prevention of mother-to-child transmission of HIV (PMTCT), which should be expanded. The Government's political will is evidenced by its decision to finance the fight against HIV/AIDS from the national budget and from funds made available from the Highly-Indebted Poor Countries Initiative, with the Joint United Nations Programme on HIV/AIDS (UNAIDS) providing a framework for collaboration. The MTR recommended emphasizing PMTCT, prevention of sexually transmitted diseases and HIV/AIDS among adolescents, the protection of children infected by AIDS and the integration of AIDS activities in the minimum package of activities of health centres, as well as in all projects of the country programme.

12. The programme of cooperation developed actions in favour of the young child using a sectoral approach. As there are no distinct policies concerning early childhood development at the national level, the MTR recommended setting up an integrated action plan in favour of the young child in the zones of programme convergence. This would call for the protection of children affected by AIDS, the provision of psychological support to HIV-positive mothers, as well as birth registration, parental education and the integration of early childhood development in all projects, with emphasis on the family and on the 0-3-year age group.

13. During its original conception, the country programme did not really consider the participation and opinion of children. Their participation in the MTR process was very constructive and should be expanded. The country programme partners have decided to involve children more systematically in the elaboration of all future programmes, documents and reviews.

Country programme management plan (CPMP)

14. As a result of the MTR recommendations, several subprojects were created under the main programmes to allow for better utilization of resources. Changes were made to the office staffing structure, especially in response to requirements for new staff in the areas of child protection and HIV/AIDS. A subproject was created under health development to emphasize PMTCT of HIV and support to HIV-infected persons, especially the young. Emphasis was placed on hygiene and sanitation activities in pre-schools and at family and community levels, and on

HIV/AIDS training by village volunteers. Three subprojects were created under the education project to target the age groups concerned (early childhood, primary and adolescent education), and to respond to needs for behavioural change in the face of HIV/AIDS and continuing efforts in the fight against child trafficking. Under community development, three projects were created to better integrate community development in sectoral activities and better target the communication activities for behavioural change required by sectoral projects.

15. The MTR noted that through the integrated monitoring and evaluation plan (IMEP), the country programme followed the principal monitoring and evaluation indicators of the different programmes as well as the planned evaluations, and also made efforts to improve the data collection system. The adoption of the logical framework approach for the country programme provides an opportunity for better execution of the IMEP.

16. The levels of other resources authorized for the community development and advocacy programmes were not obtained, because donors did not seem to be interested in financing intersectoral programmes. In order to avoid losing potential funding, as well as to respond to the new directions of the programme, the MTR recommended the reallocation of other resources. As a result, \$4 million planned as other resources for the community development programme and \$500,000 for the advocacy project were transferred to sectoral programmes. These funds will be used to achieve community development objectives but through assistance to sector-related activities.

17. The revised programme structure for 2001-2003 adopted by the MTR reflects the convergence of government priorities with the priorities of the MTSP. It also reconfirms the strategic and central character of the community development approach. This will allow the country programme to take account of such issues as early childhood, the fight against HIV/AIDS and problems of the adolescents in a coordinated manner. The programme continues to be based on a strategy of synergy and convergence, reinforcement of assistance to decentralization and building capacities for planning at the community level.

Major country programme evaluations

Monitoring of Learning Achievement project in West and Central Africa

18. Monitoring of Learning Achievement (MLA) is a joint project of UNICEF and the United Nations Educational, Scientific and Cultural Organization (UNESCO) which aims to monitor and evaluate educational performance. The project is motivated by the quest for more scientific and systematic ways of assessing children's learning achievements, and by the need for informing policy and improving practices in the face of the apparent deteriorating quality of basic education.

19. Four countries in the region completed an evaluation of the project in 2001: Cameroon, the Gambia, Liberia and Senegal. The evaluations were based on a standardized methodology and instruments. They covered only fourth-grade pupils in primary schools and dealt with performance in three areas: literacy, mathematics

and life skills. The rationale for limiting the evaluation to the fourth grade is based on strong empirical evidence that effective education up to the fourth grade prevents illiteracy.

20. Background information was also collected on the pupils within their context of learning, consisting of the type of school, its location (urban or rural setting), the distance from the school to the home, the child's attitudes towards school, the number of meals eaten per day, whether there is help within the household for homework or support to learning, the family's living conditions and the parents' education and socio-economic status. Data were also gathered on teachers, classroom requirements, learning materials, school equipment, teachers' guides and available school services and amenities. UNESCO organized the regional MLA capacity-building workshop and UNICEF funded the studies.

21. The objectives of the study were to: (a) assess children's learning achievements in the core subjects (English/French, mathematics, life skills); (b) assess the factors that might influence children's learning achievements (i.e., gender, age, school, urban/rural location, the teacher or factors related to the parents and/or the pupil); and (c) formulate strategies to remedy identified problems and weaknesses in children's learning processes.

22. The evaluations used multivariate analyses of scores recorded in each of the three areas, allowing the researchers to assess the strength and direction of the relationship between the school performance measurements and the background variables. The net effect of each of these background factors is inferred after controlling for potential confounders. The analyses looked at the minimum mastery level and the desired mastery level for each area. The main findings and recommendations of the national evaluations are presented below.

23. In general, performance was poor in all three test areas in all four countries, with mean scores below 50 per cent, no matter the country or the test area. On average, pupils do not achieve one half of the maximum expected achievement score. Most fourth-grade pupils fail to achieve the minimum mastery level (a score of 50 per cent, or lower in Liberia), let alone the desired mastery level (a score of 73 per cent). Pupils who do not achieve the minimum level are very likely to return to illiteracy if they drop out school in the fourth grade.

24. Achievement rates in mathematics were among the lowest of the test areas. In all four countries, more than 60 per cent of pupils failed to achieve the minimum mastery level and 90 per cent failed to achieve the desired mastery level, except in Liberia. The apparent good performance of pupils in Liberia is due to the fact that the minimum and desired levels were set at very low levels (30 and 50 per cent respectively) whereas in the other three countries the levels were set at 50 and 73 per cent.

25. The four evaluations fail to provide any compelling evidence of difference in performance by gender, with girls and boys performing at the same level in all subject areas in the four countries.

26. The evaluations found that having textbooks does make a difference, pointing to the importance of textbooks and their provision by the Government when parents are poor and cannot buy them.

27. In Cameroon, the Gambia and Liberia, performance in almost all test areas was better in rural than in urban schools. Overcrowded classes in urban areas, where the demand for schooling is the highest, possibly account for the poor performance.

28. In all four countries, pupils in private schools perform better than their counterparts in public schools. Classes are less crowded in private schools, the required textbooks are very often available, and most of the students come from well-to-do families.

29. In Liberia, the mean age of the fourth grade pupils was 13 years, against a normal age group of 9-11 years for this grade. Seven years of war could explain the preponderance of overage pupils, and perhaps be one reason why the older pupils do not perform better than the youngest ones. In Cameroon, most pupils in the fourth grade are aged 9-10 years, and the youngest pupils perform better than the oldest ones, except in life skills.

30. In Liberia, apart from chalk, there are few teaching aids and resources to work with, including teachers' editions of textbooks. The ratio of female to male teachers is 1:7. Most school facilities were found to be inadequate and the schools lacked telephones, radios, electricity and books to loan to students. Public libraries are very rare. In the Gambia, the scarcity of such essential teaching and learning materials as blackboards, chalk, syllabuses and textbooks often reach levels that affect the quality of learning achievement.

31. The results of the MLA study have already been utilized through sharing with UNICEF education partners for the African Girls' Education Initiative, including Ministries of Education, UNESCO, the United Nations Populations Fund and local NGOs. In Liberia, for instance, they are being utilised for informing the implementation of the Initiative and the new country programme for 2003-2005. Several other country offices plan to conduct the MLA evaluation in 2002.

Decentralization in Chad

32. The UNICEF programme of cooperation in Chad for 1996-2000 included a decentralization component that was implemented in 10 rural areas and five municipalities. This area-based programme aimed to support the sectoral programmes in developing local planning, strengthening community mobilization and empowerment and monitoring implementation of the country programme at the decentralized level.

33. In the context of overextended national capacities, long distances and very poor communication that characterize Chad, the decentralization strategy was found to be very relevant when the country programme was designed in 1995-1996. It was anticipated that decentralization would help to reach the hard to reach and foster communities' participation in their own development. Chad's political and cultural context offered opportunities for social mobilization. Recurrent political conflicts since the 1960s had undermined the authority of the central Government over the population. Because the central Government had limited presence in the field, the population progressively developed local associations and community participation. The country programme's decentralization strategy was thus in line with the cultural context and the central Government's national decentralization strategy.

34. After five years of implementation of the country programme, an external evaluation of the decentralization component was conducted in 2001. The evaluation's methodology focused on a review of programme documents, interviews with key stakeholders and beneficiaries, and field visits. Its objectives were to: (a) assess the effectiveness and relevance of the component; (b) measure the programme's impact on the population in the 10 areas of concentration; (c) assess the capacity for coordination of the local teams put in place by the programme; and (d) document the decentralization process.

35. The evaluation found that with respect to effectiveness and impact, there had been noticeable achievements in the concentration areas, specifically in terms of girls' education, children's immunization coverage, female literacy and access to safe water. Local capacities for situation assessment, planning, monitoring and project implementation have been strengthened. Progress was found to be much faster in the areas covered by the component than in other, non-target areas. These positive results support the effectiveness of the decentralization strategy.

36. The evaluation also highlighted some constraints, however. Although village social mobilization teams were created with the support of the programme, they were hardly operational because of insufficient training. The programme has fostered genuine commitment on the part of the local communities to search for solutions to their own problems, but this commitment was hampered by poverty and recurrent famine. There was a concentration of activities in the target areas, but intersectoral approaches were still weak, undermining the expected synergistic effect of the decentralization strategy. The main constraint was the limited capacities of local entities. At the institutional level, the decentralization process was not always sufficiently understood by the different actors and the roles and responsibilities were not adequately defined and delineated.

37. The evaluation made several recommendations. Strengthening the capacities of local non-governmental organizations (NGOs), rural communities and associations, and public servants in well-defined and specific tasks will improve the decentralization process in Chad. The institutional issues should be resolved if the UNICEF-supported decentralization strategy is to be used as a model for the implementation of the Government's decentralization policy.

Review of the Gambia Expanded Programme on Immunization

38. Different components of the Gambia Expanded Programme on Immunization (EPI) have been assessed over the years, but there has never been a comprehensive review of the EPI as a whole. The review undertaken in 2001 was in response to the need for a comprehensive assessment.

39. The overall objective of the review was to assess the performance of the programme, paying particular attention to management, coordination, funding, service delivery, achievements and constraints, in order to guide future performance towards sustainable disease control and have the maximum impact on child survival. Using a purposive sample of facilities throughout the country, the review assessed the four levels of the health-care delivery system: the central level; the divisional level; the health facility (hospital, major and minor health centres, outreach posts); and primary health care outposts in villages.

40. Over the years, the Gambian programme has been a success story and a leader in EPI advances, which was confirmed by the review. The review team identified a number of key achievements as follows: (a) there is a high rate of access to maternal and child health services including immunization. All health facilities provide immunization services at both static facilities and a number of outreach sites. The outreach sites are permanent and the catchment population is aware of the days when services are provided there; (b) although immunization coverage is declining, it is still relatively high; (c) the Government has increased budgetary allocations for the purchase of routine vaccines; (d) the programme organized successful National Immunization Days (NIDs) in 1998, 1999 and 2000; (e) polio is close to being eradicated in the Gambia; (f) there is high public awareness of EPI vaccines; and (g) the country has successfully included two new vaccines in its immunization services (hepatitis B and haemophilus influenzae (Hib)).

41. The review also found that several key issues need to be addressed. There has been a decline in immunization coverage (coverage of three doses of combined diphtheria/tetanus/pertussis vaccine (DTP3) declined from 97 per cent in 1998 to 74 per cent in 2000 and full immunization for the six EPI target diseases declined from 80 to 69 per cent over the same period. The vaccine supply is uncertain, with erratic supplies of the two new vaccines. The country's cold-chain equipment is ageing; although most is still functioning, over 50 per cent of the equipment has been there for 10 years or more and there is currently neither a replacement plan nor available resources for replacement. Over 50 per cent of health facilities reported interruption of outreach activities as a result of unavailability of vaccines and/or transportation. The review was unable to locate annual reports for the EPI or the entire Department of Health. Although vaccine wastage is not routinely monitored at any level, a vaccine utilization and wastage study conducted in 1999 reported a high wastage rate for all antigens. The EPI has been perceived as being fully funded by UNICEF and the World Health Organization; although this might have been true in the 1980s and 1990s, it is no longer the case. The Gambia was approved for funding through the Global Alliance for Vaccines and Immunization (GAVI). UNICEF has received \$186,000 from the Government of the Netherlands for 2002-2003 to fund the post of an EPI officer and the procurement of vaccines not covered under GAVI.

42. The review made the following key recommendations: (a) there is a need for strong and high-level advocacy to further mobilize government resources; (b) the Government should be encouraged to ensure the continued availability of vaccines and increase and maintain a line item for basic vaccines in the annual budget; (c) cold-chain equipment must be replaced and expanded as a matter of urgency; (d) the Government should further develop the outreach service strategy; (e) the Planning Directorate should reorganize the Epidemiology and Surveillance Unit to ensure the collection and use of routine data at all levels; and (f) monitoring of vaccine wastage should be improved.

Review of the Sierra Leone EPI

43. The review of EPI coverage in Sierra Leone was a nationally representative survey undertaken to: (a) assess immunization coverage for children aged 12-23 months and for women with children aged 0-11 months; (b) identify reasons for immunization failure; (c) assess the effectiveness of the cold chain; and (d) make recommendations for strategies and interventions to enhance and sustain the EPI.

Interviews also covered cold-chain equipment, power sources and vaccine availability. The review surveyed a representative sample of 450 clusters throughout the country.

44. Information on infant immunization was obtained from 3,385 children aged 12-23 months. The survey results indicate that immunization cards were retained for over 70 per cent of children in that age group. Valid national coverage rates were 60 per cent for BCG (anti-tuberculosis vaccine), 36 per cent for DTP3, 35 per cent for three doses of oral polio vaccine and 28 per cent for measles vaccine. The valid coverage rate for fully immunized children before one year of age was 20 per cent.

45. Peripheral health units provided an appreciable percentage of immunization services. The drop-out rate between the first and third doses of DTP was 21 per cent. A small percentage of children had access to immunization services as evidenced by the low crude coverage rate of 64 per cent for one dose of DPT, which is used as an indicator to assess immunization services. Reasons for immunization failure at the national level are usually a lack of information (52 per cent) and the inaccessibility of districts, mainly in the North and East (46 per cent).

46. A total of 3,453 mothers of children aged 0-11 months were surveyed; 24 per cent of the mothers produced their tetanus toxoid (TT) immunization cards during the interview, and 3 per cent provided other pieces of information (e.g., antenatal clinic cards) showing that they had received TT during prenatal visits. Fewer than 20 per cent of newborn children were protected against neonatal tetanus, based on the immunization cards seen, but over 70 per cent of mothers attended antenatal care services and 43 per cent made other health visits. The majority of women (77 per cent) delivered at home.

47. The results of the various NID campaigns show much higher coverage for polio than the results of the survey, when one compares the immunization card alone with the card and immunization history. The national immunization coverage survey shows a significant drop for both infants and mothers as compared to the results for 1993.

48. The cold-chain assessment form was administered at 109 sites. Over 80 per cent of all equipment was functioning and gas was the power source for approximately 60 per cent of all functioning equipment. The conditions under which the vaccines were stored were generally good except in some cases where the cold-chain was deemed not to be optimal.

49. The review recommended that: (a) vaccines be supplied promptly to different areas where access is difficult as these areas contributed to the low coverage recorded in the country; (b) more community sensitization be done so that the target population becomes aware of the need and importance of vaccination; and (c) the EPI Division of the Ministry of Health and Sanitation aim to improve the present levels of immunization coverage and the shortcomings identified by the review.

Child Trafficking for Economic Exploitation in Cameroon: Research on National Policy Responses

50. Child trafficking is rapidly being recognized internationally as a serious human rights abuse that requires research and urgent action if it is to be eliminated. Increasingly, children are being kidnapped, stolen, bought and sold within and

across borders for child labour, physical, sexual and other forms of exploitation. The high prevalence of HIV/AIDS makes the issue even more serious. Given the increasing gravity of this problem in West and Central Africa, UNICEF, ILO and the International Organization for Migration (IOM) have initiated a number of activities to combat the spread of child trafficking, culminating in the adoption of a broad-based plan of action at a multi-agency consultation held in Libreville, Gabon in February 2002.

51. The UNICEF Innocenti Research Centre and the West and Central Africa Regional Office have initiated a series of studies to analyse multisectoral policy responses to child trafficking in eight countries, one of which is Cameroon. Specifically, the Cameroon study aimed to: (a) identify the policy responses by various institutions and different levels and areas of intervention; (b) ascertain the definition and perception of the problem in the country; (c) trace the tendencies and dynamics of the phenomenon; (d) identify the various methods of intervention, including priorities and difficulties; (e) establish a catalogue of the main actors; and (f) create a better understanding of the problem in Cameroon in order to encourage appropriate action.

52. The study consisted of field visits to identified institutions, dialogue and interviews with the main actors, documentary research, analysis of findings and report writing. The results will be used as an advocacy tool for action by UNICEF, the International Programme for the Elimination of Child Labour (IPEC), IOM, the Government, NGOS and other stakeholders or parties interested in the fight against child trafficking for economic purposes.

53. Cameroon is said to know cases of both internal and cross-border child trafficking. Internally, children are taken by intermediaries (sometimes family members) from their poor families in rural areas to cities and placed with those who need their services, often for remuneration. On the other hand, some children leave their families on their own in search of better living conditions in cities. Cameroon can be presented as a transit country: trafficked children are transited through Cameroon from such West and Central African countries as Benin, Chad, Côte d'Ivoire, Mali and Nigeria, to such Central African countries as Gabon and Equatorial Guinea to be used in farms, shops, bars, hotels or as servants. Cameroon is also a receiving country, into which children are trafficked using all disguised means, mostly from Benin, Chad, Mali and Nigeria, by nationals of those countries resident in Cameroon. In addition, Cameroon is a supplier country; those cases are very rare and mostly concern young girls trafficked out of Cameroon and used as prostitutes.

54. Concerning the institutional and policy situation of child trafficking in Cameroon, the study noted that in spite of the absence of a specific policy on child trafficking, there is a clear intention on the part of the Government to build up an institutional, political and legal framework for the promotion and protection of children's rights, which could be extended to fight child trafficking. More than 15 ministries could be mobilized in this effort. The Government has ratified a series of international agreements on the issue, including the Convention on the Rights of the Child, the Convention on the Elimination of all Forms of Discrimination against Women, ILO Convention 138, the African Charter on Human and People's Rights and the African Charter on the Rights and Welfare of the Child. The Government is in the process of ratifying other instruments, including ILO Convention 182 on the

worst forms of child labour (which by definition include child trafficking for economic ends), the Rome Statute of the International Criminal Court and the optional protocol of the Convention on the Rights of the Child on the trafficking of children.

55. From a policy standpoint, there is thus a great potential to fight child trafficking in Cameroon. The real problem is that different institutions have varying levels of awareness of the issue, which may indicate a lack of sufficient coordination between the concerned institutions, a limited flow of information and insufficient advocacy.

56. Analysis of most of the institutional approaches and areas of intervention shows that prevention should be emphasized through education and at the community level. Preventing child trafficking through border monitoring has been difficult due to sociocultural links with neighbouring populations and porous borders. The protection of children who are victims of trafficking also requires the adaptation and harmonization of judicial frameworks with international conventions. With regards to repatriation, information from the Police Department states that this is done on almost a daily basis at the more than 30 frontier police stations, but there are no viable data and no defined policy on this since there is no convention between Cameroon and any of the countries concerned. Advocacy and inter-country cooperation have proven to be effective strategies and should be expanded further in Cameroon.

Report on sexual exploitation of children in West and Central Africa

57. As part of preparations for the Second World Congress against Commercial Sexual Exploitation of Children, held in Yokohama, Japan in December 2001, the Regional Office prepared a study on the situation in West and Central Africa, with the support of the Innocenti Research Centre. The aim of the study was to: (a) evaluate the scale of the phenomenon of abuse and sexual exploitation of children in general, within families, at school, in institutions, at work, etc., and the commercial sexual exploitation of children in West and Central Africa in particular; (b) attempt to assess public opinion and community attitudes regarding the sexual abuse and commercial sexual exploitation of children; (c) evaluate knowledge about legal protection for abused children in the region and about applicable sanctions; and (d) evaluate efforts to combat the commercial sexual exploitation of children and the lessons learned since the first World Congress against Commercial Sexual Exploitation of Children (held in Stockholm, Sweden in 1996). The analysis was based on diverse sources, including review of programme documents; reports to the Committee on the Rights of the Child and the Committee on the Elimination of Discrimination Against Women; processing of a questionnaire initiated by the Regional Office on the sexual exploitation of children; thematic country studies undertaken on child labour, child trafficking, violence against women and children, children living or working in the streets, children in need of special protection measures and children living with HIV/AIDS; and school, population, health and economic statistics, etc.

58. According to the study, most of the countries in the region indicate the existence of sexual abuse during childhood and adolescence. This phenomenon is

not new but seems to have grown in scale in recent times. Sexual abuse takes place in families, schools, workplaces and places of detention. Over the last five years, the region has seen many population displacements due to armed conflicts. Women and young girls are most exposed to sexual exploitation, especially in refugee camps. A dozen countries in the region have reported on the emergence of commercial sexual exploitation of children in reports submitted to the Committee on the Rights of the Child and the Committee on the Elimination of Discrimination Against Women, or during regional or international meetings on issues affecting children. The magnitude of the phenomenon as well as the various forms of prostitution differ from country to country. Child prostitution is essentially an urban phenomenon and very common around hotels, cinemas and bars. It usually involves girls but sometimes boys as well. Sexual tourism involving children appears to be growing in countries where tourism is booming. Cases of paedophiles exploiting and abusing children have been noted. Information on the scope of child pornography in the region is very limited and the phenomenon is not as visible as prostitution. Reports by NGOs provide pertinent information that illustrates the establishment of networks for the trafficking of women and children for sexual exploitative purposes, notably in the direction of Europe.

59. The study highlighted a series of recommendations and challenges. Firstly, the sexual exploitation of children is an emerging phenomenon in West and Central Africa and is likely to develop rapidly because the number of children living in particularly vulnerable situations is increasing. The fight against the sexual exploitation of children primarily consists of awareness-raising, in a wider context of advocacy for the recognition of the rights of the child. Mobilization of Governments and their partners is increasing, as are the pace and number of international and regional meetings and ratification of international and regional instruments.

60. In addition to taking account of child victims of commercial sexual or other forms of exploitation, measures are required to rehabilitate vulnerable children. Because sexual exploitation is the result of a set of serious violations of children's rights, it is important to integrate the fight against sexual exploitation of children with the fight against poverty; better application of policies in favour of children in state budgets; programmes to promote access to basic and quality education; activities to promote advocacy for and raise awareness of the rights of women and children; strengthened legal and judicial frameworks; and provision of care for child victims.

61. The sexual exploitation of children is part of the complex, day-to-day life of people in constant search of fragile equilibriums. Thus, long-term responses (revision of national legislation, sensitization and training of personnel responsible for the application of laws, sensitization of the population and social actors) must be accompanied by immediate actions that can be implemented easily. Advocacy and awareness-raising should be intensified as major weapons in the medium- and long-term fight against the sexual exploitation of children. They should aim to raise the awareness of policy makers, development actors, tourist agencies, families, traditional and religious leaders, the media and children (using the "child-to-child" approach and through schools and reception centres).

62. UNICEF support States in strengthening national legal frameworks for the full protection of children against all forms of exploitation or sexual ill treatment, within

and outside the family. It would also be desirable to develop mechanisms to identify incidences of abuse and report and deal with them, notably through medical personnel, teachers, educators, the police and the judiciary. Abused children also require support during legal proceedings and for physical and psychological rehabilitation and social integration. The UNICEF strategy in the fight against the sexual exploitation of children should be based on a multisectoral approach which highlights prevention and is based on partnership with other agencies and programmes, especially ILO/IPEC, UNAIDS, the United Nations Development Programme, UNESCO, the United Nations High Commissioner for Refugees, the World Bank and NGOs. In West and Central Africa, the strategy comprises: (a) provision of quality and free basic education; (b) interventions targeted at families to build their capacities to provide care for and protect children, particularly girls; and (c) campaigns to increase awareness at all levels of society of the rights of children, as well campaigns for better enforcement of the law. The comparative advantages of UNICEF are in the areas of education, child rights and advocacy, in addition to its wide field presence.

63. Major challenges include the need to: improve the collection of information and data; develop a strategy for technical and political advocacy; build alliances between the various partners, including Governments, NGOs, regional governmental organizations, the media and United Nations agencies; document and share experiences and lessons learned; develop operational strategies to combat child trafficking; and support legal reform in favour of the special protection of children, in accordance with the Convention on the Rights of the Child and other relevant instruments.

Conclusion

64. The present report has briefly summarized four issues of serious concern in West and Central Africa: EPI coverage and sustainability; the quality of basic education; child trafficking; and sexual exploitation. The sustainability of EPI achievements is a big challenge for many countries in the region, as pointed out in the two reviews examined in this report. The MLA experience ought to be generalized throughout the region as it can definitely enhance the monitoring and evaluation of pupils' performance and help to improve the quality of education. Several other country offices in the region plan to conduct the MLA evaluation. Child trafficking and sexual exploitation are issues of great concerns, awareness of which is increasing. Mobilization of Governments and their partners is still at an early stage but is growing fast in the region.
