

Cuba

Country programme document 2014-2018

The draft country programme document for Cuba (E/ICEF/2013/P/L.2) was presented to the Executive Board for discussion and comments at its 2013 annual session (18-21 June 2013).

The document was subsequently revised, and this final version was approved at the 2013 second regular session of the Executive Board on 6 September 2013.

Basic data[†]
(2011 unless otherwise stated)

Child population (<i>millions, under 18 years, male/female</i>)	1.2/1.1
Under five mortality rate (U5MR) (<i>per 1,000 live births</i>)	6
Underweight (<i>%, moderate and severe</i>)	..
(<i>male/female, urban/rural, poorer/richer</i>)	..
Maternal mortality ratio (<i>per 100,000 live births</i>)	40.6 ^a
Use of improved drinking water sources (<i>%, 2010</i>)	94
Use of adequate sanitation facilities (<i>%, 2010</i>)	91
One-year-olds immunized against diphtheria, pertussis and tetanus (<i>%</i>)	96 ^b
One-year-olds immunized against measles (<i>%</i>)	99 ^b
Primary school enrolment (<i>%, net male/female, 2010</i>)	100/100
Students who complete primary school (<i>%, 2010</i>)	94/96
Adult HIV prevalence rate (<i>%</i>)	0.2
HIV prevalence rate among pregnant women (<i>%</i>)	..
Child labour (<i>%, ages 5 to 14, male/female</i>)	..
Registration of birth (<i>%, under 5 years</i>)	100
(<i>male/female, urban/rural, poorer/richer</i>)	100/100, 100/100,/..
Gross national income (GNI) per capita (<i>US\$, 2008</i>)	5 460

[†] More comprehensive country data on children and women, together with detailed methodological notes on estimates, are available at www.childinfo.org/.

^a The figure indicated in the table was calculated at national level as presented in the *Health Statistics Yearbook*, special edition, Havana, 2012, table 66, p. 79. The 2010 estimate by the United Nations Inter-agency Group for Maternal Mortality Estimation (IGME) is 73 deaths per 100,000 live births.

^b Immunization figures reported in the above table are inter-agency estimates made by WHO/UNICEF. Gender-disaggregated data according to the *Multiple Indicator Cluster Survey 2010-2011* are as follows: for DPT, 99 per cent male and 96 per cent female; for measles, 97 per cent male and 97 per cent female.

Situation of children and women

1. Of the 11.2 million inhabitants of Cuba, 2.5 million, or 22 per cent, are children.¹ The rights of children, adolescents and women are endorsed in a body of law that precedes the Convention on the Rights of the Child (CRC) and the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW). This law is being updated and harmonized to overcome existing gaps between legal norms, public policies and social practice, including relevant observations of the Committee on the Rights of the Child.

2. When Cuba submitted its third report, it had already met a number of targets in relation to the second and third Millennium Development Goals (MDGs), with a 99.7 per cent net primary school enrolment rate, a 90.3 per cent enrolment rate for

¹ Source: *Estudios y datos de la población cubana. Cuba y sus territorios, 2011*. Population and Development Centre (CEPDE), National Office of Statistics and Information (ONEI). Updated in 2012. <http://www.one.cu/temaspoblacion.htm>.

secondary education, high gender parity indexes at all educational levels and continued advances in women's participation in decision-making.² Of the remaining MDGs, the most important in terms of UNICEF cooperation is the reduction of maternal mortality.

3. Cuba is updating its economic model on the basis of the Guidelines on Economic and Social Policy adopted in 2011, with the commitment that no one will be left unprotected. The persistence of the economic, commercial and financial embargo imposed by the United States of America against Cuba is significantly affecting the country, especially children and adolescents, and is restricting its access to international sources of finance; this situation, in turn, is being aggravated by the global economic crisis.

4. A number of governmental and academic institutions are conducting quantitative and qualitative studies on the well-being of children and adolescents, analysing certain factors, such as demography, sociocultural situation, supply/demand, income/expenditure, participation and social protection, that may cause or compound vulnerabilities. The studies show that the level of protection and development of children and adolescents in Cuba is high, thereby differentiating it from other countries in terms of vulnerability and social disadvantage. Policies and programmes to promote access to basic services and equal opportunities are mitigating the effects of economic insecurity and the impact of other factors associated with social disadvantage in children and adolescents.

5. Population groups with low incomes, dilapidated housing, deficient nutrition and disabilities, as well as families with unhealthy habits and behaviours and social maladjustment, are identified as being the most disadvantaged. Despite the Government's attention to groups of children and adolescents in the least productive parts of the country, development challenges exist for those who are affected by migration, those who live in informal urban settlements with weak infrastructure and poor sanitary conditions and those who live in rural and mountain areas and locations affected by natural disasters.

6. The ageing of the population is modifying family dynamics, in particular where several generations live in the same household. Women devote 71 per cent of their working hours to non-remunerated jobs, housework and the care of others. Traditional cultural patterns continue to hinder progress towards gender equality.

7. In Cuba, all births are registered; 99.9 per cent take place in health institutions, attended by skilled personnel. The State gives priority to early childhood development in its education and health programmes, such as the Mother and Child Care Programme and the Educate Your Child Programme. Early childhood development coverage is at 96 per cent, through institutionalized and non-institutionalized modalities, with the participation of mothers. There is also a need, however, to encourage fathers to become more involved in raising and educating children, and support will be required for curricular updating.

8. Attention to persons with disabilities is a social policy priority, aimed at raising their quality of life and creating equal opportunities for them. The Ministry of Education and other institutions, in cooperation with families and communities,

² Source: *Millennium Development Goals. Third report*, Cuba, 2010. http://www.undp.org/cu/odm_informes.html.

have begun to apply other variants of socio-educational inclusion, so that boys, girls and adolescents with special educational needs can attend school in regular classrooms at the preschool, primary and secondary levels as well as in the Educate Your Child Programme. This policy involves challenges for teachers and families.

9. Teacher training and the family's role in education are also necessary in the rural sector, where the school network is being reorganized.

10. The decline in maternal mortality has reached a plateau. A factor analysis shows that about 70 per cent of maternal deaths are related to childbirth or post-childbirth³ and that the potential for reducing this figure is associated with the response capacity and the quality of care during emergencies and other unexpected situations during these stages. Seven of the 15 provinces have higher maternal mortality rates than the national average, which was calculated in 2011 at 40.6 per 100,000 live births.⁴ The rising number of births among women under age 20, with a fertility rate of 57.3 per 1,000 women in 2011, is another risk factor.

11. The downward trends in infant mortality rates are not the same in all provinces. An increase in the number of newborns weighing less than 1,500 g was recorded in 2010 and 2011, representing 9.6 per cent and 9.5 per cent of low birth-weight babies, respectively. Accidents are still the most common cause of death among children 5 to 9 years of age, and of adolescents aged 10 to 19.⁵ Medical care for diarrhoeal and acute respiratory diseases has significantly improved for infants and adolescents. The Government is enhancing its efforts to maintain the elimination of vaccine-preventable childhood diseases and to introduce new vaccines.

12. Some nutritional deficiencies persist. Mild iron-deficiency anaemia is still a public health problem. In 2011, in the third trimester of pregnancy, it represented 21.6 per cent, and in children from 6 to 35 months, it stood at 31.3 per cent. In the eastern part of the country, mild anaemia affected 39.5 per cent of children under 2.⁶ The percentage of overweight and obese children is increasing, amounting to 17.6 per cent of those under 5 years of age.⁷ The average duration of exclusive breastfeeding in infants from birth to 35 months is 2.9 months.⁸ The vitamin A status of preschool children reveals a slight subclinical deficiency in the eastern provinces, and a moderate one in the western region. The highest prevalence of iodine deficiency disorders is found among schoolchildren in the mountainous areas, amounting to 32.6 per cent.⁹

³ Source: Update of Maternal Morbidity and Mortality Reduction Programme, Ministry of Public Health (MINSAP), 2012.

⁴ Source: *Statistical and Health Yearbook, 2011*. National Office of Medical Records and Health Statistics, MINSAP, Havana, 2012, table 66, p. 79.

⁵ Source: *10 primeras causas de muerte por grupos de edad y sexo*. National Office of Medical Records and Health Statistics, MINSAP, Havana, 2012.

⁶ Source: Preliminary results of the study on haemoglobin levels and their relationship to epidemiological variables, in the context of studies on the impact of nutritional fortification on the prevalence of iron-deficiency anaemia, INHA, 2008-2013.

⁷ Source: Institute of Nutrition and Food Hygiene (INHA), 2011.

⁸ Source: Multiple Indicator Cluster Survey (MICS). Fourth round. National Office of Medical Records and Health Statistics, MINSAP-UNICEF, Cuba, 2010-2011, table UN.3, p. 33.

⁹ Source: INHA, 2011.

13. In recent years, work has been done on a preliminary draft amendment to the Family Code, in accordance with the current needs of Cuban society and with international legal instruments such as the Convention on the Rights of the Child and CEDAW. Topics such as the active participation of children and adolescents in family life and protection against violence, abandonment and neglect are being included or expanded.

14. Progress has been made in the care and comprehensive protection of children and adolescents under 16 who have committed acts considered offences under national law. The treatment of juvenile offenders will continue to require more attention.

15. The programme “For a World of Rights”, headed by the Ministry of Justice together with a number of institutions and organizations, has promoted a culture of rights. Studies have shown a gradual increase in knowledge about national legislation and the Convention on the Rights of the Child, as well as opportunities to reinforce the meaningful participation of children and adolescents in matters concerning them.

16. Cuba has suffered recurrences of extreme natural phenomena — tropical storms, drought and earthquakes — that have caused considerable economic damage. Environmental education for sustainable development is a key element in updating the economic model and developing a strategy to enhance the protection of natural resources, public environmental awareness and the quality of life of the population, and thereby to ensure an adequate response and adaptation to climate change.

Key results and lessons learned from previous cooperation, 2008-2013

Key results achieved

17. UNICEF helped improve the living conditions and medical care in maternity homes, which are community institutions for pregnant women. A total of 11,695 pregnant women residing in the less developed eastern parts of the country, who faced prenatal nutritional risks such as iron deficiency anaemia and insufficient weight gain, received excellent medical care and their pregnancies went on to term with their risk factors resolved or controlled. The creation of the Human Milk Bank (HMB) service in six provinces supported the campaign to promote and encourage breastfeeding. Exclusive breastfeeding up to six months increased from 26.4 per cent in 2006¹⁰ to 48.6 per cent in 2010.¹¹

18. In support of the State’s policy to raise the quality of life, steps were taken to encourage the participation of children and adolescents in sports; these included football tournaments and programmes to teach swimming, which helped prevent accidents in five provinces. In less developed regions, safe and secure community recreation areas were created.

¹⁰ Source: Multiple Indicator Cluster Survey (MICS). Third round. Office of Medical Records and Health Statistics, MINSAP-UNICEF, Cuba, 2006, table UN.2, p. 43.

¹¹ Source: Multiple Indicator Cluster Survey (MICS). Fourth round. National Office of Medical Records and Health Statistics, MINSAP-UNICEF, Cuba, 2010-2011, table NU.2, p. 32.

19. With the support of UNICEF, a rights-based approach to the participation of children and adolescents was further strengthened in cultural activities, sports, recreation and communications media. Protective partnerships were established in the treatment of adolescent offenders, assistance to victims and prevention. Since 2011, the project “Comprehensive Social and Participatory Development of Adolescents in Old Havana” is helping prepare youth for more participation in society by offering them a considerable number of opportunities, with a focus based on rights and equity.

20. Educational activities were launched with the aim of preventing and mitigating disaster-related risks and emergency situations in primary and secondary schools located in geographically and environmentally vulnerable areas. These activities encouraged local initiatives to boost response capacities. The hurricanes in 2008 and 2012 caused damage to educational institutions in the affected regions. UNICEF supported efforts to rehabilitate 198 schools, to continue the preschool, primary and secondary school years and to implement psychological and emotional recovery activities.

21. Life-cycle planning, in the absence of a single national institution or governing body dealing specifically with childhood, has brought about new forms of partnership between sectors and stakeholders that share a commitment to the rights of infants, schoolchildren and adolescents. It has also promoted a cross-sectoral approach to policies, programmes, services and products that facilitate comprehensive development. These achievements will be maintained in the country programme 2014-2018, with a focus on results-based programmatic interventions at the sectoral and multidisciplinary levels.

22. Experience in decentralized cooperation in five eastern provinces of Cuba, in terms of the country’s new management models, has served as a basis for a refocus on equity and on population groups, social and educational institutions and more vulnerable communities in these regions, in which childhood and adolescent indicators are below national averages and which have also been given priority in development plans.

23. The involvement of new actors (Ministry of the Interior, Ministry of Culture, Ministry of Science, Technology and the Environment) in the work of UNICEF has reinforced advocacy programmes, intersectoral strategic partnerships and the use of spaces that offer facilities for assembly, legitimization and easy access to broad sectors of the population so that new topics can be introduced. These partnerships make people aware of their rights and create an environment for the participation and protection of children and adolescents. A number of programmes include activities aimed at changing behaviours and attitudes and at encouraging the youngest of children to participate.

Country programme, 2014-2018

Summary budget table

<i>Programme component</i>	<i>(Thousands of United States dollars)</i>		
	<i>Regular resources</i>	<i>Other resources</i>	<i>Total</i>
Health and nutrition	1 050	2 900	3 950
Education	925	2 900	3 825
Culture of rights, protection and participation	925	2 900	3 825
Cross-sectoral	850	800	1 650
Total	3 750	9 500	13 250

Preparation process

24. The process began in 2011 with preparatory meetings. It was resumed in 2012, after the United Nations agencies decided to harmonize their programming cycles and the United Nations Development Assistance Framework (UNDAF) until 2013, at the request and under the leadership of the Ministry of Foreign Trade and Foreign Investment (MINCEX).

25. At the same time, in parallel with the preparation of UNDAF, a timeline was established in consultation with ministries, institutions and centres of learning with regard to needs, priorities and opportunities, in order to determine the new objectives and goals.

26. Experts from national entities are elaborating a Situation Analysis of the Rights of Children, Adolescents and Women (SitAn) as an ongoing and complementary review, in view of the complexity of the social changes stemming from the updating of the economic model.

27. Meetings, bilateral and multilateral consultations, and sectoral and interdisciplinary workshops enabled national counterparts to make a causal analysis of the situation and to identify achievements and challenges in the implementation of development policies and programmes by sectors and priorities, on the basis of the indicators for MDG targets, the results of the current cooperation cycle and the UNICEF medium-term strategic plan. A closing meeting, convened by MINCEX, helped disseminate and develop consensus on the new country programme document (CPD) submitted for the 2014-2018 cycle.

Objectives, key results and strategies

28. UNICEF will continue to support the Government in protecting the rights and equal opportunities for development of children and adolescents. To this end, programmes will be carried out to overcome shortcomings, using an equity-based approach and a culture of rights and participation as the main focuses of intervention and monitoring with respect to the situation of children, adolescents and women in Cuba.

29. By 2018, the main results will include (1) better care of mothers, children and adolescents, and fewer nutritional problems among at-risk children and pregnant women, who will be taught safe hygiene practices, with an approach based on equity

and gender equality; (2) improved conditions for the education and development of children and adolescents, including a strengthening of ties between schools, families and communities, together with the training of teachers; (3) more comprehensive protection of children and adolescents through the enhancement of mechanisms and the implementation of innovative forms of participation, promotion of rights and prevention of violence and other risky behaviours.

30. The main strategies, which will be coordinated with the Government to obtain the above-mentioned results, will be as follows.

31. In each programme component, an equity-based approach will be used, focusing on prioritized geographical regions and population groups. Thus, results-based management and cross-sectoral action will be strengthened, with special attention on the characteristics of vulnerability described above.

32. UNICEF will facilitate South-South cooperation in sharing public policies, lessons learned, methodologies and knowledge about the rights of children and adolescents.

33. Advocacy, together with knowledge management, will have an evidence-based impact on information, attitudes, policies and programmes. Efforts will be focused on promoting the elaboration of benchmarks for some indicators that will help guide programmatic actions and enhance debate and the dissemination of knowledge about childhood and adolescence. Partnerships with excellence centres and documentation on best practices will be tools for effective analysis and advocacy.

34. Changes in behaviours and practices in each programme component will be promoted through communication for development mechanisms, campaigns and communication tools. Meaningful participation, especially by adolescents, will be encouraged.

35. A gender equality strategy will be applied, so that all programme components and results will analyse and take account of the impact of male-female differences and those between boys, girls and adolescents in family life and in the community, and efforts will be made to reduce gaps and inequalities.

36. Joint programming with other United Nations agencies and governmental institutions will be promoted in cases where it will help obtain better results.

Programme components

37. **Programme component: Health and nutrition.** This component will contribute to the Government's efforts to maintain achievements in the area of maternal, child and adolescent health. It will be carried out in the following contexts: ongoing attention to upgrading the quality of services, focusing on the entire life cycle; actions with national coverage and others targeted at selected provinces on the basis of equity-based criteria and including safe hygiene practices; and the education and comprehensive health care of women, men and the family with a view to encouraging responsible parenthood from a gender perspective.

38. Support will be given to reducing maternal morbidity and mortality and preventing teenage pregnancy, with an emphasis on the provinces that have the highest incidence of such problems. It will include health promotion and education in order to encourage appropriate attitudes towards maternal health, with responsible sexuality. It will build capacities and promote monitoring systems to

control severe maternal morbidity. It will contribute to child and adolescent health by expanding the use of a guide for evaluating the quality of childcare, which will help prevent unintentional injuries. It will support the national immunization programme and the introduction of new vaccines.

39. Human Milk Banks (HMBs) will be further developed as essential services for the promotion and protection of breastfeeding. Encouragement will also be given to better feeding practices and a healthy food and nutrition culture, as well as to improved management of vulnerable groups' capacity to prepare for and adapt to risks in terms of feeding, nutrition and hygiene in emergency situations.

40. On the basis of the results of the joint programme "Support for the Fight against Anaemia in Vulnerable Groups" in Cuba, efforts will be made in provinces with a higher prevalence to reduce anaemia in high-risk children and pregnant women. Studies will be done with the aim of improving health-care management.

41. **Programme component: Education.** This component will support improvement in the quality of education for children and adolescents living in highly vulnerable conditions owing to their socio-economic situation, geographic location, exposure to natural disasters or the fact that they are living with a disability. Actions will be carried out through two complementary strategies: (a) tightening the bonds between schools, families and communities with the support of the programme "Facts for Life"; and (b) teacher preparation and advanced training. Both strategies are complemented by three result areas: early childhood care; inclusive education for children and adolescents with special educational needs; and environmental education to reduce the risks of disasters.

42. Cooperation on educational care for early childhood will include the two existing modalities in the country — institutional and non-institutional — to improve age-appropriate development and increase fathers' involvement in bringing up their children. From the outset, this component will provide guidance to families with children with special educational needs so that they will be able to attend primary school. Such children will have an inclusive and quality education in the regular primary and secondary schools, with programmes that also involve their families and communities. Diagnostic tools for educational needs will be improved, and teachers will be specially trained to meet these needs. Environmental education will take into account the effects of climate change, the protection of health and the prevention of risks related to potential natural, technological and health-related disasters.

43. In rural areas with mixed (primary and secondary) schools and facilities for boarding students who live far away, support will be given to training teachers to encourage student participation and a culture of rights, while improving the educational environment and the school's relationship with families.

44. **Programme component: Culture of rights, protection and participation.** This component will help the country further develop a culture of rights for children and adolescents, strengthen participation mechanisms in more comprehensive and innovative ways through institutions and student and community organizations, and improve comprehensive protection.

45. Actions aimed at priority groups and regions will be supported in order to reinforce the protective environments of children and adolescents and encourage their meaningful participation; these will include cultural activities, sports,

recreation, social media, life skills training, vocational guidance and preparation for joining the labour force and becoming involved in community life.

46. This component will include cooperation with institutions implementing national protection mechanisms with regard to homes for children without family care, attention to juvenile offenders or victims of crime, and community-based prevention. It will support strategies targeted at priority groups and aimed at preventing violence on the basis of social research findings.

47. Increased knowledge and advocacy of rights will be encouraged through studies, training activities and communication, and by strengthening the networks of the Reference Centre for Child Rights and its technical teams. Actions to update legislation and protection mechanisms in Cuba will continue to be promoted and supported. This component will help provide cross-sectoral child protection in emergency activities and risk prevention. Baselines for this work will be established during 2013 and 2014.

48. **Programme component: Cross-sectoral.** This component will provide cross-sectoral support to programmatic strategies with interdisciplinary and intersectoral approaches, forging partnerships between counterparts and between excellence centres to enhance knowledge, monitoring and evaluation — as agreed with the Government — of the situation of the rights of children, adolescents and women and, in particular, analysing indicators with different levels of disaggregation and regional opening. Studies, research and evaluations will be carried out in order to accelerate the programme results. A cross-sectoral approach will also be taken to the continuation of activities to reduce risks in disaster situations and emergencies. Expenses connected with operational, communications and logistical support to the country programme will be covered.

Relationship to national priorities and UNDAF

49. A new UNDAF has been completed in agreement with the Cuban Government, defining the collective response of the United Nations system to national priorities for the period 2014-2018 and presenting the priority areas for United Nations cooperation and expected results by 2018.

50. The Framework was elaborated in the context of the updating of the economic model, with a focus on gender, population and geographical location. It will support the authorities in their development strategies for certain key areas such as the quality and sustainability of social programmes, sustainable economic development, food and nutritional security, environmental sustainability and disaster risk management. UNICEF will help achieve the direct effects of UNDAF relating to the quality, sustainability and enhancement of social and cultural services, food security and disaster risk management.

Relationship to international priorities

51. UNICEF will support the Government in its effort to achieve internationally agreed goals, including the MDGs, with an approach based on equity and pursuant to the Convention on the Rights of the Child, CEDAW and the Convention on the Rights of Persons with Disabilities. The Education component is in line with the Educational Goals 2021, signed by the Government at the twentieth Ibero-American Summit held in Mar del Plata.

52. The Cuban Government will study the recommendations of the Committee on the Rights of the Child and will implement them as appropriate, in accordance with the document containing the Government's comments on these recommendations (CRC/C/CUB/CO/2); it will also take UNICEF support into account in specific issues on which its assistance is requested.

Major partnerships

53. MINCEX is the governing body and coordinator of cooperation in the country.

54. For the Health and Nutrition component, the main partners will be the Ministry of Public Health and, in particular, the Department of Mother and Child Care, the National Department of Epidemiology, the Institute of Nutrition and Food Hygiene, the Department of Primary Health Care and the National Centre for Health Promotion and Education. Other partners are the National Transit Office of the Ministry of the Interior and the Ministry of Education.

55. As for the Education component, the national counterparts will be the Ministry of Education, the Latin American reference centres for preschool and special education, and the University of Pedagogical Sciences. Other partners are the Ministry of Public Health; the National Institute of Sports, Physical Education and Recreation; the Civil Defence General Staff; and the National Water Resources Institute.

56. The main partners for the Culture component of rights, protection and participation will be the Ministry of Justice; the Ministry of the Interior; the Ministry of Culture; the Ministry of Education; the National Institute of Sports, Physical Education and Recreation; social science research centres; the Office of the City Historian of Havana; and the National Centre for Sexual Education.

57. The National Office of Statistics and Information, the Federation of Cuban Women, the Cuban Radio and Television Institute, the Ministry of Labour and Social Security and excellence centres will participate in cross-sectoral programmatic actions and will be linked to monitoring and evaluation activities.

58. The United Nations partners will be WHO/PAHO, WFP, FAO, UNFPA, UNDP, UN-Habitat and UNESCO.

Monitoring, evaluation and programme management

59. Support will continue to be given to the building of national and local capacities for monitoring and evaluating the results of the programme. The use of monitoring systems and the collection and analysis of data from participating institutions will also be enhanced. The Integrated Monitoring and Evaluation Plan (IMEP) will include learning and training activities, follow-up of field activities, systematization and documentation of experience, joint management of qualitative and causal statistics together with studies and surveys. The systematic use of factor analysis will help identify bottlenecks and prioritize problems in order to enhance the efficiency of programme management and the obtaining of equity-based results.

60. MINCEX, in conjunction with UNICEF, will lead the review processes in the periods established for the country programme cycle and will facilitate the required evaluations. DevInfo and other data collection and processing tools will lend support to the monitoring and evaluation functions in the management of the country programme and UNDAF.