



THE **Government**
OF **Brazil** AND **UNICEF**

Partnerships for Trilateral
South-South Cooperation



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Implementation

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The United Nations Children's Fund (UNICEF) promotes the rights and wellbeing of every child, in everything we do. Together with our partners, we work in more than 190 countries and territories to translate that commitment into practical action, focusing special effort on reaching the most vulnerable and excluded children, to the benefit of all children, everywhere. For more information about UNICEF and our work, please visit <http://www.unicef.org>.

Acknowledgements

UNICEF Country Offices in Algeria, Armenia, Belize, Ethiopia, Ghana, Guatemala, Jamaica, Lesotho, Mexico and Tunisia; Fabiana Gorenstein; Caio Oliveira; Maria Estela Caparelli; Ana Cristina Guimarães Matos; Rogerio Oliveria.



Gary Stahl
UNICEF Representative to Brazil

In Ethiopia, hundreds of families are set to gain access to improved water, sanitation and hygiene services. At the same time, the hardest-to-reach children living in rural areas in Guatemala will soon benefit from a newly structured conditional cash transfer programme, and an increasing number of families in Ghana are receiving life-changing support from the national social protection programme.

These are just a few examples of the positive results brought about by South-South Cooperation (SSC) between Brazil, UNICEF and partner countries. SSC is becoming an increasingly central aspect of global development dialogues and processes among developing and developed countries, international organizations, civil society and other development partners, to achieve the best possible results for children, adolescents and their families.

UNICEF believes that innovative and effective solutions can be shared across national borders with countries facing similar challenges. Our goal is to contribute to the improvement of the quality of life and the realization of the rights of children, adolescents and families living in vulnerable circumstances around the world.

UNICEF has developed a partnership with the Government of Brazil to promote Trilateral South-South Cooperation (TSSC) based on a mutual commitment to the most vulnerable children, adolescents and their families. TSSC works to deliver results more efficiently for children across the world, by supporting, brokering and facilitating the exchange of technical expertise and successful practices between countries, within the scope of the UNICEF mandate.

This report provides an overview of 10 experiences of Trilateral South-South Cooperation that UNICEF facilitated in 2014 and 2015. It presents the activities we have implemented, some of the key lessons we have learned and some proposals for the next steps to be taken.

We hope this report will serve as a concrete example on how joint efforts of shared experiences and mutual learning can improve the situation of children and their families worldwide.

In the past few years, the challenges for the development and promotion of human rights have become more complex and interconnected. This reality brings a growing emphasis in social participation and intersectoral collaboration in terms of public policies, within the national and local levels. This brings a new model of management for the State. Additionally, partnerships for development, made among the various key-actors, are of strategic importance, as mentioned in the agenda for the Sustainable Development Goals (SDG).

Since last decade, an increasing number of developing countries have been showing their interest in knowing Brazilian social policies, especially those related to the reduction of poverty, which bring a multidimensional and intersectoral approach.

South-South Cooperation (SSC) is an innovative and effective tool to guarantee the sharing of experiences in the formulation, management and evaluation of public policies between Brazil and other developing countries. Compared to other more traditional types of cooperation, this model brings room for dialogue between the pairs, an exchange of knowledge between public administration managers, both at the national and local levels. This includes not only results, but also the difficulties, challenges and unsuccessful experiences. SSC aims at the building of a partnership and mutual empowerment. In this new cooperation paradigm, the process – participatory and horizontal – is as important as the result itself.

In the context of Trilateral South-South Cooperation with international organizations, UNICEF is a strategic partner with Brazil, especially with regards to the promotion of the rights of children and adolescents. This collaboration fosters the demands of various countries and enables a long term monitoring of the implemented activities, thanks to the wide distribution of UNICEF offices in involved countries. Additionally, due to the internationally recognized expertise of UNICEF in the area of knowledge management, the Fund plays an essential role in the systematization of the Brazilian good practices, facilitating the sharing with different countries.



Ambassador João Almino
Director, Brazilian Agency for
Cooperation – ABC/MRE

There are still many challenges for the consolidation and enhancement of the Brazil - UNICEF partnership, among them, the improvement of coordination with the involved Brazilian institutions and with other international organizations which work in the social protection area. Finally, it is important to improve the tools used for the evaluation of initiatives and the strategies for the resource mobilization, in order to attend to the increasing demands.

Apart from the difficulties, it is fair to affirm, based on the results shown in the present publication, that Trilateral SSC Brazil - UNICEF represents an effective strategy which contributes to the improvement of life conditions of children and adolescents throughout the world.

ACRONYMS

| | |
|------------|--|
| ABC/MRE | Brazilian Cooperation Agency of the Ministry of External Relations |
| BF | Bolsa Família Programme |
| BFLA | Belize Family Life Association |
| BSM | Brasil Sem Miséria Programme |
| CAGECE | Brazilian Water and Sewage Company of the State of Ceará |
| CNES | Algerian National Economic and Social Council |
| CONAFE | Mexican National Council for the Development of Education |
| CRAS/CREAS | Brazilian Reference Centres for Social Assistance Specialised Reference Centres for Social Assistance |
| CREAD | Algerian Research Centre for Applied Economics |
| CRES | Tunisian Centre for Research and Social Studies |
| CRC | Convention on the Rights of the Child |
| CPD | Country Programme Document |
| DFID | United Kingdom Department for International Development |
| ESSJ | Economic and Social Survey Jamaica |
| ECA | Brazilian Statute of the Child and Adolescent |
| ECD | early childhood development |
| GoB | Government of Brazil |
| GDP | gross domestic product |
| GTP II | Ethiopian Growth and Transformation Plan II 2016-2020 |
| IBGE | Brazilian Institute for Geography and Statistics |
| IPEA | Brazilian Institute of Applied Economic Research |
| ISTC | International Centre for Technical Cooperation on HIV/AIDS |
| LEAP | Ghanaian Livelihood Empowerment against Poverty |
| LSS | Laços Sul-Sul |
| MAGA | Guatemalan Ministry of Agriculture, Livestock and Food |
| MDA | Brazilian Ministry of Agrarian Development |
| MDS | Brazilian Ministry of Social Development and Fight against Hunger |
| MDGs | Millennium Development Goals |
| MIDES | Guatemalan Ministry of Social Development |
| MS | Brazilian Ministry of Health |
| NAC | Belizean National AIDS Commission |
| NGO | non-governmental organization |
| OWNP | Ethiopian One WASH National Programme |
| PIOJ | Planning Institute of Jamaica |
| PMTCT | prevention of mother-to-child transmission of HIV |
| PNAFN | Tunisian National Assistance Programme for Vulnerable Families |
| PNDRI | Guatemalan National Plan for Integrated Rural Development |
| SDGs | Sustainable Development Goals |
| SIDS | small island developing state |
| SISAR | Brazilian Integrated Rural Sanitation System |
| SNDIF | Mexican National System for the Full Development of the Family |
| STDs | sexually transmitted diseases |
| SUAS | Brazilian Unified Social Assistance System |
| SUS | Brazilian Unified Health System |
| TSSC | Trilateral South-South Cooperation |
| UNAIDS | Joint United Nations Programme on HIV/AIDS |
| UNESCO | United Nations Educational, Scientific and Cultural Organisation |
| UNFPA | United Nations Population Fund |
| UNICEF | United Nations Children's Fund |
| UNICEF BCO | UNICEF Brazil Country Office |
| VC | videoconference |
| WASH | water, sanitation and hygiene |

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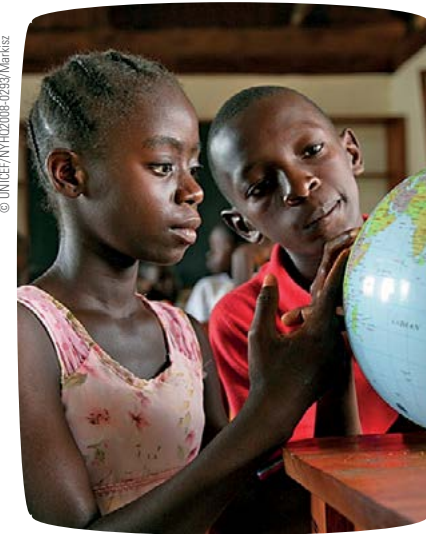
INTRODUCTION

The post-2015 Sustainable Development Goals (SDGs) have helped usher the world into a new stage of development. Children worldwide now have opportunities for progress and the right to live full, prosperous lives like never before. In the last 25 years of the Convention on the Rights of the Child¹, we have seen tremendous progress for children in many areas such as child survival and access to clean water.

Nevertheless, much more remains to be achieved for children, especially the most vulnerable and excluded, and those caught in the midst of conflicts and natural disasters. The new SDGs come at a crucial point in time. Its 17 goals focus on the most pressing global issues, from ending poverty and inequality to ensuring gender equality.² It is now evident that it is in the best interests of governments to invest in children. Experience has demonstrated that a society which values and devotes resources to its children reaps the benefits of improved indicators and standards of living. Investing in children is, therefore, investing in society as a whole.

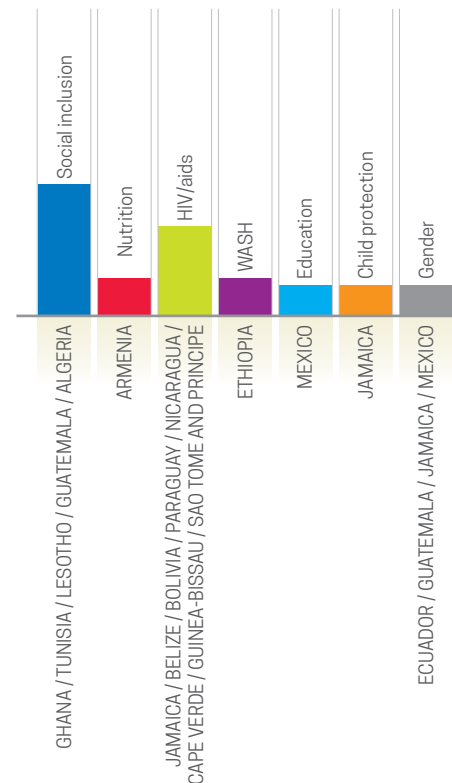
In our current global socio-economic and political climate countries and people are ever more interconnected through flows of sophisticated technologies and multilateral mechanisms for collaboration and exchange of knowledge and experiences. This interconnected world has great potential for innovation, new partnerships and cooperation, and for accomplishing together what cannot be done alone. *UNICEF's 2015 State of the World's Children Report*³ stresses that new forms of partnerships and processes are needed in order to mainstream innovation in development actions for children. South-South Cooperation has emerged as an innovative and cross-sectoral modality, driving and motivating different actors to step outside geographical and cultural boundaries and connect in order to facilitate, share and implement best practices in all areas of work for children. As highlighted by United Nations Secretary-General Ban Ki-moon, "...commitment

"South-south co-operation is not happening by global design. It's happening because communities, countries and regions are responding to – and seizing the opportunities of – the realities of a changing world". "[...] south-south and triangular co-operation are growing – organically, rapidly, wonderfully. Because they work". – UNICEF Executive Director, **Anthony Lake** Joint Board session on South-South and Triangular Cooperation, New York, 4 February 2013.



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TSSC IN THEMATIC AREAS AROUND THE GLOBE



to pioneering South-South approaches [...] will ensure shared prosperity, sustainable development and a life of dignity for all.⁴

The Government of Brazil has attained significant achievements for its people in the past decades, especially for children. Brazil's extensive social programmes have helped approximately 36 million people rise out of extreme poverty between 1990 and 2015. They have also dramatically reduced infant mortality rates by 68.4 per cent between 1990 and 2012.⁵ These economic and social developments in the last few decades have helped Brazil emerge as one of the world's top economies and have helped Brazil garner international recognition. Furthermore, Brazil's active engagement in international development and its commitment to the SDGs have made it a key international player in the fight for global sustainable development.

In 2013, UNICEF Brazil and the Brazilian Government, via the Brazilian Cooperation Agency (ABC) of the Ministry of External Relations (MRE), joined efforts to foster Trilateral South-South Cooperation (TSSC) with other developing countries.⁶ This partnership was created to tap into the wealth of development experience, knowledge, skills and resources available in Brazil. It is based on the premise that a more equitable world for children and women is achievable by overcoming capacity gaps through sharing of relevant experiences and tested policy-related innovations that address poverty and inequity.

The ABC-UNICEF Trilateral South-South Cooperation programme aims to include commitment to children at the heart of cooperation exchanges. ABC and UNICEF thus strive to respond to cooperation requests from countries by sharing and adapting successful strategies for the advancement and improvement of children's lives. Since the inception of the ABC-UNICEF Trilateral South-South Cooperation programme, 21 countries have used TSSC to help strengthen national health, education and social protection programmes, among others. This report documents the TSSC activities implemented in 2014 and 2015 and draws out interim results and initial lessons learned.

¹ Learn more about the Convention on the Rights to the Child at <http://www.unicef.org/crc/>
² Learn more about the Sustainable Development Goals at <https://sustainabledevelopment.un.org>
³ To read the report, please access <http://www.unicef.org/sowc/>

⁴ South-South Cooperation offers a path to a new global partnership for sustainable development, <http://bit.ly/1VaAvXR>
⁵ UNICEF Brazil, ECA 25 anos – Avanços e desafios para a infância e a adolescência no Brasil, <http://uni.cf/1obXYgU>
⁶ Learn more about UNICEF and the Government of Brazil's Guidelines for Trilateral South-South Cooperation at www.brasilssc.org

ALGERIA

| | |
|---|---|
| Partners in Brazil | Brazilian Cooperation Agency (ABC) Ministry of Social Development and Fight against Hunger (MDS) Institute of Applied Economic Research (IPEA) |
| Partners in Algeria | National Economic and Social Council (CNES) Ministry of Prospective and Statistics Algerian Research Centre for Applied Economics (CREAD) |
| Objective of Cooperation | Support the Government of Algeria to develop effective and efficient social protection schemes to benefit the most vulnerable children, adolescents and women in the hardest-to-reach regions |
| Component within Algerian National Plan of Action | Operational Action Plan component that informs the national reform process, aiming to achieve coherent, integrated, equitable and child-sensitive social protection. ⁷ |

Situation of children

Algeria has made significant investments in the areas of education, healthcare, social protection and child protection for its 14.3 million children.⁸ The country has reached most of its Millennium Development Goals and the well-being of children has improved due in large part to an increase in socio-economic development in recent years. Yet, children are still facing barriers such as disparities within the country's south and highland regions and urban and peri-urban areas which prevent them from fully enjoying their rights. These inequalities contribute to disproportionate rates of maternal and neonatal mortality, education and protection services in the northern and southern regions.⁹

Objective of cooperation

Algeria is striving to provide equitable and universal access to public services and has developed a policy reformulation aimed at tackling issues associated with access to quality education and quality of public services, among others. The country currently allocates over 25 per cent of its government expenditure to social transfers and subsidy schemes, such as subsidies for basic goods and products to support Algeria's most vulnerable populations.¹⁰ Algeria has reached out to Brazil in its search for innovative solutions to ensure sustainable and child-sensitive social protection reforms. Specifically, the cooperation seeks to optimize the effectiveness, efficiency and equity-focus on expanded social protection programmes, so that children and families residing in the most hard-to-reach and susceptible regions have access to improved basic services. With the support of UNICEF, Algeria identified South-South Cooperation with Brazil as an innovative and effective strategy to gain technical knowledge regarding the successful implementation of social policies.



| Basic Indicators | to the top |
|---|------------|
| Under-5 mortality rank | 95 |
| Under-5 mortality rate (U5MR), 1990 | 55.7 |
| Under-5 mortality rate (U5MR), 2014 | 25.6 |
| U5MR by sex 2014, male | 27.1 |
| U5MR by sex 2014, female | 23.9 |
| Infant mortality rate (under 1), 1990 | 46.8 |
| Infant mortality rate (under 1), 2014 | 14.6 |
| Neonatal mortality rate 2014 | 14.6 |
| Total population (thousands) 2016 | 40,400 |
| Annual no. of births (thousands) 2014 | 1,014 |
| Annual no. of under-5 deaths (thousands) 2014 | 22.2 |
| GNI per capita (US\$) 2015 | 5,490 |
| Life expectancy at birth (years) 2014 | 77.2 |
| Total adult literacy rate (%) 2008-2012 | 72.6 |
| Primary school net enrolment ratio (%) 2012 | 97.5 |

SOURCES: UNICEF, Algerian MICS4, Mortalité/Mortalité 2015, Algerian National office of statistics, Demographie Algerienne 2014, Algerian National office of statistics



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QUICK FACTS

Bolsa Família

Bolsa Família (BF) is Brazil's flagship direct conditional income transfer programme, with over 13 million beneficiary families. Its goal is to improve the living conditions of families in poverty and extreme poverty. Through BF, the Federal Government makes monthly transfers of financial resources to beneficiary families. These beneficiaries must, in turn, fulfill commitments in the areas of health, education and social assistance to access their social rights. The programme maintains and accompanies 15.1 million children and adolescents in school, has contributed to the reduction by 19.4 per cent of under-5 mortality and a 52 per cent reduction in chronic child malnutrition. For more information, please visit www.wwp.org.br

2013

Formal request from Gvt. of Algeria received

APRIL: Videoconference (VC) with government partners & UNICEF to discuss TSSC project on social protection reform

JUNE: Algerian ministerial representatives mission to Brazil for MDS seminar

2014

DECEMBER: Brazilian technical mission to Algeria for social inclusion seminar

Increased political will in Algerian Gvt. to strengthen social protection programmes

Cooperation activity

Brazil's Ministry of Social Development and Fight against Hunger (MDS) and the Institute for Applied Economic Research (IPEA) supported the cooperation. Two missions to Algeria and Brazil took place. These focused on capacity building for professionals working in development and were based on Brazil's successful experiences in social protection programmes.

In June 2013, Brazil received a delegation from the Algerian Government consisting of representatives from the Ministry of National Education, Ministry of Finance, Ministry of Prospective and Statistics and the Algerian Research Centre for Applied Economics (CREAD). The delegates participated in an international seminar entitled 'Social Policies for Development', as an initial scoping mission to identify best practices and experiences that could be adapted in Algeria.

The second phase of cooperation involved a Brazilian technical mission in December 2014. A representative from IPEA travelled to Algeria to attend the seminar on 'Institutional Matrices for Monitoring Social Equity and Improvements in the Effectiveness of Public Policies that Promote Equity'.

During both phases, the exchanges between the Brazilians and Algerians focused on the *Bolsa Família* programme and the Single Registry (*Cadastro Único*) system and how these have had impact on the reduction of poverty and vulnerability among children.

Progress to date

Algeria has strengthened its political will regarding social protection and the inclusion of the most vulnerable children and adolescents within public policies. Although Algeria has not made any formal commitments, the cooperation to date and the positive results achieved in Brazil have influenced high-ranking members of the Algerian Government to propose policy options and new orientations on social protection. The relationship between both countries has been strengthened in terms of South-South Cooperation, with UNICEF continuing to include children at the heart of ongoing conversations.

⁷ UNICEF, Proposal for Strengthening of Horizontal Cooperation between Algeria and Brazil around Social Protection Reform (internal document), 2012.

⁸ UNICEF Algeria Country Programme Document, 2016-2020.

⁹ UNICEF Algeria Country Programme Document, 2012-2014, ext. 2017.

¹⁰ UNICEF Algeria Country Programme Document, 2016-2020.

ARMENIA

| | |
|--|--|
| Partners in Brazil | State and Municipal Government of São Paulo Viva Leite Project Comunidade da Graça Foundation General Hospital of Itapeverica da Serra |
| Partners in Armenia | Administration of the Prime Minister Ministry of Health Ministry of Labour and Social Affairs Ministry of Agriculture |
| Objective of Cooperation | Develop and test a multi-sectoral approach aimed at improvement of child nutrition in Syunik Province, targeting the most vulnerable families through a unique identification system |
| Component within Armenia National Plan of Action | Sustainable Development Program 2009-2021 goal on ensuring human development. ¹¹ |

Situation of children

The Armenian Government has undertaken a series of reforms in health, education and child welfare. These reforms have helped improve these children's lives but many challenges still lie ahead. More than one-third of Armenia's 750,000 children live in poverty. Stunting and forms of undernutrition have caused high rates of child mortality, which have reached 19 per cent of under-five children in 2010 and 26 per cent of children aged 36-47 months.¹² Among the principal causes related to these indicators are low levels of awareness, prevalence of breast milk substitutes and inadequate health and nutrition counselling.¹³

Objective of the cooperation

In 2012, the Government of Armenia and UNICEF engaged in a humanitarian cooperation effort in order to overcome the country's state of nutritional emergency. This effort received the financial support of the Brazilian Government. With the intention of moving beyond an emergency response, the Government of Armenia requested technical support from Brazil to develop a national nutrition programme focusing on early childhood development. The goal of the cooperation focused on developing a model programme for child nutrition. A pilot project was initiated in the province of Syunik, a region characterized by the lowest nutrition indicators in the country. The partnership aims to help identify legal and regulatory frameworks that can support the development of programmes for the most vulnerable populations. Through this TSSC with Brazil and UNICEF, the Armenian Government aims to develop and implement programmes that will contribute to an increase



| Basic Indicators | to the top |
|--|------------|
| Under-5 mortality rank | 112 |
| Under-5 mortality rate (U5MR), 1990 | 49 |
| Under-5 mortality rate (U5MR), 2012 | 16 |
| U5MR by sex 2012, male | 18 |
| U5MR by sex 2012, female | 15 |
| Infant mortality rate (under 1), 1990 | 42 |
| Infant mortality rate (under 1), 2012 | 15 |
| Neonatal mortality rate 2012 | 10 |
| Total population (thousands), 2012 | 2,969.1 |
| Annual no. of births (thousands), 2012 | 41,3 |
| Annual no. of under-5 deaths (thousands), 2012 | 1 |
| GNI per capita (US\$), 2012 | 3,720 |
| Life expectancy at birth (years), 2012 | 74.5 |
| Total adult literacy rate (%) 2009-2012 | 99.6 |
| Primary school net enrolment ratio (%) 2008-2011 | -- |

SOURCES: UNICEF, Algerian MICS4, Mortalité/Mortalidade 2015, Algerian National office of statistics, Demographie Algerienne 2014, Algerian National office of statistics



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Rede Cegonha

Rede Cegonha: Launched in 2011, the programme aims to ensure quality care for all Brazilian women in the Unified Health System (SUS), from the confirmation of pregnancy through the first two years of a child's life. Women are guaranteed the right to family planning and humanized care during pregnancy, childbirth and postpartum, and children are assured the right to a safe birth and healthy growth and development. The Stork Network specifically targets future mothers in the Amazon and the Northeast regions, which have the highest rate of infant and maternal mortality in the country, as well as in metropolitan areas. It seeks to qualify the health professionals responsible for providing care to women during pregnancy, childbirth and postpartum, while creating support structures.

QUICK FACTS

Fome Zero

The *Fome Zero* (Zero Hunger) programme was created and implemented by the Government of Brazil under the mandate of President Luiz Inacio 'Lula' Da Silva (2003-2010) to combat hunger and extreme poverty in the country, contributed to halve the number of people suffering from hunger. With its holistic approach, it covered a range of areas linked to the issue of food security and social inclusion, such as the creation of jobs, increase in food production and stimulation of local businesses. It facilitates vulnerable populations to access food and nutrition assistance through an intersectoral approach between various ministries.

QUICK FACTS

2013

Formal request from Gvt. of Armenia received

JUNE: Armenian mission to Brazil for MDS seminar

2014

MARCH: IPC mission to Armenia on community-based child nutrition

JULY: VC with government partners & UNICEF to define priority areas of engagement

SEPTEMBER: Administration of the Prime Minister and Ministries of Health and Labour and Social Protection of Armenia in study visit to Brazil

Armenian Gvt. formulating national action plan for nutrition interventions

in exclusive breastfeeding and a reduction in stunting, via the promotion of good practices exchanged with Brazil.

Cooperation activities

In 2013, the first phase of cooperation identified public policies and programmes that could be adapted in Armenia. For this initial step, the UNICEF Representative to Armenia made two visits to Brazil. During these scoping visits the UNICEF Representative received first-hand knowledge about Brazil's experiences with development challenges that faced Armenia as well. The representative also received technical knowledge about the implementation of governmental programmes in the area of nutrition.

A high-level Armenian delegation consisting of representatives of the Administration of the Prime Minister and the Ministries of Health and Labour and Social Protection visited Brazil in September 2014. Their goal was to learn about nutrition policies and programmes, as well as early childhood development programmes at the federal, state and municipal levels in Brazil. They focused on good practices targeting child health, including Brazil's approach and strategy towards nutrition. They also looked at the implemented interventions such as the introduction of complementary food, planning models and management structures. In addition, the Armenian delegation learned about different models and mechanisms for parental guidance, initiatives to encourage community participation, nutrition centres for families, nutrition services in pre-schools, state-subsidized community restaurants, and the *Rede Cegonha* (Stork Network) programme, among other programmes and initiatives, such as the renowned *Fome Zero* initiative.

Progress to date

Brazil's experiences in its intersectoral approach to combating malnutrition were successfully identified as best practices to replicate and adapt to the Armenian reality. As a result of the exchanges with Brazil, the Government of Armenia has formulated a national Concept and Action Plan that aims to reinforce the intersectoral collaboration in addressing child nutrition issues in the country.

¹¹ Republic of Armenia, Joint Staff Advisory Note on the Second Poverty Reduction Strategy Paper, 2008

¹² Ibid.

¹³ Armenia Demographic and Health Survey (ADHS), 2010

BELIZE

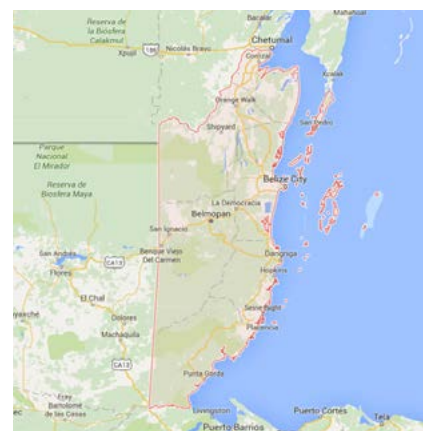
| | |
|---|---|
| Partners in Brazil | Ministry of Health State Government of Ceará State and Municipal Government of Rio de Janeiro Government of the Federal District |
| Partners in Belize | Hand in Hand Ministries Ministry of Education, Youth and Sports National AIDS Commission Belize Family Life Association |
| Objective of Cooperation | Support the Government of Belize and partners to identify and adapt sustainable interventions to prevent and raise awareness of HIV/AIDS and support children and adolescents living with the virus |
| Component within Belize National Plan of Action | National Plan of Action 2004-2015 objective 2.5.4 to combat the spread of HIV/AIDS and minimise the impact on children and adolescents. ¹⁴ |

Situation of children

Belize has a relatively small population of 340,000 people but one which is characterized by a very high proportion of children. Children under age 18 account for 39 per cent¹⁵ of the population while adolescents account for 25 per cent.¹⁶ The country is culturally rich and diverse due to high levels of immigration. Belize has the highest HIV prevalence rate (2.1 per cent) in Central America.¹⁷ In 2004, a UNICEF study found that at least 14,000 children who had lost one or both parents to AIDS were at risk of contracting HIV/AIDS. The Government of Belize has implemented a number of policies to support the realization of the rights of children.¹⁸

Objective of cooperation

The Belizean Government has taken positive steps towards addressing HIV/AIDS, such as providing free HIV testing and establishing the prevention of mother-to-child transmission (PMTCT) programme.¹⁹ Belize's National Action Plan for Children and Adolescents seeks to explore new partnerships and to identify innovative programmes and solutions that will help the country implement sustainable interventions for children and adolescents. The Brazilian successes in protecting and treating its population against the virus are internationally recognized. Reports indicate that there has been a significant drop in cases of mother-to-child transmission over the last two decades.²⁰ The implementation of Brazilian public policies targeted at HIV/AIDS was a focus area for cooperation, especially the coordination and participation at federal, state and municipal levels.



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SOURCES: UNICEF, Algerian MICS4, Mortalité/Mortalidade 2015, Algerian National office of statistics, Demographie Algerienne 2014, Algerian National office of statistics. <http://www.tradingeconomics.com/belize/mortality-rate-under-5-per-1-000-wb-data.html>
MICS 2011, 2010 Belize Census, Ministry of Education Abstract of Statistics 2011/2012



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QUICK FACTS

'Sex Thing' Intervention

UNICEF, the National AIDS Commission (NAC) and the Belize Family Life Association (BFLA) are making a concerted effort towards ensuring that adolescents in the Stann Creek District have increased knowledge of the prevention of HIV and early pregnancy. Through an initiative called 'Sex Thing', adolescents in the District will use 'edutainment' as a tool to reach other adolescents in a series of dialogues about the abovementioned issues. Street theatre will be performed as a participatory process, while delivering targeted messages for the reduction of high-risk sexual behaviours. The initiative will simultaneously offer sexual health services in a discrete location nearby. The services available include HIV testing, safe sex counselling, pap smears, testicular and breast check-ups. So far, the initiative is present in 5 communities and has reached 1,000 young people.

2014

Formal request from Gvt. of Belize received

MAY: Joint study visit of Belizean ministerial representatives and NGOs to Brazil with Jamaica

JULY: Belize-Jamaica spin-off cooperation for HIV prevention strategy

Signed cooperation agreements between Gvt. of Belize and Civil Society to work with at risk Belizean adolescents

Children in South Belize benefitting from increased access to services

2015

Cooperation activities

A Belizean delegation from the Ministry of Education, Youth & Sports, the National AIDS Commission (NAC) and local NGOs, travelled to Brazil in May 2014 and joined a Jamaican mission focussed on similar areas of interest. The delegation participated in field visits and meetings with Brazilian authorities and institutions in Rio de Janeiro, Brasilia and Fortaleza. They learned of the Brazilian experience and shared their own policies and programmes to overcome adolescent health challenges. Areas of interest throughout the mission included the degree of autonomy that Brazilian municipalities have when implementing policies, as well as the participation of civil society and young people in the implementation of programmes and public policies. Youth engagement emerged as a key theme to optimize government programmes, due to its proven ability to positively affect adolescents and their approach to sexual healthcare.

Progress to date

The Belizean Government strengthened its support for programmes to increase adolescents' knowledge and awareness of HIV/AIDS and used the lessons learned from Brazil to aid the NAC. Two cooperation agreements between the Government of Belize and civil society organizations have been signed. These organizations are working with young people and at-risk populations in the cities of Dangriga and Belmopan and are providing support programmes and information about HIV/AIDS. The NAC and the Belize Family Life Association (BFLA) have also re-developed their strategy towards planning for young persons, which now includes a comprehensive prevention strategy for adolescents and young persons. Additionally, the NAC will use the lessons learned from Brazil and Jamaica to create a working partnership with civil society organizations and thus expand its outreach work across the country, ensuring that all children and young people have access to services, information and support.

The cooperation between Brazil and Belize brought an unexpected result as the collaboration between Jamaica and Belize strengthened. This outcome allowed the two countries to continue working together following the joint mission to Brazil, and has been praised by members of the BFLA as a key added value to capacity development and awareness-raising activities with young people.

¹⁴ Government of Belize, The National Plan of Action for Children and Adolescents in Belize 2004-2015.

¹⁵ UNICEF Data, Country Statistics: Belize, <http://data.unicef.org/countries/BLZ.html>

¹⁶ UNICEF Belize, The Situation Analysis of Women and Children in Belize 2011 – An Ecological Review, <http://uni.cf/1Xo0pa9>

¹⁷ UNICEF Belize Country Programme Document, 2013-2016, <http://uni.cf/1Ry2dyH>

¹⁸ UNICEF Belize, The Situation Analysis of Women and Children in Belize 2011 – An Ecological Review, <http://uni.cf/1Xo0pa9>

¹⁹ Ibid.

²⁰ Ministério da Saúde, Boletim Epidemiológico HIV/AIDS, 2014

LAÇOS SUL-SUL

Launched in 2004, the South-South Links Network (Laços Sul-Sul – LSS) involves a common commitment to ensure universal access to HIV/AIDS prevention, treatment and care. It is the longest-standing UNICEF Brazil TSSC programme. It was created by the governments of Brazil, Bolivia, Paraguay, Nicaragua, Cape Verde, Guinea-Bissau and Sao Tome and Principe and supported by UNICEF, UNAIDS (Joint United Nations Programme on HIV/AIDS), UNFPA (United Nations Population Fund), UNESCO (United Nations Educational, Scientific and Cultural Organisation) and ISTC (International Centre for Technical Cooperation on HIV/AIDS). The initiative promotes the horizontal exchange of information and the joint elaboration of strategies

and action plans to confront the HIV epidemic, within the context of solidarity among developing nations and through a model of horizontal cooperation. The donation of antiretroviral medication and training of national health services are also key components of LSS.

Positive results in its first decade of existence have proven that LSS is one of the most successful and innovative initiatives in the fight against HIV/AIDS. All participating countries have shown a reduction in new cases and mortality rates. The number of children born with HIV in Latin America and the Caribbean dropped by 78 per cent between 2001 and 2013, an achievement in part due to the efforts of the LSS network.



Results to date, by country, include:



To ensure that LSS reached not only the general population, but also adolescents and youth, the UNICEF office in Brazil supported the creation of the South-South Youth Links Network in 2010. The initiative is formed by young human rights activists, aged 15 to 24, who engaged in activities to disseminate actions to treat and prevent HIV/AIDS in schools, social networks and places frequented by their peers in the engaged countries. An international meeting with 15 adolescents from the LSS member countries took place in June 2010, launching the youth initiative by discussing safe sexual practices and how to confront prejudice in each participant's local environment. A series of meetings and workshops enabled the young participants to return to their countries and create local projects.



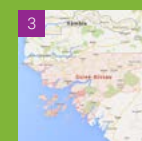
© UNICEF/Brazil/Alcides de Castro



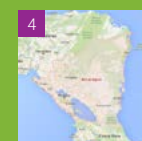
Brazil: Played a central role in supporting the expansion of national programmes to combat HIV/AIDS, in partner countries, through donations of antiretroviral drugs and technical exchanges of knowledge about the prevention of vertical transmission.



Cape Verde: Sharp increase in anti-HIV tests among pregnant women, from 13 per cent in 2005 to 67 per cent in 2007.



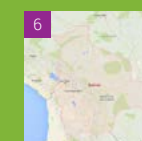
Guinea-Bissau: Reduction in new infections of around 25 per cent since 2000, and a 133 per cent increase in access to medication (from 349 people with access in 2004 to 814 in 2006).



Nicaragua: LSS helped to increase the speed of detecting new infections, to improve the healthcare system and to supply the necessary antiretroviral drugs. HIV-related mortality rate dropped from 36 per cent (1997) to 7 per cent (2007) as a result. Information shared with Brazilian professionals influenced the adoption of best work practices for the LGBT community, when dealing with HIV-related issues.



Paraguay: Rates of vertical transmission dropped from 37 per cent in 2004 to 3 per cent in 2013. 75,233 pregnant women were tested for HIV in 2011, compared to 4,400 in the year that Paraguay joined LSS.



Plurinational State of Bolivia: The number of pregnant women taking the prenatal HIV test increased from 4.6 per cent in 2007 to 69.7 per cent in 2013. Numbers of people in treatment have also increased, as in 2013, 42 per cent of adults and children who require antiretroviral drugs have been receiving them, compared to only 7 per cent in 2006.



Sao Tome and Principe: LSS provided 48.2 per cent of medications used in the country.²¹

²¹ UNICEF Brazil, Laços Sul-Sul: A Well Succeeded Decade on the HIV/AIDS Combat in the Southern Hemisphere, 2015

ETHIOPIA

| | |
|---|---|
| Partners in Brazil | Ministry of Cities Ministry of Health through the National Health Foundation Ministry of National Integration Ministry of the Environment National Water Agency State Government of Ceará Water and Sewage Utility Company of Ceará São José Project Fortaleza Mayor's Office Sobral Mayor's Office Santana Mayor's Office Regulatory Agency of Delegated Public Services of Ceará |
| Partners in Ethiopia | Ministry of Health Ministry of Water, Irrigation and Energy Ministry of Urban Development Parliament of Ethiopia Water Resources Development Fund World Vision Ethiopia Department for the Development of Water Resources of Amhara Department for the Development of Water Resources of Oromia Department of Water of Somalia Embassy of Brazil in Ethiopia UK Department for International Development (DFID) |
| Objective of Cooperation | Contribute to the strengthening of basic sanitation policies, focusing on water, sanitation and hygiene regulatory framework in urban sanitary sewerage to benefit Ethiopian institutions and families residing in Tigray, Amhara and Oromia regions |
| Component within Ethiopia National Plan of Action | Growth and Transformation Plan II (GTP II) 2016-2020 (currently under formulation) key priority direction to ensure that the Ethiopian population benefits from improved water supply service levels and support implementation of urban waste water disposal and urban sanitation systems. ²² |

Situation of children

About half of Ethiopia's 96.5 million people are children under the age of 18.²³ The quality of life of these children has improved recently as Ethiopia has experienced positive economic growth due in part to its national development plan and the Growth and Transformation Plan, 2010-2014/2015.²⁴ Children have benefited from improved water and sanitation in the country, as the Water Supply Millennium Development Goal 7c, target 10, was achieved in Ethiopia in March 2015. With 57% of the Ethiopian population now using potable water, Ethiopia also recorded the highest level of reduction in open defecation in the world (WHO/UNICEF Joint Monitoring Report 2015).²⁵ However, children in Ethiopia are now moving from rural to urban areas. The rapid urbanization rate (6 per cent a year) in Ethiopia's large cities presents challenges in ensuring quality water and sanitation services in urban areas.



| Basic Indicators | to the top |
|--|------------|
| Under-5 mortality rank | 40 |
| Under-5 mortality rate (U5MR), 1990 | 204 |
| Under-5 mortality rate (U5MR), 2012 | 68 |
| U5MR by sex 2012, male | 74 |
| U5MR by sex 2012, female | 62 |
| Infant mortality rate (under 1), 1990 | 121 |
| Infant mortality rate (under 1), 2012 | 47 |
| Neonatal mortality rate 2012 | 29 |
| Total population (thousands), 2012 | 9,1728.8 |
| Annual no. of births (thousands), 2012 | 3,084.2 |
| Annual no. of under-5 deaths (thousands), 2012 | 205 |
| GNI per capita (US\$), 2012 | 410 |
| Life expectancy at birth (years), 2012 | 63 |
| Total adult literacy rate (%) 2009-2012 | 39 |
| Primary school net enrolment ratio (%) 2008-2011 | 87.4 |

SOURCES: UNICEF. Algerian MICS4, Mortalité/Mortalité 2015, Algerian National office of statistics, Demographie Algerienne 2014, Algerian National office of statistics



The Brazilian delegation visits a rural community in Ethiopia during a scoping mission in January 2015.

© UNICEF/Ethiopia

SISAR
Integrated Rural Sanitation System (SISAR): Formed in May 2013, the SISAR benefits small communities and aims to ensure long-term development and maintenance of the systems implemented by CAGECE in a self-sustaining manner. Non-profit NGOs formed by community associations represent the beneficiary populations, with the participation and guidance of CAGECE. Among the duties of the NGOs are the provision of technical assistance, control of water quality, calculation of tariffs, issuing of accounts and transfer of information to CAGECE. One of the benefits is the amount of the bills paid, which are well below the normal amount charged for water bills, due to the community's apportioning of expenses.

QUICK FACTS



Brazilian and Ethiopian technical experts survey the area where the pilot condominium sewage system will be built in Wukro town

© UNICEF Ethiopia/2015
Brazilian and Ethiopian technical experts review the site for the condominium sewage system

Objective of cooperation

Growing demand for urban water, sanitation and hygiene (WASH) services has signalled a rise in costs for communities and a need to promote inclusive growth and access to quality services. To meet these challenges, the Government of Ethiopia, in partnership with UNICEF and the United Kingdom's Department for International Development (DFID), developed the One WASH National Programme.

Ethiopia chose Brazil as a partner due to its similar experiences in dealing with rapid urbanization and the growth of WASH services in urban areas. The cooperation focuses on Brazil's experience in providing water, sanitation and hygiene in urban areas²⁶, with a specific focus on the Brazilian State of Ceará. The Brazilian and Ethiopian semi-arid regions share many similar characteristics such as climate conditions, scarce water provision, intermittent water supply services and other specificities related to water and waste management. They also share an interest in the adoption of sustainable low-cost solutions for small rural and urban communities especially with regards to the **Integrated Rural Sanitation System (SISAR)**. The cooperation is setting up a pilot project in Wukro which will benefit federal, regional and municipal Ethiopian WASH institutions and will directly impact 859 families residing in condominiums.

Cooperation activities

In addition to numerous virtual exchanges, including a series of video conferences, three missions have taken place to date. In September 2014, a high-level mission of the Ethiopian Government, consisting of the Health Minister, the Minister of Water, Irrigation and Energy, a Member of Parliament, and other high-level government officials and members of national and regional institutions, travelled to Brazil. The delegation took part in an international seminar with various Brazilian ministries, to discuss and identify the most relevant public policies and programmes to the cooperation. This first mission also included technical field visits in the Brazilian Semi-Arid, where the Ethiopian delegates identified key systems used to implement affordable water and sewage systems which take into account the economic and social situations of different population groups.

One WASH National Programme

Launched by the Government of Ethiopia with the objective of modernizing the access to clean water, the One WASH National Programme (OWNP) also focuses on improving health and education indicators for children. An inter-ministerial programme, it provides infrastructure and technical assistance to both rural and urban populations throughout Ethiopia, with an innovative approach. The programme is aimed at providing 250,000 Ethiopians in urban areas with improved water supply and sanitation and hygiene services by 2018. Results for children can be seen in the effects that improved WASH services have in decreasing drop-out rates in schools.

For more information, please visit <http://uni.cf/1QdbzdQ>

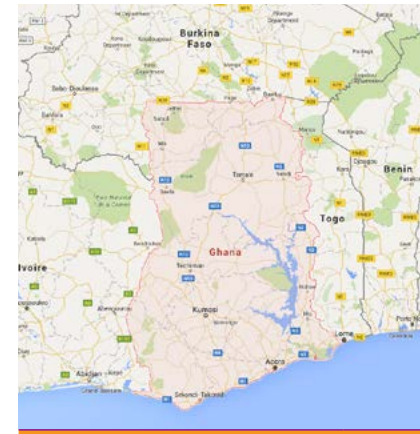
During the second phase of cooperation, a nine-person Brazilian delegation travelled to Ethiopia in January 2015 to support the capacity development of key governmental players in the WASH sector. They visited four regions of Ethiopia – Oromia, Amhara, Tigray and Afar – to survey the technical aspects of water regulation systems, condominium sewage projects and water resource management.²⁷

In October 2015, two technical experts from the Brazilian Water and Sewage Company of the State of Ceará (CAGECE) travelled to Ethiopia's Tigray region. The experts supported the elaboration and executive project **design of a pilot condominium sewage system** in Wukro and performed a technical review of existing plans and policies. At the end of the mission the Brazilians presented the project to high-level members of the Ethiopian Ministry of Water, Irrigation and Energy, in preparation for the building of the system.

Progress to date

The cooperation was formalized with a signed two-year (2015-2017) project document to strengthen WASH conditions in Ethiopia. The first steps have already begun to yield results. The technology transfer from Brazil to Ethiopia was floated as tender to a construction company in January 2016 and has now been awarded and is under construction. Next steps will include capacity development session and virtual support to the technical and operational aspects of the pilot project, followed by the systematization of management and service provision guidelines.

| | |
|-------------|--|
| 2013 | SEPTEMBER: Formal request from Gvt. of Ethiopia received |
| 2014 | JANUARY: VC with government partners & UNICEF to establish cooperation priorities & next steps SEPTEMBER: Ethiopian ministerial study visit to Brazil |
| 2015 | JANUARY: Brazilian technical & governmental scoping mission to Ethiopia OCTOBER: Brazilian technical mission to Ethiopia to design urban sanitation project & VC with government partners on follow-up actions Project document developed and ready to sign Elaboration of sewage system technical design, budget and management model by CAGECE Opening of tender of building of sewage system MARCH: Sanitation and Water for All Ministers' Meeting OCTOBER: Mission to Ethiopia to develop and finalize the project and identify a management system for the pilot sewer network |
| 2016 | JULY: Monitoring mission to Ethiopia |



Basic Indicators to the top

| | |
|--|--------|
| Under-5 mortality rank, 2013 | 36 |
| Under-5 mortality rate (U5MR), 1990 | 128 |
| Under-5 mortality rate (U5MR), 2014 | 60 |
| U5MR by sex 2014, male | 78 |
| U5MR by sex 2014, female | 62 |
| Infant mortality rate (under 1), 1990 | 80 |
| Infant mortality rate (under 1), 2014 | 41 |
| Neonatal mortality rate, 2014 | 29 |
| Total population (thousands), 2014 | 27,043 |
| Annual no. of births (thousands), 2015 | 884 |
| Annual no. of under-5 deaths (thousands), 2012 | 56 |
| GNI per capita (US\$), 2014 | 1,590 |
| Life expectancy at birth (years), 2014 | 61 |
| Total adult literacy rate (%) 2008-2012 | 71.5 |
| Primary school net enrolment ratio (%), 2014 | 89 |

SOURCES: UNICEF. Algerian MICS4, Mortalité/Mortalité 2015, Algerian National office of statistics, Demographie Algerienne 2014, Algerian National office of statistics

GHANA

| | |
|--|---|
| Partners in Brazil | Brazilian Cooperation Agency (ABC) Ministry of Social Development and Fight against Hunger (MDS) |
| Partners in Ghana | Ministry of Gender, Children and Social Protection |
| Objective of Cooperation | Strengthen, redesign and achieve governmental approval of social protection policy, and expand coverage of Livelihood Empowerment Against Poverty (LEAP) programme to the most vulnerable populations |
| Component within Ghana National Plan of Action | Ghana Shared Growth and Development Agenda II, 2014-2017 key policy objectives to develop a comprehensive social development policy framework; improve the targeting mechanism of social protection interventions; enhance funding and cost-effectiveness in social protection delivery; and ensure availability of timely, reliable and disaggregated data for policy-making and planning. ²⁸ |

Situation of children

Ghana has almost halved its monetary poverty rate from 51.7 per cent in 1992 to 28.5 per cent in 2006. In 2011, the country had one of the fastest growing GDPs in the world. In 2010 it reached lower-middle income country status. This progress has brought about improved conditions for children, such as increased school enrolment, closing of the gender gap at the basic education level, and a decline in child mortality.²⁹ However, challenges still remain as a third of the 11 million children in Ghana still live in poverty. Inequality has increased between the poor regions of the north and the more prosperous south.³⁰ These disparities by location and population group greatly affect children born in the three northern regions of the country, where approximately 50 to 71 per cent of the population live in poverty without adequate coverage of basic services.³¹

Objective of cooperation

In 2008, the Government of Ghana launched the **Livelihood Empowerment Against Poverty (LEAP)** programme to provide its people with a sustainable social protection mechanism. Inspired by Brazil's *Bolsa Família*, LEAP is a cash transfer programme aimed at the most vulnerable and excluded groups and those living in extreme poverty. Its impacts can be seen in the areas of education, health, basic food needs, production and local economy. Some results include a 10 per cent decrease in grade repetition and a 34 per cent increase in children (aged 0-5) enrolled in the National Health Insurance Scheme.³² The LEAP programme grew rapidly each year so the Government sought Brazilian cooperation to understand

²² MoWIE, Draft GTP II (Amharic version), December 2014
²³ UNICEF Data, Country Statistics, Ethiopia, <<http://data.unicef.org/countries/ETH.html>>.
²⁴ UNICEF Ethiopia Country Programme Document, 2012-2015, <<http://uni.cf/1PsUVcP>>.
²⁵ Ibid.
²⁶ In Brazil, basic sanitation, governed by Law LAW No. 11,445, JANUARY 5, 2007, encompasses water supply, sewerage system, urban cleaning and solid waste management, drainage and management of rainwater adequate to public health and to the security of life and public and private property. In Ethiopia, and thus in the context of this project document, urban sanitation refers to the aspect of the sewerage system only.
²⁷ International Reference Centre for Community Water Supply, The Start of a Shared Learning Journey: a South-South water and sanitation services partnership between Brazil and Ethiopia, <http://bit.ly/1mxUHH3>

how to achieve political commitments for the sustainable expansion of LEAP, and to ensure that it reaches all vulnerable families in Ghana. By adequately expanding the programme, the Ghanaian Government sought to address the aforementioned regional and group disparities that affect children throughout the country. Specifically, the cooperation request aims to support processes to improve the programme's coverage, boost results and improve the quality of life of the Ghanaian population, through ensuring government commitment to social protection implementation. It hopes to achieve these goals via: increase access to health services; increase the number of children enrolled in school, as well as the attendance rate and grade retention in primary and secondary education; improve household consumption and nutrition; and facilitate access to complementary services to increase the productive capacity of Ghana's most vulnerable citizens.

Cooperation activities

Brazil and Ghana have cooperated since 2007, when both countries were involved in the Brazil-Africa Cooperation Programme on Social Protection.³³ During this initial phase, experts from the Brazilian MDS visited Ghana to assist the design of the LEAP programme.

In 2014, the two countries renewed their cooperation to offer technical support for the expansion of LEAP, with a specific focus on children. UNICEF and ABC facilitated high-level ministerial exchanges with Ghana regarding the intersectoral approach to social protection programmes and the promotion of inclusive economic growth. These exchanges focussed on Brazil's experiences with *Bolsa Família*, its sustainability and its legal and political support. Initially, the Ghanaian Minister of State for Gender, Children and Social Protection and high-level representatives of the government travelled to Brazil in March 2014, to participate in the Ninth International Seminar on 'Social Policies for Development'. The visit focused on successful Brazilian social policies and included a field visit to a local social assistance centre.

Livelihood Empowerment Against Poverty (LEAP)

LEAP is Ghana's flagship programme of the National Social Protection Strategy, which enables the most vulnerable families living in extreme poverty to meet basic needs in health, education, nutrition and empowerment. The cash transfer programme is designed as a safety net to the poorest populations in Ghana, including 2.2 million people living in extreme poverty. Launched in 2008, it is based on the Brazilian *Bolsa Família* and now reaches over 143,552 households in all regions of the country. An additional 50,000 households are expected to be enrolled onto the programme by the end of 2016. LEAP has contributed to reduce school absenteeism by 8 per cent and has significantly increased enrolment in school for children aged 3-17. Girls already in school experienced an improvement in their attendance, whereas boys experienced an increase in secondary school enrolment.

Video link: <http://bit.ly/1QdbTcC>

QUICK FACTS



© Nyami Quayamye



© Ana Nascimento/MDS

Nana Oye Lithur, Minister of Gender, Social Protection and Children of Ghana, meets Brazilian Minister of Social Development and Fight Against Hunger, Tereza Campello at Intl Seminar

2007

Brazil-Ghana cooperation to support creation of LEAP

2014

Formal request from Gvt. of Ghana received

MARCH: Ghanaian ministerial mission to Brazil for MDS seminar

NOVEMBER: Visit to Ghana of former MDS Minister Mácia Lopes

Ghanaian Cabinet approves national policy on sustainable social protection

2015

The cooperation between the Brazilian Government and the Government of Ghana has contributed to the development and approval of the Ghana National Social Protection Policy, which was approved by the cabinet in 2015. Following this, the then minister of Social Development and Fight against Hunger, Márcia Lopes was invited to engage in high-level discussions on the importance of political commitment and structured frameworks for sustainable and functional social protection programmes.

Progress to date

Following the high-level mission to Brazil in March 2014, the Ghanaian Cabinet reviewed and approved a national policy on sustainable social protection in 2014. The policy established fundamental political commitment and dedicated funding. This step was a direct result of the lessons learned from the Brazilian experience, which demonstrated the need for solid political commitment in order to successfully deliver social programmes to effectively reach the most vulnerable children and families. Furthermore, LEAP coverage has expanded from 77,006 households in 2014 to 143,552 in 2015, representing an 86.4% increase.³⁴ Brazil responded to a request from the Ghanaian Parliament and pledged to continue its support to Ghana's implementation of innovative programmes and solutions for social protection and the eradication of extreme poverty and hunger.

²⁸ Government of Ghana, Ghana Shared Growth and Development Agenda (GSGDA) II, 2014-2017, <http://bit.ly/1TY5w2J>

²⁹ UNICEF Ghana, A Situation Analysis of Ghanaian Children and Women, 2011.

³⁰ UNICEF, Estimating the Impact on Poverty of Ghana's Fuel Subsidy Reform and a Mitigating Response, <http://uni.cf/1o8sJ5X>, 2014.

³¹ UNICEF Ghana Country Programme Document, 2012-2016, <http://uni.cf/1RxVlkT>

³² Building a Better Future for the Extreme Poor in Ghana. The Case of the Livelihood Empowerment Against Poverty (LEAP) Programme, International Seminar Ghana-Brazil, <http://bit.ly/1TY8TXv>, March 2014.

³³ The Brazil-Africa Cooperation Programme on Social Protection was financed by the United Kingdom's Department for International Development and supported by the International Policy Centre for Inclusive Growth-IPC-IG of the UNDP. The initiative was launched during a study tour organized by the MDS and the DFID that gathered delegations from African countries (Ghana, Mozambique, Guinea Bissau, South Africa, Nigeria and Zambia) in Brasilia to exchange experiences in Conditional Cash Transfer Programmes. In the case of Ghana, the initial study tour to Brazil was followed by another three technical missions of representatives from MDS to Ghana in support of the development and implementation of the LEAP programme.

³⁴ UNICEF Ghana, personal communication.

GUATEMALA

| | |
|---|---|
| Partners in Brazil | Brazilian Cooperation Agency (ABC) Ministry of Social Development and Fight Against Hunger (MDS) Ministry of Agricultural Development (MDA) |
| Partners in Guatemala | Ministry of Social Development (MIDES) Ministry of Agriculture, Livestock and Food (MAGA) |
| Objective of Cooperation | Strengthen and expand social protection programme (Mi Bono Seguro) to allow indigenous children and those living in rural areas to efficiently access social services |
| Component within Guatemalan National Plan of Action | K'atun National Development Plan: Our Guatemala 2032, priority to institutionalize and internalize the right to social protection. |

Situation of children

Children comprise approximately 6.88 million of an estimated population of 15.9 million.³⁵ Of these, 2.75 million are indigenous children who belong to one of the three main indigenous groups: Maya, Xinka and Garifuna. Children belonging to these groups are often considered the most vulnerable and excluded, since they have difficulty in accessing quality public services and work opportunities. Significantly, 79.2 per cent of indigenous populations live in poverty.³⁶

A number of key laws have been approved recently which protect children against violence, abuse and exploitation. They also strengthen the capacities of public agencies and civil society organizations that work with vulnerable populations. Nevertheless, 4.7 million children and adolescents were living in monetary poverty in 2014. In rural areas and among indigenous populations, this number increases exponentially (81.7 per cent and 84.9 per cent respectively, compared to 68.2 per cent of children nationally).³⁷



| Basic Indicators | to the top |
|--|------------|
| Under-5 mortality rank | 71 |
| Under-5 mortality rate (U5MR), 1990 | 80 |
| Under-5 mortality rate (U5MR), 2012 | 32 |
| U5MR by sex 2012, male | 35 |
| U5MR by sex 2012, female | 29 |
| Infant mortality rate (under 1), 1990 | 60 |
| Infant mortality rate (under 1), 2012 | 27 |
| Neonatal mortality rate 2012 | 15 |
| Total population (thousands) 2012 | 15,082.8 |
| Annual no. of birth rates (thousands), 2012 | 474.4 |
| Annual no. of under-5 deaths (thousands), 2012 | 15 |
| GNI per capita (US\$), 2012 | 3,120 |
| Life expectancy at birth (years), 2012 | 71.8 |
| Total adult literacy rate (%) 2008-2012* | 75.9 |
| Primary school net enrolment ratio (%), 2018-2011* | 98 |

SOURCES: UNICEF. Algerian MICS4, Mortalité/Mortalité 2015, Algerian National office of statistics, Demographie Algerienne 2014, Algerian National office of statistics



Guatemalan government officials learn about the Brazilian social protection system at a local CRAS in the Federal District.

MI BONO SEGURO

This conditional cash transfer programme aims to reduce rural poverty, focusing on easing conditions which can break the intergenerational poverty cycle. It works to ensure that all Guatemalans have equal access to social rights and services, especially the most vulnerable and excluded, such as rural and indigenous populations. The programme also facilitates access to healthcare and education for children and women. In 2014, the programme reached 737,247 families throughout four states. The coverage offered applies to children under 12 years of age and as resulted in approximately 1.4 million benefitted children.

For more information, please visit:
<http://bit.ly/1KgxFjE>

Source: Informe Cuatrimestral de los Programas Sociales, 2014 & 2015 - MIDES

QUICK FACTS

BRASIL SEM MISÉRIA (BSM)

Brazil Without Extreme Poverty: Launched in 2011, BSM lifted 22 million Brazilians out of extreme poverty between its launch and 2014. It is organized around three strategic axes: 1) Cash transfers, to provide immediate alleviation of extreme poverty; 2) access to public services, as to improve families' education, health and citizenship; and 3) urban and rural productive inclusion, to increase capacities and work opportunities, as well as income generation for the poorest families. BSM pays special attention to children, youth, women, afro-descendants, the indigenous populations, and other socially vulnerable groups, counting on an equity-based approach towards social development and protection where the most vulnerable and excluded populations are actively searched for, identified and included in the unified registry for social programmes by local government authorities.

For more information, visit:
<http://www.brasilsemiseria.gov.br>
or www.wwp.org.br

QUICK FACTS

Objective of cooperation

Guatemala is striving to implement a fully inclusive National Plan for Integrated Rural Development (PNDR) in order to reach its most vulnerable populations. The PNDR and the Ministry of Social Development (MIDES) will use social programmes such as **Mi Bono Seguro** to effectively implement policies that will generate opportunities and develop capacities within groups living in poverty, exclusion and vulnerability. The Government of Guatemala identified South-South Cooperation as a powerful tool to incorporate lessons learned from other countries regarding social protection programmes. In this context, Guatemala chose to follow Brazil's experience with social policies, specifically the development of the *Bolsa Família* programme. This administrative action would unify various conditional cash transfer programmes, each with their different conditionalities and under different ministries. MIDES thus approached the Brazilian Government, via UNICEF and ABC, to receive technical knowledge that would help the country meet its institutional goals, particularly the government's commitment to progressively ensure the fulfilment of social rights, especially for the most marginalized children.

Cooperation activities

In March 2014, the Brazilian Government received the Undersecretary of the Executive Coordination of the Plans of the Government of Guatemala, accompanied by the UNICEF Specialist in Adolescence and Youth in Guatemala. They participated in the Ninth International Seminar on 'Social Policies for Development', hosted by the Ministry of Social Development and Fight Against Hunger (MDS), and exchanged key information regarding Brazilian policies and programmes from the **Brazil Without Extreme Poverty plan**.³⁸

The second stage of the cooperation involved the participation of two high-level Brazilian officials of the MDS at a national seminar in Guatemala, organized by the Guatemalan Ministry of Social Development (MIDES), in July 2014. The participation focused on presenting the Brazilian approach to lifting millions of families out of extreme poverty, resulting in the capacity development of the Guatemalan participants.

A delegation of officials from the MIDES travelled to Brasília in March 2015 to gain a better understanding of the social policies at work in Brazil. Activities included meetings and workshops with key governmental staff currently implementing social protection programmes, and field visits to a

Reference Centre for Social Assistance (CRAS) and a Specialised Reference Centre for Social Assistance (CREAS).

Lastly, in June 2015, the Brazilian Secretary of Territorial Development of MDA, Mr. Humberto Oliveira, participated in a governmental seminar in Guatemala on agrarian development, to speak of Brazil's experiences in territorial rural development.

The Brazilian Single Registry³⁹ was identified as an initiative that can be adapted to the Guatemalan reality, which will enable the identification of families and children who are most in need of social programmes. Additionally, key data, methodologies and indicators were shared about the Single Registry, the *Bolsa Família* programme and the Brazil Without Extreme Poverty plan, to inform the strengthening and expansion of Guatemala's PNDRI and *Mi Bono Seguro* programme.

Progress to Date

Capacities at the ministerial level in Guatemala have been developed, specifically within the MIDES and MAGA, regarding the implementation of the PNDRI, with the guidance of similar Brazilian experiences. In addition, the *Mi Bono Seguro* conditional cash transfer programme has been redesigned to allow for a more transparent and simplified process. Specific elements of the Brazilian programmes that were incorporated into the redesign include the scheduling of cash transfers, measuring of responsibilities and simplified implementation and running of the programme. The Government of Guatemala is confident that by 2019, these programmes will help excluded children gain access to social inclusion and decentralized child protection programmes and mechanisms.

QUICK FACTS

CRAS & CREAS

The Reference Centres for Social Assistance (CRAS) and Specialised Reference Centres for Social Assistance (CREAS) are decentralized public state units, implemented at the municipal level. The CRAS serves as the main entry point into the Unified System of Social Assistance (SUAS) and is responsible for the organization and delivery of basic social protection services in areas of vulnerability and social risk, whilst promoting the organization and articulation of different social assistance units and the management of processes. The CREAS provides specialized and continuous services to families and individuals who are in situations of threat or violation of rights, including physical, psychological and sexual violence, human trafficking, compliance with socio-educational measures in an open environment, homelessness, abandon, child labor, and other types of rights violation caused by any type of discrimination.



Basic Indicators to the top

| | |
|--|---------|
| Under-5 mortality rank | 109 |
| Under-5 mortality rate (U5MR), 1990 | 30 |
| Under-5 mortality rate (U5MR), 2012 | 17 |
| U5MR by sex 2012, male | 19 |
| U5MR by sex 2012, female | 15 |
| Infant mortality rate (under 1), 1990 | 25 |
| Infant mortality rate (under 1), 2012 | 14 |
| Neonatal mortality rate 2012 | 11 |
| Total population (thousands), 2012 | 2,768.9 |
| Annual no. of births (thousands), 2012 | 50.3 |
| Annual no. of under-5 deaths (thousands), 2012 | 1 |
| GNI per capita (US\$), 2012 | 5,140 |
| Life expectancy at birth (years), 2012 | 73.3 |
| Total adult literacy rate (%) 2009-2012 | 87 |
| Primary school net enrolment ratio (%) 2008-2011 | 82.4 |

SOURCES: UNICEF, Algerian MICS4, Mortalité/Mortalité 2015, Algerian National office of statistics, Demographie Algerienne 2014, Algerian National office of statistics

| | |
|------------------|--|
| 2014 | Formal request from the Govt. of Guatemala |
| MARCH: | Guatemalan mission for MDS seminar in Brazil |
| JUNE: | VC with government partners and UNICEF, to discuss cooperation |
| JULY: | MDS mission to Guatemala to participate in national social protection seminar |
| FEBRUARY: | VC with government partners, and UNICEF Embassy of Guatemala to plan the next steps |
| 2015 | MARCH: Study visit to Brazil |
| JUNE: | Secretary of Territorial Development of Brazil to Guatemala for agricultural development seminar |
| 2016 | Completion of the project document and planning of activities |

³⁵ Instituto Nacional de Estadísticas, 2013

³⁶ UNICEF, Guatemala, Overview, Population, <http://uni.cf/20RefZK>

³⁷ National Survey of Living Conditions (ENCOVI), 2011

³⁸ For more information on the Brazil Without Extreme Poverty Plan, please visit: <http://www.brasilemmiseria.gov.br>

³⁹ For more information on the Single Registry, please visit: <http://www.mds.gov.br/bolsafamilia/cadastrounico>

JAMAICA

| | |
|--|--|
| Partners in Brazil | Brazilian Cooperation Agency (ABC) State Government of Rio de Janeiro Government of the Federal District State Government of Bahia Mayor's Office of Salvador Mayor's Office of Paulo Afonso <i>Hoje Meninha Amanhã Mulher</i> Project Municipal Social Welfare Secretariat Municipal Council on Children's Rights Municipal Council of Social Assistance and other Sector Councils Public Prosecutor's Office Juvenile Court Centre for Psychosocial Support Child Protection Councils Municipal Health Secretariat |
| Partners in Jamaica | Ministry of Youth and Culture Ministry of Labour and Social Security Ministry of Education Ministry of National Security Planning Institute of Jamaica (PIOJ) Jamaica Youth Advocacy Network Child Development Agency Office of the Children's Advocate Ministry of Local Government and Community Development Eve for Life Kingston Mayor's Office |
| Objective of Cooperation | Child Protection: Enhance technical knowhow of four central Jamaican Governmental stakeholders on the design, management and implementation of intersectoral policies focused on sexual abuse and exploitation in federal and subnational contexts. HIV/AIDS: Expand the knowledge of Jamaican policy makers and technical experts to design, develop and implement systems and interventions that meet the needs of children and adolescents. |
| Component within Jamaica National Plan of Action | Vision 2030 Jamaica National Development Plan, National Outcome #1 – A healthy and stable population and National Outcome #5 – Security and Safety. ⁴⁰ |

Situation of children

The small island developing state (SIDS) of Jamaica has a population of almost 1 million children, who represent approximately 33 per cent of the total population.⁴¹ In the past two decades, poverty has declined from 19.9 per cent in 1997 to 9.9 per cent in 2007.⁴² Levels of primary and secondary school access have remained high.⁴³ Jamaican children face a number of challenges related to HIV/AIDS. Adolescent boys and girls are the most at risk to become infected, due to the prevalence of multiple sexual partnerships and inconsistent condom use.⁴⁴ Additionally, according to UNICEF's 2012 Situation Analysis of Children in Jamaica, there has been a rise in the level of sexual abuse, although it is unclear whether this reflects an increase in cases or in reporting.

Objective of cooperation

The Jamaican Government expressed an interest in two main areas of Brazil's work with children and adolescents: HIV/AIDS prevention and sexual health, and the child protection system. They wanted to look at how both of these programmes had a strong focus on adolescent participation in decision-making processes. In the area of HIV/AIDS, they expressed interest in learning about the Brazilian experiences with prevention programmes and adolescent pregnancy and the transmission of sexual diseases, especially with high-risk groups such as sex workers and exploited groups. As for the child protection component, the cooperation seeks to respond to Jamaica's willingness to establish a comprehensive system to address issues of child and sexual abuse and exploitation. It is expected that this specific focus will serve as an entry point into the wider restructuring of Jamaica's child protection system, based on Brazilian experiences. The Brazilian child protection system, through its **Rights Guarantee System** is a renowned and highly intersectoral structure by which the country aims to provide a holistic and rights-based approach towards the protection of children and adolescents. Jamaica's **Vision 2030** the national development plan, provides the national development priority framework for the Brazil-Jamaica-UNICEF TSSC. It highlights the goals Jamaica hopes to achieve in the areas of health, education, social welfare, economics and technology, among other areas.

BRAZILIAN RIGHTS GUARANTEE SYSTEM

The picture portrays the Child Protection System in Brazil, bringing together a diversity of entities, agencies, programs and services for the care of children, adolescents and their families. These represent 'gears', emphasizing the need for all to act in coordination with each other. Only through joint effort, the System can achieve its purpose: the Child's full protection. The 'gears' are all the same size, as all are equally important to the System, and there is no hierarchy among them. The list of agencies and entities are merely an example of programs and services, to the extent that others can (and should) be integrated to the System.

The only exception to this random arrangement is the Municipal Council on Children Rights, purposely placed in the centre of the 'machine', given its role to resolve – at the municipal level – on child & adolescent rights policies and to coordinate all other bodies and agencies of the System.

QUICK FACTS

Vision 2030

Jamaica's first long-term National Development Plan, aiming to situate the country as one of the world's developed countries by the year 2030. The plan centres on the following overall vision: "Jamaica, the place of choice to live, work, raise families, and do business". There are four pillars to the plan: 1. Jamaicans are empowered to achieve their fullest potential; 2. The Jamaica society is secure, cohesive and just; 3. Jamaica's economy is prosperous; and 4. Jamaica has a healthy natural environment. For more information on Vision 2030, please visit <http://www.vision2030.gov.jm/>

QUICK FACTS

Cooperation activities

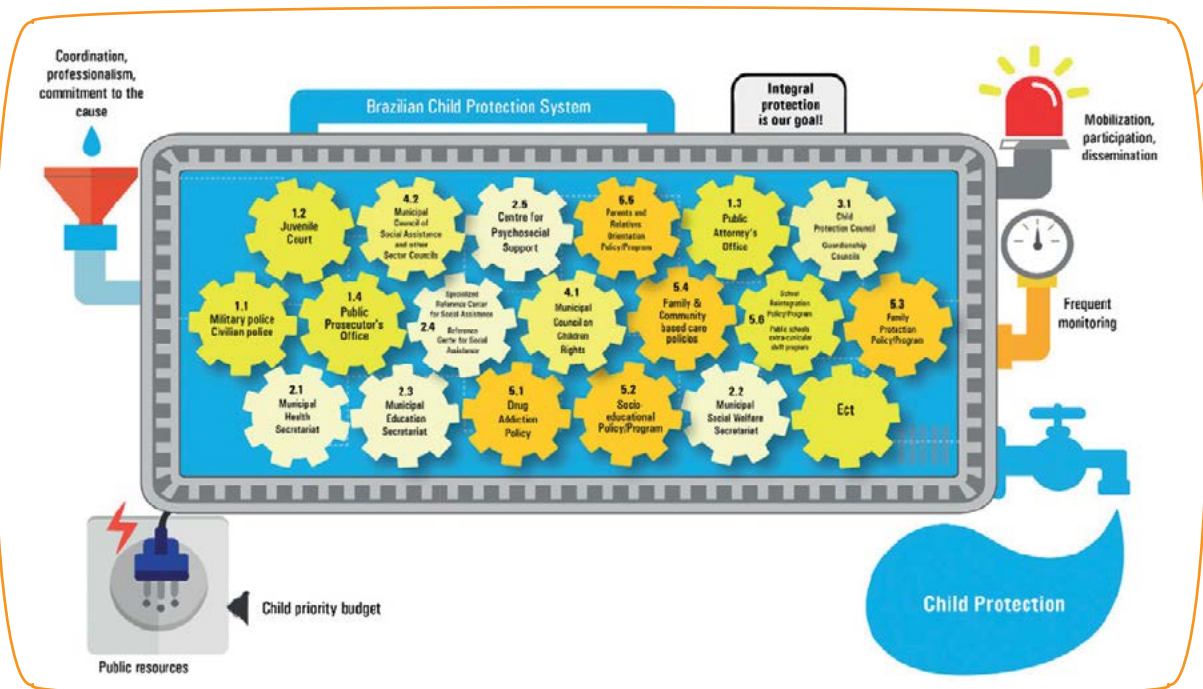
A series of activities began in 2014 to take on the two-pronged approach to this cooperation. The activities continued to 2016 when a formal cooperation project was formulated. In May 2014, UNICEF facilitated a prospective mission to Jamaica by representatives of the Brazilian Government from the State of Bahia and ABC. The goal of the mission was to identify and present to the Government of Jamaica the areas in which Brazilian good practices could be shared, especially to support the implementation of Vision 2030.

Following this first mission the mayor of Kingston, Angela Brown-Burke, visited the Brazilian city of Salvador where she participated in activities related to social protection of children and adolescents.

Lastly, a Jamaican technical delegation from government agencies travelled to Brazil during the last week of May 2014 to learn about policies and programmes regarding adolescent health and social protection. Currently, a formal cooperation project is being developed around the specific area of child sexual abuse and exploitation, with planned activities for 2016.

Progress to date

Participants in the cooperation have studied and identified innovative practices for child protection issues that can be implemented in Jamaica. They focussed on practices related to violence reduction, and community policing. They also studied the Brazilian Municipal Seal methodology, which determines which municipalities are friendly to children and adolescents. Child protection systems in Jamaica have been strengthened to standardize juvenile correctional services and to offer ongoing sports for development and life skills for the adolescents in their care. These exchanges have helped build strong commitment within the Jamaican Government around sensitive issues regarding child protection, and have strengthened intersectoral collaboration within the government and with civil society.



Drawn by Murillo J. Digiácomo



© Susan Markisz

Jamaica has undertaken initial policy changes in the area of HIV/AIDS and sexual health, including a formal partnership between a non-governmental organization (NGO) and the Ministry of Health. This partnership is part of the newly revised standards for adolescent healthcare in public health facilities, which will mobilize adolescents to use and provide feedback on services. The exchanges with Brazil also strengthened the capabilities of the NGO **Eve for Life** from a strict focus on HIV prevention and treatment support to a broader raft of healthcare services aimed at linking adolescents to the promotion of healthy lifestyle practices. Lastly, Jamaican adolescent girls and the Jamaican Ambassador to Brazil participated in the International Seminar on Girls' Empowerment, held in Brasilia. This included follow-up actions to develop an advocacy programme to improve access to sexual health services and involve women as advocates for girls' empowerment.

EVE FOR LIFE

Eve for Life is a Jamaican non-governmental organization that supports women and children living with or affected by HIV/AIDS. It offers psychosocial support and innovative interventions to improve the quality of life of these women and children and prevent future infections. Other services offered include parenting interventions, counseling, social support, training and capacity building, education and community sensitization. To learn more about Eve for Life, please visit www.eveforlife.org.

QUICK FACTS

2014

- Formal request from Govt. of Jamaica received
- EARLY MAY:** Scoping mission to Jamaica by ABC & State of Bahia
- MID-MAY:** Visit to Salvador of Mayor of Kingston to sign MoU between cities
- LATE MAY:** Joint technical study mission to Brazil with Belize
- JULY:** Belize-Jamaica spin-off cooperation for HIV prevention strategy

2015

- JUNE:** VC with government partners & UNICEF to plan TSSC cooperation
- Strengthened child protection systems and HIV/AIDS partnerships
- Finalising project document and activities on child protection

⁴⁰ Vision 2030 Jamaica National Development Plan, <http://bit.ly/1Lmcszq>
⁴¹ Economic and Social Survey Jamaica (ESSJ) 2007-2009, Planning Institute of Jamaica (PIOJ).
⁴² UNICEF Jamaica Country Programme Document, 2012-2016, <http://uni.cf/20ReCDJ>
⁴³ Ministry of Education Report for 2009.
⁴⁴ UNICEF Jamaica Country Programme Document, 2012-2016, <http://uni.cf/20ReCDJ>
 Vision 2030 Jamaica National Development Plan, <http://bit.ly/1Lmcszq>



Basic Indicators to the top

| | |
|--|---------|
| Under-5 mortality rank | 16 |
| Under-5 mortality rate (U5MR), 1990 | 85 |
| Under-5 mortality rate (U5MR), 2012 | 100 |
| U5MR by sex 2012, male | 107 |
| U5MR by sex 2012, female | 92 |
| Infant mortality rate (under 1), 1990 | 68 |
| Infant mortality rate (under 1), 2012 | 74 |
| Neonatal mortality rate 2012 | 45 |
| Total population (thousands), 2012 | 2,051.5 |
| Annual no. of births (thousands), 2012 | 56.8 |
| Annual no. of under-5 deaths (thousands), 2012 | 6 |
| GNI per capita (US\$), 2012 | 1,380 |
| Life expectancy at birth (years), 2012 | 48.9 |
| Total adult literacy rate (%) 2009-2012 | 75.8 |
| Primary school net enrolment ratio (%) 2008-2011 | 75 |

SOURCES: UNICEF. Algerian MICS4, Mortalité/Mortalité 2015, Algerian National office of statistics, Demographie Algerienne 2014, Algerian National office of statistics



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LESOTHO

| | |
|--|--|
| Partners in Brazil | Brazilian Cooperation Agency (ABC) State Government of São Paulo Ministry of Social Development and Fight Against Hunger (MDS) |
| Partners in Lesotho | Ministry of Social Development |
| Objective of Cooperation | Support the Government of Lesotho to ensure political commitment to strengthen and expand social protection systems to achieve a more rapid decline in poverty at an affordable cost. |
| Component within Lesotho National Plan of Action | Lesotho National Strategic Development Plan 2012/13-2016/17 strategic objective to consolidate and improve efficiency of social protection systems and enhance coverage of selected interventions. ⁴⁵ |

Situation of children

Lesotho is a landlocked country with a population of approximately 2 million. In recent years, it has strengthened its education system and worked towards achieving gender equality and women's empowerment, in line with the Millennium Development Goals (MDGs).⁴⁶ The country's 906,000 children face a high rate of poverty.⁴⁷ A total of 56.6 per cent of the population lives below the poverty line. In rural areas poverty rates are 50 per cent higher than in urban areas.⁴⁸

Objective of cooperation

Brazil, Lesotho and UNICEF began cooperating in 2011. Senior officials of the Government of Lesotho and UNICEF Lesotho staff members visited Brazil to study the design and implementation of social transfers and central registries. Following this visit, Lesotho implemented a number of programmes and pilots, such as the National Information System for Social Assistance, based on Brazilian experiences. Currently, Lesotho spends approximately 9 per cent of its GDP on social transfers, well above the average spent by most developing countries. However, only 7 per cent of these resources reach the poor, due to coverage overlaps and gaps.⁴⁹

In 2015, Lesotho requested a second stage of cooperation to train new governmental decision-makers on social protection. This stage should harness the necessary political will and technical understanding required to ensure continued governmental support for social protection programmes.

Cooperation activities

In October 2015, five delegates travelled from Lesotho to Brazil. They were headed by the Minister of Social Development of Lesotho, with representatives from the same Ministry and the Parliament of Lesotho. The delegation travelled to Brazil with the aim of implementing and expanding the newly formulated National Social Protection Strategy (NSPS). They focussed on Brazil's most successful and internationally renowned programmes, such as *Bolsa Família* and Brazil Without Extreme Poverty. Specifically, the delegation expressed interest in learning about how Brazil handles leadership, coordination and ownership of its social programmes at both Federal and State levels, among the various ministries and subnational secretaries. During the week long visit, the delegation attended a series of workshops and informative sessions in Brasília. They went on a field visit to a CRAS and held a ministerial meeting between **Minister Molahlehi Letlotlo and the Brazilian Minister for Social Development and Fight Against Hunger, Tereza Campello**. They concluded the visit in São Paulo, where the delegation participated in a round-table meeting with the São Paulo Deputy State Secretary for Social Protection, Felipe Sigollo, and technical state officials from the Secretaries of Education, Health and Social Assistance.



Brazilian Minister of Social Development and Fight against Hunger, Tereza Campello, meets the Minister of Social Development of Lesotho, Molahlehi Letlotlo in Brasília

Ana Nascimento/UNICEF
Ministers Tereza Campello and Molahlehi Letlotlo meet in Brazil

Progress to date

Lesotho has already achieved significant governmental investment in its social programmes, which were implemented following the initial visit to Brazil in 2011. Minister Molahlehi Letlotlo committed to advance the social protection agenda in Lesotho. He was satisfied with the learning outcomes of the 2015 mission, which effectively demonstrated the numerous advancements that Brazil has made in the area of social protection.

Additional steps are currently underway within Lesotho to revise and update the draft coordination framework for social protection to establish more coordinated and efficient programmes.



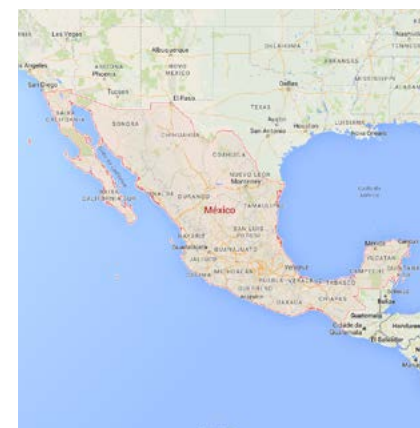
⁴⁵ Government of Lesotho, National Strategic Development Plan 2012/13–2016/17, 2012, <http://bit.ly/1KM8q8x>

⁴⁶ UNICEF Lesotho Country Programme Document 2013-2017, <http://uni.cf/1LiNO0s>, page 4.

⁴⁷ UNICEF Data, Country Statistics, Lesotho, <http://data.unicef.org/countries/LSO.html>

⁴⁸ UNICEF Lesotho Country Programme Document 2013-2017, <http://uni.cf/1LiNO0s>, page 2.

⁴⁹ Brazil-UNICEF-Lesotho Trilateral South-South Cooperation Request Form



Basic Indicators to the top

| | |
|--|-----------|
| Under-5 mortality rank | 112 |
| Under-5 mortality rate (U5MR), 1990 | 46 |
| Under-5 mortality rate (U5MR), 2012 | 16 |
| U5MR by sex 2012, male | 18 |
| U5MR by sex 2012, female | 15 |
| Infant mortality rate (under 1), 1990 | 37 |
| Infant mortality rate (under 1), 2012 | 14 |
| Neonatal mortality rate 2012 | 7 |
| Total population (thousands), 2012 | 12,0847.5 |
| Annual no. of births (thousands), 2012 | 2,269 |
| Annual no. of under-5 deaths (thousands), 2012 | 37 |
| GNI per capita (US\$), 2012 | 9,740 |
| Life expectancy at birth (years), 2012 | 77.3 |
| Total adult literacy rate (%) 2009-2012 | 93.5 |
| Primary school net enrolment ratio (%) 2008-2011 | 99.5 |

SOURCES: UNICEF, Algerian MICS4, Mortalité/Mortalité 2015, Algerian National office of statistics, Demographie Algerienne 2014, Algerian National office of statistics

MEXICO

| | |
|---|--|
| Partners in Brazil | Ministry of Education State Government of São Paulo São Paulo Mayor's Office |
| Partners in Mexico | Ministry of Health Ministry of Education National Commission for Social Protection in Health National Council for the Development of Education (CONAFE) Secretariat of Public Education National System for the Full Development of the Family (SNDIF) Government of Yucatán |
| Objective of Cooperation | Support the Mexican Government to strengthen capacities for intersectoral coordination for early childhood care and education for children aged 0 to 5 years. |
| Component within Mexico National Plan of Action | National Development Plan 2013-2018, Objective 3.1 – Develop the human potential of Mexicans with quality education, and Objective 3.2 – Guarantee inclusion and equity in the Educational System. ⁵⁰ |

Situation of children

Mexico is the world's eleventh-most populated country and twelfth-largest economy. It is well placed to implement a number of advances for children in health, education and social protection.⁵¹ Mexico's reforms in mandatory schooling, the closing of gaps in education and improvements in teaching have been widely recognized.⁵² Approximately 4.7 million of Mexico's 42 million children, however, live in extreme poverty. This presents a number of challenges in education. Children are still facing challenges in receiving education⁵³ due to low enrolment rates, particularly among indigenous and migrant children, with minimal resources assigned to education and disparities in the quality of education.⁵⁴

Objective of cooperation

Mexico's National Development Plan 2013-2018 also contains the Agenda for Children and Adolescents 2014-2018⁵⁵, which is based on the recommendation of the United Nations Committee for the Rights of the Child.⁵⁶ The Agenda aims to create a system of rights for children and adolescents founded on a general law that ensures the respect and maintenance of such rights. It sets out a number of goals in specific areas such as

early childhood development (ECD) and social inclusion

In Brazil, education is a key foundational aspect of the overall development framework, as evidenced in the National

Education Plan (2014-2024).⁵⁷ The Plan is enforced by the Brazilian Constitution, which guarantees its presence and implementation throughout government changes.

The Mexican Government sent a request, via UNICEF, for technical cooperation with Brazil. Mexico wanted to focus on ECD and education primarily for children from birth to five years of age. They also expressed an interest in learning about the Rights Assurance System for Children and Adolescents in Brazil⁵⁸, which involves a large number of actors and sectors working together with a common agenda for children.

Cooperation activities

A schedule of activities including meetings and technical field visits was organized to take place in São Paulo in November 2014. Representatives from the Secretariat of Public Education, the Government of Yucatán, the National System for the Full Development of the Family (SNDIF), the National Council for the Development of Education (CONAFE) and the National Commission for Social Protection in Health were included. These activities focused on how the actions of various sectors of the Brazilian Government converge in the Rights Assurance System, as provided for in the Brazilian **Statute of the Child and Adolescent (ECA)**. In addition, the Mexican representatives also learned how the long-term goals of the National Education Plan for infant education were established. They visited a local example of the day care system. The mission also aimed to share experiences about overcoming challenges in public education funding, teacher training and qualification, national education curriculum, and intersectoral coordination to develop, implement and monitor federal, state and municipal policies and programmes.

BRASIL CARINHOSO

The key strategy of the Brazil Without Poverty Plan focused on children's well-being, based on a perspective of integrated care, covering aspects of child development related to income, education and health. *Brasil Carinhoso* was launched to focus specifically on the BF beneficiaries aged 6 years or less. This focus on early childhood development includes a holistic approach encompassing income, education and health. The strategy aimed to close the gap of extreme poverty, by supplementing families' income in order to ensure that all family members are able to overcome extreme poverty. As a result, the Ministry of Health provided over 9 million children with supplementary vitamins between 2012-2014, and the NutriSUS was created to prevent vitamin and mineral deficiencies in children, by distributing nutritional sachets to daycare centres.

QUICK FACTS

STATUTE OF THE CHILD AND ADOLESCENT (ECA)

Based on the UN Convention on the rights of the child, and following the National Constitution of 1988, Brazil's Statute of Children and Adolescents (*Estatuto da Criança e do Adolescente*) was passed into law in 1990, which in turn redefined the responsibilities of the State and civil society, requiring the creation of participatory councils at the federal, state and local levels, including Children's Rights Councils (*Conselhos de Direitos*) and Guardianship Councils (*Conselhos Tutelares*) in all of the country's over 5500 municipalities, with the overall aim to ensure a human rights-based integral protection of children and adolescents throughout the Brazilian territory.

QUICK FACTS

Progress to date

The policies and programmes that were included in the mission were recognized as valuable and applicable to Mexican local conditions. In particular, the governance of the education system and actions for early childhood function, intersectoral collaboration and teaching methods were all recognized as feasible models to be adapted and implemented in Mexico. Following the mission to Brazil, the State of Yucatán, one of the Mexican states that has demonstrated a strong commitment for the welfare of children, committed to form an intersectoral council to promote an interinstitutional ECD agenda. The Early Childhood Development Medium Term Plan for the State of Yucatán has thus been designed to include established goals on the different areas needed to develop an integrated approach to ECD.



Andy Richter

2014

Formal request from Gvt. of Mexico received

NOVEMBER: Mexican government representatives' study mission to Brazil

State of Yucatán formed intersectoral council to promote ECD agenda

State of Yucatán ECD Mid-Term plan includes goals for integrated approach to ECD

2015

⁵⁰ National Development Plan 2013-2018, Government of the Republic of Mexico

⁵¹ UNICEF Mexico Country Programme Document, 2014-2018, <http://uni.cf/1muhbZF>

⁵² The Rights of Children and Adolescents in Mexico: A Present Day Agenda, <http://uni.cf/20Nt8MH>

⁵³ UNICEF Mexico Country Programme Document, 2014-2018, <http://uni.cf/1muhbZF>

⁵⁴ The Rights of Children and Adolescents in Mexico: A Present Day Agenda, <http://uni.cf/20Nt8MH>

⁵⁵ Ibid

⁵⁶ For more information, please visit <http://bit.ly/20qeMFY>

⁵⁷ For more information, please visit <http://pne.mec.gov.br>

⁵⁸ For more information, please visit <http://bit.ly/104n9GW>

TUNISIA

| | |
|--|---|
| Partners in Brazil | Brazilian Cooperation Agency (ABC) Ministry of Social Development and Fight against Hunger (MDS) Institute of Applied Economic Research (IPEA) |
| Partners in Tunisia | Ministry of Social Affairs Centre for Research and Social Studies (CRES) |
| Objective of Cooperation | Support the Tunisian Government to carry out its social protection reforms to include the most vulnerable populations, and to develop institutional capacities in social policies and in favour of children in need of social assistance. |
| Component within Tunisia National Plan of Action | Include contributions for social protection reform, to be included within Tunisian National Social and Economic Development Plan 2016-2020. ⁵⁹ |

Situation of children

Children comprise 3 million of Tunisia's total population of 11 million. Tunisia has, notably, included an article on children's rights in its Constitution. Positive child indicators include free and universal access to education, gender equality in schools and declining infant and child mortality.⁶⁰ Regional disparities due to location and socio-economic levels remain a challenge in Tunisia, which lead to especially vulnerable populations, including children.⁶¹ The difficulty in accessing basic services has led to a number of challenges for these children. Children are facing higher infant mortality rates in rural areas; there are 25 deaths per 1,000 live births in rural areas compared to 12 per 1,000 live births in urban areas.⁶² Attendance in school is also low; 80 per cent of children aged 3 to 5 years in rural areas do not have access to school.⁶³

Objective of cooperation

Tunisia's new National Constitution, signed on 27 January 2014, followed a process of political transition and a series of reforms, which are still ongoing. Social protection programmes have emerged as a key solution to meet the differing demands of various population groups and to ensure universal access to public services. Tunisia's social transfer programme, the



| Basic Indicators | to the top |
|--|------------|
| Under-5 mortality rank | 112 |
| Under-5 mortality rate (U5MR), 1990 | 51 |
| Under-5 mortality rate (U5MR), 2012 | 16 |
| U5MR by sex 2012, male | 17 |
| U5MR by sex 2012, female | 15 |
| Infant mortality rate (under 1), 1990 | 40 |
| Infant mortality rate (under 1), 2012 | 14 |
| Neonatal mortality rate 2012 | 10 |
| Total population (thousands) 2012 | 10,874.9 |
| Annual no. of births (thousands) 2012 | 189.3 |
| Annual no. of under-5 deaths (thousands) 2012 | 3 |
| GNI per capita (US\$) 2012 | 4,150 |
| Life expectancy at birth (years) 2012 | 75.6 |
| Total adult literacy rate (%) 2008-2012* | 79.1 |
| Primary school net enrolment ratio (%) 2018-2011 | 99.4% |

SOURCES: UNICEF, Algerian MICS4, Mortalité/Mortalité 2015, Algerian National office of statistics, Demographie Algerienne 2014, Algerian National office of statistics

NATIONAL ASSISTANCE PROGRAMME FOR VULNERABLE FAMILIES (PNAFN)

Tunisia's social transfer programme, the National Assistance Programme for Vulnerable Families (PNAFN), is the largest of its kind in terms of population and area coverage. Targeted towards vulnerable families, it offers direct cash transfers of 75 euros (150 dinars) and free healthcare. The number of beneficiary families has increased by 100% since 2012 (from an initial 230,000 families). This growth has brought about demands for a strengthened programme, which can effectively cater to a larger population.

QUICK FACTS

National Assistance Programme for Vulnerable Families (PNAFN)

characterizes the country's social policies, for which the Government spent 15 per cent of its GDP in 2010 – equivalent to approximately 3,900 million euros, according to government data. However, challenges have arisen regarding programme funding, gaps in the social protection network and the development and implementation of a set of inclusive social policies. In this context, Tunisia requested cooperation with Brazil to strengthen its social safety net programmes that account for the rights of children, adolescents and women.

The Government of Tunisia identified Brazil's Active Search, Single Registry system and the methodology of the *Bolsa Família* programme as valuable areas of exchange. These could help Tunisia develop platforms to promote social and capacity development and social protection interventions that would reach the most vulnerable and excluded populations. In addition, focus was also placed on the work carried out by IPEA, which provides the link between research and evidence and policy development in Brazil.

The cooperation aims to assist Tunisia to develop its National Social and Economic Development Plan and contribute to the capacity building of the Ministry of Social Affairs and its contributing partners. This cooperation will help ensure coordinated and intersectoral actions between government agencies.

Cooperation activities

Cooperation has moved forward with targeted technical exchanges between Brazilian and Tunisian experts. In March 2014, an official from the Office of Planning and Evaluation of the Tunisian Ministry of Social Affairs participated in the MDS-led international seminar entitled 'Social Policies for Development'.



Following this introductory visit, the Brazilian Government sent a delegation to Tunisia, upon invitation by its Government. The delegation attended the National Conference on Social Protection, held in September 2014. During the conference, delegates discussed strategies for implementing policy and programme actions, in the context of social protection programmes for the eradication of poverty.

In June 2015, two officials from Brazil's Institute of Applied Economic Research (IPEA) and the MDS travelled to Tunis. They assisted the Centre for Research and Social Studies (CRES) and partners in the technical development of the planned social protection reform in Tunisia, which has a specific focus on children, adolescents and young persons.

Progress to date

The Tunisian Government has been equipped with in-depth technical knowledge on the elaboration of inclusive and rights-based social protection systems and has ensured that the most vulnerable populations are included in such programmes. The inputs will allow the country to build on its existing knowledge in order to support the ongoing reform of the current social protection system. The formal cooperation project being developed with the Government of Brazil and UNICEF aims to provide support and best practices to the preparation of Tunisia's next development plan, which will highlight the reduction of inequalities as a key theme.



⁵⁹ Trilateral South-South Cooperation to Support the Social Protection Reform in Tunisia, 2015, Draft Document

⁶⁰ UNICEF, Analyse de la Situation des Enfants en Tunisie 2012, <http://bit.ly/1Xp4U69>

⁶¹ UNICEF Tunisia 2015-2019 Country Programme Document, <http://uni.cf/1Pt7Rzq>

⁶² UNICEF Annual Report 2013 – Tunisia, <http://uni.cf/1045pv8>

⁶³ Ibid.



CONCLUDING REMARKS

Trilateral South-South Cooperation has now become internationally relevant due to its innovative potential to help the most vulnerable populations globally. Developing countries are now at the forefront of their own development initiatives and are in a unique position to both learn and share valuable experiences with countries in similar situations. The potential for change via South-South Cooperation is unique, as it tends to carry with it a high level of political advocacy and influence. As seen in the cases highlighted in this report, this level of governmental commitment brings about change at the highest spheres of influence and ensures that policies are translated into action for children.

The 10 countries featured in this report have seen advances in social protection, education, early childhood development, child protection, HIV/AIDS, nutrition, adolescent health and WASH throughout 2014 and 2015. Trilateral South-South Cooperation between Brazil and partner countries works to strengthen policies at the governmental level and is creating long-term change for children. This strategy has already yielded results at the policy level in various countries. Two examples are Ghana's expansion of the LEAP programme and Ethiopia's commitment to providing quality WASH services. These lasting contributions are a valuable contribution supported by UNICEF and help ensure that children benefit from the most effective, targeted and prioritized innovations.

Lessons learned

To continue working effectively for children via Trilateral South-South Cooperation, it is vital to understand what steps can be taken to improve South-South Cooperation initiatives. With this in mind, a comprehensive study was undertaken which mapped out existing cooperation between Brazil, UNICEF and partner countries. The study included interviews and perspectives from various stakeholders and counterparts.

The outcome of the lessons learned study placed TSSC as a key element for the effective scale-up of good solutions, as well as for leveraging resources from new development partners, in order to achieve development goals with equity and address children's and women's rights globally. The information gathered revealed that TSSC contributes to achieve increased political buy-in and mobilization of coalitions for

change to promote child rights, while improving national capacities to ensure availability of and access to services for boys, girls and women. UNICEF's legitimacy and close partnership with governments has ensured the continuity and progress of TSSC projects, although some challenges need to be addressed to ensure that these projects are followed through systematically. If TSSC partnerships are to succeed they need a common agenda between partner countries, political commitment and strategic engagement. The lessons learned study is a key document in understanding the strengths and weaknesses of South-South Cooperation, from the perspective of partners, government and UNICEF.

The future of Trilateral South-South Cooperation between the Government of Brazil, UNICEF and other countries

The Government of Brazil and UNICEF will continue to implement joint activities to promote the rights of children, adolescents and women. They will take into account the main challenges to global development and will respect the case-sensitive nature of each challenge. The Government of Brazil and UNICEF will adapt innovative solutions to meet local conditions in each country to ensure that children, adolescents and women are not neglected.

This report and the lessons learned study will help TSSC accommodate the identified recommendations and needs that are required to offer a more effective process towards achieving evidence-based results for children. Jointly with UNICEF Brazil's new five-year programme, commencing in 2017, the Trilateral South-South Cooperation will continue to evolve and guide government officials in the development of new strategies, projects and initiatives that engage governments at all levels. The strengthened partnerships within Brazil, both at national and subnational levels, have allowed the UNICEF Brazil to continue its work on federal and decentralized levels with the Government of Brazil. The office will continue the pursuits of eradicating poverty and promoting sustainable social and economic development and inclusive growth, especially for the most vulnerable children, adolescents and their families.



TRILATERAL
SOUTH-SOUTH
COOPERATION



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