

REPORT



unicef
AZERBAIJAN



1997



**"YAPS-Youth Azeri
Parcel Service"**

*YAPS courier Eyvaz
Gassanov at work*

Photographer: **Ilgar Jafarov**
December 1997

**"Private Business with a Charitable Soul -
a New Consortium in Baku"**

*President of Azerbaijan Heydar Aliyev,
UNICEF's Regional Director John
Donohue and Shamil Mamedov YAPS courier at the Official Launching
of YAPS and CHL*

Photographer: **Mirnaib Gassanoglu**
23 July 1997

**"Psychological
Counseling Service is in
Progress"**

SOS Help Line's Operator

Photographer:
Mirnaib Gassanoglu
December 1997

Part I: EXECUTIVE SUMMARY

Azerbaijan, in 1997, remains as in previous years, in the process of transition from a centrally planned economic and political system to a market economy and a more open society. Throughout these transitional years, UNICEF has continued to lay the foundation for positive social change through its attention to Social Welfare systems in the Health and Education sectors. This year UNICEF programs, in partnership with Azerbaijan Ministries of Health and Education and private sector support, have continued to expand and realize progress in Primary Health Care and Education Reform.

While macro-economically, Azerbaijan is progressively stabilizing, after six years of economic decline, 1997 has only slightly improved over last year, which saw a rise of 1.2 % in GDP over previous years, though in real terms, 1996 GDP was only 40% of the level of 1989, pre-independence. Data from a recent World Bank/UNICEF study showed that 60% of the population can be classified as poor, and that one third of this number should be considered as very poor. An estimated 10% of the population are still considered as refugees or internally displaced with no progress gained during the OSCE Peace talks earlier in 1997 toward establishing a lasting Peace Agreement. Azerbaijan feels that their position strengthens with time as their petroleum cards play out. And, as in previous years, the refugees and displaced families hold on to the hope that they will return "this year."

Azerbaijan is clearly a country that is expecting a rapid increase in foreign exchange earnings from petroleum exports. In terms of relaxing the balance of payments and budgetary constraints, however, the major benefits from the petroleum expansion will not come until about 2005 when the capital recovery phase of the AIOC Consortium (Azerbaijan State Oil Company's joint venture corporation with international petroleum investors) is completed. During the interim, while the economy should be undergoing serious structural reforms and building the institutional base for an efficient economy, **the Azerbaijan public sector will continue to face serious financial resource constraints.**¹

A recent study found that countries with high export earnings based on natural resource wealth have grown more slowly than those without such natural resources.² The primary cause of this long-term retardation stems from: 1. greater attention devoted to the development of industries related to the production of the natural resources (and a corresponding lack of attention to education and development in other fields), 2. tendencies to import agricultural and consumable commodities and capital goods, and 3. general neglect of the indigenous institutions which serve to strengthen the living situation for the general population. In Azerbaijan, as in the other FSU Countries, the concentration is somewhat altered from the development of other natural resource rich economies because of its history of centrally controlled enterprises and its current transitional phase from serious depression (along with its industrial decline) to an open, market-driven economy. The development syndrome tendencies remain applicable, nonetheless, with all of the symptoms being manifested such as: major investment in petroleum related business and industries and the importation of food and durable goods, etc. etc. The variation in Azerbaijan, however, is the relatively high level of education throughout most sectors of the population, (poor and well-off, employed and unemployed). There continues to be state run

¹ World Bank, Azerbaijan Poverty Assessment Report. February 24, 1997

² Sachs and Warner, Natural Resource Abundance and Economic Growth (NBER Working Paper, 1995). From World Bank Poverty Assessment Report.

social welfare services in place, although in fact “privately operated”, and a common memory and concern for quality social services.

Yearly reductions of budget allocations in the social sector continue to have a direct impact on the quality of services provided, even though progress is apparent through a number of approaches in Education and Health reform programmes. Within this scenario, UNICEF continues to provide advice and guidance for design models of policy reform and efficient, effective implementation of those reform activities.

The Primary Health Care Reform Pilot Project in Kuba, for example, has attained a series of positive results and a basic level of self-sufficiency much quicker than initially estimated. As a result, the MoH has requested further assistance in order to replicate the model in other districts during 1997. Replications

have already been initiated in the Masalli District. In partnership with the Government and from contributions of several major oil companies, UNICEF is coordinating the expansion into districts in southern Azerbaijan. Contributions from the private sector for expansion have already reached \$USD 500,000. Other achievements in the Health sector were made in the continuation of the country-wide vaccination coverage which has already achieved 90% of the targeted five-year goals by mid-term. **It is notable that achievements in Mother and Child Health activities were attained more quickly with greater effectiveness where Primary Health Centre Reforms took place, notably in management of health services in Kuba and Masalli districts.**

UNICEF Achievements in Health Sector

- PHC Reform piloted in Kuba successfully replicated in Masalli and expanding to additional districts.
- Polio eradicated from Azerbaijan
- Vaccination 5 year goal reached 90% by mid-term.
- 5 major maternity hospitals achieve 10 steps of the Baby friendly Initiative.

In the Education sector, The Convention of the Rights of the Child has become part of the curricula in three pilot schools where UNICEF supports locally-based education reform strategies. Through UNICEF guidance and coordination, these pilot communities have raised matching funds for UNICEF funds, initiated income generation activities to ensure financial support for the refurbishment of school facilities, subsidies to students from poorer families and incentives for teachers.

UNICEF has also initiated two services, both managed and operated by disadvantaged youths. The first, Youth Azeri Parcel Service (YAPS) is a mail delivery service, which capitalizes on growing private sector demand for support enterprises; and the second, Child Help Line (CHL) is a phone SOS line, funded partially through the proceeds from the YAPS delivery revenues, to serve the population at large, where trained disabled provide psychological assistance to callers.

On a broader scale of advocacy for attention to the Rights of Children and related contemporary problems facing Azerbaijan families (and the NIS countries in general) is a television “soap opera” production which has been completed by Azerbaijan screen writers and will be televised throughout the NIS as soon as commercial support is forthcoming. The primary goal of these initiatives is to boost the implementation of the Convention of the Rights of the Child (CRC) through greater public awareness of how the Articles can become deeds.

The basic strategy for the UNICEF Azerbaijan programme remains today as was initially planned in 1994: to act as a catalyst for broad based reforms in the public sector, namely, Education and Health, capitalizing on the current situation of massive need for rehabilitation and change in institutions; to empower the institutional partners through first hand observation of limited pilot projects and then lay the plans for progress to full scale only after careful evaluation and assessment, and finally; to mobilize individual and community participation.

Progress based on past UNICEF surveys and rapid assessments have provided the foundation for cooperative activities with government authorities. In working alongside the governmental institutions, UNICEF has taken the opportunity to initiate this vital capacity building process, especially in Education and Health. This has proven to be a productive approach toward realizing self-sustainable development of public systems and services.

TABLE OF CONTENTS

PART 1:	EXECUTIVE SUMMARY	1
	List Of Acronyms	5
PART 2:	MAJOR ISSUES	6
	a. Aspects of the Country Programme of Cooperation	
	b. Aspects of the Management and Administration	
	c. Aspects of the United Nations Reform in the Country	
PART 3:	CHANGES IN THE SITUATION OF CHILDREN AND WOMEN	7
PART 4:	REPORT ON PROGRAMME PROGRESS	10
	A. EMERGENCY AND REHABILITATION	10
	i. Health and Vaccination	10
	a. Polio	
	b. Diphtheria	
	ii. Children in Especially Difficult Situations	11
	a. YAPS: Youth Azeri Parcel Service	
	b. CHL: Children's Help Line	
	iii. Psycho-Social Rehabilitation	14
	a. In Specialized Institutions	
	b. In IDP camps	
	B. HEALTH	15
	i. Maternal and Child Health	
	a. EPI and Communicable Diseases Control	
	b. BF/BFHI: Breast Feeding and Baby Friendly Hospital Initiative	
	c. CDD and ARI: Diarrhoeal Diseases and Accute Respiratory Illnesses	
	d. UIS / IDD: Universal Iodization of Salt	
	e. Nutrition	
	ii. Primary Health Care Reform: Goals, Activities and Achievements	17
	C. EDUCATION	20
	i. Early Childhood Development	
	ii. Education Reform Policy	
	iii. Convention of the Rights of the Child	
PART 5:	UNITED NATIONS Reform	23
PART 6:	Other Issues of Concern to the UNICEF Executive Board	24
PART 7:	Collaboration with UNICEF Partners	26
	A. Public Sector	
	B. Private Sector	
	C. International Organizations	
	D. NGOs	
	E. The Media	
	F. Civil Society	
PART 8:	Management and Administration	30

List of Acronyms

AIOC	Azerbaijan International Oil Consortium
ARI	Acute Respiratory Illnesses
BCG	Bacillus Culmette-Guerrin (Vaccine for TB)
BF	Breast Feeding
BFHI	Baby Friendly Hospital Initiatives
CDD	Control of Diarrhoeal Diseases
CEDC	Children in Especially Difficult Circumstances
CHL	Child Help Line
CRC	Convention for the Rights of the Child
DT	Diphtheria Tetanus
DPT	Diphtheria Pertusis Tetanus
ECD	Early Childhood Development
ECHO	European Community Humanitarian Assistance Organization
ED	Essential Drugs
ENT	Ear, Nose, Throat
EPI	Expanded Programme of Immunization
FDACY	Foundation for Disadvantaged Azeri Children and Youths
GDP	Gross Domestic Product
PHC	Primary Health Care
MCH	Mother and Child Health
IDP	Internally Displaced Person
IMCI	Integrated Management of Childhood Illnesses
JCGP	Joint Consultative Group on Policy
MECACAR	Mediterranean, Caucasian and Central Asian Republics
MOH	Ministry of Health
MOE	Ministry of Education
MOSA	Ministry of Social Affairs
NGO	Non-Governmental Organization
NIS	Newly Independent States
ORS	Oral Rehydration Salts
OPV	Oral Polio Vaccination
STD	Sexually Transmitted diseases
UNDP	United Nations Development Programme
UNHCR	United Nations High Commissioner for Refugees
USAID	United States Agency for International Development
UIS / IDD	Unified Iodization of Salt
UNDAF	United Nations Development Assistance Framework
WHO	World Health Organization
WFP	World Food Programme
YAPS	Youth Azeri Parcel Delivery Service

Part II: MAJOR ISSUES

a. Successful and most difficult Aspects of the Country Programme of Cooperation

UNICEF is seen as the leader in the areas of health and education reform and development in Azerbaijan. Significant successes have been achieved on the pilot scale projects such as the Primary Health Care Reform project in Kuba and its off-spring, follow-on project in Masalli. These have been extremely effective in mobilizing in-country technical support and community participation for what has become a successful Primary Health Care Reform model. Similarly, effecting change in the education system through advocacy and example, UNICEF has initiated pilot scale projects for reform of children's institutions and regular schools which will produce valuable lessons and information for developing a model for Education Reform in the country. UNICEF has been organizing and broadening alliances with government, private sectors, local and international NGOs, international organizations, the media, women's associations and civil society partners to favour initiatives and actions benefiting mothers and children, with emphasis on the most vulnerable among them.

Constraints in Country Programming

Even though the Azerbaijan economy has remained stable and has shown an increase in GDP in recent months, government investment in the social welfare sectors is very limited and will probably remain limited for years to come before revenues from petroleum exploitation finds its way through the National Budget to the Social Sectors. Fundamental to the limited social investment is a lack of experienced policy planners and policy makers who have a deep understanding of education and health reform necessary to be implemented and developed in a free market society. At present, the poor and the very poor families (60% of the population) spend nearly four and a half times less per child than non-poor families on education with correspondingly less educational texts and quality materials for non-private (public) schools. Since independence, the number of teachers per student has actually increased, comprising 44% of the total government employment, making education the second largest employment sector after Agriculture. Reform programming will help to improve education quality at a more efficient cost.

b. Successful and most difficult Aspects of the Management and Administration

Staff motivation, enthusiasm and positive spirit were the major contributors to a successful country program in Azerbaijan. However, the office has lost a large number of staff (6 over the past 3 years) to scholarships for master's degree programs in foreign universities. A shortage of trained, qualified local managers remains a problem for the office due mainly to the higher demand from the increasing number of foreign companies.

c. Successful and most difficult Aspects of the United Nations Reform in the Country

Collaboration among UN Agencies, though embryonic, continued to improve during 1997. UNICEF has worked with traditional partners such as WHO, WFP, UNHCR, the World Bank, and UNDP to varying degrees depending on the circumstances and appropriateness of overlapping country strategies and mandates. One major constraint to capitalizing on more effective collaborative efforts among the agencies has been a mutually shared, short fall of available funds.

Part III: CHANGES IN THE SITUATION OF CHILDREN AND WOMEN

In trying to understand the dynamics of living standards in Azerbaijan, it is useful to distinguish between poverty and vulnerability. While the two conditions will overlap for many people, there are a number of situations where people can be considered poor but not vulnerable and vice versa. The majority of IDPs, for example, in tented camps are poor, but they are not vulnerable to falling into extreme poverty so long as the camps - which provide basic nutritional and social service needs - continue to operate. On the other hand, pensioners (as well as single women headed households, orphans and handicapped) are no poorer on the average than the general population, but they are highly vulnerable due to their reliance on relatives, the relatively high costs of health care, and their inability in many cases to earn an income.

Very poor families have a higher average size, 5.7 people, than non-poor families, 4.1 people, and poor families, 5.4 per family. Generally the size difference is due to a higher number of children, although families with four or more adults are 75% more likely to be very poor than multi children households with one or two adults, thus, the impact of unemployment, increased cost of living, etc. expressed in current survival tactics. Whether the head of household is working or not has little impact on the likelihood of being poor. This partially reflects the structure of household incomes and expenditures, with wage income from primary and additional occupations combined accounting for only around 15% of total household expenditure. This is also due in part to a large number of the employed on unpaid leave, and to a substantial amount of unpaid wages in the public sector.

Disparities in average wages between men and women vary around the country with Baku having the highest differential for women earning about 30% of their male counterpart wage, and 45 to 50% of the men's wage outside of Baku.

One disturbing feature of life in Baku and the entire country is the new phenomenon of child labor (with the consequent impact on educational outcomes). It has become increasingly common for children as young as six years old to work, most commonly selling things in the streets, washing cars and other odd jobs. The estimate of children who had dropped out or were spending a substantial amount of school time working ranged between 10 and 25%, with the share increasing sharply once children reached 10-12 years of age. The main reason for the increase in child labor cited by the 1997 World Bank Report was the low level of family income. The situation is generally worse in the rural areas and especially among the IDPs. The drop-out rate for boys and girls seems to be about equivalent, however the reasons for dropping out are different for the two genders. Boys are more likely to be active in selling small goods on the streets and washing cars, while girls may be held from school because of poor clothing. Many families cited poor quality of schools and education as reasons for non-attendance³.

³ In February, 1997, World Bank issued the Azerbaijan Poverty Assessment report, of which the Health and Education Sectors were contributed by UNICEF. This section will reflect some of those broad aspects of social change and economic indicators discussed in that report.

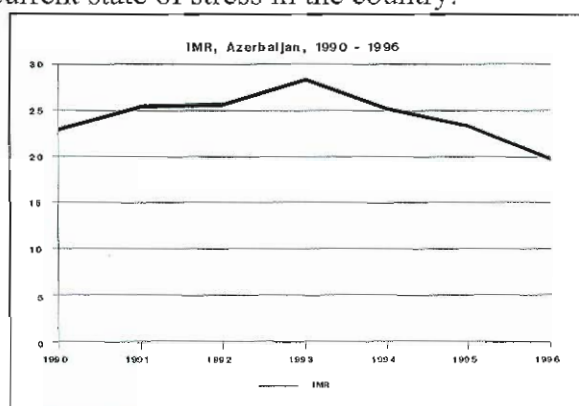
The physical and psychological health of the Azerbaijan population has been placed under extreme stress in recent years. There are a number of causes for this, but the most common manifestation is lack of access to medicines and medical treatment due to unavailability in some areas and high prices in others. Another factor effecting health care and health treatment is the declining quality of care available in public health facilities. The World Bank Survey cited a general perception by the population that the quality of doctors and medical staff is poor, citing a number of examples of ineffective medical interventions. The general perception is that the low salaries is the major factor in declining standards. Another factor is the lack of capital investment funding which has led to the breakdown in medical equipment and structural deterioration of facilities.

Economic situation and trends for 1997⁴

There was a steep rise in the trade deficit in 1996, with imports rising at almost three times the rate of exports. GDP grew in 1996, for the first time since the break-up of the Soviet Union. Foreign and joint-venture companies accounted for 55% of all investment in 1996. Annual inflation fell sharply in 1996 and 1997 to approximately 6.8% and the manat is gaining against the dollar. The forecast is for GDP growth of 3.5% in 1997 and 5% in 1998, based on investment in oil production and transport capacity. Raising oil volumes as AIOC fields enter production and push up export earnings, however, strong import demand will inflate the deficits on the trade and current accounts. The economic reform programme will be maintained, with the rate of inflation kept down by the strength of the currency. Unemployment at the beginning of 1997 was 31.9% of the workforce. Industrial decline continued through 1996 and 1997, however the declining rate has lessened during these years with 6.7% decline in output from 1995 to 1996 with improvement during each quarter.

A further contributing factor to declining public health is that sanitary-epidemiological stations responsible for rubbish collection and cleanliness of public places are either not functioning at all or are doing so ineffectively. This is particularly acute in rural villages effecting mainly children with increased skin diseases. Structural and qualitative problems are hampering the health system in coping with changing epidemiological patterns and the problems of poverty and poor nutrition associated with the present situation.

The long term deficiencies in planning and in prevention have now reached a crisis situation since the overall funding is even less able to keep up with need and demand in the current state of stress in the country.



The Infant Mortality Rate declined during the past 3 years, following several years of rapidly increasing IMRs.

Population growth in Azerbaijan has slowed with decline in life expectancy since 1990 (20.2 in 1990 to 10.7 in 1996). The birth rate has declined over the recent years (26.3 live births per 1,000 of population in 1990 to 17.1 in 1996).

The increasing trends in infant mortality rates between 1990 (23.0 per 1,000 live births) and 1993 (28.2) was reversed from 1994 (25.2) to 1996 (19.9) (refer to graph). The number of reported abortions has declined from 18.2 per 1,000 fertility age women in 1993 to 14.7 in 1996, but this may be due to an increase in illegal

⁴ Country Report, Azerbaijan. The Economist Intelligence Unit.

abortions. Children up to age 5 are highly vulnerable to infectious diseases, particularly those with poor nutritional status not only in terms of calories, but in food quality (i.e. vitamins and mineral content).

The maternal mortality rate has increased rapidly since 1990 from 29 per 100,000 births 1990 to 40 in 1996. Most employment opportunities are out of reach for the poor and the poorest because of lack of contemporary skills. The cost of living has risen and will predictably continue to rise.

Children's Clinic #14 in Narimanov District of Baku is typical of most children's clinics in the country. It was established in 1966 in the ground floor of an apartment building in a pleasant neighborhood. This district includes approximately 20,000 children age 0-14 years. The district is divided into 25 sub-districts with 800 children assigned to each doctor in the clinic for prophylactic and primary care. The polyclinic staff of 63 doctors, includes pediatricians with other specialties in the areas of ENT, ophthalmology, surgery, infectious diseases, dentistry and dermatology. Other staff includes 85 nurses, physiotherapy, and a basic laboratory for urinalysis, hematology and stool examination. Doctors working norms are an average of 7 home visits per day (3 hours) and see 15 patients in 3 hours in the polyclinic, for a total working day of 6 hours.

The standards of the clinic continue with those of the former USSR Ministry of Health, but with lack of drugs, medical records, and declining attendance. UNICEF provided Oral Rehydration Salts (ORS) has improved care of diarrheal

diseases with fewer hospitalizations. Attendance declined from 38,700 visits in 1994 to 31,700 in 1995. The number of new borns registered declined from 9,839 to 8,554 in the same years. The ability of the public to buy drugs is decreasing proportionately to their increasing cost.

New borns are registered, and examined monthly until three months, and quarterly thereafter. The new UNICEF vaccine schedule is well accepted by staff and parents. Breast feeding is estimated at 45% up to six months. Hemoglobin is checked twice, at 2 and 12 months. Iron and vitamins are not given routinely. Patient records are kept in child workbooks supplied by the parents with no standardized or recognizable system from which an individual development may be followed in comparison to any standards, nor extracted for data analysis. Mortality seems to be declining, but no data is available. Staff morale is poor. The chief doctor earns 60,000 manats per month (\$15).

Part IV: REPORT ON PROGRAMME PROGRESS

A. EMERGENCY AND REHABILITATION

As mentioned in the previous year's reports and again stressed in this annual report, UNICEF Azerbaijan initiated its rehabilitation and development strategy during the initial Emergency phase of the current program of cooperation. This approach has ensured that while the immediate demand is attended to, it is done within the context of overall long-term sustainable development of infrastructures, policies and the technical skills of the main performers in the country. Emergency activities have addressed the rising problems in the realm of 1. Health and Vaccination, 2. Children In Especially Difficult Circumstances, and 3. Social-psychological rehabilitation.

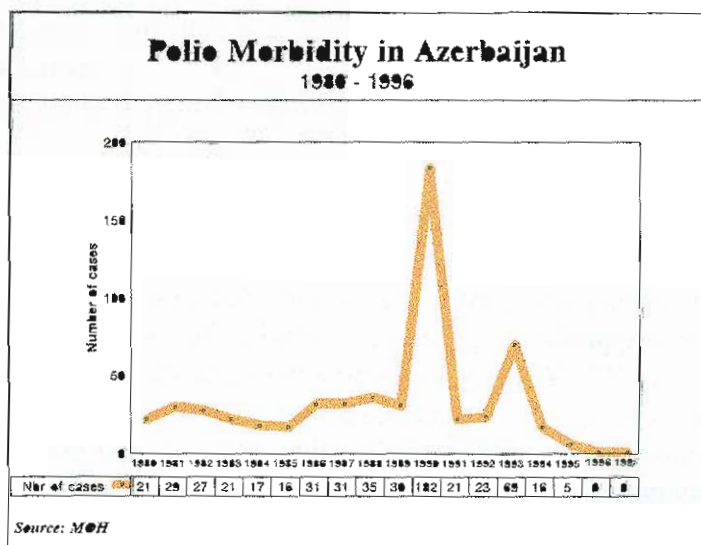
Since 1992, UNICEF has been supplying vaccines for the republic, and during the summer of 1994, the national immunization program was changed to adopt international standards. This includes elimination of obsolescent contra indications that had seriously handicapped the immunization processes in the country for many years, as well as the supply of safe and effective vaccines, cold-chain improvements, and orientation of medical professionals. Further, the Ministry of Health in cooperation with UNICEF has initiated efforts to promote a National Essential Drug Program. Ultimately, the capacity building efforts of UNICEF and the collaboratory programs implemented with the Ministry of Health and private sector donors have culminated in the Primary Health Care reform programs in Kuba, Masalli, and the other southern districts of Azerbaijan.

i. Health and Vaccination

The conscientious monitoring of programs implemented in previous years has enabled UNICEF to respond quickly to changing situations in the country. In 1997, immunization campaigns have continued according to plan: UNICEF activities included:

(a) **Polio:** Azerbaijan has remained a Polio free zone since January 1996, following the previous years' campaigns. However, the final two rounds of Polio - MECACAR - vaccinations were carried out in Azerbaijan between the 10th and the 17th of March and between the 10th and 17th of April, 1997 to all children under 5, including those who had previously received the basic course of immunization. The country-wide vaccination campaign was preceded by a series of workshops organized by UNICEF jointly with the Ministry of

Health for the medical staff of children's health facilities. About 700,000 children below the age of 5 were vaccinated. UNICEF provided the Ministry of Health with all the required polio vaccines- nearly 1,500,000 doses worth more than US\$45,000. On the whole, UNICEF purchased more than 5,300,000 doses of OPV for all rounds of the MECACAR Operation in the



country and allocated about US\$500,000 for carrying out the country-wide vaccination campaign in 1995 - 1997 which included organizing training courses for medical staff and monitoring activities.

(b) **Diphtheria:** The number of diphtheria morbidity cases in 1997 has decreased 6.3 times and the number of mortality cases has decreased 6.7 times in comparison to 1995. In order to strengthen the disease control, a second National Immunization Month against Diphtheria was carried out in Azerbaijan in early 1997. More than 1,000 local health staff members participating in the vaccination campaign were trained at UNICEF/MOH workshops organized in 16 towns and districts as well as in Nakhchivan Autonomous Republic. Thanks to donations from USAID, as well as UK, Finland and ECHO contributions, DPT-vaccines and auto-destruct syringes and additional cold chain equipment were provided. MOH specialists and UNICEF staff members were regularly monitoring the immunization campaign which covered three and a half million of the population including children from two months to 18 years old and adults up to 40 years.

ii. Children in Especially Difficult Circumstances (CEDC)

The magnitude of the problems faced by this category of vulnerable children (usually children in institutions, either disabled or orphans, or simply abandoned by extremely poor families) demanded a multifaceted approach in meeting the most urgent needs (e.g. rehabilitation of water and sanitation in some institutions for disabled and orphanages, provision of medicines, psycho-social rehabilitation) while simultaneously addressing the basic and underlying causes, and laying the foundation for comprehensive, long-term responses where the welfare of these children does not remain the sole responsibility of the state but involves the private sector and the community.

UNICEF's main goal for CEDC activities has been to enforce the articles 20 and 23 of the CRC through the promotion of partnerships/coalitions between the private and public sectors, favoring examples of full reintegration of disabled and orphans within the society as productive community members, thus becoming contributors to the welfare of the society, and to provide policy options ending the "isolation" that disabled and orphans face in the institutions.

"I congratulate UNICEF for this noble initiative. I also am grateful to everyone who has worked on the creation, development and implementation of this work"
(President Heydar Aliyev)

To reach this goal, UNICEF has incorporated several creative approaches: 1. The "Foundation for Disadvantaged Azeri Children and Youth" (FDACY) was established to bringing together notable actors from the public and private scene in order to mobilize resources in favour of activities benefiting handicapped and orphan youths, and; 2. To initiate two services, one income generating enterprise, YAPS (Youth Azeri Parcel Services) and the other, a non-profit public service organization, CHL (Children's Help Line) and, 3. Production of a TV Soap Opera series which characterizes contemporary social issues related to the Convention of the Rights of the Child in a popular format for general public viewing.

YAPS and CHL

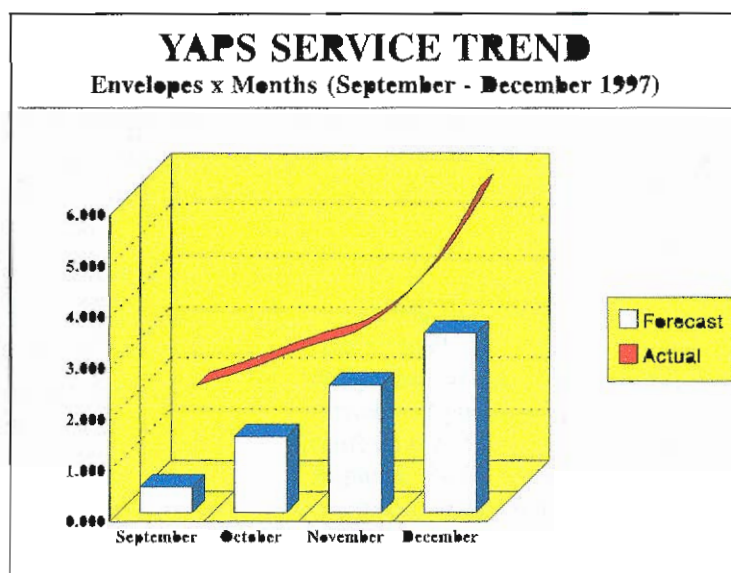
"Disabled and Disadvantaged but still Able and Beneficial to the Community - A synergistic approach - the Azerbaijan experience" is the essence of the UNICEF intervention on behalf of orphans and handicapped youths working together to provide: a mail parcel service to the growing private sector businesses and corporations; and psychological assistance and practical advice to the general population through a 16 hour per day SOS phone service. Both operations are exclusively managed and operated by disadvantaged. The situation in reality is that if tight and solid family ties characterizing Azeri society during economic transition have in many cases compensated for the growing failure of the state to meet people's basic needs, then orphans and disabled, can hardly count on any social solidarity.

"It is worthwhile to notice that orphans and disabled have been penalized by the economic crisis more than any other segment of society. In fact, this category of disadvantaged still remain relegated to the numerous decrepit institutions, the latter increasingly restricted by cuts to their already inadequate budgets to meet the needs of the children."

UNICEF "Transition" Newsletter Aze 12

a. (YAPS) Youth Azeri Parcel Service - Is a non-profit, income generating enterprise providing mailbox and parcel delivery services managed and operated by handicapped and orphaned youth. Initial projections showed that the growing number of potential customers, especially among the foreign companies operating in Azerbaijan, represented a market opportunity for YAPS to become profitable after the second year of operation; thus it will have the capacity to be self supporting and simultaneously provide funding for the CHL service, and credit any additional profit to the Foundation which in turn will finance other activities benefiting this category of disadvantaged.

This program, in its fourth month of operation, employs 16 orphans as bicycle, moped and minivan drivers for the delivery service, while 5 disabled manage the office computers, radios and phones. Although still in its infancy, success of the delivery services has been realized during the first four months of operation with a steadily growing clientele and broadening recognition of its socially beneficial contribution.



YAPS Achievements to Date

- Actual number of deliveries is averaging more than 2 times higher than projected with the number of envelopes delivered steadily increasing each month.
- Service clients increased to over 50 companies.
- Total number of deliveries more than 15,000 in 4 months.

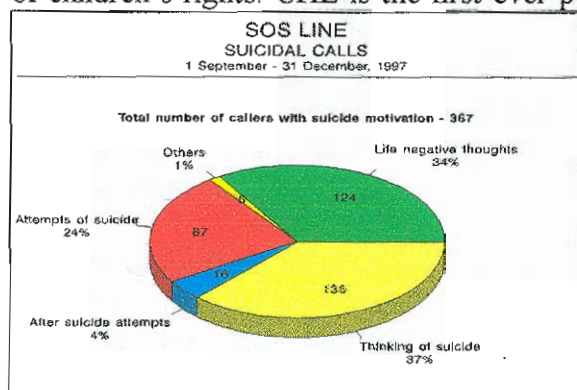
YAPS Staff Training

- General Manager had 3 week training on overall management of a parcel delivery service;

- Delivery Couriers received 4 weeks training on moped driving, road signs, etc.; 2 days on minor mechanical repairs for mopeds; and 2 days on "client approach relations".
- Operations Manager received 5 days training on radio management
- Secretaries received 1 month computer training course.
- All staff received a two month English course.

b. CHL - (Children's Help Line)

Child Help Line (CHL) - a 16 hour per day telephone SOS line providing psychological counseling services to the community, namely parents and children, in connection with violations of children's rights. CHL is the first ever public psychological counseling service in Baku. The



service functions as a sentinel site and an antenna for monitoring patterns and trends relative to the state of the community, family problems, child abuse, drug use, etc. especially during this period of severe hardship for the population as a result of the economic and social transformation.

During the four months of operation, the Child Help Line received approximately 10,000 calls dealing with problems ranging from depression to suicide. The majority of callers are between 17 and 26. The gender breakdown of the

callers is averaging about 60% female and 40% male; depression (17%), family disputes (19%), financial difficulties, alcoholism, among others, are the major problems discussed.

CHL Staff Training;

CHL operators have been extensively trained by international experts to be able to help those seeking moral, emotional, psychological and practical assistance

- Coordinator received 1 month computer course; 1 week management training and early analysis of data bank (decodification, etc.)
- Coordinator and 18 phone operators received 7 weeks on communication and psychotherapeutic skills, and an additional week of refresher training on enhanced psychotherapeutic approaches to address cases related to suicide.

CEDC Program Achievements to date:

- strengthen Governmental awareness about the plight of disabled and engagement of the highest level in designing policies and actions towards better meeting their needs;
- enlarge network of partners - among private and public sectors as well as international organizations - engaged towards improving the condition of disabled and orphans;
- increased media attention and coverage thus reinforce media's role in promoting the cause of disadvantaged;

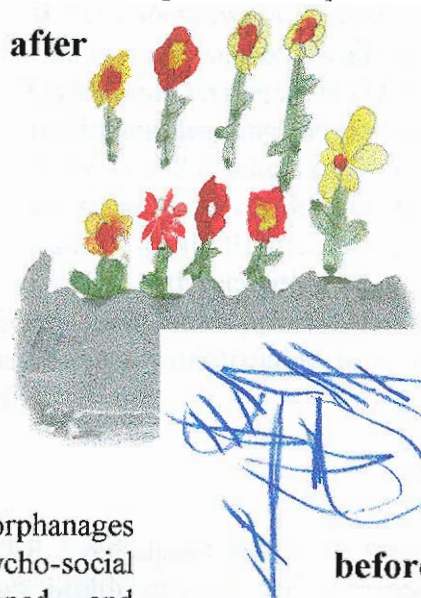
"By giving orphans and young people with disabilities an opportunity to participate fully as productive members of society, Azerbaijan is demonstrating its commitment to live up to its obligation to act in the best interests of young people when it ratified the Convention of the Rights of the Child in 1992. This is a project with high ideals. It is unique. It is particularly gratifying to see young people overcome their own difficulties and devote themselves to helping their fellow citizens, both young and old" (J. Donohue UNICEF Regional Director)

- reformulate the role of the disadvantaged as contributor to the welfare of the society, thus,
- promote a positive image of orphans and mainly the handicapped vis-a-vis, the other disadvantaged and the community at large;
- contribute to solidarity and social cohesion during the hardship of the economic and social transition;
- revitalize and enhance social to more effectively address disabled
- design and test an "exportable" and services to be replicable

iii. Psycho-Social Rehabilitation

UNICEF has intervened on behalf in IDP camps and in specialized the past three years, and continues to for these children.

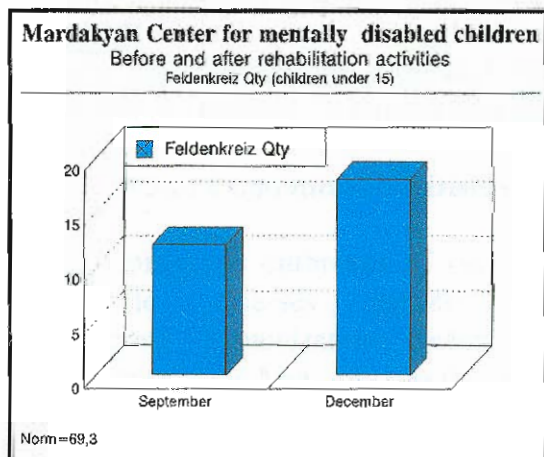
a. In specialized institutions, such as orphanages UNICEF has also carried out psycho-social activities for the mentally handicapped and training for staff members as well. In collaboration with the faculty of Social Sciences and Psychology of the Baku State University, a working group of specialists was assembled to evaluate psychological development of disabled children, ages 3-6 years, such as those living in the Saray Children's Orphanage (Boarding House No. 7). Results from special "lessons" for disabled children, carried out by trained facilitators, showed that children achieve significant improvement in verbal and non-verbal abilities (i.e. to sing, dance, distinguish colors and to draw;



workers' capacity specific needs; model of company elsewhere.

of children living institutions over focus attention

and sanitariums, rehabilitation psychological



eg: see Elmira's drawings before and after attending classes for mentally disabled inmates in Sarai institution) directly corresponding to the quality of developmental activities presented them, thus providing positive, experiential learning for the staff, parents and of course the children themselves. Another group of seriously ill children in the Children's Department of the Psychiatric Hospital in Mashtagi became familiar with music, after UNICEF provided the institute with various musical instruments. In September, 1997, the Mardakyan boarding school for mentally handicapped children included activities such as those developed for the

Sarai Orphanage in their curriculum activities. From these experiences, UNICEF is producing a manual for trainers, social workers and parents which will describe developmental activities for the mentally handicapped and will discuss educational and technical understanding of the developmental process for these children.

vaccines and syringes were purchased in order to continue implementation of routine immunization activities. Cold rooms, refrigerators, cold boxes and vaccine carriers were also procured to strengthen the overall efficiency of the cold chain system at the central and district levels.

82x
b. Breast Feeding (BF) and Baby Friendly Hospital Initiative (BFHI): In August, Azerbaijan celebrated for the third consecutive year, World Breast Feeding Week. Training seminars on breast feeding have been conducted in maternity home No. 5. Participants discussed among other related issues, the fundamental nutritional advantages of breast feeding for the infant; and the advantages for mothers in reducing the risks of breast and ovarian cancer, reducing post-partum bleeding, iron deficiency anemia, and is a natural means of spacing children by delaying ovulation. For BFHI, Clean and comfortable wards with two to four beds per room for mothers and UNICEF's cots for their newborn, snow-white curtains and soft carpets on the floor make a startling contrast with the outward appearance of the old premises of Baku Maternity No. 1. Two years ago, BFHI was initiated in Azerbaijan as a joint UNICEF/WHO implementation. One year ago the National Training Center was created in one of the initial hospitals, and in January-March 1997, UNICEF, in conjunction with the Ministry of Health continued nation-wide training on BF/BFHI for the health staff of maternity hospitals and children out-patient departments. The workshops have been accomplished in cities of Sumgayit, Shamkir, Ganja and Sheki; 350 doctors and nurses attended the workshops, all participants were provided with manuals locally produced in Azeri for personnel with procedures on the 10 steps to successful breast feeding for mothers. They were also informed of the resolutions adopted from a study conducted by the National Scientific Conference on Modern Problems of Lactation and Breast feeding carried out in Baku in January, 1997.

c. CDD and ARI (Diarrhoeal Diseases and Acute Respiratory Illnesses)

Primary objectives of this ongoing programme are to improve diagnosis and treatment of gastrointestinal disorders and respiratory illnesses of children at the PHC level facilities, and to increase community awareness of methods for prevention and early treatment.

Achievements in this programme have been significant with more than 1,000 doctors and nurses from children's polyclinics trained to WHO standards and recommendations. Leaflets and public service television announcements have brought the message home to the general population, and ORS and ARI kits made available for the public through community clinics. Furthermore, an IMCI working group has been established and a nutritional survey in the framework of IMCI adaptation carried out in 1997.

The ARI/CDD training programme will continue in the future, as well as support for IMCI adaptation and implementation, development of tools for follow up of training and the integration of the programme in the curricula of the leading academic centers such as Medical University and Doctor's Postgraduate Training Institute and Nurses Postgraduate Training Institute. Furthermore, by comparing results of the CDD/ ARI program implementation in various districts, **the preliminary assessment so far has indicated that the best results have been achieved in PHC reform pilot districts Masalli and Kuba, and that the reform program offers a better opportunity for the introduction of new approaches in general and in treatment practices in particular.**

d. UIS / IDD (Universal Iodization of Salt)

Cabinet or Ministers and is prepared for adoption in early 1998. UNICEF has provided 2 additional pieces of equipment for iodization at the Apsheron salt mines. The issue has been brought to the public's attention through health education TV announcements sponsored jointly with the Government.

Constraints which have hindered the success of this project have been poor collaboration between governmental institutions who are responsible for UIS. Also additional efforts are needed to collect valid data on the prevalence of IDD in the country, as well as to mobilize social awareness of the health problems associated with iodine deficiencies in the diet.

e. Nutrition

In the effort of reducing micro-nutrient deficiencies, UNICEF has provided vitamin kits, multivitamine syrup, anti-anaemia drugs for children under five years old and pregnant women. Growth charts have been distributed to children's clinics throughout the country as a growth monitoring program.

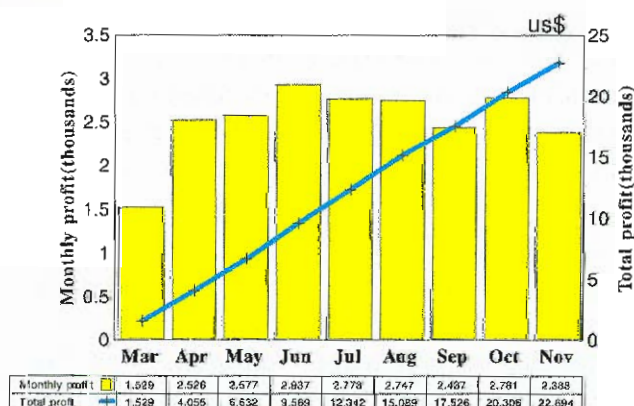
A nutritional survey in two districts of the country, conducted jointly with the MOH indicated that a general lack of understanding of the health effects of micro-nutrient deficiencies is a fundamental issue needing greater attention in the population generally and by the health professionals particularly. Coupled with the misconceptions about nutrition and micro-nutrients is a high poverty level, which gives priority of food quantity over nutritional quality.

ii. Primary Health Care Reform

In response to the country-wide general need for improvement in health care services, UNICEF initiated a series of studies in the Kuba District in 1994: "Report on the Cost of Medical

MOH-UNICEF Primary Health Care Reform

Net income from drug turnover and service fees in Masalli district
April - November 1997



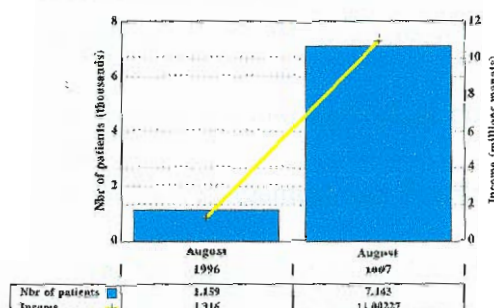
Contacts in the district of Kuba" which found that a large percentage of cost for medical care was because of the cost of drugs. As a result UNICEF launched a programme on essential drug policy and training on the rational use of drugs thus lowering costs; and "Study of Health Care Demand, Attitudes Toward Paid Health Care and Health Care Facilities in Kuba District," which indicated, among others, that because there was a tendency for people to by-pass the primary facilities and go directly to hospitals, costs spiraled, leaving the poor unable to afford access to quality care.

From these surveys and attention given to the seemingly insurmountable obstacles, as well as through the recognition by the government authorities of ways to improve their system, UNICEF designed and implemented, in close collaboration with the Ministry of Health staff, a pilot project in the Kuba District which serves as a guidance and reference for country wide Primary Health Care Reform. Indeed, during 1997, this pilot project has been successfully duplicated in the Masalli District with plans underway for additional districts in southern Azerbaijan.

The goal of Primary Health Care Reform piloted in Kuba was to improve the health conditions of the population with special attention to the most vulnerable, namely mothers and children. Its main objective was to revitalize the health system by improving the quality and efficiency of health services through the introduction of new management and financing mechanisms while maintaining values such as equity, universal coverage, accessibility and affordability.

MOH-UNICEF Health Reform Programme

Attendance vs Income - Kuba District Health Centres
(August 1996 and August 1997)



PHC Reform in Kuba: Effective ways for achieving positive results.

- Project based on household survey in 1994
- Reduction of excessive number of facilities and numbers of beds
- Promotion of the role of the District Health Board which includes community and professional representatives
- Insure financing from 4 sources: 1. Government, 2. Revolving drug fund, 3. Affordable fees for services and 4. Community based insurance.
- No fee for pregnant women, infants and children under 4 years, and elderly.
- District Health System to focus on preventative and follow-up care.

Three major actions were implemented:

1. Information gathering: Studies were conducted to develop base-line data, to determine community level of interest (attitude and behavior towards paid health care) and to fine-tune the implementation strategies. From this information, a comprehensive picture of the health situation was made available to partners, with a clear distinction between how the health services are supposed to operate and how they actually function.

2. Generate political will: By bringing the study results to the attention of the authorities, dialogues between the Government and UNICEF have produced positive steps towards understanding the revitalization of the health sector and the Government's role in initiating the reform of the welfare system, in maintaining social cohesion and thus favouring political stability. Nevertheless, this activity was complex for a number of reasons:

- lack of familiarity of the majority of the Government officials with direct management of policies;
- no experience in working in partnership;
- Widespread perception that social welfare is entailed by economic growth (oil) and as such, does not need to be planned.

The success of this activity was expressed in the broad consensus among key policy-makers in the need to plan and implement as soon as possible, reforms in the social sphere in general, particularly in the health system.

3. Redesign a new system on the basis of the following strategic principles:

- Rationalization of services to provide a leaner and more cost effective health structure.
- Strengthen PHC to orient the system towards out-patient services; emphasize MCH, immunization and preventative services
- Adoption of ED Policy (essential drugs) to reduce the institutional and individual cost for health thus guaranteeing better coverage of the most vulnerable
- Community participation to set up councils to contribute to the management and financing of district services.
- Introduction of sustainable financial mechanisms: establish new pricing policy designed to reduce household health expenditures by at least 50%; introduction of community based health insurance, establish a revolving drug fund which will provide a source of affordable, quality drugs at the centers and peripheral locations throughout the country.
- Exemption policy: Community health councils administer the exemption system being designed to ensure free access to the poor, pregnant women and children three years and younger.

Overall Achievements: UNICEF intervention in Primary Health Care Reform generated the following direct and indirect results

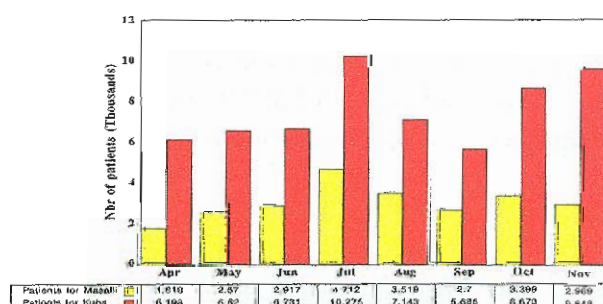
Direct:

- decreased incidence of preventable diseases;
- generated top to bottom enthusiasm for reform
- generated and sustained community participation
- regained people's confidence toward health services and practitioners
- increased access to health facilities especially pregnant women and children
- reinforced, enhanced and sustained the effectiveness of MCH programs
- increased doctor's competence on health management and financing.
- raised so far US\$ 500,000 from private sector for expansion of PHC reform in southern districts.

Indirect:

- strengthened collaboration with private sector and government authorities
- developed a replaceable model for PHC reform

MOH-UNICEF Primary Health Care Reform
Attendance at Kuba & Masalli districts
(April - November 1997)



C. EDUCATION

Attention to Education, remains one of UNICEF's primary strategies for poverty alleviation. Early Childhood Development, and Education Policy Reform are key components to the overall country intervention which will have lasting effects on the country's future.

i. Early Childhood Development (ECD)

An integral part of the Education Programme strategy is Early Childhood Development. This has traditionally been provided through preschools and kindergartens. However, in recent years, the number and quality of these facilities has reduced correspondingly to the declining ability of the national and district level educational systems to support this public service. The Azerbaijan educational system, for example, has approximately 1,300 kindergartens in 1997 in comparison with 2,000 in 1995/96. The formative role they once played has shifted to families in their home settings.

Consequently, through UNICEF coordination and sponsorship, the MOE has taken a more active role in promoting television programming for children audiences, specifically designed for preschool development. A special working group of the MOE (psychologists, teachers and other professionals), National TV and UNICEF, is developing six TV programs ready for final agreement and production. Five ECD educators were sent by the MOE to Moscow for a one month training aimed at familiarization and usage of the new ideas of the Russian Academy of Pedagogical Sciences on Early Childhood Development for the local production of cartoons and other contemporary children's educational materials. Implementation of the project has been accelerated by the active involvement of TV professionals and broadcasters in the process of planning, monitoring and evaluation of children's TV educational programs.

ii. Education Reform Policy

Education reform focuses primarily on improving the quality and sustainability of education services. The education sector of Azerbaijan employs 44% of total government employment, making education the second largest employment sector after Agriculture. The burden of this reality is compounded by the annual reductions in the education spending budgets over the past several years. In response to this situation, UNICEF initiatives in the area of education have set the framework for system reform through examples in alternative approaches to education policy and financing.

To arrest the deterioration of the system and improve the quality of education, especially at primary and secondary education level, UNICEF, with MoE established goals for decentralization of the management at peripheral level and the introduction of new school management and financing mechanisms while maintaining the achievements of the country's public education system, such as equity, universal coverage, accessibility and affordability while upgrading quality and efficiency by addressing the underlying constraints; mainly lack of funds and redundant management structures.

To achieve this goal, three objectives were identified: 1. to raise community participation in generating resources for improvement of services; 2. to develop parent partnerships towards managing school education plans; and 3. to decentralize the management of the system at the peripheral level.

In each of the five participating schools, focus groups (teachers, students, parents, and community leaders) learned that there is a willingness of parents to contribute and participate in their child's education with financial and non-financial support; there is an acceptance of the idea of the matching-grant by parents, teachers and community leaders; and a willingness by parents and teachers to create a school committee involving the community in the school financing and management. From these focus groups, a more comprehensive picture of the situation at each school was developed, with a clearer idea on how to involve the community in the process of reforming the school management. Perhaps more importantly, by bringing the results of the focus group discussion to the attention of the authorities, UNICEF has initiated dialogue with the government about the need to immediately introduce new mechanisms to revitalize the education system, and consequently, to implement reforms as soon as possible.

In redesigning the new system, policy makers, with training and guidance from UNICEF, agreed on the following principles:

1. Introduce self-financing mechanisms at the school level in the form of conditional matching grants.
2. Decentralize financial and administrative management, by opening bank accounts for each school.
3. Rationalization of the district educational structure to be leaner and more cost-effective.
4. Community participation through school committees to manage self-financing school systems and to contribute community resources.

Five schools have implemented these reforms, involving agreements between the Ministry of Education and the Ministry of Finance to open school bank accounts. Three of the schools have established the base for income-generating activities by securing equipment for printing text books and leaflets for sale, and securing land and facilities for raising and grazing cattle and sheep for breeding purposes; cultivating cotton and wheat and raising forage for livestock. Labor and materials for school renovations are being donated by parents and local businesses in the two other sites.

Chuhanli Secondary School #1 of Salyan District, a Case Study:

Salyan is a rural district with a population of 110,000 persons, approximately one and a half hours by car south of Baku. There are 35 primary schools, 13 secondary schools, including Chuhanli, and 2 high schools. Chuhanli school, built in 1953, has 508 pupils and 58 teachers, and suffers from all of the problems of this transitional period of the country. Once recognized for its outstanding achievements, the Salyan District education system is now confronted with a lack of resources at all levels, decaying infrastructure of the buildings and equipment, low morale of the employees and a declining motivation level of the students. All which has lead to a high rate of student drop outs.

As in other Azerbaijan schools, in the past the principal and his staff were able to rely on the government for all resources. Because the school has always operated in the tradition of receiving staff and supplies according to decisions of the bureaucracy, the principal has almost no experience in financial management. This has not changed much in recent years except that less and less resources have been available to manage, and more of the experienced authorities have had to leave their education posts to find work in higher paying activities. Consequently, the leaks in the roof have gone un-repaired. The heating system was not operated for lack of fuel. Toilets and water pipes stopped functioning properly and caused damage to the floors. Textbooks and most of the classroom equipment and supplies, such as desks, chairs, chalk and paper, have become impossible to replace or repair. The normal educational system had broken down.

Families in this rural community have been less able to contribute financially to their children's education than their urban counterparts because they have lost the few state run industries in the area and the collective farms have ceased to be productive.

To arrest the deterioration of the school system, a number of reform initiatives were introduced during 1997. The community elected a committee whose members are parents, teachers, students, and local

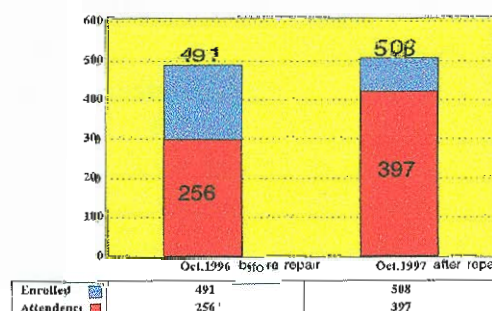
authority representatives. Forty five hectares of farm land were allocated by the district governor for income generation for school financing. Financial control of the money was maintained by the committee and deposited in a local bank account. They prepared a plan for maximizing their operational expenditures for planting three kinds of crops, cotton, wheat, and forage, and then were able to develop a projection of available cash for the various school needs.

Of the \$11,570 generated from the cotton harvest alone, operational expenses were \$7,400 and \$4,170 remained as net profit. For this first year, the committee allocated \$3,100 for school repairs, \$820 for teachers incentives, and \$250 for teaching kits. The community contribution for cash, labor and construction materials amounted to \$1,363 and was matched by UNICEF in the form of teaching kits and other educational materials.

The primary objective of this entire reform program has been successfully achieved. Student attendance has increased remarkably by 36% over the same period of the previous year. The school building is

SALYAN RURAL SCHOOL

Influence of income generation activities on number of pupils & attendance



more functional, and comfortable for teachers and students, and moral is noticeably higher.

What this program has capitalized on is the community need for self-determination. Once the tangible results have been experienced, new, creative ideas will naturally develop into a diversified foundation for sustainability.

iii. Convention of the Rights of the Child

"School is a place where children should have obligations as well as rights to develop their abilities and be considered equal partners in this process" are words spoken by the Head of the Education Department of Baku District during one UNICEF/Min. of Education sponsored convention with adults and children to discuss Rights of the Child and Education Reform. "We believe," he continued, "that wide knowledge of the basic children's rights will help us to transfer the words of the Convention into deeds as well as to create a new attitude towards children, which should be different from what we have been used to for many years." Promotion of the CRC began several years ago in Azerbaijan and has received increased attention this year through the Ministry of Education and the establishment of the CRC as part of the curriculum of one pilot school.

a. Baku Education Department adapted a special decree "On measures of protecting children's rights." As a first step, all city schools have prepared posters providing information about children's rights as well as telephone numbers of district and city education departments which the school children can contact in case their rights are violated.

b. Significantly, beginning in the 1997/98 education year the CRC will be part of the Baku Pedagogical Institute curriculum as a 10 to 12 hour special course.

c. In order to attract public attention to the most pressing children's problems and promote the basic principles of the Convention of the Rights of the child, UNICEF has developed for television, a

Said Mr. Ibragimbekov, "We have all the necessary potential to develop a high quality product bearing in mind the purpose of contributing to make the convention not only a text to read but a philosophy of life, a way of living that is as noble as it is challenging. Both ingredients are needed to shape a better future for our children and thus our society."

"**Soap Opera**" scenario which will be televised throughout the Former Soviet Union through Mir-Telefilm Creative Production Union and the "Mir" Interstate Broadcasting Company. A contest among local playwrights and scriptwriters took place in February-April, 1997. About 30 draft scenarios were submitted to an ad-hoc selection committee from which 4 finalists were chosen. Under the direction of Oscar-winner Roustam Ibragimbekov, a final screenplay has been prepared and is ready for production. The setting for the Soap Opera is in the court yard of an apartment complex and the surrounding neighborhood. It will portray the daily lives of average Baku families and cover among others, such weighty topics as disadvantaged children, juvenile delinquency, rights to education, and family abuse.

Part V: UNITED NATIONS Reform

The UN team composed of the IMF, World Bank, WFP, UNHCR, IOM and UNICEF, agree that a special working group be established with the support of locally recruited international consultants to achieve the following objectives:

- a. Analysis of the ongoing programs of the UN organizations operating in Azerbaijan
- b. Development of a common country assessment leading to a common country strategy.

These studies shall provide the foundation for the preparation of UNDAF.

Office premises: at the beginning of 1998 name will be formally changed to "UN House." In order to accommodate the expansion of UN programs, the possibility to eventually increase the office space is being considered.

- The Joint Consultative Group on Policy (JCGP) is involved in common Country Assessment
- The JCGP programme cycles will be fully harmonized in 1998
- The office lease duration is indefinite and there is no plan to relocate.
- UNDP manages the common services of the pouch, mail, reception, security and conference room. These common services are jointly financed.

Part VI: Other issues of concern to the UNICEF Executive Board

- **World Summit for Children**

The basic principles stated in the Articles of the Convention for the Rights of the Child and again reinforced in the World Summit Declaration for Children, have been the focal point for all initiatives in strategic planning, advocacy in long range development partnerships, and in capacity building at all levels of the education and health care reform movements. The summit goals have long been attained in Azerbaijan during previous times under the responsibility of State run institutions and central financing. The primary concentration for the Government, therefore, during these transitional years, along with UNICEF contributions, is to contain the deterioration and the progress made in previous years, and to transform the nature of social welfare from a solely governmental to a more shared responsibility among the public, private and community bodies.

- **Resource Mobilization**

Commitment of resources by the Government, other international organizations and the private sector have been successfully mobilized for the following reasons: 1) Positive results from pilot projects, e.g.: PHC reform in Kuba; 2) Innovativeness of the programs themselves in terms of addressing the long range needs of the social sectors for development of the country, e.g.: YAPS and CHL; 3) The ability of the country office to focus the attention of the partners on manifesting the Articles of the Convention of the Rights of the Child into a common goal, allowing for the diversity of purpose in each of the partnerships; and 4) Quick responsiveness to meet the emergency needs while establishing the foundation for Development programmes.

Contributions for PHC reform, for example, have come mostly from the private sector for replication of the Kuba pilot project in Massali, Jalilabad and Lenkaran; and from USAID who provided \$1.2 million for the immunization program which includes training and prevention components. The Dutch Government has been the major contributor to the YAPS and CHL project as a first step in integrating disabled and orphans into main stream society. Special in-kind contributions from the Azerbaijan government for YAPS and CHL office and warehouse space, are estimated to approximately \$70,000 per year.

- **Implementation of the UNICEF health strategy**

a. The **continuing priorities** remain focused on assisting the government in its effort to address the major preventable cases of morbidity and mortality of children and mothers. In this

effort, the highest priority has been given to cooperation, coordination and advocacy at all levels of public and private partnerships.

Specifically, programmes have concentrated on quality of services, ensuring safe injection practices, supporting improved disease surveillance, and monitoring and evaluation of health services. Through the coordinating efforts of UNICEF in its country wide vaccination campaigns, and its attention to strengthening disease surveillance methodology, polio has not been reported in Azerbaijan for two years.

Breast feeding and Baby friendly hospitals as well as other sound nutritional practices remains a part of the efforts to improve the health situation of the mother and child and to reduce incidences of diarrhoeal diseases, among others.

The Azerbaijan programme emphasizes the IMCI (Integrated Management of Childhood Illnesses) approach to case management of sick children, particularly with respiratory illnesses (ARI) and diarrhoea (CDD).

b. **Emerging Priorities** will focus on youth health in the form of attention to health and development of adolescents into healthy adults having the capacity to become caring parents able to provide for the health of their children. And on women's health in reducing maternal mortality.

Youth Health Programs will focus on working with schools, teachers and parents to develop school health programmes, including skills-based health education; and working with health systems to provide youth-friendly services.

Women's Health Programs will concentrate on safe delivery in rural areas particularly where Primary Health Care Reform programs are being implemented, to bring antinatal services closer to women, thus reducing the number of home deliveries.

- Implementation of policies and strategies on children in need of special protection measures.

Following the momentum of YAPS and CHL toward integration of invalids into the mainstream of society, UNICEF programs have also contributed to boosting the initiatives and policies through strengthening Governmental commitment towards designing policies and encouraging actions for better meeting the needs of the disadvantaged. The Ministry of Social Affairs, for example, plans to open a special bazaar for handicapped, constructed by disabled, where only disadvantaged, mainly disabled, shall be working. Similarly, the Ministry of Education and Ministry of Social Affairs are jointly designing policies towards the progressive integration of the invalids and disadvantaged into the regular education system. The network of partners, among private and public sectors as well as international organizations, engaged towards improving the condition of disabled and orphans has been expanded. Media attention and coverage of related issues has been concentrated on promoting the cause of the disadvantaged. Finally, through training and development of educational information, social workers' capacity to more effectively address the specific needs of the disabled have been revitalized and enhanced.

Part VII: Collaboration with UNICEF Partners

Acting as a true catalyst of social change for Azerbaijan, UNICEF has been able to bring together every available element of the community, national and international spheres, into a respected forum of collaborative, mutually supportive and beneficial partnership. This symbiotic relationship is based on expertise, experience and continuing exchange of ideas, grounded in common concern for a progressively brighter future for the people of Azerbaijan.

With the active participation of members of the Ministries of Health and Education, programs have been implemented and lessons learned which will continue the momentum developed thus far. Major collaborative partners who have committed themselves to numerous causes and events have been the members of the Ministry of Health, the Ministry of Education, many of the international petroleum companies, particularly the AIOC Consortium, UNOCAL, ELF, MOBIL and SHELL. Of particular importance and impact has been the leadership and support coming from President Heydar Aliyev, and the Cabinet and Legislative members, for UNICEF programs.

A. Public Sector

The Government of Azerbaijan remains the primary implementing partner in Health and Education Programmes, Projects and Reform implementation, with direct contributions of

"Our close and fruitful collaboration with UNICEF, the ministry of Health, the National Committee of Refugees and IDPs, Azerbaijan children's Fund and other institutions helped us produce a legislation that completely recognizes the rights of the child to health care services, education and social protection in this regard, UNICEF's projects aimed at reforming Primary Health care and primary and secondary education in the country, implemented both at national and district levels, acquire a vital significance for improving the quality of public health care services and general education and making them accessible for disadvantaged children."

Mr. Hadi Rjabov Chairperson of the Parliamentary Commission on Social Policy.

office and warehouse facilities such as; valuable, centrally located office facilities for the YAPS and CHL headquarters. Through example and observation of tangible, positive achievements, officials have recognized advantages beyond the initial handouts during emergency assistance times. The development of this partnership has been a key strategy in all of UNICEF's programs. Recognition and appreciation of UNICEF's global mandate to promote the rights of women and children has been a process in itself that has made significant progress this year.

Public sector collaborative efforts are numerous, ranging from public celebration of the UNICEF 50th Anniversary with the President of Azerbaijan, Heydar Aliyev, to the intensively coordinated vaccination campaigns implemented with the Ministry of Health. Significant collaborations with the public sector are exemplified below:

- In July, the President of Azerbaijan inaugurated the premises of YAPS and CHL offices.
- In January, Mr. Izzet Roustamov, Deputy Prime Minister opened the ceremony for the Sarai orphanage renovation, acknowledging the contributions of the Italian Government and UNICEF toward the improvements to the institution;
- PHC Reform implementation and expansion with the MOH and Regional Health Officials;
- In April, a two day workshop on Essential Drugs Policy (ED) was organized by the Ministry of Health, UNICEF, and WHO, in which representatives from the MOH, Cabinet of

Ministries, and the State Medical University attended, ultimately resulting in the drafting of legislation on Essential Drug Policy.

- In May, the Assessment of the Clinic Diagnosis, Treatment and Recording Performance was coordinated by the Deputy Minister of Health and initiated by UNICEF and WHO, for the evaluation of medical staff performance. The study results were submitted by WHO in Geneva later in July.
- EPI and Communicable Diseases Control program integrally involved with the MOH for training and implementation for the past 3 years.
- CDD and ARI diagnosis and treatment in conjunction with the MOH and leading medical universities.
- MOH established the National Breast Feeding Committee to intensify the transition of the maternities to the BFHI and pediatric services to BF principles. Approx. 500 doctors and midwives trained on BF/BFHI.
- Cabinet of Ministers has drafted decree on Iodized Salt (UIS) to be adopted 1998. UNICEF has provided 2 additional iodization plants.
- For YAPS and CHL,
 - Ministry of Education provides office premises;
 - Ministry of Communication provides phone and radio communications support;
 - Ministry of Internal Affairs provides driver skills training.
 - Ministry of Labor and Social Welfare and Ministry of Youth and Sport assist in staff selection.
- Early Childhood Development: MOE sponsored 5 educators to attend 1 month training workshop in Moscow on Children's television production. UNICEF and MOE jointly provide technical assistance, along with the State TV/Radio Company in support of these productions.
- In Education Reform in 4 schools:
 - Ministry of Education is participating in establishing local Steering Committees in several districts for decentralization of management responsibilities.
 - Ministry of Finance is helping to establish local bank accounts for schools in order to decentralize financial activities.
- Psycho-social rehabilitation research in childhood development of mentally handicapped children was conducted by Baku State University, Social Sciences and Psychology Department with support from UNICEF.

B. Private Sector

The confidence of the Private Sector in the Country Programme has been generously expressed through private contributions, matching funds and participation by executives in public events and celebrations. Donations from private sources have been an essential, mutually

beneficial approach to being responsive and progressive to the various options available to effect positive changes during this evolving contemporary social environment. This network of private contributors has provided the ideal framework for harmonious relations and mutually reinforcing achievements.

- The YAPS and CHL project has been a model in collaborative project design, fund raising and successful implementation, which has brought together Government, private forces with disabled beneficiaries to produce two highly valuable public service enterprises. Contributors have been the Dutch Government, AIOC, SHELL, UK Embassy, MOBIL, BP, Pennzoil, Wicklow Attorneys, British Bank of the Middle East, and Morrison Construction Company.
- Funding provided by SHELL and MOBIL companies was contributed for the production of "Portraits of Transition," a publication using entries from a photo competition among journalists, depicting the life of children and current events of modern Azerbaijan.
- Donations from ELF and UNOCAL for Primary Health Care (PHC) Reform expansion have been received, amounting to approximately US\$ 500,000. With these donations, new districts will receive a one-time provision of essential drugs for a self-sustaining, revolving fund, basic medical equipment (most needed for early detection of prevalent diseases), office equipment (computers, etc.) needed for improved management. These companies joined the efforts to improve the health status of the local population through the provision of quality health services, the promotion of healthy life style (hygiene, eating habits, etc.), training on health and financial management, in-service training for health professionals on improving clinical performance.

C. International Organizations

- USAID has continued to support the immunization campaign for 1997 and into 1998 with contributions for vaccines, equipment and supplies (syringes, cold chain equipment and spare parts, ARI Pediatric kits), and direct operational costs. This grant amounts to approximately US\$ 1,200,000.
- MOH with WHO and UNICEF, conducted an assessment of the Clinic Diagnostic, Treatment and Recording Performance for the first time in Azerbaijan. Training for this assessment was conducted by UNICEF. The objective of the study was to assess the conditions and treatment for diseases such as ARI and diarrhea, hypertension and STDs and provision of health care services as well as the level of the community's awareness on the diseases and their prevention.
- UNHCR Constructed premises for setting up of multi-function centers in the liberated territory
- UNDP, in cooperation with UNICEF produced a book about the environment for primary school children.
- WFP contributes Food for Work for social workers involved in psychosocial rehabilitation of children in the Multifunctional Centers of the IDP camps in southern Azerbaijan.

- UN Voluntary Fund for Disabilities contributed resources for setting up and implementing the YAPS and CHL programs.

D. NGOs

The Ministry of Health and UNICEF, announced the eradication of polio from Azerbaijan in February 11, 1997. The entire vaccination campaign has involved the expertise and cooperation of health professionals of the Ministry of Health assisted by international NGOs

- Relief International,
- Oxfam,
- MSF Belgium,
- MSF Holland
- IRC in cooperation with UNICEF implemented winterization activities of 30 Multi-functional centers in liberated territories.
- World Vision International, in cooperation with UNICEF and WFP implemented construction activities and establishment of school-based bakery in Sumgait Boarding School.
- BUTA national NGO, in cooperation with UNICEF, carried out training sessions on psychological recovery and rehabilitation activities to refugee teachers, social workers and parents in R/D camps and settlements.
- KAINAT national NGO, in cooperation with UNICEF, is elaborating TV educational programs for early child development.

E. The Media

Public attention to contemporary social changes was focused through the media in a number of forms.

- Over 170 press clippings and articles were devoted to UNICEF events and activities.
- The quarterly newsletter, "Transition", covering UNICEF's activities, is produced in Azeri and English for the fourth year. It is distributed to governmental bodies, embassies, international companies and NGOs. It has raised much interest and encouraged support for UNICEF programs and activities in the country.
- Television productions through, national TV and MOE, have been designed for children to bring Early Childhood Development programs into the home.
- The "Soap Opera" production, from its conceptualization, to the media and cinematographer's creative formulation of a variety of scenarios has been a cooperative process with UNICEF leadership and initiative. An agreement on the TV film series production was concluded between UNICEF and the "Mir-Telefilm" Creative Production Union of "Mir" Interstate Broadcasting Company in June, 1997.
- National TV is broadcasting free of charge messages promoting the SOS Help-Line.

- Reuters News Agency is in the process of producing a film describing the efforts and activities of the **immunization month** in Azerbaijan.
- CHL (Child Help Line) is receiving cooperative support and attention from ANS Radio stations (private) with news coverage and public service announcements 5 times per day, free of charge, giving recognition to UNICEF involvement.

F. Civil Society

Participation from the Azerbaijan population has been willingly expressed in many ways over the past several years, in the form of committee membership, formation of associations, and individual initiative.

- PHC Reform incorporates community involvement through an ad-hoc community committee in supervision over drug use, determination of service fees and drug prices, and in defining the groups exempted from payment for medical services.
- Community involvement in the revitalization of local Education systems has been part of success of 4 reform programmes so far. In each community, focus groups involving teachers, pupils, parents and leaders have found their local population willing to support improvement in the quality of education in the following ways:
 - willingness to provide matching-grant contributions by parents, teachers, community leaders;
 - willingness by parents and teachers to create a school committee involving the community in the school financing and management.

Part VIII: Management and Administration

In 1997, within the framework of the Primary Health Care reform, Kuba and Massalli districts have been regularly visited by the Resident Project Officer and Health Officers. All together, 15 visits to the project sites for PHC reform implementation were undertaken by UNICEF PHC and MCH officers in order to ensure regular monitoring of the reform progress. They have also undertaken a number of visits to other districts of the republic, namely Jalilabad, Lenkoran, Shemakha, Ismaili, Bilesuvar, Jardimli, etc. to assess the existing health structures and UNICEF's possible involvement in their development/restructuring. The launching of the PHC Reform project in Massalli district took place in June 1997 with the participation of the RPO and Deputy Minister of Health. In July 1997, Massalli district was visited by a group of UNICEF officials, namely J. Donohue, Regional Director of the Geneva CEE/CIS and the Baltics Regional Office, A. Zouev, Officer-in-Charge of the CEE/CIS and the Baltics Section in New York, J. Peters, Area Representative for Caucasus, M. Murray-Lee, Regional Adviser on External Relations. The trip was undertaken within the scope of the Mid-Term Review for monitoring of the PHC reform development in the district.

In September 1997, Mr. Roger Thomas, Extraordinary and Plenipotentiary Ambassador of United Kingdom of Great Britain in Azerbaijan, visited several health centers in Massalli district to assess the improvement of the health care system. In October 1997, Ken Bradley, President of UNOCAL (an American oil company), was invited to visit Massalli district and to

explore at the same time the opportunities for the PHC reform's expansion to Lenkoran and Jalilabad districts. As a result, UNOCAL expressed interest and contributed US\$ 260,000 for the expansion of the PHC reform to Jalilabad district of the republic. ELF followed the same example in Lenkoran district. At the present time, BP, Mobil, Shell, Exxon and Agip, are considering project proposals for the possible expansion of the PHC reform in the other districts of the republic, e.g. Gobustan, Bilasuvar, Salyan, Yardimli, Neftchala, etc.

While being the 3rd generation country for introduction of PROMS (in 1999), UNICEF Azerbaijan Country Office has implemented the following relevant preparatory activities in 1997:

- installation of LAN system (to be effective early 1998);
- identification of a PROMS Focal Point for the country office;
- distribution of all relevant information, namely ExDir "Getting ready for PROMS", newsletters on current PROMS roll out status, video materials, etc.;
- participation in Global Office Structure questioning;
- installation and self-directed staff training on the basis of the PROMS Training Kit, i.e. the PROMS Training Package, the Tutorials, Concepts Paper 2.2, the PROMS Installation Guide (hard copy) and Build 18;
- RPO's participation in:
 - PROMS training in Ankara, Turkey in June 1997;
 - workflow redesign workshop in Tbilisi, Georgia in October 1997. A work process redesign workshop should take place next year for all staff of the office to improve overall effectiveness;
- identification of individual training needs for upgrading of the computer literacy and inclusion of them in the 1998 Country Office Training Plan;

The Management Excellence Process is at the preliminary stage. Although the staff of the office is relatively new and inexperienced and despite the fact that no substantial resources have been allocated to introduce and follow-up on management excellence, the office established a staff association in last quarter of 1996 as well as a country management team during the second part of this year. During its first meeting, the TORs were elaborated. Discussions related to MEP took place during CMT's meetings where it was highly underlined that orientation to staff who are new to the UN system (administrative procedures, work style) should be systematically provided. The establishment of the CMT contributed to assess team performance and to develop competencies of team members. It has also the positive effect to be involved in decisions that go beyond the responsibilities of individual members and consequently to provide added value to the decision making process. CMT mainly focused on management for effective and efficient office operations including the integration of office activities and the allocation of country office resources as UNICEF Azerbaijan received important donations from the private sector this year.