# THE WORL SUMMIT FOR CHILDREN. 29-30 SEPT. 1990. UNITED NATIONS. NEW YORK. GOALS FOR CHILDREN AND DEVELOPMENT IN THE 1990s

# Basic principles

- \* In any scheme of development that puts human well-being at the center of development strategies, a high priority should be assigned to reaching the unreached and hard to reach.
- \* It means the last 15-20 % of the population that is concentrated in remote, inaccessible areas or in overcrowded urban shanty towns.
- \* Disparity reduction is a major strategic principle that is universally applicable and often more relevant and meaningful than reaching particular numerical targets.

Major goals for child have been defined according to three formost concerns: Child survival; Child development; and Child protection.

## I. Child Survival

\* (1) Between 1990 and the year 2000, reduction of the infant mortality rate (IMR) and the under-five mortality rate (U5MR) in all countries by one third, or to 50 and 70 per 1,000 live births respectively which ever is less. p.29

# \* Primary Health Care (PHC)

The goal of helth by the year 2000 was set more than 12 years ago. The Primary Health Care approach, adopted at the Alma-Ata conference in 1978, is widely recognized as the key to effective health programmes for children and mothers, and two major initiatives taken in the 1980s have strengthened prospects for success in the 1990s. The principal goal of the 1990, is to reduce mortality among young children and mothers. To achieve that, families need ready access to functioning PHC systems and personnel who are competent to handle most of their basic needs and refer more serious problems to people with higher qualifications.pp 47-52



- \* Universal child immunization (UCI). reduced death by 1.8 millions. WHO General Assembly and Unicef Executive board endorsed the following immunization goals.
  - Maintenance of a high level of inmunization coverage at least 90% of children under one year of age against diphteria, pertussis, tetanus, measles, poliomyelitis, tuberculosis, and against tetanus for women at childbearing age.
  - Global erradication of polio for the year 2000.
  - · Elimination of neonatal tetanus by 1995.
  - Reduction by 95% in measles dealth and reduction by 95% of measles cases in 1995 compared with preinmunization levels as a major step to the global erradication of measles in the longer run.p. 63

#### \* AIDS

A number of programmes have been initiated in nearly every country to prevent an treat HIV infections and AIDS. .......These programmes are endeavour to prevent the spread of HIV through education and ensuring safety of the blood supply: provides services for adults and childrens already affected; and research new vaccines and treatment drugs.

(Leading cause of death among women aged 15 to 45 in major cities in the Americas, Western Europe and Sub-Saharan Africa (Hundred of thousands of children are born with human immunodeficiency virus HIV- The Aids virus) In Central and East Africa by the year 2000 there will be between 3 and 5 millions AIDS. Orphans WHO estimates that 1.5 millions african women are infected with the HIV. In Central and East Africa 20% to 25% of urban pregnant women are affected. On rural areas the rates remain below 2%. Caribbean over 10% of all reported cases are occurring in children. In South East Asia 50% of the intravenous drug users have been infected with HIV in the past three years. Children born infected with HIV will die before the age of 5 (p. 95-100)

- \* (2) Maternal Mortality. Between 1990 an the year 2000, reduction of the maternal mortality rate (MMR) by one half.
- \* (3) Nutrition. Between 1990 an the year 2000, reduction of severe and moderate malnutrition among children under five years of age by one half.

# II. Child Development

- \* (4) Universal access to safe drinking water and to sanitary means of excreta disposal.
- \* (5) By the year 2000, universal access to basic education and achievement of primary education by at least 80 per cent of primary school-age children.
- \* (6) Reduction of the adult illiteracy rate (the appropriate age-group to be determined in each country) to at least one half of its 1990 level, with emphasis on female literacy.

#### III. Child Protection

\* (7) Improved protection of children in especially difficult circumstances.

# B. Supporting Sectoral Goals

#### Women's health and education

- \* (8) Special attention to the health and nutrition of female children and pregnant and lactating women.
- \* (9) Child spacing Acces by all couples to information and services to prevent pregnacies that are to early, too closely spaced, too late or too many.

(More than 42,000 women from Latin America, North Africa and Asia who were interviewed in a WHO Study, more than out of 9 out of 10 said that short birth intervals were harmful to child health. There is an evident relationship between child survival and child spacing (birth intervals). (pp. 89 - 93)

\* (10) Access by all pregnant women to pre-natal care, trained attendants during childbirth, and referral facilities for high-risk pregnancies and obstetric emergencies.

(Of 140 millions of pregnant women in the development world 200,000 of them will die by ilegal abortion. Only 5% and 10% of women are identified and given skilled obstetric care. 500,000 women die every year in the developing countries as a result of pregnancy or child brith. All but 6,000 who belong to the developed world. In the developing world overall, nearly 1 in every 200 pregnancies results in the death of the mother, a Maternal Mortality Rate (MMR) of 450 per 100,000, live births. In those cases where there is not care or only unskilled care, as many as 1 in every 75 pregnancies results in the death of the mother.....The risk is very high among adolescent in Africa and Asia 5% of dying.....For African women the lifetime risk of dying from pregnancy or childbirth may be 1 chance in 15......South Asian women may have 1 in 18 chances of dying......In the industrialized countries and a few

developing countries in East Asia the risk have been reduced for women to 1 in 200 to 1 in 500.)

\* (11) Universal access to primary education, with special emphasis on girls, and accelerated literacy programmes for women.

#### Nutrition

\* (12) Reduction in severe and moderate malnutrition among children under five years of age by one half of 1990 levels.

(Freedom form hunger and malnutrition is a basic human right......Nutrition sould be seen as an outcome of processes in several sectors. Improved mutrition requires simultaneous efforts to ensure adequate household food security, control of diseases and sanitation and adequate maternal and child care. ........... Malnutrition in its various forms: proteine energy malnutrition, nutritional anaemia, vitamin A, deficiency and iodine deficiency disorders (IDD) contributes to about 1/3 of the deaths of young children through out the world). PP.101-121

## \* Reduction of malnutrition and low birth overall

Reduction in severe and moderate malnutrition amont children under five years by half of the 1990 levels. Reduction of the rate of low births weight (less than 2.5 Kg) to less than 10% of annual births

(On the developing world 36% of children are underweight and therefore at great risk (150 millions under five years except in China and more than 20 millions are severally under meredsed probability as a result of the economic crisis on the SAP being undertaken la reponse to it (pp. 101-103-107)

- \* (13) Reduction of the rate of low birth weight (less than 2.5 kilograms) to less than 10 per cent.
- \* (14) Reduction of iron deficiency anaemia in women by one third of 1990 levels.

350 million of women are affected world wide. This deficiency threatsens the live and health of pregnant women and their children, loweing. (pp. 119 - 121)

\* (15) Virtual elimination of iodine deficiency disorders (IDD) by the year 2000.

(One billion people in the world are at risk of iodine deficiency disorder (IDD). 200 millions to 3000 millions of them suffering from goitre or others obvious consequences. At least, 6 millions cases of mental retardation are attribuables to iodine deficiency. Te distribution is as follows: Asia 7110 millions; Africa 230 millions, Latin America 60 millions, Europe 20 millions to 30 millions. pp. 111-114)



\* (16) Virtual elimination of vitamin A deficiency and its consequences, including blindness.

(40 million of children suffer from vitamin A defficiencies - 3,500,000 new cases each year - 70% of them lack vitamin A. About 60% of newly blind children die within one year (Milder degrees of deficiency diminish the body's capacity to cope with infection and therefore contribute to child mortality and growth retardment. pp. 115-118).

\* (17) Breastfeeding. Empowerment of all women exclusively to breastfeed their child for four to six months and to continue breastfeeding, with complementary food, well into the second year.

(According to a 1989 WHO stimation, the overall risk of death from all causes for nonbreastfeeding infants is approximately double that for those exclusively bresastfeeded. pp 123 - 128)

- \* (18) Growth promotion and its regular monitoring to be institutionalized in all countries by the end of the 1990s.
- \* (19) Dissemination of knowledge and supporting services to increase food production to ensure household food security.

#### Child health

- \* (20) Global eradication of poliomyelitis by the year 2000.
- \* (21) Elimination of neonatal tetanus by 1993. To Futuro
- \* (22) Reduction by 95 per cent in measles deaths and reduction by 90 per cent of measles cases

by 1995 compared with pre-immunization levels as a major step towards the global eradication of measles in the longer run.

- \* (23) Maintenance of a high level of immunization coverage (at least 90 per cent of children under one year of age) against diphtheria, pertussis, tetanus, measles, poliomyelitis, and tuberculosis and against tetanus for women of child-bearing age.
- \* (24) Reduction by 50 per cent in the deaths caused by diarrhoea in children under the age of five years and 25 per cent reduction in the diarrhoea incidence rate.
- \* (25) Acute Respiratory Infections in children. (ARI)
  Reduction by one third in the deaths caused by acute respiratory infections (ARI) in children under five years of age.

(children in developing countries are up to 20 times more likely to die from pneumonia than are children in the industrial World. Studies have found that correctly managing the care of Acute respiratory infections pneumonia related deaths by as much as 70%. Of all 16.6 millions deaths among children under

five years of age each year, about 30% are due to acute respiratory infections. (pp. 83 - 87).

#### Water and sanitation

\* (26) Universal access to safe drinking water by the year 2000.

(Many diarrhoeal disseases are water - borne, water - washed, water - based, or other were water - related. Women and girls are the principal carriers of water in most communities. They expend calories and time. They could use more time and energy to care their children, to participate in social activities and responsabilities. pp. 135 - 141)

\* (27) Universal access to sanitary means of excreta disposal by the year 2000.

(In country sides, cities and peri - urban slums of developing countries, 1.2 billion people still lack access to safe water and 1.7 billion lack access to appropriate sanitation....It is estimated that the implementation rates for water coverage in the 1990 will have to increase 1.5 to 2.5 times those of the 1980's: in rural and urban areas respectively, rates for sanitation will need to increase 3 to 4 times those of the 1980's in urban and rural areas respectively). pp.135-141)

\* (28) Elimination of Guinea worm disease (dracunculiasis) by the year 2000.

(This disease is referred to as Guinea worm disease (A worm - water - born parasite which infects nearly 5,000,000 people every day, primaly in 19 african countries of \$30 pp. 130,001 OF UTUITO

#### Basic education

\* (29) Expansion of early childhood development activities, including appropriate low-cost family and community-based interventions. (pp.153)

(Expansion of early childhood cares and developmental activities including family and community interventions, especialy for poor, disadvantaged and disable children (This process envolves considerably more than first growing bigger. It includes a physical dimension, the ability to more and coordinate; an intellectual dimension, the ability to think and reason; a social dimension, the ability to relate to others; and an emotional dimension, self confidence and the ability to experience emotions. Notions should focus on support and education for parents and others care. Takes in particular, as will as on measures to counteract the deteriorating circumstances for the development of children from families in the marginal urban and poorest of rural areas (pp. 161-166)

- \* (30) Universal access to basic education and achievement of primary education by at least 80 per cent of primary school-age children through formal schooling or non-formal education of comparable learning standard by the year 2000, with emphasis on reducing the current disparities between boys and girls (pp. 153).
- \* (31) Reduction of the adult illiteracy rate (the appropriate age-groupe to be determined in each country) to at least one half of its 1990 level, with an emphasis on female literacy to significantly reduce the current disparity between male and female literacy rates. (pp. 153).

(Reduction of adult illiteracy rate - the appropriate age group to the determined in each country- to one half its 1990 level by the year 2000, with sufficient emphasis on female literacy to significanlly reduce the curent disparity between male and female literacy rates - close to 1 billion people over the age of 15 are illiterate today - that is roughly 30% of the world's less developed countries. About 60% of in South Asia, 1/3 in East and South East Asia, 15% in Latin America and the Caribbean and almost 273 of the adults in the world's least developed countries. About 60% of all are women. There is a connection between literacy levels among women and the size of their families (there is a greater likehood that she will practice femily planning; mortality and nutritional states of their children: the children will be well - nourished, and they will survive the high mortality, pp. 177 - 181) (32) Increased acquisition by individuals and families of the knowledge, skills. and values required for better lying made available through all educational channels, including the mass media, other forms of modern and traditional communication, and social action, with effectiveness measured in terms of behavioural change. (pp. 153)

\* To give every child a chance for basic education...providing a certain amount, save up to 5 dollars per pupil. (pp. 159)

#### Education and mass media. The Third Chanel.

\* Increased acquision by individuals and families of the knowledge, skills, and values required for better living made available through all education channels, including the mass media, other forms of modern and traditional communication, and social action, with effectiveness measured in tems of behavioral change.

(The constituent components of the Third Channel are many and varied, and may include: religious, social action, cultural and community communication channels, and leaders; political institutions, parties and leaders, mass organization; political institutions, parties and leaders, mass organizations, lobying groups; any location where life skills and knowledge are communicated: de village health unit, community center, agricultural cooperative; traditional and modern means of mass communication: traditional folk drama, mass meetings and rallies, print media, radio,

television, computer; face - to - face communication between individuals. (pp.185-186).

# Children in especially difficult circumstances

\* (33) Provide improved protection of children in especially difficult circumstances and tackle the root causes leading to such situations.

Perhaps 15% of children would wide live under what are termed "especially difficult circumstances": 100 million children working in hazardous or explotation conditions; 50 millions living on the streets; over 100 millions who are abused or neglected in homes and institutions; over 20 millions refugees or displaced children excluding those who have been physically or psychologically traumatized by armed conflicts or natural disasters (pp. 191)

# Children in armed conflicts

- \* Creating a more peaceful world for children. Maintained consciousnes on "Children as a Zone of Peace" would help ensure that all conflicting parties would protect children and allow access for relief and rehabilitation efforts.
- \* Reduce military expenses is one of the first actions to be undertaken in order to reach this goall. (pp. 193-198)

# Working and street children

- \* Multifaceted applied a characteristic fed and enforcement income generating opportunities and relevant educational and other sources for working children.
- \* Since it is considered that "it is not feasible or practical to end child labour, particulary among the poorest groups, governments can act during the 1990's to protect such children from abuse, provide them with meaningful training, and institute flexible educational programmes that can bring schooling to chindren unable to actend conventional classes.

(Child labour, Street Children and serious exploitation of working children are the expression of struggle for survival of poor of poor families in countries of the Third World. Early school abandonment is the consequence of family's needs for more income. Children contribute to their families or own support). (pp 199 - 204).

# The girl child: an investment in the future

\* Gender equality needs to be a clear objective and measure of childhood development. The 1990's could be the decade in which, finally, every opportunity is given to the girl child to acquire equal status to ensure that she grows and develops to her full potential in every nation. Assuring equitable access for the

girl child to health, nutrition, work parity, and education demands the committed support and backing of the family, private voluntary and non - governmental organizations (NGOS), and governments. (pp. 207)

\* Adressing the needs of the girl child could be the key to achieving a more equitable status and role for women in the long run. Of even greater urgency, however, is the need to ensure her right as a person to the full benefits of childhood. (pp. 207 - 214)

#### Children and environment

\* The need to protect the environment, emerging as a high priority on government agendas and in the consciousness of the world, is closely linked with the survival and development of children. Key to improving the welfare of children and the environment is the pursuit of sustainable and equitable development. Great disparities in wealth and consumption between and within countries contribute to both social and environmental desequilibrium. In empowering women and meeting the basic needs of children and their families for health care, adequate nutrition, access to clean water and sanitation, and education the world will ensure a fairer, more productive environment for all its people, now and in the future. (pp. 217)

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