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UNICEF REPORT 1979

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INTRODUCTION

I firmly believe that the next two decades can make a decisive difference in improving the inequitable situation of hundreds of millions of deprived children in the Third World. A number of relatively recent developments, and some new information about progress already achieved, reinforce this conviction.

First, there has been a gradual improvement in some key indicators of the situation of children over a 15-year period, even in low-income countries.

Second, the International Year of the Child is stimulating national and international action.

Third, a number of world conferences have adopted targets to provide universal coverage of several services benefiting children.

Fourth, the capacity of developing countries to prepare and implement programmes has grown, and bilateral and international agencies are co-operating more effectively to support these national efforts.

The improvement in key indicators is reflected in the World Bank's Development Report 1978. The report shows that in 34 low-income countries, over the period 1960-

1975, life expectancy has risen from 36 years to 44, reflecting a substantial reduction in infant and child mortality; and the percentage of girls of primary school age in school has risen from 16 to 41 per cent. I am citing statistics from the low-income developing countries because it is there that the situation is most difficult, and improvements therefore more significant. However, the indicators also show that there is still far to go before children in all parts of the world have the chance to develop their potential, and contribute to the development of their societies.

I feel that UNICEF's support of community-based or basic services, described more fully elsewhere in this report, is one important means of helping to meet, at very reasonable costs, children's everyday needs such as simple health care, clean water, nutritious food and basic education.

National action to improve the lives of children is the motivating force of the International Year of the Child. There can be little doubt about the surge of interest in the concerns of children, generated by the Year through the efforts of people and organizations in their own countries, usually led by National Commissions. More than 150

countries have established such bodies to stimulate and guide a diversity of activities; many have launched a full-scale review of their development plans and policies aimed at ensuring that the needs of children are fully taken into account. These reviews are expected to lead to the expansion of services benefiting children, to the strengthening of legislation, and to increased co-operation between Governments and non-governmental organizations. They should also stimulate assistance to developing countries from various sources of external aid. UNICEF will do its best to help maintain this momentum to the limits of its capacity and will try to direct other resources to the same end.

Progress in this direction is further encouraged by the global targets which the world's Governments have set in a number of fields of direct relevance to children. A conference sponsored by WHO and UNICEF at Alma-Ata in September 1978, and attended by representatives of 134 Governments, reaffirmed a target adopted by the World Health Assembly in 1977 by declaring that primary health care was the key to "the attainment by all peoples of the world by the year 2000 of a level of health

that will permit them to lead a socially and economically productive life.' Universal access to clean water and sanitation facilities was adopted as a target at a world conference at Mar del Plata in 1977. The control of malnutrition as a public health problem was adopted as a target by the World Health Assembly in 1976.

At its 1979 session in Mexico City, the UNICEF Executive Board reviewed the Fund's support of such global targets and concluded that UNICEF should help countries to establish and reach their own national targets within, and as part of, these broad global targets.

The capacity of developing countries as a whole to prepare and carry out programmes benefiting children has notably increased. A great number of developing countries now have more qualified personnel than in earlier years, a stronger administrative structure, and more institutions able to give training, undertake problem-oriented research, and provide technical advice. Technical Co-operation among Developing Countries (TCDC) is a logical consequence. For some years, UNICEF has drawn on such expertise in the preparation of programmes,

and has used a significant portion of its resources in strengthening local training institutions. Over the last thirty years, a total of 2.3 million national personnel, ranging from nurses and midwives, teachers, social and community workers to planners and administrators, have been given training, orientation or refresher training with the help of UNICEF stipends. The Executive Board has agreed that UNICEF should further expand its support for such activities, for example by helping institutions to make practical case studies of new approaches, organization patterns and costs, etc., under different circumstances—as, for example, in health services research.

The international community has also, for its part, improved its capacity to collaborate effectively in support of developing countries. New or improved mechanisms have been established within the UN system for the purpose of providing more effective co-operation in delivering desired services. UNICEF is an active participant in many of the evolving mechanisms of co-operation, and I believe that the trend they represent is extremely important. There is also increasing co-operation between bilateral

assistance agencies and UNICEF. Such joint efforts can do much to help provide country-wide coverage of services benefiting children.

All the factors I have mentioned—gradual improvements of the overall situation even in low-income countries, the stimulus provided by the International Year of the Child and global targets, and the growth of national and international capacity—reaffirm my conviction that the next two decades hold great promise for innovative and intensified action on behalf of children.


In the past 15 years, UNICEF's assistance to programmes benefiting children in developing countries has increased considerably, both financially and in scope of co-operation. This is partially reflected in the fact that, in dollar terms, UNICEF's resources increased more than six times during the period: \$35 million in 1965 against an estimated \$220 million in 1979. When inflation is taken into account, this still represents almost a three-fold increase in real terms. We are now seeking an increase in revenue to \$350 million in 1982.

Our role has grown from the almost sole function of providing material assistance to

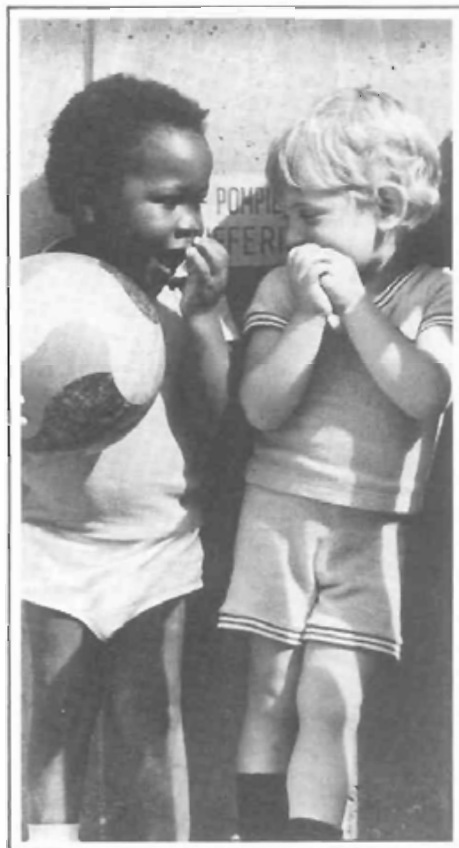
one in which advocacy for children's concerns, and help for the design and planning of programmes, are an integral part of our co-operation. A fairly new development is that a growing number of Governments are now requesting our staff to work directly with sub-national authorities at the regional or district level in the implementation of community-based services. We are very proud of this mark of confidence in UNICEF's capacity to be of help in this aspect of co-operation.

Looking back at the evolution of our organization's policies and methods of work over the past 15 years, I feel that UNICEF has proved itself able to adapt to changing demands and possibilities. I know that, under the leadership of my extremely able successor, James Grant, it will continue to do so. What I hope can remain unchanged is the relative autonomy which has allowed this flexibility and growth. I also hope and trust that the Executive Board of UNICEF will continue to guide UNICEF's work in the same spirit of close co-operation and partnership between Board and staff, which is so important and necessary for effective action.

UNICEF has a tremendous task to accomplish in the decades ahead, which will be a time of great challenge and opportunity for all our efforts on behalf of children.



Henry R. Labouisse
Executive Director
United Nations Children's Fund



(UNICEF photo ICEF 8110
by Marotta)

Off to a flying start. Children such as these, in a park in Sao Paolo, will benefit from child welfare programmes launched by Brazil during the International Year of the Child.



(UNICEF photo
ICEF 8192 by
Muckenhirn)



INTERNATIONAL YEAR OF THE CHILD

In sharpening the world's focus on the child the International Year of the Child (IYC) has triggered world-wide action towards the Year's main goal: increased long-term services benefiting children.

The Year has received widespread support. So far, over 150 countries have set up high-level IYC National Commissions, often with leadership at the highest levels.

Most countries are examining the situation of their children and some have already launched both short- and long-term programmes to improve conditions for these children.

Three examples:

Egypt has decided to establish a National Institute for Child Research and Training, and will review legislation related to children. Other IYC objectives are the establishment of vocational training centres in rural areas to assist school drop-outs; stepping-up of education about immunization; the establishment of 100 day-care centres and 200 children's clubs; the establishment of a factory for educational toys and teaching aids; and the publication of more books for children.

India's short-term goals are to lower infant and maternal mortality rates by 5 per cent; to provide clean drinking water for 20 additional villages in each of the country's 395 districts; and to provide free education for all children up to class 8. In the long term, India plans to review laws relating to children, and to increase the public's awareness of the conditions and needs of children, especially pre-school children.

Colombia has decided to make permanent its IYC National Commission. Commission sub-groups have been formed for health, education and recreation, child labour and children's legal status, mobilization of volunteers, the unprotected and abandoned child, social promotion, and information and communications. A special effort is being made to resolve the plight of the "street children."

Support for the Year has come not only from Governments but especially from professional groups—lawyers, architects, doctors, and journalists; from other non-governmental organizations; and from individuals. The media have produced stories dramatizing the poverty, deprivation, ex-

ploitation and other problems affecting children.

IYC National Commissions in most countries are reviewing the situation of their children and helping to prepare long- and short-term measures to benefit children. They are looking into the health, nutrition, and education of children; and such areas as the special problems of handicapped children, the problems of street children, drug abuse, children abandoned or abused by their families, delinquency, children and violence, mental health, play and cultural activities, and the impact of television and other media on young children. They are also engaged in advocacy and fund-raising for children. In some countries, these National Commissions may become permanent bodies advising the President's or Prime Minister's Offices.

As 1979 is the twentieth anniversary of the United Nations Declaration of the Rights of the Child, many countries have reviewed existing legislation to bring it more into line with the Declaration. Other countries are realizing that their laws relating to children are adequate but need to be better enforced.

the urging of greater deployment of resources, both internal and external, for these services, together with adequate provision for children in country development plans, national or zonal.

UNICEF's view is that, since there is no development without people, planning which does not consider and involve the interests and concerns of the community and the family is unlikely to have any lasting benefit. And that whatever their particular expression, these interests and concerns will have at their heart the betterment of the situation of children.

Forms of co-operation

How do UNICEF's policies translate into action? Co-operation takes three broad forms:

- help for the planning and design of policies and services benefiting children;
- the delivery of supplementary supplies, equipment and other aid for extending these services; and
- funds to strengthen training and orientation of national personnel.

Country approach

These are the elements but, while relatively more support is given to projects in least-developed countries, there is no centrally decided standard for the pattern of UNICEF co-operation. In each country, UNICEF field staff work out with national planners, officials of relevant ministries and administrators the particular programme of co-operation which fits the country's own priorities and which takes advantage of various possibilities for action in line with UNICEF's policies.

Focusing on the child

One of the fundamentals of UNICEF programme policy is that the co-operation has to be of direct or indirect benefit to children, irrespective of benefits to other age groups. This criterion recognises the particular vulnerability of children and the fact that a comprehensive view of their needs has to be taken if their potential is to be realized. Implicit in the approach is the recognition that problems of children cannot be tackled in isolation from those of the family and the community of which they are part. Some-

times services which work through other members of family or community—such as helping mothers to adopt better child-rearing practices—are the best way to help the child.

Priority groups

The specific needs of different age and socio-economic groups are an important consideration. Priority is given to the needs of young children, because they are the most vulnerable, and to children of lower-income families in, for example, unreached and underserved rural and urban communities.

Bringing things together

Co-operation should address the long-term priority problems of children where action is possible, preferably as part of mainstream development efforts, and try to take account of the ways these problems are interrelated in such fields as health services, water supply, family food supply, community development and other social welfare services.

This means helping to strengthen not

only the child-related efforts of individual ministries but also the links between these efforts. One key objective is the convergence of sectoral services at the district and community level so that they complement and reinforce each other.

Encouraging innovation

Programme policies are flexible enough to include projects aimed at solving a specific problem such as, for example, control of endemic goitre. Or to favour “multiplier-effect” project elements likely to increase substantially the coverage and quality of long-term services benefiting children—as in, for example, helping strengthen relevant capacities at intermediate and local levels of government, from provincial or district to village and urban community levels.

Innovative approaches are also within the scope of UNICEF policy, making possible the risk-taking involved in testing potential “growing points” in child-related project designs and strategies.

Thus UNICEF co-operation is available

for pilot and “starter” activities not initially part of a country’s development plans but offering promise of evolving into national policy.

Watching country costs

In all its co-operation, and pre-eminently in the more innovative approaches, UNICEF policy is to evaluate costs to the country, particularly recurring costs beyond the initial period of support from external sources.

These costs have to be reasonable enough to be borne in the future by central and local government budgets and the community. This is a factor bearing not only on continuation of the individual project but also on its possibilities for replication elsewhere in the country.

Training emphasis

Allied to consideration of ongoing costs is the importance of assessing what is likely to happen after UNICEF co-operation ends. This is one reason for the major emphasis in UNICEF policy on strengthening the train-

ing and orientation of personnel in services benefiting children, and including provision for this in projects wherever possible.

Community involvement

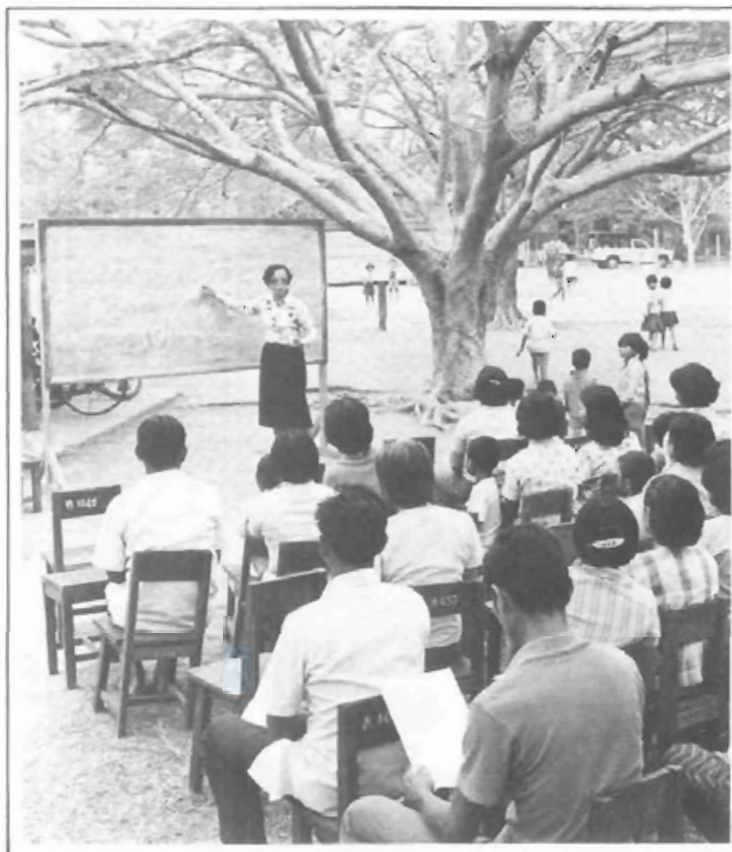
Programme policy also seeks to encourage community involvement in order to develop self-reliance, to mobilize a country’s human resources and to promote greater local participation in, and responsibility for, services benefiting children.

This may include support for action initiated by local government units, community organizations and leaders, women’s groups, youth and other non-governmental organizations, or even schoolchildren.

UNICEF has fostered community involvement in various ways for many years. In 1975, this experience—combined with that of a considerable number of developing countries—led to UNICEF adopting the community-based services approach as an overall policy theme. UNICEF called this the “basic services” approach.

Why it works. The basic services approach thus tackles the most pervasive problems of children at the same time as it contributes to national development. It aims at the poorest, most underserved communities, building self-reliance and national capacity as it contributes to equity within the country. It attacks interrelated problems at levels where that interrelationship can hardly be overlooked.

Moreover, the basic services approach, being labour-intensive, provides opportunities for the productive use of developing country human resources, abundantly available but substantially neglected. The approach makes it possible to reach children with essential services, and at long-term recurring costs the community and nation will be able to afford, given sufficient outside aid over a sustained period to help meet capital costs and launch the process.



A health worker instructs volunteers on health care in northern Thailand. The Thai Government's use of health volunteers chosen from the communities provides an inexpensive and effective way of extending health care services to the villages.

(UNICEF photo
ICEF 7988
by M. Clark)

COMMITMENTS AND EXPENDITURES

Table 2 shows UNICEF expenditures in 1978 by major field of aid. The classification is made according to the particular government ministry having predominant responsibility for a project. It does not fully reflect the trend in many countries, encouraged by UNICEF, to provide various services for children in an interrelated way at the community level so that they complement and reinforce each other.

Table 3 shows, by region and type of programme, the balance of commitments available for use after 1 January 1979, amounting to \$418 million, and the commitments approved by the UNICEF Executive Board at its 1979 session, amounting to \$252 million. The total commitment for spending in 1979 and future years is \$670 million. About two-thirds of the total commitments are planned to be spent in 1979 and 1980 and the remainder later.

TABLE 2
Expenditure in 1978 compared with 1977

	1977	1978
	(in millions of US dollars)	
Child health		
Maternal and child health	35.9	43.3
Village water supply	17.9	26.5
Responsible parenthood (mainly funds-in-trust from UNFPA for family planning)	5.0	4.9
Total child health	58.8	74.7
Child nutrition	8.9	11.6
Social welfare services for children	6.9	9.9
Formal education	19.6	24.7
Non-formal education	3.7	5.0
Emergency relief*7	5.1
General (mixed categories)	7.4	11.2
Programme support services	21.9	25.4
Total assistance	127.9	167.6
Administrative services	13.8	15.9
TOTAL	141.7	183.5**

* Expenditure for rehabilitation of damaged and destroyed facilities is included in figures for the appropriate programme sectors. Total expenditure for emergency aid and rehabilitation amounted to \$158 million in 1977 and \$20.1 million in 1978.

** Does not include expenditure for operations not directly resulting from Executive Board commitments. In 1978, UNICEF also handled donated foods for children worth an estimated \$49 million, and procured supplies worth \$14 million on a reimbursable basis, bringing the total—in financial terms—of UNICEF "output" for the year to almost \$246 million. After deducting staff assessment, the *net* administrative cost of handling this output was \$13.5 million, or 5.5 per cent, of the total.

TABLE 3

Balance of commitments for future expenditure as of 1 January 1979 and commitments approved by the Board in 1979, by region and type of programme (in thousands of US dollars)

	Africa	The Americas	East Asia and Pakistan	South Central Asia	Eastern Mediterranean	Inter-regional	Total
Balance of commitments for future use as of 1 January 1979	92,852	17,664	123,732	123,261	29,424	31,432	418,365
1979 Board Commitments:							
Child health	17,248	1,755	30,478	3,060	6,002	5	58,548
Water supply and sanitation	3,676	965	17,223	1,980	2,860	—	26,704
Child nutrition	2,315	1,771	15,254	240	704	10	20,294
Social welfare services for children	4,567	2,211	7,261	500	2,725	—	17,264
Formal education	9,966	941	11,522	2,910	2,617	—	27,956
Non-formal education	2,360	1,979	5,487	—	300	—	10,126
Emergency reserve	—	—	—	—	—	1,000	1,000
General (mixed categories)	2,493	2,974	9,824	1,310	1,592	5,850	24,043
Deficits	119	—	—	19	214	30	382
Programme support	9,964	4,368	8,177	5,223	4,569	7,827	40,128
Total assistance	52,708	16,964	105,226	15,242	21,583	14,722	226,445
Administrative services	—	—	—	—	—	24,931	24,931*
Savings (cancellations)	(224)	(1)	(5)	—	—	(10)	(240)
Net increase in commitment by 1979 Board	—	—	—	—	—	—	251,136
TOTAL	145,336	34,627	228,953	138,503	51,007	71,075	669,501

* Includes \$1.7 million operational costs for IYC Secretariat.

A visiting doctor checks a child at a Mobile Creche, a social service run for thousands of unskilled labourers who live and work on construction sites in New Delhi, India. These workers live in makeshift villages and cannot use the health services in the city.

The Mobile Creches provide high-protein supplements, the services of part-time doctors, regular vaccination and immunization, nursery and primary teachers, vocational training and adult literacy classes. UNICEF provides training grants to creche workers and teachers.



(UNICEF photo ICF 6776
by J. Myers)

CHILD HEALTH

Child health is the major area of UNICEF co-operation in national services. It accounted for expenditures of some \$75 million, 52 per cent of the total, in 1978.

Primary health care

In 1975, it was decided that UNICEF, as an extension of its long-standing co-operation in maternal and child health care systems, should work with the World Health Organization (WHO) to advocate and support the primary health care approach. The approach received broad support from representatives of 134 Governments at an international conference co-sponsored by WHO and UNICEF held at Alma-Ata, Kazakhstan, Union of Soviet Socialist Republics in September 1978.

Basically, primary health care is an attempt to make health care accessible to all communities, particularly those at present unserved, mostly in rural and poor urban areas. Some 75 per cent of children live in such communities.

To achieve this the approach calls for a reorientation of the conventional health

care system—predominantly urban-oriented and curative in nature—to involve communities in the planning, supporting, staffing and management of their own health care.

The approach involves extensive use of community workers for front-line curative, protective and health promotion tasks. These workers, selected by their community, are trained to diagnose and treat some four-fifths of children's ailments using simple medical techniques and equipment. Other problems are referred to health centres and hospitals.

The country's health structure establishes technical policies and provides advice, supervision, training and referral services as well as administrative and logistical support.

It is a fundamental principle of the approach, however, that preventive health care should be an integral part of the overall development effort, involving work in agriculture, water supply, education and civil administration among others.

The UNICEF Executive Board at its 1979 session stressed this integrated approach in adopting recommendations for UNICEF ac-



A health promoter chosen by her community and trained in a UNICEF-assisted Government nutrition programme measures the arm of a four-year-old child for an indication of malnutrition in the village of El Panecillo in Ecuador.

tion in co-operation with WHO following the governmental agreement reached in Alma-Ata, and to help translate primary health care policy into national strategies, plans of action and services.

The areas of UNICEF action include: advocacy of the approach, at the national policy level and internationally; support for intersectoral planning and co-ordination; strengthening centres in developing countries which can undertake research, train key personnel and provide advice; helping introduce the primary health care concept into appropriate schools in developing countries, including those which can provide relevant orientation for non-health professionals; supporting the introduction of primary health care into rural and peri-urban development programmes, country health programmes or any others which offer an entry point for the approach; helping to orient existing health-related programmes, such as those dealing with nutrition, or water and sanitation, to include support of primary health care; supporting the exchange of country experiences; and strengthening the participation of non-governmental organizations.

In-1978 UNICEF:

- co-operated in child health programmes in 103 countries: 45 in Africa, 27 in Asia, 21 in the Americas, 9 in the Eastern Mediterranean region and 1 in Europe.
- provided grants for training orientation and refresher courses for 77,700 health workers—doctors, nurses, public health workers, medical assistants, midwives and traditional birth attendants.
- provided technical supplies and equipment for 40,700 health centres of various kinds—especially rural health centres and subcentres.
- supplied medicines and vaccines against tuberculosis, diphtheria, tetanus, typhoid, measles, polio and other diseases.

An important focus of UNICEF co-operation in primary health care is training and orientation in maternal and child health. This training can be extended not only to health personnel but also to workers whose services have a bearing on health—teachers, agricultural extension workers, community workers, home economists and others in contact with villages and peri-urban settlements. This group includes organized community groups, women's organizations and youth movements. Village midwives and traditional healers are regarded as important community resources deserving particular attention through training and supervision.

UNICEF is also co-operating in the strengthening of national services for support and referral, expanded programmes of immunization, diarrhoeal diseases control, and the supply of essential drugs.

Immunization

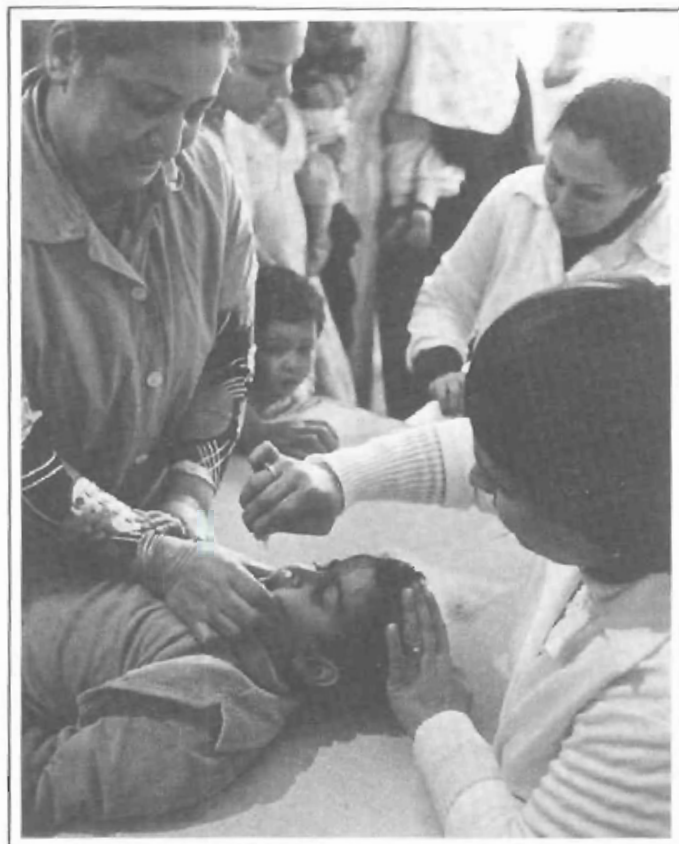
UNICEF is co-operating in campaigns against common childhood diseases such as

diphtheria, whooping cough, tetanus, tuberculosis, poliomyelitis and measles. Since vaccines are now relatively inexpensive and effective, the major difficulties with an immunization campaign are organization and funding.

In a number of countries UNICEF is, therefore, supporting the WHO "expanded programme of immunization," which usually delivers a number of vaccinations simultaneously and seeks to permanently strengthen national capacities to immunize children by building and extending the primary health care structure.

UNICEF is providing more vaccines and equipment, as well as help for training. Improved "cold-chain" equipment has been tested and developed in collaboration with WHO.

UNICEF Executive Board discussions in 1979 stressed the need for training programmes, quality control of vaccines and help for logistical problems such as storage, "cold-chain" technology and mobility of vaccinators. Support for research should aim to increase stability of vaccines, simplify technologies and reduce costs.



An Egyptian child is immunized against childhood diseases, which needlessly claim millions of lives in developing countries. Immunization is a basic preventive health measure which makes an important contribution to reducing child mortality and averting permanent disability.

UNICEF is co-operating in the WHO "expanded programme of immunization" which is helping to vaccinate millions of children.

(UNICEF photo ICEF 8269 by B. Wolff)

all by the year 1990. The Children's Fund works closely with other United Nations organizations through the Co-operative Action for the International Drinking Water Supply and Sanitation Decade (1980-1990), which also involves the United Nations, the United Nations Development Programme (UNDP), WHO, the World Bank, the Food and Agriculture Organization of the United Nations (FAO), the International Labour Organization (ILO), and a number of bilateral aid agencies. This collaboration helps countries make more rapid progress toward the goal of complete coverage of their territory with clean water supply.

Typically, UNICEF co-operates in schemes for the drilling of wells, and the construction of simple gravity-flow systems to stand-pipes. Sometimes there is also provision for home connexions. A major part of UNICEF's input is in the form of equipment and materials such as drilling rigs, pumps, pipes, casings, and fittings—plus funds for training purposes, as well as limited provision of project support staff to help with training, logistics and operations. UNICEF helps to promote community participation in planning, construction and

maintenance of local water supply systems. A few countries are being helped to manufacture the hand-pumps they need for shallow or deep wells.

In the field of environmental sanitation, UNICEF helps in schemes for excreta disposal (especially household latrines), health and sanitation education, orientation of community-level workers, and the diffusion of information through such channels as women's organizations. Support is given for the introduction of appropriate low-cost technologies, backed by the provision of simple supplies, such as latrine bowls and construction materials. However, at both national and community levels there is a much smaller demand for assistance for sanitation than for water supply, and only some 5 per cent of UNICEF expenditure for water and sanitation has been for sanitation. The 1979 Board agreed with the recommendation of the WHO/UNICEF study that a greater effort should be made in this field. This will need the involvement of women's organizations and the community.

Besides being one of the most effective and economical ways to improve the health of children, the provision of safe water has

other benefits as well. An accessible water supply lessens the drudgery of mothers, freeing them to spend more time on other activities, including child care. And, since water is commonly a community priority, its supply is often the starting point for self-reliant local efforts of the basic services type. By increasing the possibility of micro-irrigation, the availability of water can also lead to a better family food supply.

In 1978 UNICEF:

- co-operated in programmes to supply safe water and improved sanitation in 77 countries. Some 8.7 million people (approximately 40 per cent of them children) benefited from approximately 28,568 water supply systems; these included 27,024 wells with hand-pumps, 970 piped systems, and 574 with motor-driven pumps. Some 700,000 people gained access to better waste disposal systems.

CHILD NUTRITION

The general state of child nutrition in any country depends not only on national food supply and distribution, but also on such factors as poverty, employment, distribution of land and income, families' knowledge of nutrition and their capacity to produce and store family foods, as well as on health and other social services.

UNICEF co-operates in programmes in only some of these areas but helps countries to seek solutions which recognize the inter-relationships between them. Improvement of child nutrition thus cuts across various sectors; it is part of efforts to ensure safe water and sanitation, to expand immunization, to provide primary health care and nutrition education and to spread knowledge of hygiene and child care. The promotion of breast-feeding and the addition of suitable weaning foods after the age of four to six months are particularly important, and need to be supported by the health services, the school, extension workers and information media.

UNICEF therefore supports development of national policies for agriculture, food and nutrition which take account of



Village-level nutrition workers learning how to prepare food to best preserve its nutritional value at the State Health Institute in Lucknow, India. They in turn teach mothers to cook readily available foods suitable for children. UNICEF provides the Indian Government with stipends to train these workers.

(UNICEF photo ICEF 7894 by T. Satyan)

In 1978 UNICEF:

- co-operated in nutrition programmes in 67 countries: 27 in Africa, 18 in Asia, 15 in the Americas and 7 in the Eastern Mediterranean region.
- helped to expand applied nutrition programmes in 72,300 villages, equipping nutrition centres and demonstration areas, community and school orchards and gardens, fish and poultry hatcheries, and seed production units.
- provided stipends to train 24,300 village-level nutrition workers.
- delivered some 38,000 metric tons of donated foods (including wheat flour, rolled oats, skim milk, special weaning foods and nutritional supplements) for distribution through nutrition and emergency feeding programmes.

the special needs of infants, young children and pregnant or nursing mothers; systems for monitoring the food and nutrition situation as it affects children; the orientation and training of national personnel—from planners and administrators to auxiliary and community-level workers dealing with such areas as health, agriculture, education, community development and co-operatives, which have an impact on the food and nutrition situation; and the development and local production or home preparation of low-cost weaning foods.

A particular area of UNICEF support is intervention against micro-nutrient deficiencies affecting children. This includes provision of large-dose capsules of vitamin A against xerophthalmia, which causes child blindness; arrangements to iodinate salt in order to prevent goitre; and distribution through the health services of iron and folate supplements to combat anaemia in mothers.

UNICEF co-operates with the maternal and child health services to provide information and support to pregnant women and nursing mothers; to run "under-fives clinics;" to weigh young children regularly, and help mothers monitor their growth; to

distribute children's foods to families in need; and to treat cases of diarrhoea and child malnutrition.

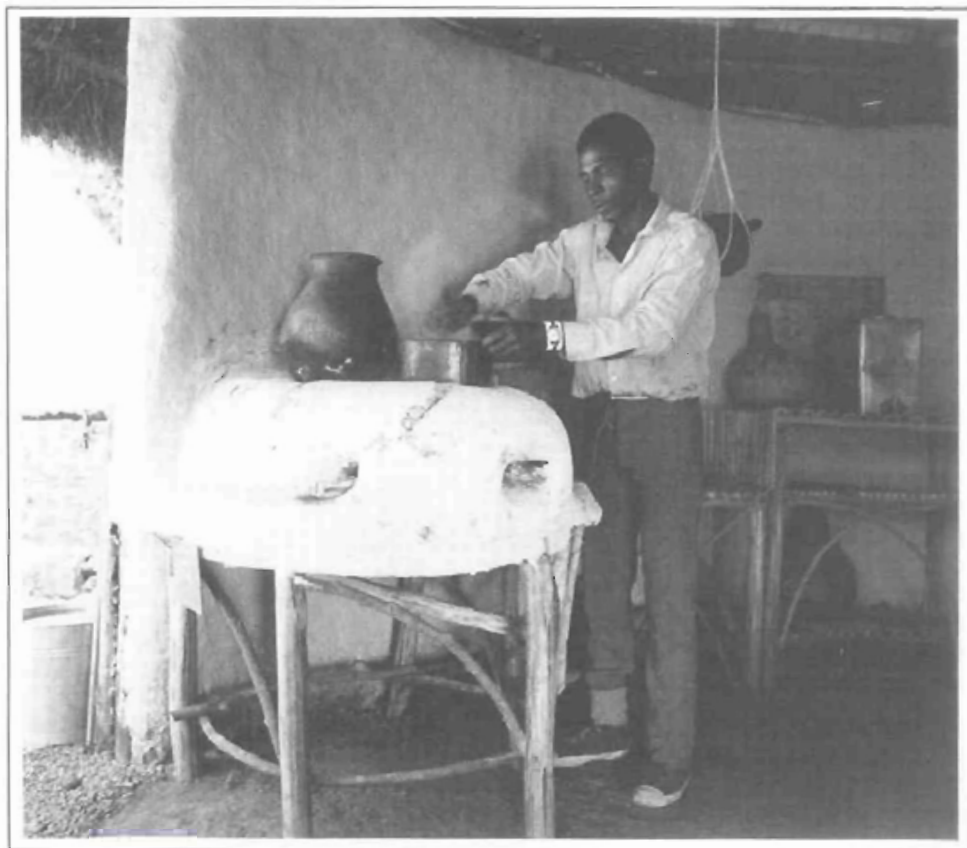
UNICEF also provides support for "applied nutrition"—family and community gardens, poultry and small-animal raising or fish-farming; better family food storage; and home or local processing of foods for young children.

UNICEF spent \$11.6 million on child nutrition in 1978, and delivered 38,000 tons of donated supplementary food worth (with freight) some \$49 million. This was in addition to expenditures in co-operation with the health services which are recorded under "child health."

UNICEF is grateful for the food donations that make it possible to supply some foods for children during emergencies, and to support food distribution by health services for children and mothers in families below the poverty line. In the latter case of long-term need, UNICEF tries to work with countries to improve family food production, to expand nutrition education, particularly among girls and mothers, and to promote breast-feeding and better weaning practices using local food resources.

In child nutrition, UNICEF works with the technical guidance of FAO and WHO, and in food assistance, with the World Food Programme. UNICEF is a member of the United Nations system's sub-committee on nutrition which has participation from bilateral aid agencies. UNICEF is joining WHO in arranging a meeting on infant and young child feeding in WHO headquarters in October 1979. The meeting will be representative of Governments, the infant-food industry and non-governmental organizations and will consider the promotion of breast-feeding, the introduction into the infant's diet of adequate weaning foods, the role of the media, the changing situation of women and the appropriate marketing of infant formulas and weaning foods.

A smokeless cooking stove made of mud is one of the many simple village technology improvements which are enabling rural Kenyan women to cook indoors without filling their huts with smoke.



(UNICEF photo ICEF 7389 by E. Thorning)

VILLAGE-LEVEL TECHNOLOGY

UNICEF in the past few years has begun to co-operate in the development and promotion of low-cost, indigenously-based "technologies"—ideas, methods, equipment, tools and practices—which help to improve the nutrition, health and daily life of children, and to relieve family workloads, particularly those of mothers.

The work is now going on in most regions of the developing world. A particular example is the Karen Village Technology Unit outside Nairobi in Kenya. This unit demonstrates more than 50 simple devices, including solar food dryers, water and grain storage, charcoal filters for water purification, smokeless stoves, rodent-free cupboards, and labour-saving ways to shell and mill various grains and nuts. Work has also been carried out on complementary cropping, composting and windmills.

The Karen Centre, now fully operated by the Kenya Government, also trains people from a number of African countries in construction of farm and household tools, food conservation and processing devices relating

to better family food supply and living conditions.

FORMAL AND NON-FORMAL EDUCATION

Education activities are a major field of UNICEF co-operation, accounting for an expenditure of almost \$30 million in 1978. Of this, some \$5 million was for non-formal education.

In primary education, UNICEF co-operation seeks to promote qualitative improvements aimed at making it more useful, increasing the attendance of girls and reducing the numbers dropping out. UNICEF concentrates on aid for curriculum reform, the development of teaching aids and textbooks, and teacher training and retraining.

Complementing co-operation in the formal sector is UNICEF help for education outside the regular school programme—non-formal education—which is aimed at children, youth and women who have missed school. It seeks to provide the basics of literacy and numeracy as well as skills and knowledge for improving conditions of life

In 1978 UNICEF:

- co-operated in primary and non-formal education in 92 countries: 43 in Africa, 17 in the Americas, 22 in Asia and 10 in the Eastern Mediterranean region.
- provided stipends for refresher training of some 69,400 teachers, 47,200 of them primary-school teachers.
- helped to equip more than 90,200 primary schools, secondary schools and teacher-training institutions and 1,800 vocational training centres with teaching aids—including maps, globes, science kits, blackboards, desks, reference books and audio-visual materials.
- assisted many countries to prepare textbooks locally by funding printing units, book-binding and the provision of paper.

and prospects for the future of those attending. In particular UNICEF co-operation seeks to help non-formal education to reach girls and women and to strengthen their knowledge of health, child care and nutrition, and to provide training in practical skills.

A report to the 1977 session of the Executive Board on bilateral and multilateral aid for primary and non-formal education found that in 1975 more than 40 per cent of multilateral aid in these fields came from UNICEF. Moreover UNICEF co-operation played a key role: since developing country education budgets are largely committed to costs difficult to reduce—such as teachers' salaries—UNICEF support makes possible reform and innovations that would not otherwise be undertaken.

Another point stressed by this report was the need for more attention to the needs of pre-school children. UNICEF has been involved in a variety of initiatives, particularly in Latin America, to give more systematic attention to the development of day-care services for the young child, primarily through community organizations. The concept of early stimulation is finding ready application in some of the day-care schemes.



Young Somali children learn the new Somali script in primary school. UNICEF is aiding their education by supplying educational materials to their school.

(UNICEF photo
ICEF 8380
by W. Campbell)

SOCIAL WELFARE SERVICES FOR CHILDREN

This help, which in 1978 totalled almost \$10 million, is channelled through neighborhood and community centres, various child welfare and youth agencies, women's clubs and day-care services—especially for

children of employed mothers.

In many cases these activities are not separate projects but part of health, nutrition education or home economics extension programmes. Often they are part of community development or *animation rurale* in rural development zones, in which services for women are given a special emphasis.

URBAN SERVICES

UNICEF is supporting a wide variety of activities benefiting urban children, including mother and child health services, communicable disease control measures, supplementary child feeding, non-formal education programmes and community and day-care centres.

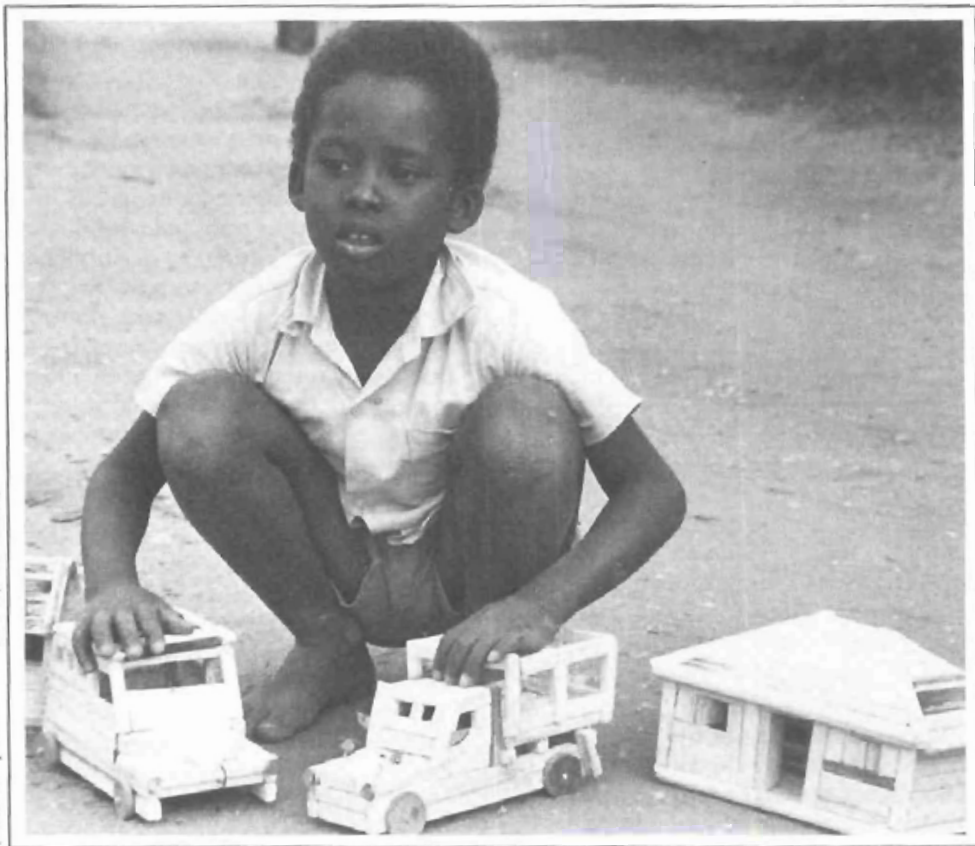
The 1978 Executive Board session endorsed adapting the community-based or basic services strategy to the urban situation, taking advantage of low-income urban residents' capacity for self-help, if given the needed support by government services.

Thus, community groups or individual workers selected with the agreement of the community would be involved in identifying problems and in planning and carrying out low-cost community-level action. Referral services would be made available from the network of government services.

Today, more than 156 million children under 15 live in low-income urban areas—populations growing at twice the rate of the cities as a whole.

In 1978 UNICEF:

- co-operated in social services for children in 71 countries: 30 in Africa, 15 in Asia, 16 in the Americas and 10 in the Eastern Mediterranean region.
- supplied equipment to more than 5,300 child welfare and day-care centres, 1,700 youth centres and clubs, and 3,2000 women's centres or co-operatives.
- provided stipends to over 15,400 women and girls for training in child care, homecrafts, food preservation and income-earning skills.
- provided stipends to train some 27,800 local leaders to help organize basic services in their own villages and communities.
- provided equipment and supplies to 300 training institutions for social workers, and training stipends for 5,200 child welfare workers.



In the face of such needs, UNICEF cooperation, despite considerable growth over the past decade, can only be considered a beginning. Nevertheless, it is contributing to a growing understanding of the interrelationship between community-based social development and physical improvement of low-income urban areas. In a number of instances this has aroused the interest of large funding sources in social aspects of urban development, or encouraged local authorities in this type of approach.

A child plays with simple, locally-produced toys at a UNICEF assisted day-care training centre in Tanzania. UNICEF helps train personnel for day-care centres and supplies teaching aids for the training institutions. It is also helping the Tanzanian Government establish new community centres in the most deprived neighbourhoods of Dar-es-Salaam.

EMERGENCY RELIEF AND REHABILITATION

In accordance with the policy of the Executive Board, emergency relief accounts for a small proportion of UNICEF assistance, although often its role is vital in the immediate post-disaster period. Much more UNICEF support is provided for medium-term reconstruction and rehabilitation of services benefiting children, but as far as possible this is funded by additional specific-purpose contributions from Governments.

In 1978, relief supplies and other emergency help worth \$5 million were sent to 18 disaster or emergency situations. Rehabilitation expenditure is recorded under the relevant headings of health, water, nutrition, etc. UNICEF expenditure for relief and rehabilitation amounted to \$20 million in 1978 (footnote to table 2).

UNICEF's ability to respond flexibly to disaster situations has a broad basis. It has a network of field offices and co-operates with other agencies as part of the United Nations system-wide disaster relief arrangements and with the International Red Cross (covering both the International Committee and

the League). It also draws upon its stockpile of 300 commonly-needed relief items in the UNICEF Packing and Assembly Centre (UNIPAC), Copenhagen.

Often UNICEF staff in the affected country help to assess rapidly the most urgent needs of children and mothers, and they can arrange to divert UNICEF supplies already in the country. There is also provision for UNICEF representatives to authorize some local expenditures and, if necessary, to get additional funds from the Executive Director's emergency reserve for which \$1 million is set aside each year. With the approval of the Government and UNICEF headquarters, a larger scale rescheduling of commitments approved for longer-term programmes can also be made to provide for both relief and rehabilitation. The need for support for longer-term reconstruction and rehabilitation often continues after the main inflow of outside relief aid has ended. UNICEF seeks special contributions for such projects.

Disastrous flooding in five Asian countries in 1978 resulted in heavy loss of life and dislocation of essential services. To plug gaps in national and international relief efforts, UNICEF committed \$18.4 million, ap-

proved by the Board through a mail poll, for rehabilitation of services for children and mothers.

In 1979, civil strife and international and internal crises in some countries have given cause for increased concern for the welfare of children in the affected areas. UNICEF is currently providing relief and rehabilitation assistance for children in Kampuchea, Lebanon, Nicaragua, Uganda and Zaire and the children of local inhabitants displaced by the reception of refugees in several South East Asian countries. (Refugee children come under the care of the Office of the United Nations High Commissioner for Refugees).



UNICEF FINANCES

REVENUE

UNICEF's revenue comes from voluntary contributions by Governments and individuals. It was \$211 million in 1978, of which \$160 million was for general resources and \$57 million for specific purposes.

The revenue came from the following sources: 68 per cent directly from 125 Governments and territories as regular and specific-purpose contributions; 13 per cent from private sources (fund-raising campaigns, greeting card profits and individual donations); and 19 per cent from the United Nations system and miscellaneous sources. Table 4 shows UNICEF revenue during the years 1974-1979 by source.

The 1978 revenue was 29 per cent or \$47 million higher than in 1977. Of this increase, \$26 million came from Governments. Governmental contributions for general resources increased by \$21 million to a total of \$113 million, a rise of 23 per cent. Governments also provided \$5 million more in supplementary funding for specific purposes compared with 1977. Government contributions are listed in table 5.

Revenue for 1979 is estimated at \$220 million—\$172 million for general resources and \$48 million for specific purposes. The

financial plan of UNICEF estimates revenue of \$250 million in 1980 and \$290 million in 1981.

Table 6 lists, by country, non-governmental contributions received in 1978, totalling \$26.9 million. In addition to net proceeds from greeting cards, these contributions come from fund-raising activities of UNICEF National Committees, including the "Trick or Treat" campaign in Canada and the United States, and various collections, campaigns and special events organized by National Committees in Europe, Japan and Australia. Significant support also continued to come from other non-governmental organizations.

Table 7 lists contributions-in-kind made through UNICEF in 1978. These consisted mainly of children's foods, medicines and freight, on which the donors placed an estimated value of \$49 million; of this amount, commodities contributed by the European Economic Community were valued at more than \$43 million. Contributions-in-kind are not listed as income in UNICEF financial accounts.

Contributions for specific purposes

For some years, UNICEF has appealed to

Governments and non-governmental organizations for contributions to long-term projects for which UNICEF's regular resources are insufficient, and for relief and rehabilitation in emergency situations. During the period 1974-1978, nearly a quarter of the funds committed by UNICEF came from such specific-purpose contributions.

Projects funded by specific-purpose contributions are prepared in the same way as those funded from general resources. Most are in countries classified by the United Nations as "least developed" or "most seriously affected."

At its 1979 session, the Executive Board "noted" 33 new projects to be carried out if and when specific contributions are received. These, together with previously "noted" projects, brought the total needed for such projects to \$141 million.*

In many cases the country infrastructure and central services are already being assisted from UNICEF's general resources. Specific contributions extend services to children not otherwise reached.

*Full information about each of these projects can be found in the UNICEF publication, *Proposals for supplementary funding*, volume 6, 1979.

TABLE 5 (continued)

	General contributions (incl. local budget costs)	Specific-purpose contributions (including funds-in-trust)	Total		General contributions (incl. local budget costs)	Specific-purpose contributions (including funds-in-trust)	Total
Honduras	20.0		20.0	Malawi	2.2		2.2
Hong Kong	6.3		6.3	Malaysia	100.2		100.2
Hungary	15.4		15.4	Maldives	2.5		2.5
Iceland	15.4		15.4	Malta	5.4		5.4
India	1,561.0		1,561.0	Mauritania	6.8		6.8
Indonesia	506.0		506.0	Mauritius	4.7		4.7
Ireland	297.4	48.3	345.7	Mexico	277.2		277.2
Israel	45.0		45.0	Monaco	3.1		3.1
Italy	476.2		476.2	Mongolia	3.1		3.1
Ivory Coast	93.1		93.1	Nepal	7.6		7.6
Jamaica	10.7		10.7	Netherlands	8,252.2	2,500.0	10,752.2
Japan	2,613.3		2,613.3	New Zealand	721.6		721.6
Jordan	16.3		16.3	Niger	2.3		2.3
Kenya	19.1		19.1	Nigeria	204.2		204.2
Lao People's Democratic Republic	4.5		4.5	Norway	10,520.7	2,895.8	13,416.5
Lebanon	33.7		33.7	Oman	50.0		50.0
Lesotho	2.1		2.1	Pakistan	146.1		146.1
Liberia	20.0		20.0	Panama	22.0		22.0
Libyan Arab Jamahiriya	43.6		43.6	Papua New Guinea	7.5		7.5
Liechtenstein	2.0		2.0	Peru	121.7		121.7
Luxembourg	20.6		20.6	Philippines	537.0		537.0
Madagascar	11.9		11.9	Poland	348.7		348.7
				Portugal	30.0		30.0

	General contributions (incl. local budget costs)	Specific-purpose contributions (including funds-in-trust)	Total
Qatar	200.0		200.0
Republic of Korea	100.0		100.0
Romania	12.5		12.5
Rwanda	3.0		3.0
St. Kitts-Nevis-Anguilla	0.7		0.7
Saint Lucia	2.6		2.6
Saudi Arabia	1,000.0	500.0	1,500.0
Seychelles	0.6		0.6
Sierra Leone	47.4		47.4
Singapore	8.2		8.2
Somalia	13.8		13.8
Spain	167.4		167.4
Sri Lanka	11.3		11.3
Sudan	35.0		35.0
Suriname	3.0		3.0
Swaziland	6.9		6.9
Sweden	22,123.9		22,123.9
Switzerland	3,440.9	5,231.0	8,671.9
Syrian Arab Republic	25.6		25.6
Thailand	318.0		318.0
Togo	13.6		13.6
Trinidad and Tobago	8.3		8.3
Tunisia	60.9		60.9

	General contributions (incl. local budget costs)	Specific-purpose contributions (including funds-in-trust)	Total
Turkey	221.6		221.6
Uganda	71.6		71.6
Ukrainian Soviet Socialist Republic	163.5		163.5
Union of Soviet Socialist Republics	883.0		883.0
United Arab Emirates	372.4		372.4
United Kingdom of Great Britain and Northern Ireland	8,655.1	2,858.8	11,513.9
United Republic of Cameroon	35.1		35.1
United Republic of Tanzania	35.7		35.7
United States of America	25,000.0	6,565.0	31,565.0
Venezuela	200.0		200.0
Viet Nam	10.0		10.0
Yemen	22.0		22.0
Yugoslavia	233.1		233.1
Zambia	50.9		50.9
TOTAL:	113,462.4	29,976.8	143,439.2

TABLE 6

1978 non-governmental contributions (in US dollars)

Countries where non-governmental contributions exceeded \$10,000 (figures include proceeds from greeting-card sales)

Algeria	26,699	German Democratic Republic	36,585	Netherlands	1,027,241	United Arab Emirates	168,995
Argentina	125,628	Germany, Federal Republic of	6,850,180	New Zealand	151,625	United Kingdom of Great Britain and Northern Ireland ..	656,764
Australia	498,609	Ghana	15,455	Nigeria	44,146	United States of America	7,094,555
Austria	364,845	Greece	139,498	Norway	628,999	Uruguay	40,961
Belgium	903,835	Guatemala	11,556	Pakistan	13,715	Venezuela	23,541
Bolivia	15,529	Hungary	30,624	Panama	11,462	Yugoslavia	149,320
Brazil	1,961,687	India	282,763	Paraguay	14,537	Zambia	11,147
Bulgaria	128,735	Indonesia	22,843	Peru	53,806	Contributions under \$10,000	167,353
Burma	13,876	Iran	10,994	Philippines	23,005	TOTAL	37,265,565
Canada	4,192,954	Ireland	134,303	Poland	167,456	Less costs of Greeting Card Operation*	10,305,783
Chile	142,434	Italy	193,251	Romania	19,259	Net available for UNICEF assistance	26,959,782
Colombia	92,125	Ivory Coast	11,029	Senegal	13,029		
Costa Rica	13,913	Japan	1,178,422	Spain	1,785,655		
Cuba	10,326	Kenya	12,398	Sri Lanka	10,536		
Czechoslovakia	22,179	Lebanon	10,653	Sweden	652,643		
Denmark	647,167	Luxembourg	56,069	Switzerland	1,453,471		
Ecuador	21,337	Malaysia	15,613	Thailand	14,782		
Egypt	14,430	Mexico	79,425	Turkey	26,489		
El Salvador	11,171	Morocco	10,465	Uganda	11,791		
Finland	494,759			Union of Soviet Socialist Republics ..	673,692		
France	3,351,226						

*Costs of producing cards, brochures, freight, overhead

TABLE 7

1978 contributions-in-kind
made through UNICEF

(estimated value in US dollars)

	Value of commodities (inc. freight)
FROM GOVERNMENTS	
Belgium	1,757,850
Canada	134,771
Switzerland	1,581,140
United States of America ...	2,719,646
FROM INTERNATIONAL ORGANIZATIONS	
European Economic Community	43,246,085

MEDIUM-TERM
WORK PLAN

The 1979 Executive Board approved for the first time a medium-term work plan for UNICEF, covering the years 1979-1982. It includes the financial plan, with which the Board has been working for some years, but is much broader in scope. It summarizes UNICEF's objectives, the constraints on their realization, and the strategies being followed. It gives an estimated breakdown by programme category of co-operation through 1982. This can only be an estimate because the type of project in which UNICEF co-operates depends on discussions in each country related wherever possible to the cycle of the country's development plan; however the plan provides for an increase of co-operation in clean water supply and primary health care.

A chapter of the plan deals with UNICEF's budgets for administrative services, project support services, the Greeting Card Operation, the UNICEF Packing and Assembly Centre (UNIPAC), and for 1979, with phase-out in 1980, the Secretariat of the International Year of the Child; budget

requirements are related to the programme involved. Finally, the plan proposes the personnel recruitment and training required.

As mentioned in the introduction, UNICEF is planning an expansion of its co-operation with countries, in the follow-up of the International Year of the Child, and to help them implement a number of world targets of universal accessibility of basic services bearing on the well-being of children, such as water supply, health care and nutrition. Where possible UNICEF is planning to work along with other aid agencies towards these objectives. Revenue is projected as follows:

1979—	\$220 million
1980—	\$250 million
1981—	\$290 million
1982—	\$350 million

These projections were planned to provide for a real increase in the volume of co-operation, after allowing for a 7 per cent increase in prices paid by UNICEF. (At present these prices are still rising at about twice that rate, and while this continues the above revenue projections need to be raised to provide for a real increase in assistance to countries.)

Commitments for co-operation in programmes and expenditures are planned in relation to these revenue projections, and personnel requirements are derived from the workload. For 1980, the Board approved 553 professional posts for administrative services and programme support and this total is planned to increase by 7 per cent to 591 in 1982. The total of posts approved for 1980, including clerical, secretarial and manual workers was 1,754, planned to increase by 9 per cent to 1,900 in 1982. Increases in personnel are related partly to the rising financial "throughput," and partly to a trend for UNICEF's work to require more servicing, such as co-operation in setting up projects at the local level with community involvement, and helping countries prepare plans for large-scale coverage of services.

EXPENDITURE AND WORKING CAPITAL

Expenditure in 1978 amounted to \$183 million, 29 per cent or \$42 million more than in 1977. In addition, UNICEF handled \$14 million in expenditures for reimburse-

TABLE 8
UNICEF's annual revenue, expenditure and funds-in-hand
(in millions of US dollars)

	Actual		Planned		
	1977	1978	1979	1980	1981
Revenue (table 4)	164	211	220	250	290
Expenditure (table 2)	142	183	229	246	278
Liquidity provision*	89	91	91	81	83

*In addition to funds held for its liquidity provision UNICEF holds other funds given for specific purposes (mainly funds-in-trust). Those funds were \$42 million in 1977 and \$53 million in 1978.

able procurement and other services, and donations-in-kind valued at \$49 million—bringing the total, in financial terms, of UNICEF's overall "throughput" for the year to about \$246 million. The net administrative cost for handling this throughput was \$13.5 million or 5.5 per cent.

UNICEF has to work with countries in the preparation of programmes for approval of commitments by the Executive Board some two to three years in advance of major expenditures on those programmes. Further-

more, UNICEF does not hold resources to cover the total of its commitments, but depends on future revenue to cover future expenditure. It therefore needs a liquidity provision of funds available to meet differences between planned and actual revenue and expenditure for the year, and to provide for expenditure during the first four months of the year when few contributions are paid. Table 8 shows UNICEF's revenue and expenditure for 1977 and 1978 and the estimates for 1979-1981, plus its liquidity provisions at the year's end.



BACKGROUND INFORMATION ABOUT UNICEF

ORIGINS

UNICEF was created by the General Assembly at its first session on 11 December 1946 as the United Nations International Children's Emergency Fund. For its first several years, the Fund's resources were devoted largely to meeting the post-war emergency needs of children in Europe for food, drugs and clothing. In December 1950, the General Assembly shifted the main emphasis of the Fund toward programmes of long-range benefit to children of developing countries. In October 1953, the General Assembly decided to continue UNICEF indefinitely.

The name was changed to United Nations Children's Fund although the acronym "UNICEF" was retained.

ORGANIZATION

UNICEF is an integral part of the United Nations but it has a semi-autonomous status, with its own governing body and secretariat. It is governed by a 30-nation Executive Board which establishes policies for UNICEF, reviews programmes, and commits funds for projects and for the administrative and programme support budgets of

the organization. Ten members of the Board are elected each year for a three-year term by the Economic and Social Council of the United Nations. The Board meets annually and is assisted by a Programme Committee and a Committee on Administration and Finance. The reports of the Board are reviewed annually by the Economic and Social Council and the General Assembly. The Executive Director, who is responsible for the administration of UNICEF, is appointed by the Secretary-General in consultation with the Board. The Executive Director since June 1965 has been Mr. Henry R. Labouisse, who is retiring on 31 December 1979. He will be succeeded by Mr. James P. Grant.

Officers of the Board for 1979-1980

Chairman (Executive Board):

Dr. Zaki Hasan (Pakistan)

Chairman (Programme Committee):

Mrs. Maimaouna Kane (Senegal)

Chairman (Committee on Administration and Finance): Mr. Paal Bog (Norway)

First Vice-Chairman:

Mr. Hugo Scheltema (Netherlands)

Second Vice-Chairman:

Mr. Mihály Simai (Hungary)

Third Vice-Chairman:

Mrs. Carmen Romano de López Portillo (Mexico)

Fourth Vice-Chairman:

Dr. Lumbwe Chiwele (Zambia)

The membership of the Board for the period 1 August 1979 to 31 July 1980

Afghanistan	Hungary	Somalia
Australia	India	Sweden
Barbados	Japan	Switzerland
Burundi	Jordan	Union of Soviet Socialist Republics
Byelorussian Soviet Socialist Republic	Libyan Arab Jamahiriya	United Kingdom of Great Britain and Northern Ireland
Canada	Mexico	United States of America
Chile	Netherlands	Venezuela
France	Norway	Yugoslavia
Ghana	Pakistan	Zambia
Germany, Federal Republic of	Philippines	
	Senegal	

Staff in field offices not only help countries with the preparation and implementation of programmes in which UNICEF is co-operating, but assess the effectiveness of UNICEF aid in relation to country priorities and to opportunities for improving the situation of children. A programme support budget provides for 37 field offices in 1979 serving 108 developing countries, with 179 professional and 865 clerical and other general service posts. This budget also provides for supply procurement staff in New York and Geneva, with 42 professional and 86 clerical and other general service posts.

An administrative services budget provides for staff in New York and Geneva for service of the Executive Board, general direction, financial and personnel management, audit, information, and relations with donor Governments and UNICEF National Committees. The 1979 administrative services budget provides for 125 professional and 211 clerical and other general service posts. The estimated cost of the budget is 7.6 per cent of UNICEF expenditure, or about 6 per cent if account is taken of

workload not included in UNICEF expenditure, such as handling of contributions-in-kind and reimbursable procurement.

CO-OPERATION WITHIN THE UNITED NATIONS SYSTEM

A system of co-operative relationships is in effect between UNICEF and various agencies within the United Nations system. The purpose is to ensure that, in co-operation in programmes and in overall policy and planning, there is a systematic exchange of experience, assessments of priorities, and the development of co-ordinated operating procedures. UNICEF representatives work in co-ordination with the "single official" appointed by the Secretary-General as the senior representative of the United Nations system in each country and receive appropriate support from him. Though UNICEF is not an executing agency of UNDP, it exchanges information with other agencies in

the UNDP country programming exercises.

In numerous cases UNICEF co-operates in a country programme together with other "funding" agencies of the United Nations system, such as the World Bank, the United Nations Fund for Population Activities, the World Food Programme, or the United Nations Capital Development Fund. It also works with the regional development banks and the regional economic and social commissions on policies or programmes benefiting children. For example, regional development and planning institutes may arrange training activities relating to or taking account of children in national development.

Other United Nations bodies—notably the United Nations Department of International Economic and Social Affairs, ILO, FAO, WHO and the United Nations Educational Scientific and Cultural Organization (UNESCO), provide UNICEF with technical advice in establishing its programme policies. A continuous process of consultation between the field staff of UNICEF and these agencies helps achieve complementary

inputs for services benefiting children. In the case of emergencies, UNICEF works closely with the Office of the United Nations Disaster Relief Co-ordinator, UNDRO, other agencies of the United Nations system, the League of Red Cross Societies and the International Committee of the Red Cross.

UNICEF NATIONAL COMMITTEES

UNICEF National Committees in 31 countries play an important role in helping to generate better understanding of the needs of children in developing countries in general and of the work of UNICEF in particular. All the Committees are concerned with increasing financial support for the global work of UNICEF, either indirectly through their education and information roles or directly through the sale of greeting cards and other fund-raising activities. The Committees contributed some \$25.7

million net to UNICEF resources in 1978. In their work, the Committees usually benefit from widespread voluntary help. The Committees provide a means for thousands of individuals in many countries to participate directly in an activity of the United Nations.

GREETING CARDS

During the 1978 season, some 107 million UNICEF greeting cards were bought. Some of the sales were made by a network of volunteers, people from all walks of life working under the auspices of UNICEF National Committees or other non-governmental organizations. Net income to UNICEF was around \$13 million, some of which is included in the revenue collected by National Committees referred to in the preceding paragraph. The Greeting Card Operation, which produces the cards, and the Committees have set a target of 133 million card sales during 1979, the International Year of the Child.

RELATIONS WITH NON-GOVERNMENTAL ORGANIZATIONS

UNICEF has long worked closely with non-governmental agencies concerned with children.

An NGO Committee on UNICEF represents 111 international non-governmental organizations having consultative status with UNICEF. They offer UNICEF information and advice based upon their experience. Many co-operate with UNICEF or UNICEF National Committees in information and fund-raising work. Non-governmental organizations may be designated by Governments to assist or to carry out programmes in which UNICEF is co-operating.

Further information about
UNICEF and its work may be
obtained from UNICEF offices
and UNICEF National Committees

UNICEF Regional Offices

UNICEF Headquarters, United Nations,
New York 10017

UNICEF Office for Europe
Palais des Nations, CH 1211, Geneva 10, Switzerland

UNICEF Regional Office for East Africa
P.O. Box 44145, Nairobi, Kenya

UNICEF Regional Office for Nigeria and Ghana
P.O. Box 1282, Lagos, Nigeria

UNICEF Regional Office for West Africa
P.O. Box 4443, Abidjan Plateau, Ivory Coast

UNICEF Fondo de las Naciones Unidas para la Infancia
Oficina Regional para las Américas, Isadora Goyenechea
3322, Comuna de las Condes, Santiago, Chile

UNICEF Regional Office for East Asia and Pakistan,
P.O. Box 2-154, Bangkok, Thailand

UNICEF Regional Office for the Eastern
Mediterranean; P.O. Box 5902, Beirut, Lebanon

UNICEF Regional Office for South Central Asia
11 Jorbagh, New Delhi 110003, India

UNICEF Office for Australia and New Zealand
G.P.O. Box 4045, Sydney, Australia

UNICEF Office for Japan
22nd Floor, Shin Aoyama Bldg. Nishikan
1-1, Minami-Aoyama 1-Chome
Minato-ku, Tokyo 107

UNICEF National Committees

Australia
UNICEF Committee of Australia
55 York Street
Sydney NSW 2000

Austria
Österreichisches Komitee für UNICEF
Volksgartenstrasse 1, (Ecke Hansenstrasse)
1010 Vienna

Belgium
Comité belge pour l'UNICEF
Rue Joseph 11 No.1- Bte 9
1040 Bruxelles

Bulgaria
Bulgarian Committee for UNICEF
c/o Ministry of Public Health
5 Place Lénine
Sofia

Canada
Canadian UNICEF Committee/
Comité UNICEF Canada
443 Mount Pleasant Road
Toronto, Ontario M4S 2L8

Czechoslovakia
Czechoslovak Committee for Cooperation with
UNICEF
98, Trida W. Piecka
120 37 Prague 10, Vinohrady

Denmark
Dansk UNICEF Komitee
Billedvej 8, Frihavnen
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Finland
Suomen YK: Lastenapu UNICEF/
Finnish Committee for UNICEF
Kalevankatu 12
00100 Helsinki 10

France
Comité français FISE-UNICEF
35, rue Félicien-David
75781, Paris Cedex 16

German Democratic Republic
UNICEF-Nationalkomitee der Deutschen
Demokratischen Republik
Warschauer Str. 5
1034 Berlin

Germany, Federal Republic of
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Steinfeldergerasse 9
5000 Köln 1

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Hellenic National Committee for UNICEF
Xenias 1
GR-Athens 611

Hungary

Az ENSZ Gyermekalap Magyar Nemzeti Bizottsága
Belgrad Rakpart 24
56 Budapest

Ireland

Irish Committee for UNICEF
12 South Anne Street
Dublin 2

Israel

Israel National Committee for UNICEF
P.O. Box 3489
Yerushalaim/Jerusalem

Italy

UNICEF Comitato Italiano
Via Sforza 14
00184 Roma

Japan

Japan Association for UNICEF, Inc.
1-2, Azabudai 3-chome
Minato-Ku
Tokyo

Luxembourg

Comité luxembourgeois pour l'UNICEF
B.P. 1602
22 Blvd. Royal
Luxembourg

Netherlands

Stichting Nederlands Comité UNICEF
Bankastraat 128 (Postbus 85857)
2508 CN 's-Gravenhage/The Hague

New Zealand

New Zealand National Committee for UNICEF, Inc.
5-7 Willeston Street, G.P.O. Box 122
Wellington

Norway

Den Norske UNICEF-Komiteé
Egedes gate 1
Oslo 1

Poland

Polski Komitet Współpracy z UNICEF
ul. Mokotowska 14
00561 Warszawa

Portugal

Portuguese Committee for UNICEF
c/o Papelarias Antonio Vieira
Rua Aurea, 153
Lisboa 2

Romania

Fondul Naționalilor Unite Pentru copii
Comitetul Național Român
6-8 Strada Onesti
7000 Bucharest, 1

Spain

Asociación UNICEF-España
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Apartado 12021
Madrid 16

Sweden

Svenska UNICEF-Komittén
Skolgränd 2, Box 15050
104 65 Stockholm

Switzerland

Swiss Committee for UNICEF
Werdstrasse 36
8021 Zürich 1

Tunisia

Comité tunisien pour l'UNICEF
L2 Colysée
Escalier B Bureau No. 158,
Tunis

Turkey

Türkiye Milli Komitesi UNICEF
Atatürk Bulvarı No. 223/5
Kavaklıdere, Ankara

United Kingdom

United Kingdom Committee for UNICEF
46-48 Osnaburgh Street
London NW1, 3 PU

United States of America

United States Committee for UNICEF
331 East 38th Street
New York, New York 10016

Yugoslavia

Jugoslavenski Nacionalni Komitet za UNICEF
104 Bulevar Avnoja-a Siv II
11070 Novi-Beograd

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Cyprus

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14 Makarios III Av.
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P.O. Box 1508
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Iceland

UNICEF in Iceland
Storagerdi 30
108 Reykjavik

Union of Soviet Socialist Republics

Alliance of Red Cross and Red Crescent Societies/
Sojuz Obshchestv Krasnogo Kresta i Krasnogo
Polumesiatsa
1 tcheremushkinskii Proezd, 5
Moskva 117036

The following documents and publications* provide additional information about the needs of children and the work of UNICEF:

Report of the Executive Board on its 1979 session—C, E, F, R, S (E/ICEF/661)

General progress report of the Executive Director—E, F, R, S (E/ICEF/658)

Proposals for supplementary funding, volume 6—E (SA/35 (I) and (II))

An overview of UNICEF policies, organization and working methods—E, F, R, S (Doc. No. E/ICEF/CRP/79-2)

Medium-term work plan for the period 1979-1982—E, F, R, S (E/ICEF/L.1392)

Financial Report and Statements for the year ended 31 December 1978—E, F, R, S (E/ICEF/AB/L.197)

International Year of the Child—1979: progress report by the Executive Director—E, F, R, S (E/ICEF/L.1384 and Corr. 1)

Les Carnets de l'Enfance/Assignment Children, a quarterly review published by UNICEF—E, F
UNICEF News, published quarterly by UNICEF—E
Facts about UNICEF: 1978-1979 (leaflet)—E, F, S
The Human Factor in Development, speech by Henry R. Labouisse (leaflet)—A, E, F, S

*Documents and publications are available from the UNICEF offices listed above in the languages indicated, A/Arabic, C/Chinese, E/English, F/French, R/Russian, S/Spanish.

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UNICEF

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