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Revised country programme document

Paraguay

Summary

The revised country programme document (CPD) for Paraguay is presented to the Executive Board for final approval. At the second regular session of 2006, the Board commented on the draft CPD and approved the aggregate indicative budget for the country programme. In accordance with decision 2002/4 (E/ICEF/2002/8), the draft CPD has been reviewed, taking into account, as appropriate, comments made by delegations during that session. Any changes have been indicated in red. A summary results matrix is presented separately.

Decision 2002/4 also states that the present document will be approved by the Executive Board at the first regular session of 2007 on a no objection basis, unless at least five members have informed the secretariat in writing by 6 December 2006, of their wish to bring the country programme before the Board.

Basic data[†]
(2004 unless otherwise stated)

Child population (millions, under 18 years)	2.7
U5MR (per 1,000 live births)	24
Underweight (% , moderate and severe, 2000/2001)	5
Maternal mortality ratio (per 100,000 live births, 2002)	180
Primary school attendance (% net, male/female, 2002/2003)	89/89
Primary school children reaching grade 5 (% , 2001/2002)	70
Use of improved drinking water sources (% , 2002)	83
Adult HIV prevalence rate (% , end 2003)	0.5
Child work (% , children 5-14 years old, 1992)	8 ^{††}
GNI per capita (US\$)	1 170
One-year-olds immunized with DPT3 (%)	76
One-year-olds immunized against measles (%)	89

[†] More comprehensive country data on children and women are available at www.unicef.org.

^{††} Indicates data that differ from the standard definition or age-group.

The situation of children and women

1. The 2005 Common Country Assessment (CCA) highlighted the weakness of Paraguayan institutions and the existence of a significant social deficit resulting from decades of insufficient social investment. The country's first Millennium Development Goals report, prepared in 2005, found insufficient progress towards all but two of the seven goals examined: universal primary education and gender equality.

2. Of Paraguay's population of 5.7 million people, 48 per cent is under 18 years of age and some 43 per cent lives in rural areas. The country has the second most unequal income distribution in Latin America. The indigenous population of 89,000 individuals includes 19 ethnic groups. Although representing only 2 per cent of the population, indigenous peoples have the worst social development indicators of any segment of Paraguayan society. Another excluded segment is the monolingual Guarani speakers; nearly 60 per cent of households use Guarani as their first language. A significant proportion of children and adolescents do not yet enjoy full exercise of their rights, especially the Guarani-speaking poor and the indigenous, who are subject to exclusion, discrimination and inadequate protection.

3. Real per capita income has stagnated at 1980 levels, and poverty rate rose from 32.1 per cent in 1997/1998 to 38.2 per cent in 2005, increasingly affecting the urban population. Nearly half of the country's children are poor. Although a Social Promotion and Protection Network targeting poor families has been set up, it is still highly insufficient to tackle poverty. Consequently, the country is not on track to reach the first Millennium Development Goal.

4. A major constraint for public policy formulation and monitoring is the inadequately developed national statistical system, with data not yet sufficiently regular, timely or consistent. Estimates for the infant mortality rate, for instance, range from 21 to 34 per 1,000 live births. The Millennium Development Goals

report concluded that the trend observed from 1995 onwards indicates that it is unfeasible for Paraguay to reach Goal 4 on child mortality. Insufficient social investment has translated into a health system that leaves many excluded. A basic health insurance scheme for pregnant women and children under 5 was designed but its implementation is at an early stage. Among the main causes of infant mortality are (a) problems during birth delivery and infections among newborns, in a country where only 74 per cent of deliveries are attended by skilled personnel (58 per cent in the rural areas); and (b) acute respiratory infections and diarrhoea. These continue to present a challenge, as does achieving universal immunization coverage. Progress also has been insufficient on Goal 5 of reducing the maternal mortality ratio by three fourths.

5. Malnutrition constitutes a threat to children's right to survival and development. Underweight prevalence is 7.3 times more common among children living in poor households than among children living in rich households. Chronic malnutrition (stunting) affects 13.7 per cent of all children under 5, increasing to 41 per cent among the indigenous population. Exclusive breastfeeding for the first six months of life is just 22 per cent. The National Programme for Food and Nutritional Assistance, targeting children under 5 years of age and pregnant women, was launched in 2005, but is still of limited scope.

6. In 2004, only 58 per cent of the population had access to safe drinking water. This proportion declined to 33 per cent in rural areas and 2.5 per cent among the indigenous population. An estimated 44 per cent of the total population had access to basic sanitation. Although public expenditure has prioritized health and water and environmental sanitation – in 2005 public budget allocations to health were 43.7 per cent greater than in 2003, and 100 per cent higher to water and sanitation – funding is not sufficient to reach the most excluded groups, particularly indigenous and poor rural communities.

7. The adult HIV prevalence rate was 0.5 per cent in 2003. Actions for HIV/AIDS prevention, diagnosis, treatment and care are still weak and of low coverage and quality. As a result, insufficient progress has been made towards reaching Millennium Development Goal 6. Feminization of the epidemic signals a worrisome trend: in 2004, approximately three cases of male infection were reported for every female infection reported, compared with a 28:1 ratio in the early 1990s. Implementation of the National Programme to Prevent Vertical Transmission of HIV/AIDS is under way. Launched in late 2005, the programme provides pregnant women and adolescents with access to free, voluntary counselling and testing, and to treatment, if required.

8. The Education Reform initiated in 1992 has achieved important results towards realizing children's right to education. The pre-school net enrolment rate for children aged 5 increased from 17 per cent in 1992 to 74 per cent in 2002, and the net primary school enrolment rate for both boys and girls was 89 per cent in 2002/2003. These figures indicate that it is feasible to reach Millennium Development Goal 2. However, in 2001/2002, only 70 per cent of all school children completed grade 5 (only 20 per cent of indigenous children). Teaching methods and curricula do not sufficiently address children's bilingualism. Educational materials are written predominantly in Spanish, the language used almost exclusively in higher grades. Pregnancy is a cause for girls' exclusion from formal education. The secondary school net enrolment ratio is 51 per cent, which

shows that half of all children are left behind. In terms of the quality of education, children are achieving 50 per cent of the established learning standards in key areas.

9. In 2001, approximately 1 in every 5 children between 10 and 17 years of age was economically active, and almost half of economically active children were below age 15. Children who work every day have shown poorer academic results on national tests. Boys work in greater proportion than girls, but the latter dedicate more working hours to “invisible” or domestic-type labour, beginning at a very early age. The *Programa Abrazo* (“embrace programme”) for the Progressive Eradication of Child Labour on the Streets was initiated in 2005; nevertheless, the protection of children from exploitation and abuse is still inadequate.

10. Paraguay has already ratified the majority of international treaties on human rights and has advanced in adjusting its legal framework to the provisions of the Convention on the Rights of the Child. However, this compliance is neither accompanied by strong public institutions and programmes nor translated into necessary changes of behaviours and social practices of duty-bearers. The National Child Rights Protection System aims to promote enhanced protection of children from violence, exploitation and abuse, but is not adequately implemented. It is estimated that 22.3 per cent of all children are not registered. Sexual exploitation of children, coupled with trafficking, is particularly prevalent in borders areas, including the Tri-Border area between Argentina, Brazil, and Paraguay. Women in particular are victims of trafficking. The main underlying causes of all these problems, as highlighted in the recommendations of the Committee on the Rights of the Child, include weak institutional capacity, financial constraints and inadequate inter-institutional coordination. These issues will receive further emphasis in the new country programme.

Key results and lessons learned from previous cooperation, 2002-2006

Key results achieved

11. Through the Joint Project with the United Nations Development Programme (UNDP) and the United Nations Population Fund (UNFPA), UNICEF contributed to an increase of 39 per cent in the allocation of public funds for social investment between 2002 and 2005. In a move towards greater transparency and accountability, the Government has granted to the Joint Project direct, on-line access to its Integrated Financial Management System, allowing close monitoring and analysis of the national budget. As a direct result of the project’s advocacy, children under 5 and pregnant women are now benefiting from a programme to combat malnutrition, for which \$6 million was allocated by Congress. This is the first time public funds of this magnitude have supported a nutrition initiative.

12. Children are now better protected from violence, abuse and exploitation, thanks to important improvements in the legal framework. UNICEF advocated ratification of the Optional Protocols to the Convention on the Rights of the Child, in partnership with numerous child rights non-governmental organizations (NGOs). With the International Labour Organization (ILO), UNICEF advocated ratification of the ILO conventions concerning minimum working age and the worst forms of child labour. The National Secretariat for Child and Adolescent Affairs led the

process of criminalizing child pornography, with strong UNICEF technical assistance.

13. Thanks to implementation of the National Programme to Prevent Vertical Transmission of HIV/AIDS and an important South-South cooperation initiative on HIV/AIDS with Brazil, each year 300 fewer children will be infected during pregnancy and delivery. This amounts to almost all cases currently registered. UNICEF provided technical assistance, supplied rapid test kits, and is importing, with no cost to Paraguay, antiretroviral drugs donated by the Government of Brazil.

14. Through UNICEF direct support, and in partnership with local governments, indigenous peoples' organizations and local NGOs, hundreds of indigenous families from 140 communities and 10 ethnic groups have improved conditions in health, nutrition, water, sanitation and girls' education. Grassroots organizations have strengthened their capacity to protect children's and women's rights and to generate demand for basic social services at municipal and state levels. **Ten municipalities have strengthened their institutional capacity to serve children through the establishment of Municipal Counselling Services on Child and Adolescent Rights.** Local interventions supported by UNICEF have been adopted as models for large-scale Government-led initiatives: the water provision system to indigenous communities in dry land areas has been adopted by municipal governments; and a local project to eradicate child labour served as an important model for the *Abrazo* programme.

Lessons learned

15. Experience has shown that local-level interventions need to be linked with policy frameworks at municipal, state and national levels. In 2002-2006, this linkage was made difficult by a two-pronged structure in which one programme concentrated on national-level work and the other on local-level work. As a result, the sustainability of local-level interventions was compromised. The new programmatic structure will be organized around thematic interventions at all levels, ensuring an integrated policy approach.

16. As highlighted by the 2004 mid-term review (MTR), the UNICEF-UNDP-UNFPA Project on Social Investment has effectively leveraged resources for the realization of rights through high-quality technical analyses and strong communication and policy advocacy. Therefore, UNICEF and its partners should continue to use this inter-agency strategy in public-policy advocacy work.

17. The effectiveness of the UNICEF role in securing participation from both governmental and non-governmental organizations to better protect the rights of children and adolescents has been demonstrated in several cases. For instance, an inter-institutional Commission for the Monitoring of Penitentiaries, convened by UNICEF, helped to improve the detainment conditions of adolescents in conflict with the law. Similarly, UNICEF articulated efforts leading to the enactment of a law that criminalizes child pornography. The new programme of cooperation should further position UNICEF as a major advocate for children's rights.

18. The adoption by the Government of the *Abrazo* programme in 2005 to combat child labour on the streets, based on a methodology developed by UNICEF, demonstrates the importance of supporting and documenting rights-based experiences that are in line with national priorities. The existence of a documented

successful intervention model allowed for a fast response to the rights violation and helped to ensure the leverage of public funds.

The country programme, 2007-2011

Summary budget table

(In thousands of United States dollars)

<i>Programmes</i>	<i>Regular resources</i>	<i>Other resources</i>	<i>Total</i>
Child survival and development	1 938	3 517	5 455
Public policies and child protection	1 292	2 345	3 637
Cross-sectoral costs	500	300	800
Total	3 730	6 162	9 892

Preparation process

19. It took longer than planned for finalization of the CCA, which occurred in the second half of 2005. For the CPD, UNICEF organized a large national consultation in December 2005 with key counterparts and strategic allies, including Government institutions, NGOs and sister United Nations agencies. The CPD was developed in the first quarter of 2006 alongside the draft of the United Nations Development Assistance Framework (UNDAF), which was ready weeks before the CPD was finalized. The CPD process proved to be invaluable for reinvigorating relations with partners, strengthening strategic alliances and laying the foundation for including children's and women's issues in both the CCA and the UNDAF.

20. The new country programme also reflects the results of the 2004 MTR and continued consultations with counterpart Ministries, particularly regarding the adjustment needed in the work carried out at local level. Due consideration was given to the Observations made by the Committee on the Rights of the Child on the country's second report. Among the recommendations taken into account was the need for efforts in several areas: advocacy to increase investment in children; the establishment of child protection mechanisms; the improvement of national statistical data on children; the promotion of non-discrimination; cultural and linguistic adaptation of learning materials; the improvement of the civil registry system for births; and the provision of assistance to adolescents in conflict with the law.

Goals, key results and strategies

21. The overall goal of the new country programme is to support national efforts to ensure that all children in Paraguay enjoy greater respect, fulfilment and protection of their rights as a result of improved capabilities and increased opportunities, in accordance with the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women. The country programme constitutes the UNICEF contribution to meeting the Millennium Development Goals and the Goals-related intermediate development targets set by the Government.

22. Key expected results include the following: (a) exclusive breastfeeding for children under six months of age is adopted by at least 35 per cent of all nursing mothers; (b) 94 per cent of primary school-age children are enrolled in school, with an emphasis on reaching excluded girls, children with disabilities and rural children; (c) at least 90 per cent of school children successfully reach Grade 5; (d) at least 70 per cent of all children living with HIV/AIDS benefit from access to comprehensive care and support services; (e) 50 per cent of HIV-positive pregnant women have access to prevention of mother-to-child transmission plus programmes; (f) at least 70 per cent of all children are opportunely registered within their first year of life; and (g) resource allocation for social investment has increased from 41 per cent to at least 48 per cent of the National Budget, focusing on the most vulnerable and marginalized populations.

23. UNICEF will seek to influence public policy-making at all levels, promoting thematic and financial prioritization of the realization of children's and women's rights. The human rights-based approach to programming guides the entire country programme, which focuses in particular on disadvantaged groups in poor rural and urban areas, social and gender disparities, and indigenous populations. The following specific strategies will be employed: (a) utilizing evidence-based policy advocacy through effective communication, knowledge-generation, and the provision of strong technical assistance; (b) creating and strengthening existing partnerships to promote and monitor compliance of rights and to ensure sustainability of processes; (c) convening partners and building consensus around child rights; (d) fostering the ability of rights-holders to claim their rights and developing the capacity of duty-bearers to fulfil, respect and protect these rights; (e) ensuring that policies and services take into account disparities and different cultural contexts, particularly regarding indigenous communities; (f) using social modelling as a tool for scaling up successful interventions and influencing public policy-making; and (g) incorporating emergency preparedness and response in all areas of work, prioritizing at-risk and/or affected populations.

Relationship to national priorities and the UNDAF

24. Paraguay's national development priorities are articulated in the National Strategy for the Reduction of Poverty and Inequality, the Economic Growth with Equity Plan and the National Environmental Policy Document. The priorities strongly emphasize the reduction of poverty and the improvement of social conditions for the excluded. In this regard, the country programme will advocate and promote the increased allocation of public funds for social investment. It will also provide technical assistance to the Government in key social areas such as education and health, aiming at an increase in the coverage and quality of public social services. The country programme is consistent with the following components of UNDAF key outcome areas: (a) strengthening national capacities to formulate and implement policies and programmes to combat poverty and inequalities; (b) promoting accountability of the public sector in relation to civil society; (c) increasing the coverage and quality of public health care and education services; (d) strengthening the national statistical system; and (e) improving the management and delivery of basic environmental sanitation services.

Relationship to international priorities

25. The country programme will contribute to the priorities identified in the medium-term strategic plan (MTSP) for 2006-2009, supporting national efforts in the areas of early child development (ECD), quality basic education, HIV/AIDS, child protection and public policies.

26. The country programme's key results will contribute to achieving the Millennium Development Goals for 2015 and the Government's intermediate goals for 2008, particularly through interventions aimed at poverty reduction, primary education, gender equality, child mortality and maternal health. UNICEF has played a pivotal role in defining these intermediate targets, which show the Government's commitment to work towards achieving the Millennium Agenda.

Programme components

27. Based on lessons learned from previous cooperation, the structure of the country programme for 2007-2011 will further strengthen the internal capacity of UNICEF to link local-level projects with its public-policy work at national, state and municipal levels. The programme's thematic structure, which aligns with the MTSP, will help to ensure programme cohesiveness at all levels. Interventions centre around two major programmes: (a) child survival and development; and (b) public policies and child protection. They will contribute to the realization of children's rights, with due attention paid to the most underserved regions of the country and to using a gender-based, culturally sensitive approach. The main UNICEF role will be to provide technical assistance for public policy development, leverage resources for children, and promote information dissemination to strengthen children's and families' capacity to claim their rights.

28. The child survival and development programme has three components. The first one, on **health and nutrition**, seeks to ensure that women and children enjoy their right to healthy lives, particularly during pregnancy and early childhood, respectively. UNICEF will support the Ministry of Public Health and Social Welfare and other partners in their efforts to implement the National Plan for the Comprehensive Care of Children and Adolescents and the National Plan for Food Security and Nutrition. These plans include core areas such as integrated management of childhood illnesses, immunization, breastfeeding and nutrition. Key allies in health and nutrition include the Children's Pastoral of the Catholic Church, the Pan-American Health Organization (PAHO), and UNFPA. In the area of water, sanitation and hygiene (WASH), UNICEF will work with other United Nations agencies and international donors to support national institutions in order to improve service coverage and quality, through culturally appropriate modalities for indigenous and rural communities.

29. The second component, on **education and equity**, seeks to ensure that more children, particularly those currently excluded from the educational system, enjoy their right to a quality basic education responsive to the multicultural and bilingual context of the country. To make further progress toward reaching Millennium Development Goals/Education for All targets, UNICEF will support national efforts to expand child development strategies (with a family and community focus), and will promote inclusive and culturally-appropriate public policies to increase school retention and completion rates. Initiatives to overcome gender bias in education and to increase student participation will be supported. UNICEF will work closely with the Ministry of Education and Culture, at both central and decentralized levels,

development cooperation agencies, and international financial institutions, particularly the Inter-American Development Bank. Important partners will include civil society, teachers, and indigenous and student organizations.

30. In the third component, covering **HIV/AIDS**, UNICEF will seek to strengthen the national response to the epidemic in order to ensure universal access to prevention, treatment and care. Emphasis will be placed on supporting the national capacity to design, implement and monitor public policies and programmes on prevention of mother-to-child transmission of HIV/AIDS; comprehensive care for children and adolescents affected by HIV/AIDS; and access to information (especially by groups at risk and women). Efforts will be made to empower leaders, mobilize civil society (including people living with HIV/AIDS), strengthen information systems and advocate the allocation of more public resources for this area. UNICEF will promote the “three ones” strategy and will coordinate its assistance with the National HIV/AIDS Programme and the National NGO Network on HIV/AIDS within the context of the United Nations Joint Programme on HIV/AIDS Thematic Working Group and in partnership with other organizations, including the United States Agency for International Development, the Peace Corps and Plan International.

31. The second major programme, Public Policies and Child Protection, is divided into two components. The first one, on **public policies**, will support the formulation and implementation of rights-based public policies to combat poverty and inequalities that affect children and adolescents, within the framework of Paraguay’s commitments to the Millennium Development Goals and intermediate national development goals. Support will be provided to increasing the volume, efficiency and accountability of public social investment via ongoing budget analysis, monitoring and advocacy at the national and subnational levels. The production of strategic information for policy advocacy and decision-making will be supported, as will capacity development for national emergency preparedness and response. Strategic allies and counterparts include the Ministry of Education and Culture, the Ministry of Finance, the Ministry of Justice and Labour, the Ministry of Public Health and Social Welfare, the National Secretariat for Child and Adolescent Affairs, the Secretariat for Social Affairs, the Secretariat for Women’s Affairs, the Technical Secretariat for Planning, the National Congress, PAHO, UNDP and UNFPA.

32. The second component, on **child protection**, aims at creating a protective and supportive environment for children. UNICEF technical assistance will help to strengthen systems to protect and guarantee children’s rights, particularly the capacity of the National Child Rights Protection System to provide effective protection to children from violence, exploitation, abuse and discrimination. Cooperation will be undertaken with the judiciary to strengthen the capacity of the juvenile and family branches of the justice system to guarantee children’s rights. UNICEF will promote reducing child labour through increased school attendance and improved academic achievement. Support will be given to national efforts towards universal access to birth registration, focusing especially on the first year of life. The strategic allies and counterparts include the National Secretariat for Child and Adolescent Affairs, the Secretariat for Social Affairs, the Supreme Court of Justice, Governors’ offices, municipalities, and NGOs that work with child rights issues.

33. **Cross-sectoral costs.** These will include costs related to rental of facilities, utility bills, vehicle maintenance, and salaries and related support expenses for staff. These costs also will include expenses for technical assistance in support of the country programme and a portion of the operational costs related to implementation, monitoring and evaluation.

Major partnerships

34. At national, subnational and local levels, UNICEF will cooperate with Government institutions, NGOs, faith-based organizations and community structures working to develop innovative, effective, scaleable and sustainable interventions for the realization of children's and women's rights.

35. Government programme partners include the National Secretariat for Child and Adolescent Affairs, the Secretariat for Social Affairs, the Ministry of Public Health and Social Welfare, the Ministry of Education and Culture, the Ministry of Justice and Labour, and the Supreme Court of Justice. Additional partner Government institutions include the National HIV/AIDS Programme, the General Directorate for Statistics, Surveys and Censuses, the Technical Secretariat for Planning, the General Directorate for Environmental Health, and the National Service for Water and Sanitation.

36. Major NGO and community-based allies include Plan International on HIV/AIDS, birth registration and WASH; the Children's Pastoral of the Catholic Church on ECD and nutrition; *Global Infancia* (Global Childhood) on child rights; and indigenous organizations on WASH, basic education, ECD and nutrition.

37. In the spirit of the United Nations reform, UNICEF will continue to promote greater joint programming, thereby helping to ensure a stronger United Nations voice in Paraguay. UNICEF will continue its joint project on social investment with UNDP and UNFPA. Other future opportunities include work with PAHO and UNFPA on child and maternal health and HIV/AIDS, including capacity-building for the delivery of basic services at both the central and decentralized levels; with PAHO on WASH; with ILO on violence, exploitation and abuse against children and women; with UNFPA on establishing means for the participation of children and youths and for addressing gender-based inequalities; and with the Food and Agriculture Organization of the United Nations on food security issues.

Monitoring, evaluation and programme management

38. Monitoring, research and evaluation activities will be coordinated through the five-year Integrated Monitoring and Evaluation Plan of the UNDAF. Continuing cooperation with the National Directorate for Statistics, Surveys and Censuses will help to improve the availability of baseline social data in key areas, disaggregated by gender, age, ethnicity and geographic area. ParInfo (*DevInfo*) will be promoted as a tool for monitoring the Millennium Development Goals, in conjunction with other United Nations agencies.

39. Country-specific results-monitoring will be based on the following key indicators: the under-5 mortality rate; the exclusive breastfeeding rate; the number of antenatal care visits; the birth registration rate; the percentage of children under 5 suffering from underweight, wasting and stunting; the percentage of the

population using improved drinking water sources; the percentage of the population using adequate sanitation facilities; the percentage of pregnant women undergoing HIV/AIDS testing; the percentage of primary school children reaching grade 5; and the per capita budget allocated to social investment.

40. UNICEF and other agencies will continue to share common premises at the United Nations House, and UNICEF will participate actively in its Management Committee to optimize the utilization of common premises and services. As for financial management, UNICEF will adopt and comply with the harmonized approach to cash transfer, once the system becomes operational in Paraguay.

41. An MTR for the UNDAF and the country programme will be held in 2009. The programme coordination function will be enhanced to ensure proper links among the various thematic projects. Programme monitoring and evaluation will be complemented by routine monitoring activities such as field trips and periodic reviews with the Government. In line with the rights-based approach to programming, evaluations will consider the capacity-building of duty bearers, among other results.

42. The Ministry of Foreign Affairs has overall responsibility for coordinating the country programme, which will continue to participate in and take advantage of intersectoral coordination mechanisms, including, among others, the National Commission for the Eradication of Child Labour; the Inter-institutional Group on Trafficking in Persons; the National Commission for Early Childhood Development; and the Commission for Monitoring of Penitentiaries.
