I. Introduction

1. Members of the Bureau of the UNICEF Executive Board – H.E. Mr. Stephan Tafrov, Permanent Representative of Bulgaria to the United Nations, Vice-President of the UNICEF Executive Board and Head of the Delegation; H.E. Mr. Denis Regis, Permanent Representative of Haiti to the United Nations and Vice-President of the UNICEF Executive Board; H.E. Mr. Bo Jensen, Ambassador of Denmark to Burkina Faso; H.E. Ms. Koki Muli Grignon, Deputy Permanent Representative of Kenya to the United Nations; H.E. Mr. Sahebzada A. Khan, Deputy Permanent Representative of Pakistan to the United Nations; Ms Nina Nordstrom, Secretary of the Executive Board of UNICEF; and Mr. Guy Hubbard, Reporter – visited Burkina Faso from 26 April to 2 May 2014.

2. The field visit allowed the Bureau to gain a first-hand understanding of UNICEF work at the country level. More specifically, it sought to demonstrate concrete examples of UNICEF cooperation with the Government and other partners, including the other members of the United Nations country team. Finally, the visit provided an opportunity for the members of the Bureau to better understand the challenges facing children and women in Burkina Faso.

3. The members of the Bureau and members of the UNICEF country office for Burkina Faso met with high-ranking officials. During the interactive meetings the issues discussed included:

   (a) The cooperation between UNICEF and the Government on issues relating to children;

   (b) Further enhancement of programmatic presence in areas where UNICEF has comparative advantage;

   (c) Further honing UNICEF engagement with the Government on pertinent areas focusing on children.

* E/ICEF/2014/14.
4. The delegation would like to express its gratitude to the Government and people of Burkina Faso for their warm welcome and hospitality, as well as for the constructive engagement, the facilitation of the visit and for the opportunity for substantive dialogue with senior members of the Government on a wide range of issues relating to children.

5. The delegation would like to thank the UNICEF country management team in Burkina Faso for the comprehensive programme, the well-organized visit, and for making all the necessary arrangements for its success – including the staff’s availability throughout to provide support to the delegation to better understand the work and engagement of UNICEF and its partners. It may be noted that the excellent relations between the Government of Burkina Faso and the UNICEF team are instrumental to the significant progress achieved promoting the well-being of the country’s children.

6. The Bureau was particularly impressed by the commitment and dedication of Government officials at every level and the UNICEF staff in Burkina Faso.

7. The programme of the visit consisted of two main components, (a) in the capital, and (b) in the field:

(a) Ouagadougou: courtesy call to the First Lady of Burkina Faso, meetings with the President of the National Assembly, with the Minister of Foreign Affairs and Regional Cooperation, with high-level Government officials from a number of ministries (Education, Water and Sanitation, Mines and Energy, Social Affairs, Justice, Home Affairs), with different Commissions of the National Parliament (including the Child Rights Parliamentary Network), with UNICEF Burkina Faso country management team, with UNICEF Regional Director, with members of the UNCT and with the diplomatic corps, as well as with key donors and non-governmental organization partners;

(b) Field trips to Gangaol and Dori (Sahel Region), and to Ouahigouya, Yatenga Province (Nord Region), where the delegation met with regional and local authorities and visited UNICEF-supported social services programmes, the children benefiting from various programmes, members of local communities, and development partners.

8. The present report summarizes the briefings received by the Bureau members and the activities undertaken during the visit. The report concludes with the delegation’s own observations on the various issues related to the visit and UNICEF work in Burkina Faso.

II. Key issues facing children and women in Burkina Faso

9. Burkina Faso is one of the least developed countries in the world, ranked 183 of 187 nations according to the United Nations Development Programme’s (UNDP) 2013 Human Development Index. With an estimated population of 17.9 million people in 2014 and a population growth rate of 3.1 per cent annually, demography remains a key challenge. Women represent 51.7 per cent of the population, children under 18 represent 55 per cent and children under 5 represent 19 per cent. The rapid demographic growth puts additional pressure on already stretched social services and jeopardizes youth employment in the future. The school age population has grown by 43 per cent in the past 10 years.

10. Despite external shocks, Burkina Faso recorded a real gross domestic product (GDP) growth of 7 per cent in 2013 and the country’s average real growth rate (6.2 per cent) over the past decade
has been among the highest in sub-Saharan Africa. The solid economic performance is mainly due to strong macroeconomic policies, growing public investments in agriculture, health and education and increased international investments in industrial gold mining. Mining production has boomed since 2007 and represents 12.5 per cent of current GDP, compared to less than 1 per cent in 2005. The sector’s impact on the economy as a whole and on people’s living conditions, however, is still limited.

11. Burkina Faso has achieved significant progress in reducing both acute and chronic malnutrition and HIV prevalence and enhancing access to primary education and safe drinking water. The country is, however, still far from meeting goals to eradicate extreme poverty, improve access to sanitation, promote gender equity, and decrease under-five and maternal mortality. Poverty affects children disproportionately: 45.3 per cent are poor compared to 41.9 per cent of adults. Children and women still face a number of challenges: limited and increasingly unequal access to quality health, education, protection, water, hygiene and sanitation services; vulnerability to recurrent nutrition crises; persistence of harmful traditional practices affecting the fulfilment of children’s and women’s rights, particularly early marriage and female genital mutilation/cutting (FGM/C).

12. High rates of chronic poverty and the exclusion of poorer groups from basic services constitute major barriers for the attainment of national development goals on child survival, development, education and protection. The Sahel, Nord and Est regions are in all respects the most disadvantaged and underserved regions of the country. Area of residence, household size and household education level are among the key factors determining chronic child poverty: 90 per cent of the poorest children live in rural areas, 70 per cent of them live in large households and 90 per cent belong to families headed by an adult with no formal education.

13. The number of women per 100,000 live births dying from preventable complications related to pregnancy and childbirth decreased from 484 in 1998 to 341 in 2010. Three-quarters of maternal deaths occur during delivery and the post-partum period. Skilled attendance during pregnancy and delivery is a key intervention to prevent maternal mortality: the percentage of skilled birth attendance is increasing progressively, from 42 per cent in 1993 to 57 per cent in 2003, and to 82 per cent in 2012; however this is still below the 2015 Millennium Development Goal target of 100 per cent.

14. The under-five mortality rate decreased from 169 per 1,000 live births in 2008 to 129 per 1,000 in 2010, yet this is still far from the 2015 Millennium Development Goal target of 62 per 1,000 live births. Children from the poorest families have a 50 per cent higher risk of dying before the age of five than those from richer households. The vast majority of children continue to die at home from easily preventable or curable diseases, such as pneumonia, malaria, diarrhoea, neonatal tetanus, and measles. Malnutrition, affecting more than one million children in the country, is the underlying cause of 45 per cent of those deaths.

15. The nutritional situation in Burkina Faso is characterized by a high prevalence of chronic and acute malnutrition, as well as micronutrient deficiencies. In 2013, the prevalence of global acute malnutrition (wasting) among children under 5 was 8.2 per cent, and the prevalence of severe acute malnutrition was 1.7 per cent. In 2014, it is expected that 514,000 children under 5 will suffer from global acute malnutrition, of which some 144,000 cases will be severe. Children affected by wasting are at high risk of dying from common infectious diseases; urgent and immediate care is needed to prevent these deaths.
16. The prevalence of chronic malnutrition (stunting) is estimated at 31.5 per cent. More than one million children under 5 are affected by stunting annually, the consequences of which are irreversible: stunted children have a weakened immune system, impaired cognitive ability and lower-than-average life expectancy; their ability to learn is reduced, as is their ability to earn as adults. The victims of stunting need urgent support in order to realize their right to health, education and a productive life.

17. The causes of malnutrition are multiple and complex. Among the immediate causes of malnutrition, suboptimal infant and young child feeding has a tremendous impact. The proportion of early initiation of breastfeeding is only 30 per cent; the proportion of exclusive breastfeeding for the first six months is only 47 per cent; and the proportion of children receiving a minimum acceptable diet is only 7 per cent.

18. Micronutrient deficiencies – particularly Vitamin A, iodine and iron deficiencies – are a major public health problem in Burkina Faso.

19. Significant progress has been made regarding drinking water. Access to drinking water in the Plateau-Central and Centre-Nord regions increased from 70.6 to 77 per cent, and from 63.4 to 69 per cent respectively in 2012. At the same time national rates increased, including a rise from 54 to 63 per cent in rural areas. Indicators for family sanitation lag behind. The percentage of households with improved family latrines increased in some regions, but at the national level the figures are alarming: access to household sanitation was only 3.1 per cent in rural areas in 2012.

20. The education sector in Burkina Faso has registered major results over the last decade. The gross primary school enrolment rate rose from 44 per cent in 2000 to 81.3 per cent in 2013, with near gender parity; the gross admission rate reached 92.8 per cent in 2013, up from 47.4 per cent in 2000. Challenges remain, however, as high demand for education is not always met. In addition, a large percentage of children who enroll in primary school do not complete the cycle: the completion rate in 2013 was 59.8 per cent (59.6 per cent for girls). Those who do finish are faced with greater challenges accessing secondary school, and even more remote chances of, after that, accessing higher education. The system is both expensive and biased, in favour of wealthier families, mostly located in urban areas.

21. Though declining, the gender gap (0.99 in 2013) remains an issue with regard to education, especially at the post-primary level. Adult literacy rates remain much lower for women (22.5 per cent in 2012) than for men (36.7 per cent). Furthermore, it is estimated that 75 per cent of disabled children have never been to school, and educational opportunities for these children are mostly offered by civil society and the private sector. Geographic disparities are also an issue, with more positive indicators in urban areas. Net school enrolment in major cities reaches 75 per cent, whereas in rural areas it is 37 per cent.

22. There are approximately 35,000 Malian refugees in Burkina Faso, and ongoing insecurity in northern Mali has led to an increase in the number of Malians seeking refuge in Burkina Faso. This number peaked in 2013, with 49,945 refugees (27,146 of whom were children). Refugees and host communities remain at high risk of communicable and waterborne diseases, as well as psychosocial stress, child recruitment into armed groups, gender-based violence, and education disruption.
III. The Role of UNICEF in Burkina Faso

23. The current UNICEF five-year programme covers 2011 to 2015, with a total budget of $163.5 million. UNICEF supports Government efforts to accelerate achievement of the Millennium Development Goals and realize national priorities to enhance child survival and development, deliver quality education for all, and reduce child poverty and vulnerability.

24. To combat extreme poverty (Goal 1) and strengthen human capital, national government policy strongly prioritizes the enhancement of social protection systems targeting the most vulnerable households. The Government recently put in place an inter-ministerial Permanent Secretary, under the leadership of the Prime Ministry, who will be in charge of implementing the National Policy on Social Protection adopted in 2012. The policy aims to ensure pro-poor and equitable access to basic services through a set of transfers and social inclusion measures, such as free health care for children under 5 and pregnant women, universal health insurance, free access to preschool for children aged 0 to 5, food price subsidies and public housing for the poorest.

25. To address the challenges that hinder children the most (housing, nutrition and sanitation), UNICEF launched the “Wash in Nutrition” approach in 2013.

26. The 2013 census of disabled children, a UNICEF initiative, provided key evidence to hone the equity focus to reach the most vulnerable children. The results of this survey will enable partners to develop evidence-based strategies and budgets based on data disaggregated by sex, age and type of disability.

27. UNICEF successfully mobilized Government and other partners to support a survey in 2014 evaluating Millennium Development Goal indicators, rather than wait for the 2015 Demographic and Health Survey to provide information on progress toward the goals.

28. UNICEF’s partnership with the Global Alliance for Vaccines and Immunization (GAVI) and the World Health Organization (WHO) led to the introduction of two new vaccines against pneumococcus and rotavirus. More than 300,000 infants were reached in the last quarter of 2013. These vaccines are expected to reduce by 30 per cent child mortality caused by pneumococcus and diarrhoea due to rotavirus.

29. UNICEF provided technical and financial support to the Government of Burkina Faso for birth registration.

30. UNICEF has supported the in-country presence of the Office for the Coordination of Humanitarian Affairs (OCHA) since 2012 in response to a severe food crisis in 2012 that affected nearly 2 million people.

31. UNICEF has provided a multi-sectoral response to mitigate the risk of communicable and waterborne diseases, psychosocial stress, the risk of child recruitment into armed groups and gender-based violence, and disruption to children’s education among refugees and host communities affected by the Mali crisis.

32. In early 2012, the Government of Burkina Faso declared that 2.8 million people were at risk of food insecurity due to a decline in cereal production, with 100,000 children under 5 suffering from severe acute malnutrition (SAM). In 2012, UNICEF response resulted in a total of 85,900 children treated for SAM, and 60,097 were treated in 2013. UNICEF and the Ministry of Health
have scaled up management of SAM in 10 out of 13 regions, and will do so in the remaining regions by mid-2014.

33. Since 2011, UNICEF has been coordinating the group of technical and financial partners in nutrition security, including United Nations agencies, donors, research institutes and non-governmental organizations. Coordination under UNICEF leadership ensured that almost all partners working in nutrition support the Government and the national nutrition strategy, opting for service delivery through the health system rather than direct service delivery, as was the case before 2012.

34. UNICEF ensures uninterrupted provision of ready-to-use therapeutic food as well as essential medicines (antibiotics, deworming drugs, Vitamin A, etc.) for the treatment of severe acute malnutrition.

35. UNICEF works closely with the health managers of the Nutrition Directorate and at the regional and district level as well as with non-governmental partners to coordinate activities.

36. UNICEF supports Government efforts to promote emergency preparedness and efficient humanitarian response by strengthening national partners on humanitarian standards, strategic operational planning, oversight and monitoring.

37. Recurrent humanitarian crises in recent years have exacerbated the existing vulnerabilities of women and children in Burkina Faso. In line with the United Nations Strategy for the Sahel, as of 2014 UNICEF efforts will focus more on the Sahel, Est and Nord regions, adopting an integrated programme based on community needs that: reinforces the capacity of communities and decentralized government structures to provide basic services in preparation and response to emergencies; strengthens systems for collecting and analyzing data at local level; and encourages the inclusion of social norms by promoting community-based approaches, decentralized monitoring, and community dialogue for social change.

IV. High-level meetings

38. The members of the Bureau had a number of high-level meetings with Burkina Faso officials at central and regional level; these were held in an open, friendly atmosphere and allowed for a substantive dialogue on a wide range of issues relating to the protection of children.

39. The delegation was honoured to be received by First Lady of Burkina Faso Mrs. Chantal Compaoré, who is also a Goodwill Ambassador for the worldwide ban on female genital mutilation/cutting. The First Lady noted the efforts made by UNICEF and other partners supporting Government activities to eliminate harmful practices like FGM/C and early marriage, as well as its measures to improve the overall conditions for children and women in the country.

40. The First Lady is a strong campaigner against FGM/C both nationally and internationally. In spite of laws prohibiting it and the launch of a powerful public campaign against the practice, FGM/C is still widespread in the country, particularly among some ethnic groups. Traditional leaders have recently accepted a willingness to discuss the issue, but most still strongly support this practice.

41. Another alarming practice affecting girls is the widespread tradition of early marriage, which, like FGM/C, corresponds to the critical demographic challenges facing Burkina Faso. Like
most of the Sahel countries, Burkina Faso has a population growth of about 3 per cent, which erodes otherwise impressive growth rates of 5-6 per cent per year; the high demand for social services is a huge burden.

42. Although child marriage is illegal, in some areas of Burkina Faso girls are married as early as 12 and give birth as soon as they reach puberty – a practice that has serious consequences for the health of both mother and child.

43. The delegation was received by President of the National Assembly H.E. Soungalo Apollinaire Ouattara, who gave a detailed account of child protection legislation being introduced, which covers FGM/C, early marriage and child labour. He placed special emphasis on measures taken to implement the Convention on the Rights of the Child and its Optional Protocols, emphasizing the country’s ratification of all relevant international conventions and legislation enacted for child protection.

44. The Bureau members had a fruitful meeting with Minister of Foreign Affairs and Regional Cooperation H.E. Djibrill Yipènè Bassole, during which they discussed key issues related to children’s well-being in Burkina Faso. The Foreign Minister highlighted ongoing Government efforts and contributions by UNICEF and other stakeholders to protect children and address the challenges they face. He agreed that child labour in goldmines and cotton plantations is a major problem that needs immediate action, touching upon its regional dimensions, including cross-border trafficking. He underlined the sensitive issue created by the presence of refugees in the north and recognized the key role UNICEF has played addressing this problem. He shared his concern regarding FGM/C, still performed throughout the country, and spoke about measures taken to end this harmful practice. The Foreign Minister was appreciative of UNICEF engagement on child protection and its fruitful cooperation with the Government, confirming his country’s determination to continue this excellent collaboration.

45. The delegation had the opportunity to meet with high-ranking officials from other ministries (Education, Water and Sanitation, Mines and Energy, Social Affairs, Justice, Home Affairs), as well as with parliamentarians and various parliamentary commissions, including the Child Rights Parliamentary Network.

46. The ministries provided exhaustive presentations and well-structured accounts of their cooperation with UNICEF. They openly discussed difficult issues and problems regarding the challenges they face. They all expressed satisfaction with their cooperation with UNICEF.

47. The Ministry of Health highlighted its collaboration with UNICEF focused on the prevention and promotion of the right to health services, emphasizing neo-natal mortality as a particular concern. A key Government priority is to ensure the availability of health services to children under 5.

48. The Ministry of Education focused its presentation on the EQAME (école de qualité amie des enfants/child friendly quality schools) developed in Ganzourgou and Namentenga provinces, where the retention rate is over 90 per cent, way above the national average. EQAME addresses one of the most serious problems of the educational system in Burkina Faso: poor quality due to the rapid increase of enrolment. Large classes combined with a lack of proper educational materials and adequately trained teachers erode the quality of education, often prompting parents to keep their children – especially girls – at home. By creating schools that provide a more conducive learning
environment, the programme has managed to increase retention rates. The Ministry asked UNICEF to remain fully engaged in its support for the EQAME model, envisioning a national roll-out within the framework of the national education plan.

49. The Ministry of Justice highlighted UNICEF support regarding the improvement of prison conditions for children and their mothers. In major prisons around the country UNICEF supports better prison conditions, and in particular vocational training for young inmates and maintaining family ties.

50. An extensive discussion ensued on the issue of child labour in artisanal mines. The ministries confirmed that while international mines follow the law and only employ adults, the situation is different in the artisanal mines. The driving force that has led to the widespread use of child labour is poverty – poor families see this as their only option for survival. Government officials lack well-documented information about the extent and causes of the problem. They have very few tools at their disposal to get children away from the mines. Efforts offering educational opportunities have achieved some results, but they are insufficient to reverse the trend.

51. The Parliamentary Network for the Promotion of Child Rights (REPRODEN) made a detailed presentation and underlined the exemplary partnership between parliament and UNICEF. The Bureau emphasized how critical it is to ensure that all health fees for children under 5 are removed as soon as possible. The Bureau also reassured parliamentarians that the visit was taking place as part of the preparations for the next country programme, and that UNICEF support to the country would factor in the findings of the visit.

52. During field visits the delegation met with governors of Sahel and Nord regions, as well as with the Regional Directorate of Health, Yatenga Province, Nord Region. The valuable discussions during those meetings contributed to a better understanding of the challenges the different regions face and the steps being taken by local authorities, in collaboration with UNICEF, to address them in an efficient and timely manner.

53. The Bureau had a fruitful meeting with Mr. Manuel Fontaine, UNICEF Regional Director for West and Central Africa Region, who shared his expertise and insights on some of the main challenges facing the region, including the Sahel crisis, the refugee issue, and political instability. He presented a comprehensive overview of the biggest social and developmental problems Africa faces, which was highly appreciated by the members.

54. The delegation held meetings with the United Nations Country Team and respective Heads of Cooperation representing donor partners active in Burkina Faso; it met with members of the Diplomatic Corps in Ouagadougou, as well as with civil society organizations implementing projects in the country.

55. Discussions held with civil society organizations underlined the various domains of collaboration with Government and other partners. They also emphasized three main bottlenecks impeding progress: insufficient funding, weak logistical capacity and heavy disbursement procedures.

V. Field trips and observations

56. The delegation visited a UNICEF-supported project run by the non-governmental organization REMAR that aims to reduce the number of vulnerable children without parental care.
Focused on the protection and rehabilitation of vulnerable children, the project provides medical care, psychosocial support, education, vocational training and family reintegration, especially for children who were living on the street and those suffering from drug addiction. With UNICEF support from 2011 to December 2013, REMAR assisted 1,775 vulnerable children.

57. With the active support of UNICEF, REMAR has established 28 community homes for children in Burkina Faso (in Ouagadougou, Ouahigouya, Bobo, Koudougou, Réo, Banfora, Laye and Tougan). The organization also runs six vocational training centres that teach skills such as carpentry, tailoring, masonry, and auto mechanics.

58. The number of children living on the streets of Burkina Faso continues to grow at an alarming rate. A survey conducted in 2010 estimated 5,721 children were living on the streets (4,982 boys and 739 girls), 1,395 of whom live in the capital, Ouagadougou. That figure rises 2 per cent per month, which means an additional 20 children find themselves in these circumstances monthly. The extreme poverty of their home environments as well as violence, abuse and marginalization within their own families are what drives children to the streets. Girls are mainly driven by forced marriages and unplanned pregnancies, which lead to their exclusion from the family. This problem is further exacerbated by the breakdown of the family unit and a lack of awareness about children’s rights.

Observations during the visit at the REMAR project

59. The delegation was pleased to note that UNICEF provides emergency support to children retrieved from the streets or who are still living on the streets; it provides assistance to children addicted to drugs, education and training support for these children, as well as support for family reunification.

60. The delegation visited the Gorol Kadje artisanal gold mining site, established in 1981. More than 4,000 people, mostly children and women, are involved in the daily work of the mine: men and boys usually dig the pits, crush and transport the ore; women and girls pound, grind and wash the ore.

61. According to the Ministry of Mines and Energy, in 2013 approximately 800 artisanal gold mines were functioning in Burkina Faso. According to a UNICEF-supported 2010 study on child labour, 86 of the artisanal gold mine sites identified 19,881 child workers (10,218 boys and 9,663 girls).

62. The delegation is very concerned about the magnitude of child labour in artisanal mining where, according to UNICEF estimates, significantly more than 100,000 children are employed. This is a striking number, especially compared to the formal workforce of registered mining companies, which is 5,000. The health risks associated with hard physical work, mine dust and unsecured mine shafts are extremely high, and accidents claim lives almost daily. Children who work in artisanal gold mines often suffer from respiratory diseases (bronchitis, pneumonia), sexually transmitted diseases (including HIV), psychological disorders, and drug addiction. Over 80 per cent of these children haven never attended school.

63. Although child labour is illegal in Burkina Faso, the powerful social and economic pressures driving this phenomenon have thwarted Government attempts to eradicate this practice. Some positive initiatives have been introduced – such as vocational training for children who have worked...
in the mines. A new mining legislation is being considered and could possibly be used to regulate artisanal mining.

64. Since 2009, UNICEF – together with the Government and non-governmental organizations – has developed and implemented an integrated project in the five regions of Burkina Faso most severely affected by child labour (Centre, Sahel, Plateau-Central, Sud-Ouest and Centre-Nord); its aim is to provide children working in artisanal gold mines with much needed protection, education and socioeconomic support. The overall objective of the project is to prevent and progressively eliminate child labour in artisanal gold mines in Burkina Faso. Activities include: childhood development, returning to school, vocational training, support for small enterprise start-ups and management, income generating opportunities for young and vulnerable mothers heading households, and communication for social change.

65. In Dori the Bureau visited a Vocational Training Center for children who formerly worked in the Gorol Kadje gold mines.

66. Since 2002 UNICEF has been supporting efforts to withdraw children from the Gorol Kadje mines; to date more than 200 children have left the site and received vocational training through a partnership with the Action for the Promotion of the Rights of Children. Along with these efforts, since 2009 UNICEF has been supporting five implementing partners working in five different regions to retrieve 20,262 children (10,984 boys and 9,278 girls) from 43 artisanal gold mines and quarries. One of these partners is “Terre des Hommes,” a Swiss non-governmental organization, which has allowed for the rehabilitation and protection of 5,669 children.

67. It is noted that some parents are reluctant to send their children, particularly girls, to vocational training centres, apprehensive of the lack of appropriate supervision. Furthermore, due to persistent traditional practices, some communities do not distinguish between hazardous work and education or apprenticeships for children.

Observations during the visit at Gorol Kadje

68. Artisanal mining continues to expand, with dangerous consequences for children. In order to protect children and prevent their exploitation, UNICEF has stepped up advocacy efforts, working with technical and financial partners (France, Denmark, Sweden, the European Union) to promote the regulation of artisanal gold mining in Burkina Faso.

69. In addition, UNICEF is increasing advocacy targeting mining companies present in Burkina Faso to strengthen corporate social responsibility and political leveraging to prevent child labour and advance the rights of children.

70. UNICEF works closely with the Mining Chamber of Burkina Faso and the Ministries of Labour and Social Affairs and Mines and Energy to pursue: the translation of international child rights obligations into national legislation; the introduction of child labour regulations within the child protection system, especially with regard to artisanal gold mines; and the creation of skilled and equipped social action teams at community level to prevent and respond to child rights violations.

71. In spite of concerns expressed by the Ministry of Education regarding children leaving school for artisanal mines and the mobilization of technical and financial partners – such as France
and the European Union – the Government is yet to develop and launch a coordinated national effort to address the issue of child labour in the artisanal gold mines.

72. The delegation visited a primary school and Early Childhood Development (ECD) centre in Selbo, a village not far from Dori, and had the opportunity to see the school facilities and become acquainted with the curriculum and the teaching materials.

73. The school and the centre were developed by the Government under the National Early Childhood Development programme, which was drafted and is periodically revised with UNICEF expertise. The main objective of the programme is to improve education through the active participation of teachers, parents and the community, emphasizing the crucial role each play in children’s welfare – especially for the youngest children.

Observations during the Selbo village visit

74. The delegation had an informative and fruitful discussion with the faculty and staff of both the school and ECD centre. It was also very fulfilling to meet the children. The school and the centre are positive examples of the significant results achieved in the education sector over the last decade by the Government of Burkina Faso, in close partnership with UNICEF. However, it should be noted that a number of challenges still remain in the education sector that need due attention, including: rapid population growth and the increasing (and unmet) demand for education; financial constraints limiting access to secondary schools and higher education; the high percentage of children who do not complete the full education cycle of education; and poor educational quality.

75. The delegation welcomes the measures taken by the Government, with strong support from UNICEF, to address the challenges in education, and encourages its continuous efforts, including: taking steps toward achieving national educational goals; increasing access to quality education; reducing gender and geographical disparities in education; and enhancing educational outcomes. To achieve better results for children, these efforts should continue.

76. Bureau members visited the Goudebou Malian Refugee Camp – with some 11,000 refugees – in the northeastern part of Burkina Faso. They noted that no tensions exist among the different communities (Tuareg, Peulh, Arab, Tamasheq, Songhai) living together in the camp.

77. According to recent surveys, more than 200,000 people fled Mali in 2012 and 2013, prompted by political instability. The deployment of the United Nations Multidimensional Integrated Stabilization Mission in Mali (MINUSMA) in the second half of 2013 has contributed to some degree of stabilization within the country and to a decrease in refugees. Nevertheless, a large number of refugees still remain in neighbouring countries – especially Burkina Faso – without immediate plans to return.

78. Before MINUSMA was deployed, a military intervention in January 2013 and ongoing insecurity in northern Mali resulted in an increase of Malians seeking refuge in Burkina Faso, bringing the total number of refugees to a peak of 49,945, of which 27,146 were children. The risk of communicable and waterborne diseases among refugees and host communities remained high and a top priority for UNICEF. These populations are also at risk of psychosocial stress, child recruitment into armed groups, gender-based violence, and a break in education.

79. The success of presidential and legislative elections in Mali in the second half of 2013, along with an overall improvement in security in the north of the country, have prompted the
spontaneous return of some refugees. However, renewed insecurity – including clashes in Timbuktu, Kidal and Gao, the decision by the National Movement for the Liberation of Azawad to pull out of the peace process, the deaths of four peacekeepers, and the kidnapping and killing of two French journalists – may have affected refugees’ plans to return in 2014. Therefore, under the overall coordination of the Government, UNICEF remains engaged to support the provision of basic social services to an estimated 35,000 refugees and 31,000 within the host community in Burkina Faso, as well as to monitor the situation with the United Nations High Commissioner for Refugees (UNHCR).

80. UNICEF also supports the Government of Burkina Faso in terms of emergency preparedness and humanitarian response by strengthening humanitarian standards and strategic operational planning.

Observations during the visit at the Goudebou Malian Refugee Camp

81. Together with United Nations agencies and civil society organizations, UNICEF plays a key role in addressing the humanitarian situation in refugee camps through the provision of decent accommodation, food and safe drinking water, health services, and education. By supporting partners to build schools, train teachers and provide pedagogical materials, UNICEF is instrumental in ensuring child refugees have access to education.

82. It should be noted that the situation in the camps remains precarious. Many of the refugees belong to vulnerable groups – women, children, elderly, and disabled persons – many of whom were not prepared to live away from their homes and families and to adapt to new conditions in a foreign country.

83. The Bureau encourages ongoing efforts by UNICEF and UNHCR to protect the rights of Malian refugees in Burkina Faso. The Government of Burkina Faso and the refugees themselves thanked UNICEF for its efforts addressing this humanitarian situation.

84. In Ouahigouya (Nord Region) the delegation visited a UNICEF-supported nutritional health centre run by a non-governmental organization in Sissamba village.

85. The integrated package of services provided in Ouahigouya is part of a larger programme taking place at the national level. Since 2011 Burkina Faso has been a member of the Scaling-Up Nutrition (SUN) Movement, with technical support from UNICEF, which also supports the Nutrition Directorate of the Ministry of Health to prepare and implement:

(a) The National Plan to scale up management of severe acute malnutrition for 2011–2015 aims to provide quality training on integrated management of acute malnutrition for health agents and community health workers in the 1,700 health facilities and 9,000 villages throughout the country; these health workers, in turn, then conduct screening campaigns and refer children suffering from SAM to health centres for treatment. The plan covers three regions every year and has so far reached 10 out of 13 regions, increasing coverage of SAM treatment from 45,000 children in 2011 to 78,000 in 2012 and 102,000 in 2013. The programme’s performance indicators are very good, with a cure rate as high as 90 per cent and a death rate as low as 2 per cent.

(b) The National Plan to scale up infant and young child feeding (IYCF) services for 2013–2025 promotes optimal breastfeeding and adequate complementary feeding as
essential to prevent malnutrition, reduce infant and child mortality, save children from chronic illness and impaired brain development, and reduce the socio-economic burden of malnourished children in regular need of treatment. This life cycle-based approach targets the 1,000 days window of opportunity (from conception to 2 years of age), during which physical development and brain damage linked to malnutrition become permanent. The plan aims to reduce chronic malnutrition, which affects more than 1 million children every year.

86. As of 2014, an estimated 144,000 children in Burkina Faso suffer from SAM, 16,700 of whom live in the Nord Region.

87. The Nord Region was a pioneer in scaling up SAM management and IYCF plans, in 2011 and 2013, respectively. It is the first region of Burkina Faso where these two approaches are being implemented together. The region has 114,942 children under 2, of whom 67,241 will benefit from IYCF in 2014. At the same time, 33,562 pregnant women (out of the region’s total of 57,371) will also benefit.

88. The delegation was acquainted with the work of the AMMIE Association – a non-governmental organization led by a former Minister of Health who is dedicated to promoting healthy living for child and mother by educating families on the importance of hygiene and exclusive breastfeeding for the first six months. In collaboration with the Government, AMMIE also promotes the FGM/C ban campaign and works to raise awareness on the importance of receiving pre- and post-natal maternal services, as well as on feeding and nutrition as a whole. The organization works in four provinces of the Nord Region – Yatenga, Zondoma, Passoré and Loroum.

Observations during the visit at the Nutritional Health Centre

89. The relationship between UNICEF and the Government of Burkina Faso is very good and mutually fulfilling. There are challenges and there is still a lot more to be done, but there is also genuine commitment on both sides. The programme, the briefing notes, the discussions and the guidance throughout the visit were well-organized and skillfully managed and coordinated.

90. The delegation had the opportunity to hear about the processes, procedures and implementation strategies of all the initiatives at the health centre, including the partnership with UNICEF, the European Union, other United Nations agencies, civil society organizations and other key stakeholders.

91. During the meeting the Governor of the Nord Region spoke of his personal commitment to ensure full implementation of the health centre’s initiatives throughout the region, as well as to work closely with UNICEF and the European Union to ensure that ongoing projects are sustained, expanded and rolled out as needed to reach the rest of the country.

92. The delegation noted with satisfaction that in addition to the awareness campaign and civic education on IYCF provided by stakeholders, both national and regional governments have also developed their own awareness initiatives and training programmes for counsellors and nutrition and health service providers throughout the regions where such programmes and projects are implemented.

93. Given the broad consensus on the implementation strategy of essential nutrition interventions, as well as the positive collaboration between the Government and its partners, the
main challenge for nutrition programming is predictable and long-term funding. The implementation of the complex IYCF strategy is costly and requires uninterrupted service in order to be effective.

94. Inter-sectoral action – involving health services, food security, WASH, education and social protection – is also critical to accelerate the reduction of chronic malnutrition (stunting). In close partnership with UNICEF, the Government is working to establish a common results framework and an integrated action plan for tackling chronic malnutrition and achieving the World Health Assembly target to reduce by 40 per cent the number of stunted children between 2010 and 2025.

VI. Conclusions and recommendations

95. The delegation would like to highlight the considerable efforts made by UNICEF to organize an interesting and intensive field visit focusing on the main aspects of its work in Burkina Faso. The delegation would especially like to thank UNICEF staff in New York and Ouagadougou for their commitment and dedication, which is much appreciated.

96. It was evident from the meetings and discussions that UNICEF has taken a very strong position in terms of protecting children and their rights in Burkina Faso. The technical advisory and advocacy efforts have had significant impact on policy formulation. The recent legislation on child protection benefited considerably from UNICEF support and advice. At the same time, UNICEF remains active in the dialogue on Government-introduced social security measures, and has pointed out that some of the most vulnerable groups have not been reached by the measures introduced. The delegation encouraged UNICEF to continue this work.

97. As a relatively small donor, UNICEF is more important for the normative and technical expertise it provides than as a source of financing. The technical input UNICEF provides in the sectoral coordination groups is appreciated by other development partners. Despite its limited budget, UNICEF is engaged in a wide variety of activities with a very large number of partners. In this context, when drafting the next country programme, it might be worth considering limiting the number of partner engagements to make better use of the resources (both financial and human) for a smaller number of select areas, thus achieving greater impact.

98. UNICEF is a valued partner in many sectoral coordination groups and participates actively in the coordination discussions. But while most development partners often participate in joint donor arrangements, such as basket funding or support programmes that provide general assistance to existing national policies, UNICEF's preferred mode of operation is with specifically developed UNICEF programmes. UNICEF participates however also in other global and national initiatives. For instance, UNICEF supports the global model for quality education EQAME implemented together with the Ministry of Education in two provinces in Burkina Faso; UNICEF is also currently (2014-2015) the coordinating donor agency of the WASH sector, which is aligned with the national strategy in that area. Even though there is close coordination between the programmes, UNICEF should strive to achieve a higher degree of cooperation and alignment.

99. Burkina Faso policy makers would like to see UNICEF and other partners incorporate a long-term development component to emergency and other humanitarian responses which will help build and strengthen sustainable capacities and capabilities in Africa. Efforts should be made for the timely implementation of new and innovative programmes aimed at eradicating preventable
diseases, alleviating poverty, ending malnutrition, harmful practices and ignorance as well as promoting formal education.

100. Building on the successful cooperation and partnership with the Government of Burkina Faso, UNICEF needs to elaborate strategies to further help the Government develop its own resource mobilization capacities and to complement efforts to implement its policies and programmes in a sustainable manner with limited assistance from partners and other actors.

101. The delegation noted with satisfaction the positive collaboration among United Nations agencies for the protection of children in Burkina Faso and encouraged their coordinated efforts under the framework of delivering as one; this framework helps these agencies maintain sustainable partnerships among themselves as well as with the host Government. This structured and coordinated approach ensures better results for children in a far-reaching, comprehensive and multi-faceted manner.

102. The Bureau welcomed the high-level of commitment demonstrated by donors and development partners, which account for a large portion of funding in Burkina Faso.

103. The delegation noted with appreciation the cooperation UNICEF has forged with governmental institutions at all levels – including central, regional and provincial authorities – for advancing the rights of children. UNICEF and Government partners are working to achieve results for children through advocacy and the development and implementation of key policies.

104. The delegation appreciated the clear emphasis UNICEF places on the most vulnerable population groups and the most disadvantaged geographical areas of Burkina Faso, as well as its focus on equity in programming.

105. The Bureau welcomed UNICEF efforts to influence policies, legislation and public spending to benefit the most disadvantaged children and women in society, viewing this as an important strategy for achieving long-term results for children.

106. UNICEF engagement with partners, civil society, the private sector, communities and other organizations can be highlighted as a very good example of the added value that UNICEF is able to generate by acting as a catalyst that brings various partners together to achieve common objectives for children.

107. The members of the Bureau appreciate the crucial role UNICEF plays in support of the Government to achieve the Millennium Development Goals and to advance the rights of children. The delegation observed that the Government and local authorities were open to ideas and willing to commit resources to advance the cause of children, bolstered by the credibility UNICEF adds by playing a key role in the implementation of programmes and projects in the country.

108. The delegation would like to highlight the grave demographic challenges that Burkina Faso has been experiencing in recent years. Its population, estimated at 17.9 million, has grown at a rapid rate of 3.1 per cent per year. Population growth has put additional pressure on already stretched social services and canceled the benefits the country earned from its relatively high economic growth of 6–7 per cent per year. The issue requires immediate action in order to improve the lives of people and secure a better future for the children of Burkina Faso.
109. Despite being legally banned FGM/C is still widespread. It is alarming that more than 75 per cent of the country’s girls are still subjected to this harmful practice. The existing high-level political commitment and national action should be further galvanized to build a broad-based movement to end FGM/C and related discriminatory practices in the next generation.

110. The Bureau noted with deep concern that child labour/exploitation in gold mines remains a major problem in Burkina Faso that needs urgent action by all stakeholders, and commends UNICEF efforts in this regard.

111. It should be highlighted that the Burkina Faso programme was very rich, well-organized and fulfilling. While the six-day field visit necessitated an intensive programme, the delegation would like to note the importance of allocating sufficient time to visiting field projects.
Annex 1

Participants to the Bureau of the UNICEF Executive Board Field Visit to Burkina Faso, 26 April to 2 May 2014

H.E. Mr. Stephan Tafrov, Permanent Representative of Bulgaria to the United Nations, Vice-Chair of the Bureau, Head of the Delegation

H.E. Mr. Denis Regis, Permanent Representative of Haiti to the United Nations, Vice-Chair of the Bureau

H.E. Mr. Bo Jensen, Ambassador of Denmark to Burkina Faso

H.E. Ms. Koki Muli Grignon, Deputy Permanent Representative of Kenya to the United Nations

H.E. Mr. Sahebzada A. Khan, Deputy Permanent Representative of Pakistan to the United Nations

Ms. Nina Nordstrom, Secretary of the Executive Board of UNICEF

Mr. Guy Hubbard, Reporter
Annex 2

Summary of the programme of the field visit to Burkina Faso of members of the Bureau of the UNICEF Executive Board, 26 April to 2 May 2014

Day 1 – Saturday, 26 April 2014

• Arrival at Ouagadougou

Day 2 – Sunday, 27 April 2014, Ouagadougou


• Briefing on the political situation in Burkina Faso by Mr. Marc Rubin, UNICEF Representative.


• Special children’s lunch: Discussion on current children’s issues as seen by children themselves (Children’s Parliament).

Day 3 – Monday, 28 April 2014, Ouagadougou

• Meeting with the Minister of Foreign Affairs and Regional Cooperation, as well as with high-ranking officials of other ministries (Education, Water and Sanitation, Mines and Energy, Social Affairs, Justice, Home Affairs).

• Working lunch with members of the diplomatic corps.

• Courtesy call to Mrs. Chantal Compaoré, First Lady of Burkina Faso and Goodwill Ambassador of the Worldwide Ban of FGM/C.

• Visit of REMAR – a non-governmental organization supporting children removed from the street and suffering from drug addiction.

• United Nations Country Team Dinner.

Day 4 – Tuesday, 29 April 2014, Gangaol – Dori

• Arrival at Gangaol and visit to Gorol Kadje artisanal gold mining site.

• Arrival at Dori and visit to Vocational Training Center for children formerly working in goldmines.

• Visit to a primary school and an early childhood development centre at Selbo village.

• Visit to a Malian Refugee Camp (Goudebou) and meeting with UNHCR and UNICEF staff based in Dori, as well as with implementing partners.

• Dinner hosted by the Governor of Sahel Region.
Day 5 – Wednesday, 30 April 2014, Ouahigouya

- Arrival at Ouahigouya and visit to a nutritional centre run by a non-governmental organization supported by UNICEF (Integrated Management of Acute Malnutrition + Awareness).
- Meeting with the Governor and the Regional Directorate of Health.
- Dinner with UNICEF-supported civil society groups focused on accountability and citizen control of decentralized public expenditure.

Day 6 – Thursday, 1 May 2014, Ouagadougou

- Arrival at Ouagadougou and visit to parliament.
- Meeting with parliamentarians and parliamentary commissions, including the Child Rights Parliamentary Network.
- Dinner with Mr. Manuel Fontaine, Regional Director for West and Central Africa Region.

Day 7 – Friday, 2 May 2014, Ouagadougou

- UNICEF all-staff meeting.
- Special advocacy event on violence against women, which included FGM/C and child marriage.
- Debriefing with UNICEF management team.
- Departure from Burkina Faso.