



General Assembly

Distr.: General
3 August 2011

Original: English

Sixty-sixth session

Item 65 (b) of the provisional agenda*

Promotion and protection of the rights of children: follow-up to the outcome of the special session on children

Follow-up to the special session of the General Assembly on children

Report of the Secretary-General

Summary

The present report is issued in response to General Assembly resolutions 58/157 and 58/282, in which Member States requested the Secretary-General to continue to report to the General Assembly on the progress made in implementing the commitments made at the special session of the General Assembly on children, as contained in the outcome document of that special session, entitled “A world fit for children” (S-27/2). The report provides an overview of the progress and challenges in that regard, and the actions needed to achieve further progress, particularly the need to reach the most vulnerable and disadvantaged children in each context.

In the report, it is noted that failure to achieve the commitments will significantly undermine efforts towards realizing the aspirations of the United Nations Millennium Declaration and the Millennium Development Goals by 2015 and beyond.

* A/66/150.

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I. Introduction

1. During the past decade, the United Nations Millennium Declaration and the Millennium Development Goals have led to unprecedented commitments and partnerships for goal-driven progress towards fulfilling the rights of children, reaffirmed in successive summits and meetings. A commemorative high-level plenary meeting on the commitments of “A world fit for children” (S-27/2) was held in 2007 to review the outcome and progress made in implementing the Declaration and the Plan of Action. In General Assembly resolution 65/1, entitled “Keeping the promise: united to achieve the Millennium Development Goals”, Member States further committed to accelerating progress towards achieving the Millennium Development Goals.

2. The present report follows previous reports¹ and assesses the progress made in achieving the goals set out in “A world fit for children”, many of which correspond to key targets for children as envisaged in the United Nations Millennium Declaration and the Millennium Development Goals.

3. Compared with 2000, when the Millennium Declaration was adopted, 2.1 million fewer children are dying every year from preventable causes before reaching their fifth birthday; the number of primary school age children out of school dropped by 39 million from 1999 to 2008. Yet each year there are 8.1 million deaths in children under 5 years of age and over 350,000 maternal deaths; close to 67 million children are still out of school; and in developing countries 195 million children under 5 years of age are suffering from stunting, jeopardizing the achievement of the Millennium Development Goals. Millions of children continue to experience the searing impacts of conflict, such as the loss of parents or sudden, forced relocation. It is estimated that more than 1,000 babies continue to be born with HIV every day and nearly 5 million young people aged 15-24 are living with HIV. More than 200 million children under the age of 5 do not have a birth certificate.

4. The global economic downturn in 2008-2009 and price volatility in food and energy commodities exposed the interdependence of countries in the global economy and the need to strengthen the use of development policy both at the national and global levels to safeguard the status of children, especially in the poorest families. Capacity weaknesses, financial volatility and increased indebtedness have proved to be destabilizing for the sustained achievement of the Millennium Development Goals in many developing countries and have often been associated with widening disparities between and within societies.

5. Declining social investments, combined with long-standing challenges such as the social exclusion of indigenous and disadvantaged minority groups, children with disabilities and girls, as well as the effects of migration, rapid urban expansion and climate instability, are making the implementation of “A world fit for children” more challenging.

¹ Annual reviews of progress have been submitted to the General Assembly, beginning with the fifty-eighth session (A/58/333, A/59/274, A/60/207, A/61/270, A/62/259, A/63/308, A/64/285 and A/65/226).

II. Follow-up to the special session of the General Assembly on children

A. Planning for children

6. In 2010, major thematic studies or analyses on the rights of children and women were carried out in at least 81 countries. Six more countries joined the Global Initiative on Child Poverty and Disparities, led by the United Nations Children's Fund (UNICEF), raising the number of participating countries to 52. Situation analyses increasingly focused on identifying the most vulnerable and disadvantaged children and women in order to promote equity-focused strategies that could better support them. Findings are used to advance policies to protect and promote the rights of children.

7. In 2011, UNICEF published a report entitled *The State of the World's Children: Adolescence — An Age of Opportunity*, in which it highlighted the importance of investing in adolescents in order to break cycles of poverty and inequity. Facing an increasingly uncertain world where climate change, urbanization, economic recession and rising unemployment pose unprecedented challenges, the report emphasizes the need to provide adequate support to adolescents so that they reach their full potential.

8. Support for protecting the most vulnerable in each country context was seen as an urgent priority. A continued focus on boosting employment growth, maintaining basic services and strengthening social protection measures are recognized as crucial for solidifying and broadening economic recovery and well-being for all.

B. Promoting the implementation of the Convention on the Rights of the Child

9. In May 2010, the Secretary-General, the Special Representative of the Secretary-General on Violence against Children, the Special Representative of the Secretary-General for Children and Armed Conflict, UNICEF, the Office of the United Nations High Commissioner for Human Rights and partners launched a global campaign to promote the universal ratification and implementation of the Optional Protocols to the Convention on the Rights of the Child by 2012. The campaign aims at raising awareness of the importance of mechanisms for protection against violence, including adherence to international standards and their effective enforcement. Since the launch of the campaign, eight more countries have ratified/acceded to the Optional Protocol on the sale of children, child prostitution and child pornography, and one country has signed it, bringing the total number of States parties to 145 and signatories to 118. In 2010, seven additional countries ratified the Optional Protocol on the involvement of children in armed conflict.²

10. The first regional training of trainers using the "Training manual to fight trafficking in children for labour, sexual and other forms of exploitation" was

² See United Nations, *Treaty Series*, vol. 2171, No. 27531. The Optional Protocols were adopted by the General Assembly in its resolution 54/263, annex I (on the involvement of children in armed conflict) and annex II (on the sale of children, child prostitution and child pornography).

piloted in 2010 with the support of UNICEF and the International Labour Organization (ILO).

11. Increased international attention to sexual violence was achieved through support to the Human Rights Council general day of discussion and its resolution (13/20) on sexual violence against children. As a follow-up to that thematic debate, a joint report (A/HRC/16/56) by the Special Representative of the Secretary-General on Violence against Children and the Special Rapporteur on the sale of children, child prostitution and child pornography to the Human Rights Council called for the establishment in every country of accessible, safe and child-sensitive counselling and complaint and reporting mechanisms for children to report incidents of violence. Technical knowledge on social norms and addressing harmful traditional practices was shared with the Committee on the Rights of the Child and the Committee on the Elimination of Discrimination against Women to help to ensure that the knowledge is reflected in a future joint general comment of the Committees on harmful practices.

12. Partnerships continued to be strengthened. In 2010, the scope of the “Together for Girls” initiative, an innovative multi-country partnership established in 2009 to end sexual violence against girls in Africa and East Asia, was broadened to focus on data collection and coordinated programme response and advocacy around the prevention of violence against children, particularly sexual violence. Those efforts galvanized action at the local level, while stimulating the interest and support of global partners. A workbook for corporations on child rights and child-focused impact assessments was completed, and a consultation was held with stakeholders. The United Nations Adolescent Girls Task Force advocates for and promotes comprehensive policies and programmes for adolescent girls, especially the most marginalized. In addition, UNICEF continued to foster the relationship with the Hague Conference on International Private Law on four of its conventions on children. Technical inputs were provided to the Hague Global Child Labour Conference, and follow-up and support were provided to countries for implementation of the recommendations contained in the Road Map for Achieving the Elimination of the Worst Forms of Child Labour by 2016.

13. For children in the poorest countries and most disadvantaged population groups, expanding coverage of essential services will be critical to fulfilling their rights. “Going to scale” involves a complex range of actions, including expanding the delivery of tried-and-tested interventions and overcoming behavioural, institutional and environmental impediments to service delivery. That, in turn, requires a good understanding of the bottlenecks to delivering essential services for children and the barriers faced by families in accessing them. Initiatives will require greater coherence and harmonization.

C. Collaboration and leveraging resources for children

14. In 2010, increased collaboration with donors led to greater coordination of leveraging resources for children in emergencies. New donors provided humanitarian funding in order to improve capacity for humanitarian response. New mechanisms incorporated into funding agreements, such as multi-year and country cycle-specific thematic agreements, provided increased flexibility and funding predictability for programmes.

15. According to the 2010 report of the United Nations Millennium Development Goals Gap Task Force, aid from members of the Development Assistance Committee reached almost \$120 billion in 2009, increasing by less than 1 per cent, in real terms. However, the share of official development assistance in the gross national income of donors was only 0.31 per cent, well below the target of 0.7 per cent, which has been reached and exceeded by only five donor countries. Remittances have become a growing source of income in many developing countries, reaching a high of an estimated \$336 billion in 2008. In the current crisis, remittances have proved to be more resilient than private capital flows. Partnerships involving foundations, non-governmental organizations and global programmes expanded further in 2010, providing opportunities to leverage additional funding for children worldwide. Among the major contributors were Rotary International, the Bill and Melinda Gates Foundation and the Global Fund to Fight AIDS, Tuberculosis and Malaria.

16. With the financial downturn, global discussions are increasingly focused on key investment sectors such as infrastructure and agriculture. While overall levels appear not to have declined, resources for investments in children are still highly inadequate in most countries. The consequences could have harmful implications for future funding of basic social services, which are critical to the well-being of children.

D. Monitoring progress

17. Global databases on children and women were updated throughout 2010. Data from national household surveys and other sources were analysed and disaggregated by sex, wealth and location in order to provide a stronger understanding of inequalities. The United Nations directed significant efforts towards harmonizing work on data among partners, including through common recognition of new methodologies, standardization of indicators and monitoring tools, building national statistical capacity and developing joint estimates.

18. Nearly 200 multiple indicator cluster surveys have been conducted globally in the first three rounds (1995, 2000, 2005-2006). The fourth round is being carried out during 2009-2011, with a wider range of indicators. The results of the surveys started to be produced in 2010.

19. The common United Nations Development Group database software, DevInfo, has been adopted worldwide as a tool to organize, display and analyse standardized human development data. By 2010, DevInfo had over 120 adaptations available. More than 1,000 professionals from many programme countries have been trained to support the effort of establishing national repositories of data on human development, including a wide range of child-related indicators.

20. In 2010, a UNICEF study entitled “Narrowing the gaps to meet the Goals” provided compelling evidence for an equity-based strategy that, compared with the traditional path, could move the global community more quickly and cost-effectively towards meeting Goals 4 and 5 of the Millennium Development Goals. That strategy, according to the study, has the potential to help to avert millions of maternal and child deaths by the 2015 deadline.

E. Participation and self-expression of children

21. There has been an increase in children's participation in contributing to the fulfilment of the rights of the child and meeting the Millennium Development Goals. A few countries have established a standing committee of parliamentarians on the rights of the child to have regular face-to-face continuous dialogue with girls and boys. Many countries reported on children's media initiatives and the use of information technology to further the participation of children. There has also been an increase in the number of surveys and polls taken of young people to further the understanding of their perspectives and opinions regarding the societies in which they live. Special efforts are being made to strengthen the participation of children who are often marginalized, such as adolescent girls, children with disabilities and indigenous children.

22. The International Year of Youth has seen the growing participation of young people and adolescents in addressing the many issues affecting the governance of nations. A number of capacity-building tools were finalized to help States to strengthen children's participation, such as the Handbook on General Comment No. 12, concerning the Convention on the Rights of the Child, produced by UNICEF and Save the Children for government officials. UNICEF and the Inter-Parliamentary Union also completed a handbook for parliamentarians on child participation, with the objective of promoting the interests and perspectives of children in parliamentary processes.

23. The participation of children in key global forums that affect the lives and well-being of children and adolescents has continued to increase. They include the Global Migration Group, the United Nations Permanent Forum on Indigenous Issues, and the preparation of the reports of the Secretary-General on the girl child and on youth. UNICEF and the Alliance of Youth community-based organizations, with support from the Food and Agriculture Organization of the United Nations, produced "Climate Change: Take Action Now!", a guide to supporting the local actions of children and young people, with special emphasis on girls and adolescents.

III. Progress in the four major goal areas

A. Promoting healthy lives

24. Since 1990, the under-5 mortality rate for developing countries has declined from 99 deaths per 1,000 live births to 66 deaths per 1,000 live births in 2009. An estimated 12.4 million children born alive died before their fifth birthday in 1990, but by 2009 that had been reduced to 8.1 million, the lowest number on record. That represents an annual rate of decline of 2.1 per cent, which must now accelerate to at least 11.6 per cent each year to achieve the target of reducing the rate by two thirds by 2015. The mortality rate of children under age 5 is, on average, more than twice as high for the poorest 20 per cent of households in developing countries as for the richest 20 per cent. Similarly, children in rural areas are significantly more likely to die before their fifth birthday than those in urban areas.

25. Nearly 1.5 million children under age 5 die from pneumonia each year, accounting for nearly one in five child deaths globally. Diarrhoea remains the

second leading cause of death among children under five, followed by measles. Globally, 82 per cent of children under age 1 were immunized against measles in 2009. Similarly, estimates for the global immunization coverage of three doses of vaccine against diphtheria, pertussis and tetanus stood at 82 per cent in 2009, up from 74 per cent in 2000. From 2000 to 2008, the combination of improved immunization coverage and the opportunity for a second dose contributed to a 78 per cent drop in deaths caused by measles globally. However, progress in reducing neonatal mortality continues to be slower.

26. Owing to increased funding for and policy attention to malaria control, from 2008 to 2010 alone, 290 million insecticide-treated nets were distributed in sub-Saharan Africa, enough to cover almost 80 per cent of the reported need.

27. Since the Global Polio Eradication Initiative began in 1988, 2.5 billion children have been immunized, but polio is not yet eradicated and transmission continues in four endemic countries (Afghanistan, India, Nigeria and Pakistan). Conflict and related security concerns, combined with poor coverage of services and natural disasters, have constrained progress in parts of Afghanistan and Pakistan.

28. Globally, one third of deaths among children under age 5 are associated with undernutrition. Although the percentage of children who are underweight in developing countries declined from 31 per cent around 1990 to 26 per cent around 2008, many countries are still making insufficient or no progress. From 1995 to 2009, no meaningful improvement was seen in Southern Asia among children in the poorest households, while underweight prevalence among children from the richest 20 per cent of households decreased by almost one third. In developing countries, 40 per cent of young children in the poorest wealth quintile are underweight, compared with 15 per cent in the richest. In the developing world, children in rural areas are twice as likely to be underweight as those in urban areas and are 50 per cent more likely to be stunted. As of early 2011, only 58 of 118 countries with data available were on track to meet the target of reducing the number of underweight children by 50 per cent.

29. Vitamin A supplementation coverage continued to be high among children in the least developed countries, with 87 per cent of children fully covered with two doses in 2009, including 81 per cent in sub-Saharan Africa and 76 per cent in Asia. The coverage has more than doubled in the least developed countries, rising from 41 per cent in 2000 to 88 per cent in 2008.

30. There has also been progress in eliminating iodine deficiency disorders. Some 37 countries have reached the target of at least 90 per cent of households using adequately iodized salt, an increase from 21 countries in 2002, when the universal salt iodization goal was endorsed at the special session of the General Assembly on children. According to recent data, some 72 per cent of households in developing countries have been consuming adequately iodized salt, including about 73 per cent of households in Asia and 61 per cent in sub-Saharan Africa.

31. Progress in infant and young child feeding has been modest. In the developing world, the rate of exclusive breastfeeding has increased only slightly, from 33 per cent in 1995 to 38 per cent around 2008. However, some 19 countries, through a combination of sound policies, legislative enforcement and community-based support, have shown significant increases of at least 20 percentage points in the past 5 to 10 years.

32. In 2010, the Secretary-General's High-level Task Force on the Global Food Security Crisis placed greater emphasis on improving nutrition and helped to promote dialogue and maintain global strategic partnerships and initiatives. Significant efforts were made to improve the nutrition of children and women in developing countries, including through the development of a road map to implement the recommendations contained in the "Scaling Up Nutrition" framework, with more than 100 agencies participating.

33. Globally, the annual decline in the maternal mortality ratio from 1990 to 2008 was estimated at only 2.3 per cent, compared with the 5.5 per cent annual decline needed from 1990 to reach the 2015 target. An estimated 358,000 maternal deaths occurred in 2008, a decline of 34 per cent against the target of a 75 per cent decline from 1990 levels. From 1990 to 2008, 147 countries achieved a decline in the maternal mortality ratio, 90 of which showed a decline of 40 per cent or more. Despite that progress, developing countries continued to account for 99 per cent of all maternal deaths; sub-Saharan Africa and South Asia accounted for 87 per cent. Complications related to pregnancy and childbirth are among the leading causes of death worldwide for adolescent girls aged 15-19.

34. Maternal health is another area where there is a conspicuous gap between the rich and poor. While almost all births are attended by skilled health personnel in developed countries, in the least developed countries, the figure for women in urban areas is only 41 per cent. The ratio of richest to poorest quintiles is 3 to 1. Disparities in access to care during pregnancy are also striking within developing countries, with women in urban areas 1.3 times as likely as rural women to obtain antenatal care coverage at least once before giving birth. The ability of women to choose when and how many children they will have significantly affects maternal morbidity and mortality. By 2008, more than half of all women aged 15-49 who were married or in union were using some form of contraception. However, progress slowed from 2000 to 2008. Women in sub-Saharan Africa continue to have the lowest level of contraceptive prevalence (22 per cent), with little progress reported since 2000. Worldwide, more than 120 million women aged 15-49 who are married or in union have an unmet need for family planning.

35. Today, 87 per cent of the world's population, a total of 5.9 billion people worldwide, use drinking water from improved sources, an increase of 1.8 billion people since 1990. However, 884 million people, almost all of them in developing regions, still do not get their drinking water from such sources. Sub-Saharan Africa accounts for over a third of that number and is lagging behind in progress towards the target in Goal 7 of the Millennium Development Goals. Huge disparities remain between regions, countries and rural and urban areas. In sub-Saharan Africa, an urban-dweller is 1.8 times more likely to use an improved drinking water source than a rural-dweller. While 94 per cent of the urban population of developing regions uses improved sources, the figure for rural populations is only 76 per cent. However, in urban areas, the increase in coverage is barely keeping pace with population growth. Since 1990, the world's urban population has risen by 1.09 billion, while the urban population without improved drinking water sources has increased from 102 million to 140 million.

36. Over 2.6 billion people still lack access to flush toilets or other forms of improved sanitation. Although approximately 1.3 billion people gained access to improved sanitation from 1990 to 2008, the world will miss the sanitation target by

13 percentage points. Unless great efforts are made, the target for lowering the proportion of people without access to basic sanitation will not be met.

37. In 2010, the launch of Sanitation and Water for All, a global partnership of developing countries, donors, multilateral agencies, civil society and others working together to achieve universal and sustainable access, helped to scale-up water, sanitation and hygiene programmes. The immediate focus has been to accelerate progress towards meeting targets in those countries that are most off track and in the most deprived communities. In 2010, 49 countries received sanitation support, with the goal of eliminating open defecation through demand-led, participatory community approaches to total sanitation. In addition, the number of countries with an intensive communication programme to change national behaviours, promoting hand-washing with soap, rose from 53 in 2008 to 87 in 2010.

38. The 2010 World Conference on Early Childhood Care and Education called for stronger commitments in that area, with a focus on equity and inclusion, and for the extension of quality care for young children by strengthening the capacities of parents, families and service providers. A revised Care for Child Development training package was developed jointly by UNICEF and the World Health Organization and launched at the 2010 International Paediatric Association Congress, held in Johannesburg, South Africa.

39. In order to accelerate progress in women's and children's health, the Secretary-General spearheaded a global effort to bring together all key stakeholders from Government, civil society and the corporate sector to develop a plan to promote the achievement of Goals 4 and 5 of the Millennium Development Goals. The resulting Global Strategy for Women's and Children's Health outlines the key areas where action is urgently required to enhance financing, strengthen policy and improve service delivery. All concerned parties are called upon to coordinate action to maximize the impact of tried-and-tested interventions for the most deprived populations.

40. In 2010, nearly 300 humanitarian situations occurred in close to 100 countries, affecting millions of children. The earthquake emergency in Haiti and monsoon floods in Pakistan had a daunting impact on communities and children, affecting more than 3 million people in Haiti and nearly 20 million in Pakistan. In addition, there were earthquakes in Chile, China and Indonesia; drought and worsening malnutrition in the Niger and the Sahel region; protracted crises in Afghanistan, the Democratic Republic of the Congo, Somalia and the Sudan; and new conflicts elsewhere.

B. Providing quality education

41. Considerable progress has been made towards achieving Goal 2 of the Millennium Development Goals in terms of increased enrolments, narrowed gender gaps and extended opportunities for children in disadvantaged groups. However, an estimated 67 million children of primary school age were still out of school in 2008, despite a reduction in the numbers of such children by 39 million since 1999. Projections based on the recent rates of progress in school enrolments suggest that at least 72 million children of primary school age are still unlikely to be in school in 2015. In addition, 74 million children of lower-secondary school age are still out of school.

42. Though enrolment in primary education has continued to rise, reaching 89 per cent in the developing world, there was little improvement in the net enrolment rate between 1999 and 2008 in several countries. In at least 20 countries, the net enrolment rate even fell. Worldwide, among children of primary school age not enrolled in school, 42 per cent, or 28 million children, live in poor countries affected by conflict. Even in middle-income countries, there are often large numbers of children from marginalized groups not attending primary school. Based on an analysis of data from 42 countries in the developing world, girls in the poorest 20 per cent of households are 3.5 times more likely to be out of school than girls in the richest households, and 4 times more likely to be out of school than boys in the richest households. A global initiative on out-of-school children was launched at the beginning of 2010 with the aim of introducing a more systematic approach to the challenge of including out-of-school children. Measures to address cost barriers to access and retention, such as school fee abolition and equity-focused social protection measures and school feeding programmes, are now being expanded in many countries. In 2010, 44 per cent of 146 reporting countries had developed policies, accompanied by concrete mechanisms and adequate budgets, to address costs and other barriers to primary education.

43. In 2010 there was an increase in the number of reporting countries with national policies on school readiness. Sixty-five of the 146 reporting countries had such policies in place compared with 50 in 2008. Also in 2010, policy development was undertaken and gender-focused interventions were scaled up in basic education in 44 countries, including through partnerships of the United Nations Girls' Education Initiative. A key achievement at the global level was the adoption of the Dakar Declaration on Accelerating Girls' Education and Gender Equality.

44. Barriers to the retention of girls and their transition to secondary school were addressed in 2010 through various approaches, including remedial classes, grants, scholarship programmes for girls and gender-sensitized teacher training and classroom materials. In poor communities, learning and teaching materials were distributed that are based on active learning, focused on equity and incorporating new curricula. In order to enrol and retain disadvantaged children, Governments in many countries implemented accelerated age-appropriate learning initiatives. Environmental and climate change education was incorporated into primary school curricula in 47 countries and into secondary school curricula in 51 countries.

45. The Education For All Fast Track Initiative, launched in 2002 to help low-income countries achieve free, universal basic education and ensure accelerated progress towards Goal 2 of the Millennium Development Goals, has been successful in leveraging funds for country education sector plans and the development of plans, including in several fragile States.

46. Recent evidence, however, shows that the quality of education is lagging behind the improvement in school enrolment ratios. In response, 79 countries had adopted quality standards for primary education based on child-friendly schools or similar models by 2010, compared with 43 in 2005. Establishing a protective learning environment for children, especially for girls, is now included as an integral part of quality education. Programmes for safe spaces, the prevention of violence and sexual abuse of children, psychosocial services and community-based interventions have taken root in a number of countries. Efforts have also continued to introduce a ban on all forms of violence within the school system. By 2010,

79 countries had developed national policies to end the practice of corporal punishment; 50 countries had created national education sector plans that address issues of children affected by HIV and AIDS; and 88 countries had implemented activities about water, sanitation and hygiene education in schools, benefiting 4.2 million children in more than 20,000 schools. In April 2010, a multi-partner call for action for such activities was launched, to intensify focus on the issue.

47. The International Task Force on “Teachers for Education for All”, coordinated by the United Nations Educational, Scientific and Cultural Organization with the involvement of 64 countries and 24 international governmental and non-governmental organizations, has emphasized action on a number of important issues relating to teachers and the achievement of the Education for All goals and Millennium Development Goals on primary education.

48. A review of the constraints to the implementation of education programmes highlighted the following: limited capacity of partners and Government counterparts; poor coordination among Government departments and between the national and subnational levels; unstable political situations; lack of flexibility in funding; and weak systems of monitoring and evaluation. Strategic focus on promoting equitable and inclusive results within education sector plans, on maintaining attention to both out-of-school children and children at risk of dropping out and not learning, and on strengthening national monitoring and evaluation systems, is needed to accelerate the achievement of Goal 2 of the Millennium Development Goals.

49. In 2010, education was a key component of the humanitarian response. In Haiti, UNICEF and partners led the education response, which reached some 583 schools, or well over 1 million children and 50,000 teachers. In Pakistan, more than 400,000 children and 500 schools received support in 2010. Back-to-school campaigns were also a feature in Iraq, Yemen and other countries affected by natural disasters or conflict. In 2010, the global education cluster mechanism of the Inter-Agency Standing Committee was strengthened through the establishment of 35 country-level clusters. While humanitarian responses have contributed to faster recovery, a further challenge lies in consolidating responses in order to contribute to longer-term rebuilding and reform of education systems.

C. Protecting against abuse, exploitation and violence

50. Children across all wealth quintiles, in development and emergency contexts, and in low-income, middle-income and industrialized countries, are vulnerable to various forms of violence, abuse and exploitation in a range of settings, including schools, welfare and justice institutions, the home, the workplace and the community. Robust data on child protection are gradually becoming more available, including on the situation of children and the characteristics of those most at risk.

51. Nearly half of children under age 5 in developing countries are not registered and are therefore beyond the reach of the protection and basic services to which they have a right, such as health care, social welfare and education. Children from the wealthiest households are two to three times more likely to have their births registered than those from the poorest. A relationship also exists between wealth quintile and child marriage: across many developing countries, girls from the

poorest households are 3 times more likely than those from the richest to be married before the age of 18.

52. While poverty is a predictor of vulnerability to some child protection violations, many other factors are at play, linked to discrimination and deeply entrenched social norms, attitudes and behaviours. Some forms of violence cut across all wealth quintiles and geographic regions. Across all regions, many children experience psychological violence and physical punishment regardless of their economic status. Female genital mutilation and cutting rates vary more by ethnicity than by any other sociodemographic variables. Across 29 countries in Africa and one country in the Middle East, more than 70 million girls and women (aged 15-49 years) have undergone the practice.

53. Although precise data on some protection issues are difficult to collect, the available estimates raise concern: between 500 million and 1.5 billion children experience violence annually, often perpetrated by those they should be able to trust. According to the ILO estimates, approximately 215 million children under age 18 worldwide are engaged in child labour, for which boys are more likely to be engaged in economic activity and girls are disproportionately engaged in household chores. At least 2 million children are also thought to be living in institutions, and children are forcibly recruited by armed groups or forces in at least 25 countries.

54. The strengthening of child protection systems continued to be a major focus, with mapping and assessments producing important lessons to ensure that child protection issues are holistically addressed. Advances were also made in addressing social norms that underlie violence, exploitation and abuse, including through declarations to abandon female genital mutilation and cutting. While the application of social-change approaches to broader forms of violence remains a challenge, the knowledge base was strengthened in that area in 2010 and is informing practical application in a number of countries. An estimated 131 programme countries are engaged in strengthening social welfare and justice systems and at least 15 countries initiated a comprehensive exercise to map child protection systems. Law reform for children's protection from violence is gaining momentum worldwide. Currently, 29 countries have introduced a comprehensive legal ban prohibiting all forms of violence in all settings, including corporal punishment in the home. Across regions, significant legislative reforms are under way to achieve full prohibition, and in a large number of nations, new legislation has been adopted to prohibit specific forms of violence, including trafficking, sexual abuse and exploitation, domestic violence and female genital mutilation and cutting.

55. A collective starting point for understanding child protection systems was articulated in the 2010 paper entitled "Adapting a systems approach to child protection: key concepts and considerations", endorsed by UNICEF, the United Nations High Commissioner for Refugees, Save the Children, and Chapin Hall at the University of Chicago. The paper details the functions of a child protection system and provides the basis for mapping and assessment tools, some of which were piloted and rolled out in early 2010 in sub-Saharan Africa and other regions.

56. Mapping and assessment exercises are essential to systems-strengthening work. They support the utilization of all available resources, promote the connections between all system components and identify methods by which vulnerable people can access and benefit from a system. By including relevant actors within formal and less formal structures, the mapping process builds a

political consensus around the goals of the child protection system and the actions needed.

57. There has been a growing trend in aligning national policies with international standards for alternative care, including those recommended by the 2009 Guidelines for the Alternative Care of Children, with 58 countries having adopted national policies consistent with international standards in 2010, compared with 36 in 2005. Countries submitting their reports to the Committee on the Rights of the Child are being urged, in its concluding observations, to consider the Guidelines when developing their child protection services. Globally, a framework for measuring and monitoring armed violence was developed and includes child-specific indicators. To address global challenges in monitoring and evaluation in the sector, an inter-organizational child protection monitoring and evaluation reference group was set up, which aims to improve data collection methodologies and coordination.

58. In countries with low levels of birth registration, studies and mapping exercises provided a basis for national action plans and policies. Strengthening human resource capacity and collaboration with health services to improve protection-related service delivery is another core component of work in child protection systems and was a focus in 2010 in various countries. Innovations, such as Short Message Service technology for birth registration, were employed to strengthen institutional capacities to deliver protection services for children.

59. In 2010, UNICEF and other partners worked with legislators and policymakers from at least 99 countries to improve legal and policy frameworks around child protection. Efforts were also scaled up towards influencing national agendas on the use of diversion from judicial proceedings and alternative measures to detention, helping to advance recognition that they are both essential to ensuring the protection of the rights of children in conflict with the law and are in conformity with the Convention on the Rights of the Child. Furthermore, in 2010, some 24 programme countries used child-friendly and gender-appropriate investigation and court procedures, compared with 17 in 2008.

60. The social norms perspective was further operationalized through the United Nations Population Fund-UNICEF Joint Programme, which intensified its efforts in 15 countries in 2010 to support acceleration of the abandonment of female genital mutilation and cutting. Visible results included more widespread public abandonment of that practice by entire communities, increasingly at the subdistrict or district level. Under the Together for Girls initiative, global and country cooperation is being strengthened to reduce violence against children. Development of a national strategy to end child marriage is expected to start in India in 2011, based on State-level action plans and the findings from formative research on social norms that was completed in 2010.

61. The organization of the general day of discussion and adoption in March 2010 by the Human Rights Council of a resolution on sexual violence against children (see para. 11, above), and the joint report of the Special Representative of the Secretary-General on Violence against Children and the Special Rapporteur on the sale of children, child prostitution and child pornography presented key guiding principles and recommendations to inform the work of countries on combating sexual violence and the exploitation of children.

62. As a result of the Global Child Labour Conference, held at The Hague in 2010, an agreed Road Map for Achieving the Elimination of the Worst Forms of Child Labour by 2016 will be used to track progress through 2016. In addition, at the ninety-ninth session of the International Labour Conference, member States of the ILO agreed to develop a convention and recommendation on domestic labour.

63. In the response to large-scale natural disasters, the inter-agency guidance and tools developed for conflict but adapted for disaster have been found to be inadequate. Efforts to address those gaps were initiated in 2010, and include the development of inter-agency standards on “child-friendly spaces”, the development of rapid response teams for child protection in emergencies with standby partners, and inter-agency emergency preparedness training. Building on capacity development efforts in 2009, countries were supported to address gender-based violence. That will be a central area of focus for the United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women), with other partners.

64. In line with the responsibilities mandated by the Security Council in resolution 1612 (2005), implementation of the monitoring and reporting mechanism on grave violations against children was supported in situations of armed conflict in 13 countries. A monitoring and reporting mechanism based on Security Council resolution 1888 (2009) is being developed. This will include a set of indicators to gauge the response of the United Nations to sexual violence and to provide guidance on how monitoring and reporting systems can be put in place at the country, regional and global levels. Efforts will also need to be intensified to collect and analyse data on protection and other challenges facing the most marginalized children and groups.

65. In 2010, reintegration support was provided to 28,000 children affected by armed conflict and 11,400 boys and girls associated with armed forces and armed groups in 15 conflict-affected countries. Eleven more countries endorsed the Paris Commitments to protect children from unlawful recruitment or use by armed forces or armed groups, raising the total to 95.

66. The work of the child protection sub-cluster strengthened the recognition of child protection activities in broader emergency and humanitarian responses, including issues on gender-based violence and mental health and psychosocial support. Nineteen countries received technical support in child protection in emergencies. Of particular interest is the programme convergence that was developed in the Haiti emergency response on issues of child protection, water and sanitation, nutrition and health through multisectoral assessments of children in institutions as well as in child-friendly spaces for displaced children and unaccompanied/separated children. This resulted in a more comprehensive understanding of the needs of children in institutions and child-friendly spaces in Haiti.

67. As part of a multi-year partnership to strengthen the capacity of religious communities, particularly interreligious mechanisms, to protect children affected by conflict, UNICEF and Religions for Peace published the guide entitled “From commitment to action: what religious communities can do to eliminate violence against children”, in keeping with the recommendations contained in the report of the independent expert for the United Nations study on violence against children (A/61/299).

68. Experience supports the continued focus on strengthening child protection systems and addressing social norms in all contexts, including in conflicts and natural disasters. Awareness and knowledge exchange among partners need to be further strengthened on strategic approaches to addressing the needs of the most vulnerable children. While progress has been made in monitoring and evaluation, and data on child protection have expanded, challenges still remain. Current household surveys do not capture the situation of children living outside of households, including children in institutions, in detention centres, in the worst forms of child labour, or living on the street. More comprehensive knowledge on the most vulnerable and marginalized, including children without family care, is vital for ensuring that interventions have a positive impact and are in children's best interests.

D. Combating HIV/AIDS

69. In 2009, an estimated 33.3 million people were living with HIV, an increase of 27 per cent from 1999. It is estimated that 5 million young people (aged 15-24) were living with HIV in 2009, accounting for 41 per cent of new HIV infections in people aged 15 and older in the same year. Sub-Saharan Africa remains the most severely affected region, accounting for 68 per cent of all people living with HIV and 72 per cent of AIDS deaths. An estimated 890,000 young people aged 15-24 were newly infected with HIV in 2009 — nearly 2,500 every day — with 75 per cent of the new infections occurring in sub-Saharan Africa. The epidemic particularly affects women and girls. Globally, 60 per cent of young people living with HIV are young women; in sub-Saharan Africa, that figure jumps to 72 per cent. Adolescent girls and young women in sub-Saharan Africa are several times more likely to be living with HIV than males of the same age. With the number of people receiving antiretroviral treatment increasing 13-fold from 2004 to 2009, the number of AIDS-related deaths declined by 19 per cent during the same period. Still, the epidemic continues to exact severe consequences. From 2005 to 2009, the number of children orphaned by AIDS increased from 14.6 million to 16.6 million.

70. Routine, voluntary HIV testing and counselling of all pregnant women is the key entry point for services in the prevention of mother-to-child transmission of HIV. The proportion of pregnant women tested for HIV in low- and middle-income countries increased from 7 per cent in 2005 to 26 per cent in 2009. By the end of 2009, 27 out of all low- and middle-income countries had already reached the target set by the General Assembly at its twenty-seventh special session (see resolution S-27/2), that 80 per cent of all pregnant women should have access to HIV testing and counselling by 2010. In low- and middle-income countries in 2009, 53 per cent of pregnant women living with HIV received antiretroviral treatment to prevent mother-to-child transmission of HIV, compared with 45 per cent in 2008. In sub-Saharan Africa, that proportion increased from 45 per cent in 2008 to 53 per cent in 2009. About one third of infants born to mothers who are HIV positive receive such treatment for the prevention of mother-to-child transmission; coverage has increased only slightly in low- and middle-income countries, from 32 per cent in 2008 to 35 per cent in 2009. Reaching the goal of eliminating mother-to-child transmission of HIV requires a more substantial effort towards universal testing and at least 95 per cent coverage for antiretroviral treatment.

71. Globally, treatment coverage is notably lower for children (28 per cent) than for adults (37 per cent). In accordance with new guidelines, in 2010, many more children with HIV, including all those under age 2, became eligible to initiate antiretroviral treatment. However, new data reveal that this potential remains largely unrealized. In 2009, there were 2.5 million children under age 15 living with HIV. Although the number of children in low- and middle-income countries receiving antiretroviral treatment increased from an estimated 275,300 in 2008 to 356,400 in 2009, that figure is still only 28 per cent of the 1.27 million children currently estimated to be in need under the new guidelines. However, the true gap between adults and children is far greater, as about 50 per cent of children infected with HIV who receive no treatment die before their second birthday. An array of cost-effective antiretroviral formulations for children is now available, and improved technology permits rapid HIV diagnosis.

72. In 2001, 5.7 million young people aged 15-24 were estimated to be living with HIV. At the end of 2009, that number had dropped to 5.0 million. Further, an estimated 890,000 new infections occurred among young people aged 15-24 in 2009. The significant decline in HIV prevalence among young people is linked to clear trends towards safer behaviours and practices, including delayed age of first sex, reduction in the number of partners, and increased condom use. In 2010, the United Nations Joint Programme on HIV/AIDS reported a decline in prevalence among young people of more than 25 per cent in 22 key countries in sub-Saharan Africa between 2001 and 2008. In most parts of the world, new HIV infections are steadily falling or stabilizing. An estimated 80 per cent of all infections in young people globally are in 20 countries spanning several regions of the world and representing a diversity of epidemic settings. Young women still shoulder the greater burden of infection, and in many countries women face their greatest risk of infection before age 25. Data on comprehensive knowledge of HIV among young people still show levels well below the target of 95 per cent by 2010, set by the General Assembly at its twenty-seventh special session and highlight variations between regions and countries. Since 2000, condom use increased by 10 or more percentage points among young men in 11 of 17 countries with trend data and among young women in 11 of 22 countries with trend data. To reduce HIV infections in young people, greater efforts are needed to increase the comprehensive knowledge of HIV among young people in and out of school, the numbers of young people reporting condom use during sexual intercourse and the HIV testing and counselling services available to young people.

73. Most countries in sub-Saharan Africa have made significant progress towards parity in school attendance for orphans and non-orphans aged 10-14. In 27 out of 31 countries in sub-Saharan Africa that have reported data for at least two points in time, school attendance among children who have lost one or both parents has increased. Despite those impressive gains, concerns remain about the low coverage of external care and support for households caring for orphans and vulnerable children. In 25 countries where household surveys were conducted between 2005 and 2009, a median of 11 per cent of households were receiving external support. Despite the large number of children in need, the responses for orphans and vulnerable children remain small and fragmented, and fail to connect to broader prevention and treatment efforts for children affected by AIDS. Until now, orphans have been considered a convenient proxy for children affected by AIDS, yet orphanhood is not necessarily a marker of the most vulnerable children, including

those living outside of households. There is growing interest in developing more multidimensional indicators of vulnerability that describe not only the extent to which children are affected by AIDS, but also broader poverty-related vulnerability.

74. Children who have lost parents to AIDS will need continued attention long after rates of new infection subside. Care and support for orphans and children made vulnerable by HIV should be seen as part of a cycle of intervention giving paramount priority to linkages between care and support and primary prevention and access to treatment for young people living with HIV. Investment in social protection measures and child protection for orphans and children made vulnerable by HIV is crucial for ensuring more equitable outcomes. Not only can such programmes reduce the economic vulnerability of children who have lost parents or who are living with sick relatives, but they can also be protective and reduce vulnerability to HIV infection, as demonstrated by evidence related to keeping adolescent girls in school. Well-designed cash transfers offer incentives for adherence to treatment and for the elimination of mother-to-child transmission of HIV. That is one of many AIDS-specific interventions with broad potential for improving the health and welfare of families caring for children, whatever the cause of the vulnerability.

IV. Ways forward

75. Although considerable progress has been seen in several key child-related indicators during the nearly 10 years since the convening of the special session of the General Assembly on children, disparities within many countries and among regions are in many cases worsening or staying at the same levels. An equity-focused approach, with efforts concentrating on the most vulnerable and disadvantaged children and families, is potentially the most cost-effective and quickest way to achieve the Millennium Development Goals. The approach will also help to sustain progress and to assure the children of poor and disadvantaged communities of a future that is consistent with global commitments made to all children in the Declaration and Plan of Action that emerged from the special session. The commitments were reaffirmed at the commemorative high-level plenary meeting of the General Assembly devoted to the follow-up to the outcome of the special session on children, held in December 2007. Equity-focused strategies will improve the provision and use of social services and reduce barriers that result from factors such as geographical location, income poverty, lack of information and social discrimination.

76. The 2010 High-level Plenary Meeting of the General Assembly on the Millennium Development Goals and resolution 65/1, entitled “Keeping the promise: united to achieve the Millennium Development Goals”, provided new impetus to meet the aspirations of children and families worldwide. Further initiatives at the country, regional and global levels, including through an appropriate commemorative high-level plenary meeting of the General Assembly in 2012, may be considered by Member States as a mechanism with which to review progress, especially for children who are most disadvantaged, and to further galvanize action to make the world fit for children by 2015.