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**THE DECENTRALIZATION OF THE
NATIONAL PROGRAMME OF ACTION:
A CASE STUDY OF SUDAN**

Tarique Farooqui and Anupama Rao Singh*

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This paper forms part of the background documentation for an ICDC study on the Decentralization of the National Programmes of Action, directed by Carlos Castillo.

* Both of the UNICEF Country Office, Khartoum.

The views expressed in this paper are those of the authors and do not necessarily represent the views of the UNICEF International Child Development Centre.

The preparation, implementation and decentralization of the National Programme of Action for Child Survival, Protection and Development (NPA) in Sudan has been undertaken by a number of agencies, including focal ministries of the Government of Sudan, UNICEF, other UN system organizations and international and national NGOs. It would be impossible to list all contributors by name, but among the significant actors are Mohammed El Khair Zubair, state minister, economic planning and investment; Ahmed Abdel Halim Mohammed; Mohammed Ali Omer and Mohammed Abdel Hameed of the Ministry of Economic Planning and Investment, and Gamini Abeysekera.

This paper is based on published and unpublished sources of information, including reports of workshops, seminars and consultations connected with the preparation and decentralization of the NPA.

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EXECUTIVE SUMMARY

Following the World Summit for Children, the Government of Sudan initiated a participatory, intersectoral process for the development of a National Programme of Action (NPA) that culminated in the adoption of a programme in January 1992. The National Council for Child Welfare was established under the president with the mandate to undertake advocacy in support of children, monitor the status of children and mobilize public support for the implementation of the NPA. The goals of the NPA have been generally reflected in the Comprehensive National Strategy (1993-2002) adopted by the Government. The decentralization of the NPA was set in motion in 1993. To date, situation analyses have been completed in four of the six erstwhile northern states and initiated in the southern state of Equatoria.

The Sudan case represents an attempt at the decentralization of an NPA in a complex environment characterized by economic isolation and chronic emergency situations resulting from an ongoing, decade-old civil conflict. Efforts have been made to advocate and support a focus on "decade and mid-decade goals" (MDGs) within continuing relief activities (for which UNICEF is the lead agency for non-food services), as well as in the shift from relief to rehabilitation in the relatively stable and secure areas of southern Sudan. Linkages between relief and development (and therefore a drive toward MDGs) are thus being forged and strengthened. The interventions of Operation Lifeline Sudan in guinea worm eradication, polio and measles vaccination and vitamin-A supplementation, as well as emergency education for the displaced, serve as examples.

Participatory planning and capacity building are pivotal features of the NPA decentralization process, given their critical relevance to sustainability. Six-member intersectoral teams have been constituted for each state and made responsible for undertaking the situation analyses and preparing the state Programmes of Action (SPAs). The teams have been trained in assessment, planning and programme formulation. Their work is overseen by task forces under the chairmanship of the *Walis* (state governors). In addition, capacity building among counterparts on issues such as comprehensive education-sector analysis, costing and financing, innovative fund-raising, gender sensitization and monitoring has been undertaken.

The empowerment of local communities is promoted through the Child Friendly Village Initiative (CFVI), which provides support to local communities to help them understand the goals of the NPA, analyse their present situation in relation to the goals and identify and adopt actions which they can take to realize the goals.

The NPA serves as an important framework for interagency collaboration with UN agencies, especially the UN Development Programme, the World Health Organization, the UN Population Fund and the World Food Programme, in the context of relief and rehabilitation activities, as well as development programmes. Collaboration between the UNDP and UNICEF in the Area Development Services Scheme project is a case in point where the CFVI is being promoted to achieve "synergy" between the economic activities and efforts at poverty alleviation within the Area Development Services Scheme and the goal-oriented interventions of the CFVI.

In early 1994 the nine states of Sudan were reorganized into 26. Capacity building for the planning and development of the SPAs will now be supported on a zonal and regional basis for all the 26 new states. Support will eventually be extended to selected priority states to undertake the costing of the MDGs, assess available and required resources and evolve viable SPAs. The experience gained will be used to replicate the initiative in the other states.

Success in the decentralization of the NPA process will be determined by a number of critical economic and political factors and the country's ability to raise domestic and external resources for the implementation of the planned activities. In this, the quest for cost-effective strategy options will become a priority. The ability of the Federal Government to raise the resources to equip the administrative and organizational system adequately and harness the nongovernmental sector (NGOs, academia and communities) in each of the fledgling states is a dimension which needs serious consideration.

Finally, the prospect of the resolution of the civil conflict and of peace in Sudan will have far-reaching consequences for NPA decentralization and goal achievement. Conflict resolution and the dividends of peace can bring about a valuable reallocation of precious national resources for child survival and development, regenerate external assistance for development and, most importantly, enable the country to recover and make a rapid advance into the 21st century.

I. INTRODUCTION

Sudan was one of the first countries in Africa to ratify the Convention on the Rights of the Child and adopt a National Programme of Action (NPA) after the World Summit for Children in September 1990. The Convention was ratified by the Government in August 1990, and the NPA was adopted in January 1992. A National Council for Child Welfare was established under the Office of the President in 1991. A new Basic Cooperation Agreement between UNICEF and the Government was also signed in August 1992 and has greatly reinforced UNICEF's mandate to work at the grassroots level in Sudan.

This paper attempts to trace the NPA preparation process in Sudan and the subsequent decentralization of the programme to the subnational level. In essence, it focuses on the key activities undertaken during the period 1991-4. The paper draws on published and unpublished sources of information. In addition, reports of workshops, seminars and consultations on the situation of children and women in Sudan and on the NPA preparation and decentralization process have been employed extensively.

The Sudan case reflects an attempt at the decentralization of an NPA in a complex country environment characterized by economic isolation and chronic emergency situations resulting from an ongoing, decade-old civil conflict. Efforts have been made to advocate and support a focus on the "decade and mid-decade goals" in continuing relief activities (for which UNICEF is the lead agency for non-food services) and in the shift from relief to rehabilitation in the relatively stable and secure areas of southern Sudan. Linkages between relief and development have been forged and strengthened. Interagency coordination is being directed at "goal achievement", while similar efforts at further leveraging and directing the interventions of Operation Lifeline Sudan have gained momentum, especially in relation to the achievement of the mid-decade goals. The recent agreement among the various parties involved in the conflict to de-link the humanitarian aspects from the political and military dimensions has been an additional and important development.

The decentralization of the NPA was initiated in 1993, and the process is far from completion. It is an ongoing activity and is being adapted to the recent initiatives of the Government to increase the number of states from nine to 26. To date, state situation analyses have been completed for the erstwhile six northern states and begun in the southern state of Equatoria. Two states have prepared draft programmes of action.

Capacity building at the national and subnational levels and the empowerment of local communities have been important process objectives in the decentralization of the NPA.

Intersectoral task forces composed of members of the national and state governments and representatives of the National Council for Child Welfare and UNICEF have been responsible for decentralization activities. The training and orientation of task-force members, as well as other key actors, have been given priority. At the grassroots level the empowerment of local communities to assist them in understanding the goals and the relevance of the goals to their villages in planning and managing actions aimed at achieving the goals is being supported through the Child Friendly Village Initiative.

The emphasis on participatory planning and capacity building has no doubt affected the pace of implementation. However, it continues to be a pivotal feature of the NPA decentralization process because of its critical relevance to sustainability.

Perhaps the most significant spinoff of the preparation and decentralization of the NPA has been the elevation of the commitment of the economic planning departments of the Government to a qualitatively higher dimension. Cooperation with the Ministry of Economic Planning and Investment used to be limited mainly to protocol issues. The NPA process has now resulted in a close working relationship between officials of this ministry and UNICEF on substantive issues and concerns and its emergence as the focal point for UNICEF cooperation in the country. It has also led to efforts at capacity building among key Government officials in related areas of strategy development, costing and financing, innovative fund-raising and monitoring.

II. THE SUDANESE CONTEXT

Sudan, with an area of about 2.5 million square kilometres (approximately 967,000 square miles), is the largest country in Africa. It shares international boundaries with nine other countries: the Central African Republic, Chad, Egypt, Eritrea, Ethiopia, Kenya, Libya, Uganda and Zaire. The country is characterized by diverse climatic conditions, terrain and social and demographic features. The White and Blue Nile rivers, along with their main tributaries, are the major sources of irrigation and sustenance in the predominantly agrarian economy.

Social Characteristics

Sudan is a meeting place of Arab and African cultures. Nearly 600 different tribes and ethnic

groups are estimated to live within its borders. However, within this social and cultural diversity, the country's population can be divided into two broad and distinct cultural and religious groups: the mainly Arab and Muslim North and the Negroid peoples of the South who are predominantly animists or Christians, with some additional Muslims. This broad ethnic division, sharpened by economic and political inequities and perhaps by past neglect, may be considered a major contributor to the genesis of the civil conflict in the country since Independence, a conflict whose most recent phase is over a decade old.

Demography

The census conducted in 1993 estimated the population of Sudan at about 24.9 million people. Some consider this figure to be too low, given the under-reporting in those areas of the South that were inaccessible to the census-takers because of the civil conflict. The annual population growth rate is reported to be 2.8 percent, which means that an increasing burden is being placed on the scarce resources available to the country for development.

There is an average of ten inhabitants per square kilometre in Sudan. The Central and Khartoum states and the areas along the banks of the Nile rivers are heavily populated, while exceedingly low population densities (in single digits) are found in the other parts of the country. About 68.5 percent of the population reside in rural areas. Urban dwellers account for about 20.5 percent of the population, while 11 percent are nomads.

Children under 14 years of age constituted about 43 percent of the total population in 1983. While age-specific population figures based on the 1993 census are still being computed, mid-year projections for 1993 indicate that this proportion has remained unchanged. A marginal decline to 42 percent is expected by 2003. In real terms, the present population in the 0-to-4 age group is probably about 3.5 million, while that in the 5-to-14 age group is estimated at around 7.5 million (NPC and UNICEF 1994).

Political Trends

Prior to Independence in 1956, Sudan was ruled by the Anglo-Egyptian condominium which had been established in 1898 following the overthrow of the Mahdist rule. Since Independence, Sudan has experienced considerable political change, with democratically elected governments and military regimes replacing each other with regular frequency.

The inability of democratically elected governments to generate and sustain political stability has had serious consequences both for the country's development and for the management of the differences between the northern and southern regions.

The Civil Conflict

The onset and continuation of the civil conflict in Sudan can be traced to a complex of cultural and historical factors, as well as to developments of the post-Independence period. Under the Anglo-Egyptian condominium, the South tended to be administratively separate from the North, with local British administrators and tribal chiefs enjoying a considerable degree of autonomy. At the time of Independence the "South" emerged with a distinct subnational identity within the national fold.

The inability to establish viable regional autonomy in the South, along with recurring violence, resulted in the eruption of a major civil war toward the end of the 1960s. The situation improved with the signing of the Addis Ababa Agreement in 1972. However, an intricate set of factors, including only limited success in realizing the terms of the Addis Ababa Agreement, led to the outbreak of a second phase of civil war in the mid-1980s (Voll and Voll 1985). The adoption of Islamic law (the *Shari'a*) at that time intensified the conflict, which remains unresolved to this day.

The decade-long civil war has had a devastating effect on the country and its citizens. An estimated 500,000 civilians have lost their lives, and the basic social-services infrastructure in many parts of the South has been virtually destroyed. The financial costs of the conflict, coupled with the international repercussions, have severely affected the nation's economy.

Economic Trends

There has been a steady decline in the country's economic situation since the late 1970s. A substantial drop in production, increasingly large deficits in Government budgets, rising external debt and a large deficit in the balance of payments have resulted in high inflation, depreciation of the currency and a scarcity of resources for social development expenditures.

In early 1992 the Government undertook to restructure and liberalize the economy. Key measures included a floating exchange rate between the Sudanese pound and the US dollar, a pricing policy based on market forces, a reduction in Government subsidies and the

liberalization of imports.

In order to mitigate the negative effects of the new policy on the economically vulnerable, the Government raised the minimum wage in both the public and private sectors, introduced a child benefit supplement for children in primary and secondary schools, established systems to supply food staples to Government employees on a loan basis, increased the pensions for retired Government employees, and provided for cash supplements of 500 Sudanese pounds per month each to some 500,000 needy families outside the formal sector (Al-Nayyal n.d.).

In 1991-2 the country's GDP at fixed prices was reported at approximately 7.5 billion Sudanese pounds, a modest increase over the figure of 6.7 billion pounds reported for 1990-1. While the Government reported GDP growth rates of 11.3 percent in 1991-2 and 13 percent in 1992-3, international estimates have been more moderate: 7.6 percent in 1992, 4.3 percent in 1993 and a projected 5 percent in 1994.

Federal budget deficits have increased steadily since the late 1980s, with an estimated deficit of 36 billion pounds in 1993-4. The inability of the Government to control expenditures has had an adverse impact on Federal funding for social services, with reductions in allocations in real terms, the transfer of the burden of financing to state governments and a proposal to increase the level of privatization of many services.

Continued inflation and a sharp fall in the value of the Sudanese pound have aggravated the situation and caused hardship to the average citizen. The inflation rate was as high as 150 percent in the latter part of 1992, peaking in December of that year and then declining to 80 percent during the first part of 1993. The inflation rate was estimated at around 115 percent at the end of 1993, with a marginal decline to 105 percent forecast for mid-1994 and a considerable decline during the second half of the year.

At the end of 1992, Sudan's external debt was estimated at about \$15 billion. The debt burden in 1991 was over \$600 per capita, an increase of over 100 percent since 1980. The country's ability to service the external debt has steadily declined, with only \$23 million paid in 1991 and \$22 million in 1992 against an estimated \$1.2 billion due in 1991 (EIU 1993).

No reliable data exist on the prevalence and extent of poverty in the country. In February 1992, at the time of the liberalization of the economy, the Government estimated that some 1.5 million families were in need of special assistance. If the proportion of income spent on food is used as a rough indicator of economic status, the situation of the average Sudanese family is not promising: about 60 percent of the average family income tends to be

spent on food alone.

Official development assistance declined sharply between 1985 and 1991, falling from around \$1.1 billion to \$887 million (World Bank 1993). In 1993 external aid was expected to reach no more than 27 percent of the total national budget.

The overall economic situation and the decline in external aid have had an impact on the Government financing of social-sector programmes (see later).

III. THE NATIONAL PROGRAMME OF ACTION

Sudan's experience with national development planning since Independence has been mixed. The first Development Plan, designed to run for a period of ten years, was initiated in 1961 but abandoned in 1964. Following a gap of more than five years, a development plan was launched for the period 1970-1 to 1974-5 but was also quickly abandoned. Further attempts at prospective planning resulted in a Six-Year Plan (1977-83), which was soon replaced by a three-year Investment Programme. The Government subsequently adopted an annual planning cycle. Then, when it introduced the Comprehensive National Strategy, the Government changed the planning cycle to three years.

Following the ratification of the Convention on the Rights of the Child, a clear, visible effort was initiated by the Government to articulate a national policy for children. The president of Sudan represented the country at the World Summit for Children in September 1990, and Sudan was one of the first signatories of the World Declaration on the Survival, Protection and Development of Children that was agreed to at the Summit. The preparation of the National Programme of Action was initiated in mid-1991, and the programme was officially adopted in January 1992. The revised Basic Cooperation Agreement between UNICEF and the Government was signed in August 1994, thus reinforcing the mandate of UNICEF in Sudan and the role of that organization at the grassroots level in the country.

The Preparation Process

The NPA preparation process was initiated with the establishment of an institutional framework and oversight mechanisms. The Ministry of Economic Planning and Investment was given the responsibility of mobilizing state governments and local development councils.

Through the regional planning unit in the ministry, state governments were consulted about their particular situations and needs.

The preparation of the NPA was undertaken in two broad phases. During the first phase (June-October 1991) the sectoral ministries, in consultation with NGOs, UNICEF and other UN agencies, undertook a rapid situation analysis, identified priorities and drafted sectoral programmes of action. During the second phase (October 1991-January 1992) the sectoral programmes of action were reviewed and integrated; resource requirements were estimated, and the NPA was prepared. The second phase involved extensive consultations with voluntary agencies, academics, public interest groups and national leaders. A national symposium of voluntary agencies was organized on 11 December 1991, under the coordination of the Sudan Council of Voluntary Agencies, to review the draft NPA and the role of NGOs in NPA implementation.

Two main sets of goals have been identified in the NPA: national priority goals and complementary sectoral goals. The sectoral goals have been broken down into interim goals for the period 1990-5. Within the Sudanese NPA the elimination of poverty has also been recognized as an additional goal of national importance. Furthermore, because more than eight of every ten women are estimated to have been constrained to undergo circumcision (the extreme "pharaonic" circumcision in nearly 50 percent of the cases), the eradication of harmful traditional practices has been classified as a national sectoral goal (GOS 1992).

Implementation and Resources

Among the strategic elements identified in the implementation process are improved planning, monitoring and intersectoral coordination; a higher priority assigned to less developed areas and more deprived target groups; the adoption of low-cost interventions to maximize resources; institutional strengthening and capacity building to promote sustainability; cost sharing; the generation of local resources; community mobilization and participation, and micromanagement.

The financial resources required to achieve the goals have been estimated at around \$2.8 billion. The Government is expected to contribute about \$2.1 billion, and the other \$700 million are to come from external aid. The need to restructure government budgets at the Federal, state and council levels, decentralize planning and harness traditional sources of social insurance has been recognized. The NPA includes a commitment to increase the

allocations for health care, shift resources from urban to rural water and sanitation programmes and expand the mobilization of local resources for primary education.

The NPA implementation process is to be reviewed every two years. The National Council for Child Welfare has been assigned the overall responsibility of reporting to the president, while technical assistance is provided by the National Population Committee. In coordination with the sectoral ministries, the Ministry of Economic Planning and Investment has the task of monitoring overall resource generation and allocation. The National Council for Child Welfare is also expected to serve as the lead agency for advocacy and follow-up among voluntary organizations and public-sector representatives and for "social mobilization" in support of the NPA. The active cooperation of international and bilateral donors has also been envisaged in the implementation and realization of the NPA goals.

The Commitment and Activities of the Government

National development plans used to focus mainly on economic issues, and interventions designed to benefit children tended to be relegated to sectoral programmes. However, the ratification by Sudan of the Convention on the Rights of the Child, the participation of the president of Sudan in the World Summit for Children and the drafting and adoption of the NPA have provided a much needed impetus in the drive to raise solicitude for children to the highest levels of the national agenda. Thus, in 1990, following the ratification of the Convention, a wide-ranging concern for children became evident, and the Government undertook a series of measures to translate this concern into action.

During the early 1990s the Government initiated a series of broad-based consultations to review the country's situation and determine a national agenda for development. These consultations resulted in the Comprehensive National Strategy for the period 1992-2002. The CNS is now accepted as the nation's development plan for the decade. It is to be implemented in four phases (1992, 1993-5, 1996-9 and 2000-2). The goals and strategies of the NPA are fully integrated into the CNS, both in the general plan and in each of the sectoral plans. The CNS is the first development plan to embrace a distinct section on children, thereby confirming the national priority accorded to the survival and development of children. Sections on women, youth, public participation (including NGOs) and decentralization have also been incorporated. Through the CNS, the foundation has thus been laid for the integration of the NPA with the current national planning process.

The following are key elements in the preparation of the NPA.

- The elevation of the concern for children to the highest levels of the national agenda, resulting, *inter alia*, in the inclusion of an intersectoral strategy for child survival and development in the country's national development strategy.
- The creation of an autonomous organization, the National Council for Child Welfare, under the leadership of the president, to monitor the NPA and other initiatives linked to the Convention on the Rights of the Child.
- The exploration of innovative channels for resource mobilization, including debt conversion, the harnessing of traditional sources of social insurance, community participation, cost-sharing and the establishment of a special allocation of 2 billion Sudanese pounds to carry out related activities.
- The incorporation of the goals of the NPA into the Comprehensive National Strategy, thus paving the way for the integration of these goals into the national planning process.
- The development of a process to decentralize the NPA in keeping with the country's federalization initiative.

IV. THE DECENTRALIZATION OF THE NPA

Over the last several decades the Government has been searching for an effective system for development planning and administrative decentralization. Between 1961 and 1983 four development plans were formulated. These plans were all eventually abandoned earlier than expected, lasting from three to ten years. During the mid-1980s an annual planning system was adopted. In the early 1990s this system was in turn replaced by the Comprehensive National Strategy.

Local and regional development received only limited attention prior to the Six-Year Plan of 1977-83. That plan included a comprehensive local and regional component designed to reduce the disparity among various areas in terms of resource allocations and overall development. It was aimed at raising standards of living and achieving development which was balanced throughout the country. To support the implementation of the plan, a ministry of planning was created within the Federal Government, and regional planning units were

established at the state level. Fifteen percent of the total outlays for the plan were earmarked for regional and local development. The participation of local councils in regional development activities was encouraged. The realization of the aims and objectives of the Six-Year Plan was restricted by a lack of resources to equip the regional planning units with the expertise they required and of an infrastructure and appropriate mechanisms for planning and coordination at the council level.

Decentralized planning received a further impetus in the four-year Salvation, Recovery and Development Programme (1987-92). The full-fledged decentralization of planning and development was to be promoted in order to reduce regional disparities. A four-tier system (Federal, state, province and council) was adopted. Priority was accorded to the reorganization of basic social and economic infrastructures and to activities designed to promote food security and integrated rural development which would meet the basic needs of rural populations and improve the productivity of the traditional sector. Fourteen percent of the total investment resources were allocated to regional development.

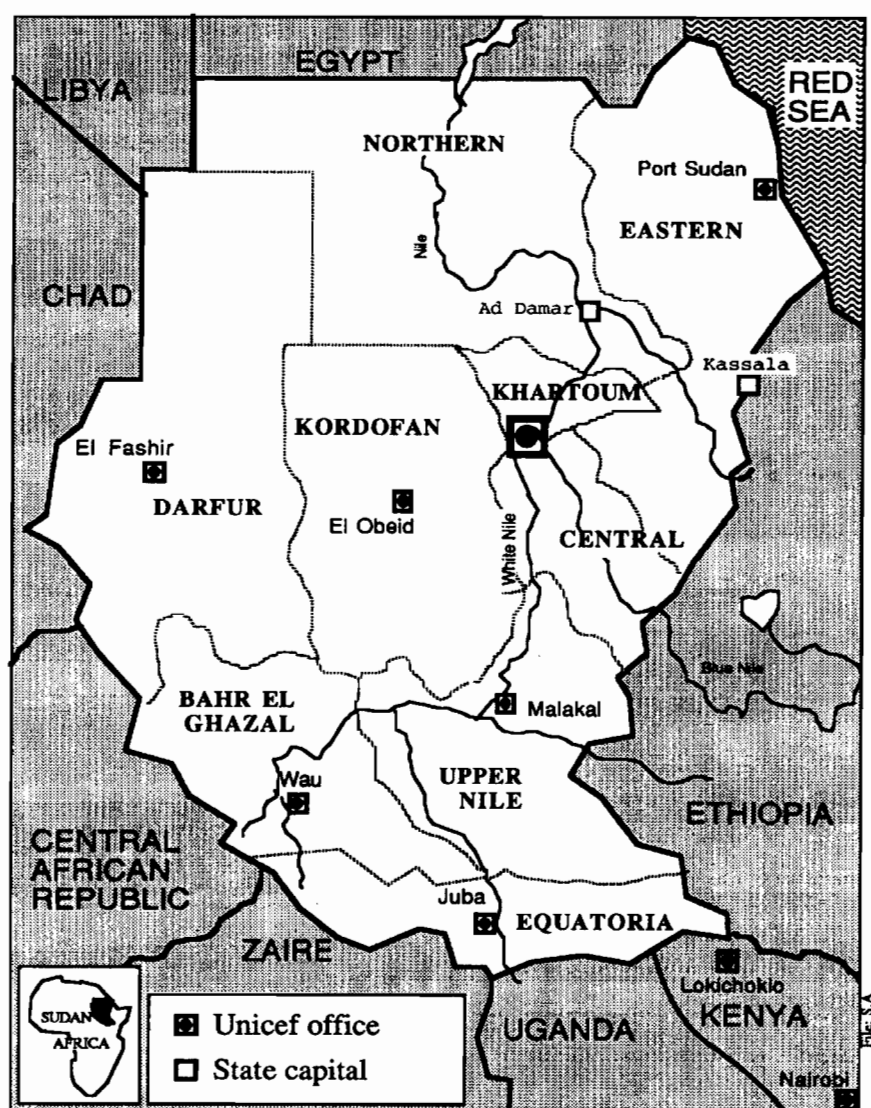
The Federalization Initiative

As part of the federalization initiative, the states were restructured by constitutional decree in February 1991. The country was redivided into nine states: six in the North and three in the South (Figure 1). Each state comprised an average of five to six provinces (though a few had more), the total number of provinces having been increased from 18 to 66. This was done in order to promote more effective organization and administration. At the lowest administrative level, local councils, consisting of 176 rural councils, 27 town committees and 16 municipalities, were established. Popular committees composed of people's representatives were created to assure popular participation in development and the monitoring of Government programmes.

Each state was headed by a *Wali*, or governor, who was assisted by a cabinet of four ministers. In each of the three southern states an "advisor for peace" was also appointed. The provinces were headed by commissioners, who in turn designated local councils composed of public representatives. All officials at the provincial level and above were appointed by the central Government. Civil servants staffed the administrative departments.

Each state was responsible for local government, law and order, administration, planning, development, and taxation and for the regulation of local trade, industry, forestry,

Figure 1: STATE BOUNDARIES: 1991



Source: Developed by UNICEF-Khartoum.

agriculture, environment, wildlife, housing, tourism, basic services (health care, education and water resources) and roads and communications within the state. The constitutional decree restructuring the states provided for a further devolution of power from the central Government to the state, provincial and council levels.

Within the social sector, Federal powers were generally confined to national planning, development policy and higher education; local councils were given extensive responsibilities, including the provision of health care, education services and public works like sanitation.

The Mobilization and Allocation of Resources

The responsibility for the generation and allocation of resources at the various levels was clearly defined in 1991. Each state was expected to produce 70 percent of the financing for its budgets, while the Federal Government was to make the balance available in the form of subsidies. In turn, each state was to allocate 20 percent of its budgets to the local councils.

Recent assessments have yielded the following useful insights into the actual situation in resource transfers and expenditure patterns at the various levels of government.

- With the decentralization initiative, the share of the Federal budget expended on staff salaries and related outlays in the social sector declined to around 10 percent, mainly because the burden was transferred to the states, which were spending over 75 percent of their budgets on this single item.

- The database on government resource allocations and expenditures is inadequate, especially in relation to the social sector and the subnational levels. This has made any analysis of the resources available for the NPA extremely difficult.

- Regional development allocations have averaged 10 percent of total budgets as against the proposed 14 percent. Cumbersome procedures for the actual transfer of funds have led to serious delays and inhibited the full implementation of the transfer process.

- The budgets of local councils show that the major share of the funds are being allocated for basic services in health care, water supply and education. This is testimony to the public demand for these services. However, over 90 percent of these funds are being spent on the maintenance of existing services (salaries and so on), rather than on service expansion or improvements in quality.

- While the states have been given considerable authority to raise revenue through taxes, the actual revenue gains have been limited because of the relatively weak infrastructure for tax enforcement and recovery. This is a sensitive area which requires attention.

- The existing allocation of 20 percent of state budgets for local councils is obviously inadequate, given the responsibility of the councils to provide essential services. However, the actual resource position of the local councils is not clear, since the councils tend to under-report their revenue income.

- The planning, documentation and monitoring capacity at the council level is very weak and will need substantial strengthening if the councils are to be effective. State planning

units need more technical support (Ibrahim and Bilal 1992, Qurashi 1992).

Many of these deficiencies are already being addressed, and the federalization initiative has been welcomed and is generally acknowledged to have yielded positive results in a relatively short time.

The decentralization of the NPA was initiated in 1993, in keeping with the federalization process, in order to enable the state governments to evolve clear strategies and plans to enhance child survival and development.

State Situation Analyses and Programmes of Action

In the context of the move toward federalization and in view of the need to translate national goals into state goals, the Federal Government and UNICEF, along with selected states, undertook an effort in 1993 to develop State Programmes of Action. The SPAs are expected to address needs which are specific to these states and to seize the opportunities available in the various parts of the country to reach the NPA goals for children during the 1990s.

The SPAs will serve as the basis for investments in human resources and the implementation of cost-effective strategies and interventions for the survival, protection and development of children and women in individual states. The exercise is a collaborative effort of the Ministry of Economic Planning and Investment, regional planning units and the related departments of the state governments, the National Council for Child Welfare and UNICEF.

The state planning exercise is coordinated jointly by UNICEF and the technical assistance department of the Ministry of Economic Planning and Investment. The state governments and the National Council for Child Welfare are active partners in the process. During the initial stage the six northern states of Kordofan, Darfur, Northern State, Eastern State, Khartoum and Central State were covered.

Six teams have been formed to undertake the work in the states. Each team has six members: two from the technical assistance department of the Ministry of Economic Planning and Investment, two from the state government, one from the National Council for Child Welfare and one from UNICEF. One member of the team is selected as the coordinator who leads the team, allocates responsibilities, oversees the administrative aspects of the team's work and is responsible for the timely completion of the team's task according to established guidelines.

To collect data the teams hold extensive discussions with the experts, UN agencies and NGOs working in the field, as well as with appropriate Government departments.

To help oversee the work of the teams and provide support, task forces have been established in each of the states under the chairmanship of the Wali. The members of the task forces include state cabinet ministers, representatives of Government departments, UNICEF, NGOs and academic institutions and experts from UN-supported projects. The state director for planning performs the functions of secretary of the task force.

Training and Capacity Building

Training and capacity building have played a central role in the decentralization process. A series of national, regional and subnational training and orientation activities has been initiated. The following have been significant among these activities.

- The participation of all members of the six intersectoral teams in a national-level training programme has been an integral part of the preparations for carrying out the state situation analyses and for the development of the SPAs.

- Participation in one of six state-level orientation workshops by task force members, experts from NGOs, public leaders, representatives of women's associations and so on.

- Support for the participation of the head of the Government Department of Statistics in a regional training programme on monitoring.

- National-level training and orientation workshops on innovative fund-raising strategies, including debt relief and debt conversion, costing and NPA resource mobilization.

- Sponsorship of research trips to observe how federalization and decentralization are being carried out in other countries.

- A regional training programme on comprehensive education-sector analysis designed to promote effective planning and strategy development aimed at achieving universal primary education.

- The participation of key officials in Federal and subnational planning and sectoral ministries and of the staff of UN agencies in gender awareness courses designed to promote gender-based analysis and planning.

- The organization of a series of national workshops on the Convention on the Rights of the Child for administrators, public-sector representatives, NGOs, lawyers and appropriate

interest groups.

While contributing to overall SPA preparation, these initiatives also focus specifically on cost analysis in key areas in a few selected states. This is expected to yield background data for the development of SPAs in these states and help strengthen government costing and planning at the subnational level.

A series of six zonal workshops on SPA preparation was undertaken in July 1994. In addition to building capacity for the next phase of the initiative in the selected states, the workshops serve as forums on the NPA and the mid-decade goals to orient freshly appointed Walis, cabinet members and key officials of the newly constituted states.

After the state reorganization and the SPA preparations have been completed in selected states, training and orientation for the NPA and the SPAs and for the mid-decade goals are to be carried out among the local councils, thereby cementing the link between NPA decentralization and ongoing community-level activities.

Encouraged by the enthusiasm and political support generated by the initiative among the states and as a strategy for facilitating the transition from a focus on relief to one on rehabilitation, the Government has sought UNICEF assistance in expanding the effort to the southern states. Accordingly, drawing upon the wealth of information generated by the coordinated interagency assessments regularly undertaken to plan relief and rehabilitation needs, state situation analyses have been undertaken in the erstwhile states of Equatoria, Bahr el Ghazal and Upper Nile. Efforts are underway to synthesize the data on the areas held by the Government and by the Sudan People's Liberation Movement in order to generate a comprehensive picture of the needs of children in the South.

Two of the six northern states attempted to draft SPAs during the first quarter of 1994. However, before the programmes could be finalized and adopted, the Federal Government expanded the number of states from nine to 26 (Figure 2). Each of the new states is headed by a Wali, who is assisted by a cabinet of four ministers and, in the southern states, an "advisor for peace". The new state governments retain the same responsibilities and powers of the previous state governments (see earlier). The administrative and organizational capacities of the new states are to be strengthened for this purpose. The reorganization has led to a large-scale transfer of personnel from the Federal Government to the state level, as well as among the states. The full transition to the new system is expected to take some time.

A review of the state situation analyses indicates that distinctive priorities have been

Figure 2: THE REORGANIZATION OF THE STATES: 1994



Source: Developed by UNICEF-Khartoum.

adopted in keeping with the diversity of the country. For example, the former states of Kordofan and Darfur have highlighted the need for a special focus on those people displaced by recurrent drought and the ongoing civil conflict. Effective strategies for reaching out to nomadic populations through low-cost interventions in health care and basic education are a primary concern in Darfur. Despite the relative prosperity of the former Central State, high levels of protein energy malnutrition have been exhibited by under-5-year-olds there, testifying to the need for an intersectoral, community-based nutrition strategy which

emphasizes nutrition education and is coupled with community-based assessment, analysis and action.

The preliminary work done on the SPA in Eastern State has stressed the need for capacity building among state planning units. This should include technical assistance to improve planning, costing analysis, financing and monitoring. In addition, the active involvement of the popular committees established by the Government has emerged as a unique strategy for social mobilization that was not identified in the original NPA. These areas will receive special attention in the next phase of the decentralization process.

The implications of the state reorganization of 1994 for NPA decentralization are still being examined in order to identify viable programme adjustments. The ultimate objective is to facilitate the development of SPAs for all 26 states in phases. As an interim strategy, capacity building for SPA planning and development will be supported on a zonal and regional basis. Thereafter, support will be extended to selected states, which will undertake the prioritization and costing of decade and mid-decade goals, the assessment of the resources available and required and the development of viable SPAs. The experience gained will be used to replicate the initiative in the other states.

The pace of implementation has been impeded by the deteriorating economic situation, the continuing civil conflict and the drastic decline in external development aid. In many areas of the war-torn South these factors have become constraints on sustained development activities and the generation of appropriate domestic and external resources.

Consequently, in 1993 a reassessment was undertaken during the mid-term review of the programme of cooperation between the Government and UNICEF. This resulted in adjustments in the priorities among the key goals for the mid-decade and the fresh commitment of the Government, NGOs and UN agencies to focus on critical goals in their ongoing relief and rehabilitation activities in the war-torn South and in transitional areas. Among the priority mid-decade goals identified were the following.

- The maintenance of the immunization campaign in the northern states and the pursuit of universal measles-vaccination coverage among under-5-year-olds in the South.
- The adequate intake of vitamin A among under-2-year-olds.
- A reduction in measles morbidity and mortality.
- A halt to the spread of guinea worm disease (dracunculiasis) in villages where the guinea worm is endemic.

- The iodization of salt supplies throughout the country.
- A reduction in the gap between the enrolment rates in 1990 and the decade goal by one-third and a reduction by one-third in the "gender gap" in the enrolment rates in 1990.
- A reduction by one-fourth in the "gap" in access to safe water and a reduction by one-tenth in the "gap" in sanitation, especially in areas where the guinea worm is endemic.

The eradication of the guinea worm, immunization against measles, the supply of vitamin-A supplements, and improvements in the access to basic education are to receive special attention in the relief and rehabilitation activities being undertaken.

V. NPA MANAGEMENT IN COMPLEX EMERGENCY SITUATIONS

The current phase of the civil war in southern Sudan has lasted for more than a decade and has led to some 500,000 civilian deaths. Humanitarian relief for individuals affected by the conflict is being provided under the umbrella of **Operation Lifeline Sudan**, which was launched in April 1989 to ensure a unified UN response to the needs of people on all sides of the conflict. The efforts undertaken through Operation Lifeline Sudan are planned and carried out by UN agencies in collaboration with government authorities and national and international NGOs. Operation Lifeline Sudan is a cross-border initiative in which the neutrality of humanitarian aid is recognized. It delivers critical relief services to displaced populations, especially women and children. The key services provided are emergency food aid; non-food assistance, embracing basic health care services, nutritional assistance, water and sanitation, relief and shelter, and emergency education services, including services for children affected by war trauma; the control of communicable diseases; the prevention of the spread of HIV/AIDS, and services for agriculture, livestock and fisheries, including household food security. The World Food Programme coordinates the transfer of emergency food aid, and UNICEF is the lead agency for non-food services and household food security.

An analysis of the non-food services delivered in 1993 indicates that approximately 88 percent of the inputs were related to the decade and mid-decade goals reflected in the NPA. The following were among these services.

- The provision of essential drugs and meningitis vaccines as a means of decreasing

infant and child mortality.

- The immunization of under-5-year-olds against the six "killer" diseases, especially measles.
- Support for periodic nutrition surveillance, vitamin-A supplementation and food supplements for malnourished children, pregnant women and nursing mothers.
- The provision of oral rehydration salts and training and health care education for the management of diarrhoea.
- Better access to safe water and sanitation and support for the training of community health educators and village health committees.
- The provision of seeds, tools and cattle vaccines as a means of promoting household food security and contributing to the control and reduction of child malnutrition.
- Improved access to basic education for the some 250,000 children affected by the war through the rebuilding of schools, the supply of educational materials, and teacher training, all with the involvement of communities.

The special factors associated with a complex emergency situation require that distinctive implementation strategies be employed, of which the following are examples.

- Advance planning and the pre-positioning of supplies, equipment and other inputs to facilitate timely and appropriate responses.
- Support for therapeutic and supplementary feeding in order to prevent deterioration in nutritional levels and reduce malnutrition among displaced children and women.
- The optimal and creative use of all avenues of access to populations in need. For instance, mobile medical teams now travel on the barges which transport emergency food aid along the rivers of southern Sudan. They provide health care services, including immunization, nutrition surveillance and the distribution of vitamin-A supplements and inputs for the management of diarrhoea, to people who would otherwise remain out of reach.

There has been an increasing focus on initiatives which can help improve service quality and cost-effectiveness, promote service sustainability and facilitate the transition from relief to rehabilitation wherever possible. The following are examples of efforts being undertaken to this end.

- Local capacity building for the planning, implementation, coordination and monitoring of activities. This effort also involves national-level NGOs.

- An examination of the feasibility of using local ingredients in UNIMIX, a supplementary food provided by UNICEF, and of fortifying them with vitamin A.

- The expansion of the scope of efforts to achieve household food security from the 126,000 households targeted in 1993 to 220,000 households in 1994 as a complementary strategy for the reduction of malnutrition.

- The promotion of revolving funds for the purchase of tools and the development of marketing strategies for "bush" shops, women's groups and cooperatives.

- The training of community volunteers in animal health to carry out activities such as cattle vaccination and the promotion of the use of traditional remedies for diseases which cannot be controlled through vaccination.

- The creation of local committees for community education and community mobilization for the planning, implementation and monitoring of initiatives in basic education, water supply and sanitation.

In areas of the South which are relatively more accessible, such as the erstwhile state of Equatoria, situation analyses of women and children have been carried out, and SPAs are in preparation. The process has been innovative in that the data generated through the annual assessments undertaken to plan relief efforts have been used for the situation analyses, and the ways in which the achievement of NPA goals will be addressed in relief and rehabilitation programmes are outlined in the SPAs. The preparation of the SPAs has also clearly revealed the prevalence of war trauma among displaced children and the need to assign a higher priority to initiatives aimed at children in especially difficult circumstances.

Notwithstanding these developments, emergency situations represent unique problems and challenges for NPA decentralization. Ensuring continuity in coverage and monitoring the progress toward the achievement of the goals are difficult, if not impossible, given the frequent and large-scale movements of refugees from the fighting. Relief services and similar interventions can contribute to the NPA goals by helping prevent a deterioration in children's health and nutritional status and improving their general well-being. The virtual destruction of social-service infrastructure and the problems in access increase the capital and recurrent costs of interventions and thus have an impact on financing and sustainability.

VI. SOCIAL MOBILIZATION AND POLITICAL COMMITMENT

The mobilization of political support for the NPA is an ongoing process undertaken in collaboration with various agencies. Within the framework of the negotiations for the resolution of the civil conflict, the advocacy being promoted by the Intergovernmental Authority for Drought and Development has resulted in an agreement in 1994 among the parties to the conflict to create "corridors of tranquility" to enable a polio-measles-vitamin A campaign to be conducted.

The National Council for Child Welfare has been identified as the lead agency for social mobilization in support of the NPA. Significant among the activities being undertaken are the following.

- The organization of a series of national and subnational workshops for NGOs, academic institutions and other public organizations and leaders.
- The organization of special activities among children, including marches, meetings and painting and debate competitions, on the Day of the African Child and on Arab Child Day in order to draw public attention to the NPA and the decade and mid-decade goals.
- The organization of a workshop on the NPA for 284 members of the Transitional National Assembly (of whom 29 are women).
- Frequent meetings with policymakers and administrators at the state level for advocacy and mobilization, especially in the context of the decentralization of the NPA. This has led to the formation of state councils for child welfare in two states and discussions on the creation of three additional state councils.
- Efforts to promote community education on the main goals through the mass media and by word of mouth.
- The provision of support for community workers through training, and the distribution of information materials for parental education. In Kordofan alone, more than 50 Imams and 1,000 primary school teachers have become actively involved in community social mobilization in support of NPA implementation.

The **Theatre for Life** initiative in Kordofan represents a unique approach to the use of traditional media for social mobilization. In collaboration with the state Ministry of Cultural Affairs, local dramatists are identified. After the goals of the NPA have been

explained to them, these artists develop scripts on relevant themes. These scripts are reviewed and finalized by a group which includes technical experts. Teachers and schoolchildren in villages are then assisted in staging the scripts. These plays are expected to be performed regularly as part of the effort at social mobilization. Teachers monitor the activity. The experiment has been very popular with parents and other community members. The Theatre for Life project is being evaluated to determine if it can be expanded to other parts of the country.

VII. THE NPA AND SOCIAL DEVELOPMENT PROGRAMMES

An ongoing effort has been undertaken to focus national relief and development programmes on the goals of the NPA and to promote the adoption of these goals at the community level and within interagency collaborative initiatives. The following are examples of steps taken in this effort.

- The inclusion of the goals and objectives of the NPA in the National Comprehensive Strategy adopted in 1992 as the blueprint for the country's development efforts over the ten years up to 2002.

- The establishment of special extrabudgetary allocations of 200 million Sudanese pounds per year and 2 billion pounds altogether to support NPA implementation.

- The promulgation of the National Education Act, which affirms the commitment of the Government to the goal of "Education for All".

- In collaboration with UNICEF, greater use of innovative fund-raising strategies, such as debt conversion, to generate resources for NPA implementation.

- The establishment of a social welfare fund which pulls together traditional sources of social insurance (for instance, the *Zakat* and *Takaful*, or mutual support) that can be used to finance key social development programmes in the various states.

- The commitment of an extrabudgetary allocation of 100 million Sudanese pounds for water supply and sanitation projects and 215 million pounds for the nationwide polio-measles-vitamin A campaign in 1994.

However, the usefulness of these and other steps taken in the effort to make the NPA

a mainstream programme in terms of Government policy and planning has so far been limited by several factors. The NPA goals have not yet become fully integrated into the planning process for the Comprehensive National Strategy at the national and subnational levels; this has made it necessary to restructure budgets. The organizational and technical capacity of the National Council for Child Welfare is not yet sufficient to handle the challenging mandate of that body. The costing of the NPA and the estimation of the resource needs for the programme require constant revision because of the current environment of inflation and currency depreciation. A viable and effective mechanism has not been instituted for this purpose. Finally, the database on NPA activities and on the progress in achieving the NPA goals is still inadequate for efficient programme monitoring.

To a considerable degree the constraints and challenges being faced in the implementation of the NPA mirror those affecting the country as a whole. Therefore, while efforts are being made to address these specific issues, the outcome will be determined to a great extent by the overall political and economic developments of the next few years.

Community Initiatives

Recognizing the importance of the empowerment of local communities so that they can sustain development efforts, UNICEF launched the Child Friendly Village Initiative in selected areas of Kordofan in 1992. The aim of the initiative is to help local committees understand the essential decade and mid-decade goals of the NPA, analyse the current situation in relation to these goals and determine and adopt those steps which they can take to realize the goals. The following are among the criteria which have been developed to identify "child friendly" villages.

- The existence of a village committee which involves the representation of women and which can be employed to oversee NPA activities.
- The presence of a trained midwife in the village.
- The enrolment and attendance of all school-age children, especially girls, in local primary schools or non-formal educational programmes (the *khalwas*, for instance).
- The census of all under-1-year-olds and their immunization with six key antigens.
- The immunization of all pregnant women with two doses (or booster doses) of tetanus toxoid vaccine.

- The use of oral rehydration therapy by all families and the existence of a depot for oral rehydration salts.
- Ready access to safe drinking water and the existence of a community-based facility for the preventive maintenance and repair of the water supply system.
- General acceptance of hygienic sanitation and the availability of low-cost options for the safe disposal of human waste.

A main component of the UNICEF initiative is an endeavour to enable the members and leaders of communities to undertake surveys of local conditions and develop plans for village-based interventions. These interventions typically involve extensive efforts at community education and mobilization and the expansion of key services to fill existing gaps. This service expansion is usually fostered by helping the communities to develop local inputs and interface with the appropriate departments of state government. Village committees constituted for this purpose meet regularly to determine priorities, review progress and identify future actions.

The Child Friendly Village Initiative has been undertaken in selected villages, each of which has at least 2,000 inhabitants and has already been involved in an ongoing UNICEF-assisted sectoral programme. In addition, the initiative is being used as a focal point for the delivery of relief and rehabilitation services to displaced persons in selected areas.

The following are among the concrete village projects which the Child Friendly Village Initiative has promoted.

- The training of village health committees in handpump maintenance, health care and environmental sanitation and the creation of village centres for the sale of spare parts.
- The training of three-member volunteer teams in each village to monitor immunization coverage and help motivate parents to have their children vaccinated. The aim is to achieve coverage rates of 80 to 90 percent among under-1-year-olds in the project villages through regular immunization campaigns. Villages have assumed responsibility for the transportation of vaccines from health care centres and are thus no longer dependent for this on the Ministry of Health.
- The establishment of a revolving fund for the purchase of essential drugs and medicines and the training of volunteers to manage the fund. Packets of oral rehydration salts have been made available through the fund, and one specialist in oral rehydration

therapy has been trained for every ten families. As a result, 75 percent of all families have become familiar with the therapeutic method.

- The formation of parent-teacher boards in villages. These boards have generated resources for education, undertaken the rebuilding and expansion of schools, motivated parents to enrol their school-age children in school, promoted adult literacy classes for women and supported the establishment of village libraries for young people and others who have just learned to read.

Because of the success in the project villages, the initiative is being expanded. It now serves as a basis for UNICEF cooperation in the Area Development Services Scheme supported by the UN Development Programme, as well as with other international donors, including NGOs. During 1994-5 the initiative is being extended to cover approximately 200 villages in Kordofan, in addition to villages in other key areas.

The focus on communities as part of the decade and mid-decade goals in the context of relief and rehabilitation efforts in the war-torn South is to be promoted by supporting the Child Friendly Village strategy as part of the rehabilitation project for Wau, in Bahr el Ghazal, that is being carried out with the assistance of the UN Development Programme.

Interagency Collaboration

The interagency collaboration and cooperation that were initiated at the time of the framing of the NPA are still evident within relief and rehabilitation efforts and have been strengthened in recent months, especially in terms of the decentralization of the NPA and the greater attention being paid to carrying out programmes aimed at achieving the mid-decade goals. The following are among the key activities being undertaken that have fostered, directly or indirectly, the decentralization of the NPA.

- The active involvement of UN organizations in SPA-related projects at the national and subnational levels.

- The joint preparation by the Government, the World Health Organization and UNICEF of plans of action to achieve the goals in health care. Such an approach maximizes resources and promotes further coordination.

- The undertaking of similar efforts with the UN Population Fund, especially through

projects to ensure safe motherhood, eradicate harmful traditional practices and improve the status of women and girls.

- Collaboration with the UN Development Programme to support and expand the Child Friendly Village strategy within the six Area Development Services Scheme projects being carried out with the help of that organization. This will enable linkages to be established between the economic activities and community participation mechanisms of the scheme on the one hand and, on the other, the key social services and interventions required by communities to achieve the goals of the NPA.

- Coordination among international organizations and donor agencies, especially the UN Development Programme and UNICEF, in capacity building activities related to programme planning, management and monitoring at the national and subnational levels.

- The initiation of the preparation of a "country strategy note" for UN cooperation in Sudan that is being spearheaded by the Government and the UN Development Programme with the active involvement of donor agencies and international organizations such as the World Health Organization.

Decentralized planning and programming have been recognized as key strategic concerns (in addition to the NPA) for the country strategy note, which will provide a policy framework for further efforts at decentralizing the NPA.

Monitoring and Evaluation

At the national level the Ministry of Economic Planning and Investment, in collaboration with the sectoral ministries, has been given the responsibility for monitoring the allocation of resources and the implementation and progress of the NPA. The National Council for Child Welfare has been charged with the task of assessing the overall situation of children in the context of the Convention on the Rights of the Child. It is expected to report to the president on the status of these assessments twice a year.

The lack of adequate and reliable data represents a constraint on the effective monitoring of the progress of the efforts to achieve the goals. The analysis of the results of the 1993 census and the recently concluded Pan-Arab Programme Child Survey is expected to yield important findings. Nonetheless, the need for adequate data continues to assume paramount importance. UNICEF, in collaboration with central and state governments and

other partners, is exploring the possibility of supporting the application of cost-effective monitoring techniques. These could include the adaptation of the methodology employed by the Ministry of Health in its quarterly nutrition surveys in order to monitor the related goals of the reduction of vitamin-A deficiency, the wider use of oral rehydration therapy and improvements in water and sanitation; capacity building among education departments at the national and subnational levels in order to enhance planning and the management database for primary education, and the provision of support to the Government in the creation of a sample analysis of census data in order to expedite the collection of information for planning and monitoring.

The task forces established in the states for the preparation of SPAs are to be assigned responsibility for monitoring implementation and progress. A valuable spinoff of the decentralization initiative has been the institution of local chapters of the National Council for Child Welfare under the leadership of the Walis. Two state councils have already been formed, and efforts are underway to organize three others. With proper training and capacity building, these state councils for child welfare and the state task forces can serve as focal points for monitoring at the subnational level. The detailed strategies and infrastructures to be adopted are to be an integral part of the SPAs.

VIII. PROSPECTS FOR THE FUTURE

Perhaps the most significant spinoff of the preparation and decentralization of the NPA has been the more dynamic involvement of the Ministry of Economic Planning and Investment. Cooperation between UNICEF and the ministry used to be limited mainly to protocol issues. The NPA process has changed this. There is now a close working relationship between the two organizations on substantive issues and concerns; indeed, the ministry has become the focal point for UNICEF cooperation within the country. The NPA process has also fostered capacity building among key Government officials in strategy development, costing and financing, innovative fund-raising and monitoring.

The success of the decentralization of the NPA will be determined by a number of critical factors related to the attempt to federalize the Government. The federalization process has been marked by frequent changes in direction and insufficient effort to consolidate results fully. Many of the changes have been motivated by a legitimate desire to be more responsive

to the problems and needs of the country and its people. However, patience, adequate support and an environment of stability and continuity are needed if the recently implemented initiatives are to bear fruit. The Government's ability to provide the necessary support and wherewithal to the nascent 26 states will therefore be a key factor in the future.

The precarious economic situation of Sudan, the likely repercussions of adjustment policies and the trends in external development assistance will determine the country's success in its efforts to alleviate poverty and mobilize the resources required for the implementation of the NPA and the SPAs. In such an environment, the quest for cost-effective strategies will assume priority. The ability of the Federal Government to raise resources to equip the administrative and organizational infrastructures of each of the fledgling states adequately is an added dimension which demands serious consideration.

The success of the decentralization initiative will depend to a great extent on the ability to harness human resources for effective planning, implementation, management and monitoring. While training and capacity building will continue, the Government's skill at attracting and retaining qualified personnel and profit from nongovernmental resources, including academic institutions, NGOs and communities, will be critical.

Finally, a resolution of the civil conflict and the realization of peace in the South will have far-reaching consequences for the decentralization of the NPA and, indeed, for the country. Peace would foster a reallocation of precious national resources for child survival and development, regenerate external assistance for development efforts and, most importantly, enable the country to recover from the devastating effects of the war and make the transition from relief to rehabilitation and development. Until the conflict is resolved, the effort to spread the concern for children and women and for overall human development in Sudan will be extremely demanding. The selective focus on the mid-decade goals in relief and rehabilitation must be continued beyond 1995-6 and expanded to include the key decade goals of the NPA.

In addition to the efforts highlighted above, the following actions should be pursued.

- The support for the decentralization of the NPA in southern Sudan should be maintained. Adjustments must be made as appropriate in light of the special constraints and needs in the area.

- Broad-based advocacy and capacity building in the 26 new states in support of the decentralization of the NPA, with a focus in a few, selected states during the early stages on

critical follow-up activities, such as costing, coordination and monitoring.

- Further integration of the NPA and the SPAs (after they have been adopted) in the planning process at the Federal, state and council levels; the costing of activities should form the basis for the mobilization and allocation of resources in the various sectors.

- The extension of advocacy and capacity building initiatives to include key actors and decision-makers in local councils.

- Continued advocacy and support for community empowerment, including the expansion of the Child Friendly Village Initiative.

- Further interagency collaboration in the formulation of policies and strategies, decentralized planning and development, capacity building, and programme implementation and monitoring in order to maximize returns from the scarce external resources available for development efforts.

- Sustained advocacy for the restructuring of Government budgets and external aid in line with the "20/20 vision", the initiative advocated by UNICEF to fund specific priority interventions on the human development agenda through national and international sources.

- Further exploration of innovative strategies for resource mobilization, including debt relief and debt conversion and community contributions.

- Support for the development and adoption of effective systems for monitoring at the subnational level.

- Research, documentation and evaluation in support of all the above.

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International Child Development Centre

Piazza S.S. Annunziata, 12

50122 Florence, Italy

Tel. 3955-234-5258 - Fax 3955-24481

Telex 572297 UNICEF I