File Sub: CF/EXD/SP/1989-0026

Statement of Mr. James P. Grant Executive Director of the United Nations Children's Fund (UNICEF) to the Economic and Social Council (ECOSOC) of the United Nations

Geneva, Switzerland 6 July 1989



Item # CF/RAD/USAA/DB01/1998-02151

ExR/Code: CF/EXD/SP/1989-0026

Economic and Social (ECOSOC) of the United Nations. States

Date Label Printed 18-Jan-2002



United Nations Children's Fund Fonds des Nations Unies pour l'enfance Fondo de las Naciones Unidas para la Infancia Детскому фонду Объединенных Наций 联合国儿童基金会 منظمة الأمم المتحدة للأطفال

File Sub: CF/EXD/SP/1989-0026

Statement by Mr. James P. Grant

Executive Director of the United Nations Children's Fund (UNICEF)

to the

Economic and Social Council (ECOSOC) of the United Nations

Geneva - 6 July 1989

Mr. President, Distinguished Delegates, Ladies and Gentlemen,

It is a pleasure to contribute once again to the deliberations of the Economic and Social Council as you begin discussions on the international economic situation. We meet at a time of great challenge on this issue. While economic progress continues in major parts of the world - particularly in North America, Western Europe, East Asia and South Asia - economic imbalances are becoming more marked, and for almost nine hundred million people - approximately one sixth of humankind - the march of human progress has become a retreat.

I am among several here today who draw attention to such grim economic realities as the fact that throughout most of Africa and Latin America, average incomes have fallen by 10 to 25 per cent during this decade, and with average debt repayments now accounting for almost 25 per cent of the developing world's export revenues, the effects of any growth that occurs are quickly negated in many countries. The Council has before it this year's World Economic Survey, presented by Under-Secretary General Ahmed and his Department. I believe the report documents recent developments in a highly insightful manner, and I read with particular interest the analysis and recommendations regarding adjustment and the flow of resources. I urge members of the Council to give full consideration to the proposals made.

As we have come to learn, it is often the poor, and the most vulnerable among the poor - especially women and children - who bear the heaviest burden of the suffering. The average weight-for-age of young children is falling in many countries for which figures are available. In the 37 poorest nations, spending per head on health has been reduced by 50 per cent, and on education

7836G

by 25 per cent, over the past few years. And in almost half of the 103 developing countries for which recent information is available, the proportion of 6-to-11 year-olds enrolled in primary school is now declining. Clearly, the well-being of children is dictated by a broad spectrum of social and economic forces.

While this decade has witnessed in major parts of the world a devastating slow down, and in many countries even regression, in human development, in a few highly focussed areas there has also been a counter-trend. Despite reversals in nations where poverty has tightened its grip, two major accelerated child health programmes alone of the 1980s — the Expanded Programme of Immunization (EPI) and Control of Diarrhoea Diseases (CCD) through Oral Rehydration Therapy (ORT) — are now each year saving the lives of approximately 2.5 million children under-five — 7,000 daily — and protecting the health and growth of even larger numbers of the world's young children. For example, while only 10 per cent of the world's under-one children were immunized against the six main child-killing diseases at the beginning of this decade, today 66 per cent are protected, according to WHO.

Similarly, significant progress has been made against the single most important specific cause of death among the world's children. In 1980, dehydration caused by diarrhoea was claiming some 10,000 young lives every day. Today, more than 25 per cent of the developing world's families are using low-cost oral rehydration therapy at home to prevent and treat dehydration, and the lives of nearly one million children - more than 2,000 daily - are now being saved as a result.

Time-tested approach

Mr. President,

When I first addressed this Council in 1980, at the opening of this decade, I emphasized three global developments which would guide UNICEF's course in responding to the needs of children in the particular social and economic climate of the times. First, I pointed to the "...increasing insistence of the world community that its concern is not only with economic growth, but also with more rapid improvement in the condition of people, including particularly children, as part of the development process". (Many now refer to this as the human dimension of development.) I noted, in this regard, that in order to achieve the kinds of reductions in infant mortality rates (IMR) which were feasible during the last two decades of this century, rates would have to decline over the period at two to three times their existing rate. Experience had shown that this was possible, but only - as I said then, "with increased commmunity and people participation... - and a stronger political will - than had been historically the case".

The second development I singled out was the international community's growing commitment to goals for accelerated progress in certain fields that particularly affect the condition of children -- goals, I said, "such as drinking water and sanitation, the elimination of mass hunger and illiteracy,

and health for all, which provide the basis for reducing infant mortality and raising the level of development and well-being of children". We clearly acknowledged that achieving the international goals to meet children's basic needs was far beyond UNICEF's capacity to meet alone, and that we would have to increasingly interact with and rely on others — other agencies, governments, and people themselves, reached at the community level, throughout the world.

Finally, I pointed to the heightened global concern for children fostered by the International Year of the Child (IYC), and to the lead-agency responsibility which UNICEF was assigned by the General Assemby for the development goals flowing from the IYC in the 1980s and beyond.

The intervening years of this decade have borne out the necessity of taking such broad concerns into account in addressing the needs of children. I believe these same considerations offer proven guidance as we chart the course of development for the 1990s.

Goals and strategies for the 1990s

Mr. President,

As we prepare to enter the last decade of the century, the international development community voices increasing concern for the <u>human dimension of development</u>, and we seek high priority common goals that are achievable. Furthermore, it is increasingly evident that the most significant variable toward achieving otherwise feasible goals is whether we can stimulate the <u>political will</u> to transform possibility - even the readily do-able - into reality.

Realizing the value of the international community's emphasis on clear consensus goals, UNICEF is among many partners seriously committed to a broad range of exercises to help define goals and strategies for children for the 1990s.

Thus, for example, the international Task Force on Child Survival met last year on the issue of goals and strategies for children in Talloires, France. Composed of health ministers and health secretaries from some of the largest developing countries of the world, heads of major international organizations, major bilateral aid agency administrators, and leadership from the private sector, such as foundations, the group reached consensus on an ambitious but achieveable set of common goals for children in the 1990s. Similarly, consultations have been conducted among a wide range of non-governmental organizations (NGOs), in which a variety of groups have helped define their perspectives of goals toward which they are willing to work.

In a more formal next step, the WHO/UNICEF Joint Committee on Health Policy (JCHP) offered the careful expertise of both organizations in the honing of priority, achieveable goals for our common concerns. These were endorsed by UNICEF's Executive Board after considered deliberations on a "Strategies for Children and Development in the 1990s" report, a document which I commend to your attention, as well. And as it is becoming

increasingly clear that goals and strategies for children cannot be divorced from the wider range of issues, nor from the work of our partners, UNICEF has been most encouraged by deliberations of key UN committees, such as the ACC committee on operational activities and the Task Force on Long Term Development Objectives, in examining the goals for the UN system.

I would also stress that we do not believe that one can or should arrive at meaningful goals through an exclusively global-level process. We have actively sought and encouraged exercises to define perspectives at the country and regional levels as well. UNICEF field offices have been specifically instructed to place high priority on supporting national governments' efforts to formulate goals and strategies for the coming decade.

So far, as might be expected, a number of common goals for children have emerged which enjoy broad support from across the spectrum of the international community. A useful "short list" of these goals includes:

- -- Between 1980 and the year 2000, reduction of infant and under-5 mortality rates in all countries which currently reflect the loss of 14 million children annually by 50 per cent or to 50 and 70 per 1,000 live births respectively, whichever is less;
- -- Between 1980 and the year 2000, reduction of maternal mortality rates -- which currently reflect the loss of more than 500,000 women annually by 50 per cent.

After the achievement of the above goals, the continued reduction of infant, child and maternal mortality rates by at least 3.5 per cent annually.

- -- The eradication of polio and of the guinea worm;
- -- Virtual elimination (less than 1 per cent) of severe malnutrition and 50 per cent reduction of moderate malnutrition;
- -- Universal access to safe drinking water;
- -- Universal access to sanitary means of excreta disposal;
- -- Universal basic (primary) education for children and accelerated adult literacy programmes, especially for women; and
- -- Improved protection of children in especially difficult circumstances.

These goals are given in more detail in an attachment to my distribution copy of this speech, and they are explained in the UNICEF Executive Board paper which I mentioned. Might I add that if the first of these goals is met - that of halving 1980 child mortality rates by the year 2000 - and the expert groups I named have agreed that this is feasible - then the lives of 100 million young children will have been saved over the last two decades of this century as a result, and comparable numbers will be saved from lives of crippling disabilities. More than 10 million young child lives will be saved annually by the year 2000, and, importantly, the number of births, as we are

First and foremost, we have seen, time and time again, the vital need for setting clear, widely supported and achievable goals — for example, through the goal-setting process I described a moment ago — as the foundation on which to build co-ordination and mobilization efforts. This sequencing — goals first with structures built around them, seems obvious. Yet, too often the United Nations system's efforts to achieve coherence have faltered on this first step. Even today, some have not truly taken this lesson to heart.

At its last session, the UNICEF Executive Board favourably reviewed a major policy paper (entitled "UNICEF and the United Nations System — an Agenda for Inter-Agency Action") which gives what I believe to be important illustrations of how the United Nations system can mobilize in support of country-level actions.

For example, in the field of nutrition there have been significant new advances in understanding the determinants of malnutrition and devising One approach, sometimes called the "entitlement effective interventions. approach", emphasizes purchasing power and the "demand side" as areas often overlooked in favour of a misleading over-emphasis on food availability. On the "supply side", there is a need to combine health concerns with food issues especially so as to ensure adequate feeding of children under five years old. This, in turn, further emphasizes the need for the empowerment of women and other actions to relieve the work time burden placed on them so as to achieve a better allocation of household responsibilities. A number of these points have emerged as clear lessons of the \$100 million Joint Nutrition Support Programme of WHO and UNICEF. These new insights are being effectively translated into policy through such bodies as the ACC Subcommittee on Nutrition. We need, however, to place new emphasis on transforming these new policy goals into country-level action. The United Nations system needs to support country-level mechanisms for nutritional issues on a far more systematic scale with a broad range of government, UN, bilateral and NGO The child nutrition goals, contained in the Executive Board documents I referred to earlier, should help achieve this sort of concerted focus.

Water supply and sanitation is one of the fields in which inter-agency action has benefitted most from clear, tangible goals, including those of the International Decade. One particularly praiseworthy feature has been the formation of country-level committees that develop tangible collaborative efforts. At the country level and at the international level, the Decade's efforts have involved all external donors along with the relevant national entities. One particular element worth noting is the emphasis on supporting the co-ordinating capacity of governments, which I believe should be one of the highest priorities of our collaborative efforts.

Adjustment policy typifies an area in which stronger inter-agency efforts are clearly needed. The United Nations system has a unique role, one that is compatible with the UN-related Bretton Woods institutions, but must also be clearly distinct from these institutions. A broad range of views on adjustment policy can be considered legitimate, and indeed, such a range exists at both international and national levels - an understandable

phenomenon as it is one of the most important issues of our day. Naturally, international organizations should co-operate with each other to help reinforce widely accepted goals, but we must also not hesitate to acknowledge our diversity. In fact, governments may benefit from exposure to a range of views.

Discussions on co-ordination issues frequently overlook the fact that co-ordination must help address the sometimes competing needs of financial equilibrium versus long-term development activities and human needs. Too often we have failed to provide adequate co-ordinating mechanisms, where the full balance of issues can be weighed and where we can strengthen mutually supporting elements. In addition to broadening the adjustment criteria considered in existing co-ordinating mechanisms, we need to increase the interaction of these mechanisms with some of the key adjustment policy mechanisms, such as the Policy Framework Papers prepared by the IMF and the World Bank.

Education represents an area where a large-scale, new inter-agency initiative is underway. The World Conference on Education, sponsored, as Bill Draper noted, by UNESCO, the World Bank, UNDP and UNICEF, to be held in Bangkok next year, will hopefully lay the corner-stone for what will be an innovative attack on the problems of basic education and literacy that should be one of the foremost efforts of the 1990s. Related to this, the UNESCO and UNICEF Executive Boards are creating a new mechanism - a Joint Committee on Education Policy - composed of governments from our respective Executive Boards and modeled after UNICEF's historically successful Joint Committee with WHO. This new JCEP will encourage a concerted common effort by our two organizations.

I will not discuss at length the major inter-agency efforts underway in the fields of health or child survival. The members of the Council are well aware of the long-standing and comprehensive mechanisms that exist, for example, between WHO and UNICEF. I also believe an increasingly important emphasis needs to be given to links with UNFPA and to the important set of goals for the 1990s which this Council has endorsed. However, no discussion of the operational activities of the United Nations system will be complete if it does not refer to the WHO/UNICEF "marriage", which we believe to be an invaluable illustration of the importance of collaborative inter-agency efforts.

Perhaps at this point, Mr. Chairman, I might add just a word of thanks for the strong inter-agency support I have received in my role, not as Executive Director of UNICEF, but as the Personal Representative of the Secretary-General for "Operation Lifeline Sudan". This is not the place for even a partial report on this unprecedented relief effort where, for the first time, two major warring groups have agreed on a common relief effort. But I do want, before this Council, to acknowledge the strong co-operative effort, especially of UNDP, WFP, the ICRC, the NGOs and certain bi-lateral agencies, in successfully seeking to avoid a repetition of last year's disaster which took the lives of 250,000 civilians, a majority of them children.

Mr. President,

I am fully aware that this list of concrete directions and actions elaborated on in my distributed text - is by no means comprehensive or exhaustive. However, even these few examples highlight some significant points. First, the depth and breadth of the issues that we face necessarily implies that the United Nations system's collaborative efforts can only be properly co-ordinated by national governments themselves. We often pay service to this principle, but we must make it a higher priority, and in particular, we must pay far greater attention to the ways in which we can support national governments in their exercise of these responsibilities. Second, it is clear that these major undertakings cannot be addressed by the United Nations system acting alone, nor by interacting only among each other. Our collaborative efforts must extend to other multi-lateral organizations, bi-lateral agencies and NGOs. Third, within the United Nations system, we can do considerably more to ensure that we help support each other to achieve success in mobilization efforts.

The role of the Resident Co-ordinator System within the United Nations system is an important one and should be strengthened, in particular by the specific actions recommended by the ACC Committee on operational activities. The Resident Co-ordinator System is not lacking in authority or formal structure, but rather has not been adequately supported and utilized. Recent surveys of UNICEF field Representatives show that country-level meetings convened by the Resident Co-ordinator on issues of programme substance take place far too rarely. As I have stressed in previous ECOSOC sessions, the Resident Co-ordinator should be required to call regular meetings on programme issues with results that are clearly reported and monitored at senior levels Similarly, and as the ACC committee on operational activities has stressed, the Resident Co-ordinators should receive training, orientation, and policy support - not enough of which are provided at Likewise, UN staff at the country level need to support groups present. focussed on specific sectors or themes and examine ways in which they can enhance our collaborative efforts.

All of these country-level resources should be regularly monitored by the Director-General's Office and by the other headquarters of the United Nations system. The current absence of monitoring, technical backstopping and overall substantive policy support is another surprising gap in the Resident Co-ordinator System. I believe strongly that more support, and particularly more resources, must be devoted to addressing these issues.

In short, the structures of the United Nations system are basically sound. I agree with the Administrator of the UNDP that what is needed is not new structures, nor new studies of structures, but far more thorough and systematic utilization of our existing structures.

Mr. President,

In my remarks of 1980 to this Council, I spoke of the IYC and its importance in raising global concern regarding child-related issues. It is fitting that in this 10th anniversary of the IYC, the draft UN Convention on

the Rights of the Child will be before the General Assembly. I urge your continued support for its adoption and subsequent ratification in countries, and untimately for the full implementation of the principles it codifies.

It is also most gratifying to see the swelling of support at the highest level in the international arena for a representative World Summit for Children. The purpose of holding such a meeting within the next 12 months would be to mobilize practical action worldwide to achieve the readily possible two-thirds reduction in child deaths, to accelerate the national consideration required for ratification of the Convention on the Rights of the Child, and to secure for children a permanent position of priority on national and global political agendas so that progress in their survival, protection and development can be sustained. The number of governments officially on record to date in support of the Summit proposal is 75 - virtually half of the total membership of the United Nations. This includes nearly 30 Heads of State or Government who have personally expressed their endorsement, in addition to leaders who participated in a unamimous resolution adopted by the Francophone Summit in Dakar on 26 May.

Mr. President,

I began this statement with a reference to my first address to this body. As you may have gathered from my statement today, I believe I have learned many lessons during the 1980s, in my decade of work under the guidance of the Member States. These have sometimes not been the lessons that I had expected nor wanted to experience. Yet in most instances, I have seen truly moving progress — far beyond what many of us might have expected. We have seen the beginnings of an enormous potential that comes from increasing human capacity and harnessing cooperative efforts.

If this has been a decade of some disappointment in mechanisms and dogmas, it has also been a decade of reaffirmation of human potential — and, in the past year, as manifested by the award of the Nobel Peace Prize to the United Nations Peacekeeping Forces, of the potential of the United Nations. I urge you — us — to draw new strength from these potentials in the decade to come. We must harness the capacity of our international institutions to form a common mobilization, and we must do likewise in national institutions at country-level; we must harness the capabilities of a broad range of social groups and institutions that typify the diversity of challenges which must be tackled. Above all, we must unleash human capacity toward solving our human problems — which surely means directing development resources to help release the untapped potential of the vast majority of the disadvantaged. This is, perhaps, the great challenge of the Fourth Development Decade, as well as a unifying theme of this Council's deliberations.

GOALS FOR CHILDREN AND DEVELOPMENT IN THE 1990'S (Consolidated list combining WHO-UNICEF JCHP goals and Strategies for Children in the 1990's: E/ICEF/1989/L.5)

I. Major Goals for Child Survival, Development and Protection

- 1.1 Between 1980 and the year 2000, reduction of infant and under 5 mortality rates in all countries by 50% or to 50 and 70 per 1000 live births respectively, whichever is less.
- 1.2 Between 1980 and the year 2000, reduction of maternal mortality rate by 50%.

After the achievement of the above goals, the continued reduction of infant, child and maternal mortality rates by at least 3 1/2% annually.

- 1.3 Virtual elimination (less than 1%) of severe malnutrition and 50% reduction of moderate malnutrition.
- 1.4 Universal access to safe drinking water.
- 1.5 Universal access to sanitary means of excreta disposal.
- 1.6 Universal basic (primary) education for children and accelerated adult literacy programme, especially for women.
- 1.7 Improved protection of children in especially difficult circumstances.

II. Supporting/Sectoral Goals

2. Women's Health

- 2.1 Special attention to the health and nutrition of the female child, and pregnant and lactating women.
- 2.2 Access by all couples, especially women, to information and services for child spacing.
- 2.3 Achievement of universal primary education with special emphasis for girls, and accelerated literacy programmes for women.

3. Better nutrition

- 3.1 Virtual elimination of severe malnutrition among under-5 children and reduction by half of moderate malnutrition.
- 3.2 Reduction of the rate of low birth weight (2.5 kg) to less than 10%.
- 3.3 Enable all women to exclusively breast-feed their child for four to six months and to continue breast-feeding with complementary food well into the second year.
- 3.4 Virtual elimination of iodine deficiency disorders.
- 3.5 Virtual elimination of the blindness and other consequences of vitamin A deficiency.
- 3.6 Growth promotion and its regular monitoring to be institutionalised in all countries by the end of the 1990s.
- 3.7 Dissemination of knowledge on increasing food production combined with policy changes favouring agrarian reform, credit schemes and extension services for small farmers, including women, to ensure household food security.

4. Control of childhood diseases

- 4.1 Global eradication of polio by the year 2000.
- 4.2 Elimination of neonatal tetanus by 1995.
- 4.3 Reduction by 95 per cent in measles deaths and reduction by 90 per cent of measles cases in 1995, compared to pre-immunisation levels as a major step to the global eradication of measles in the longer run.
- 4.4 Maintenance of a high level of immunisation coverage (at least 80% of children under one year of age) against DPT, BCG, measles, polio and TT.
- 4.5 Reduction by 70 per cent in the deaths due to diarrhoea in children under the age of five years; and 25 per cent reduction in the diarrhoea incidence rate.
- 4.6 Reduction by 25 per cent in the deaths due to acute respiratory infections in children under five years.

5. Control of the environment

- 5.1 Universal access to safe drinking water.
- 5.2 Universal access to sanitary means of excreta disposal.
- 5.3 Elimination of guinea-worm disease by 1995.
- 5.4 Achievement of a safer and more sanitary environment, with significant reductions of radioactive, chemical and other microbiological pollutants.

6. Basic Education

- 6.1 Universal basic education for primary-school age children through formal schooling, non-formal education or other equivalency programmes as appropriate.
- 6.2 Accelerated functional adult literacy programmes with the goal of reaching a high rate of female literacy by the year 2000.
- 6.3 Stimulation of the pre-school age child through health, nutrition, psycho-motor and cognitive development activities using low-cost, family-based approaches reaching underprivileged communities.
- 6.4 Quality and relevance of education must be improved to overcome the problem of low enrolment, high desertion and the overall inefficiency of the educational system.

7. Children in Difficult Circumstances

7.1 Provide improved protection of children in especially difficult circumstances and tackle the root causes leading to such situations.

8. Child Rights

8.1 The adoption, ratification and implementation of the provisions of the Convention on the Rights of the Child by all countries by the year 2000.