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**Promotion and protection on the rights of the children:  
follow-up to the outcome of the special session on children**

## **Follow-up to the special session of the General Assembly on Children**

### **Report of the Secretary-General**

#### *Summary*

The present report has been prepared in response to the request of the General Assembly in its resolution 58/282 that the Secretary-General report to it regularly on progress achieved in realizing the commitments set out in the final document of the twenty-seventh special session of the Assembly, entitled “A world fit for children”, with a view to identifying new challenges and making recommendations on actions needed to achieve further progress.\*\* The report notes that failure to achieve the goals of the special session of the General Assembly on children (resolution S/27-2, annex) will significantly undermine efforts towards realizing the aspirations of the Millennium Declaration and the Millennium Development Goals by 2015 and beyond. It calls for a greater sense of urgency by Governments and the international community to achieve the goals of the special session on children.

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\* A/63/150 and Corr. 1.

\*\* The report uses the best available data at the time of writing.



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## I. Introduction

1. At the historic special session of the General Assembly on children, which was held from 8 to 10 May 2002, delegations from 190 countries adopted the Declaration and Plan of Action set out in the document entitled “A world fit for children” (resolution S-27/2, annex). The outcome document committed Governments to a time-bound set of goals for children and young people, with a particular focus on: (a) promoting healthy lives; (b) providing quality education; (c) protecting children against abuse, exploitation and violence; and (d) combating HIV/AIDS.

2. The present report is an update of progress made in the follow-up to the special session. The report follows the previous annual review of progress presented at the fifty-eighth session (A/58/333), the fifty-ninth session (A/59/274), the sixtieth session (A/60/207), the sixty-first session (A/61/270) and the sixty-second session (A/62/259) of the General Assembly.

3. The present report also follows the commemorative high-level plenary meeting of the General Assembly devoted to the follow-up to the outcome of the special session on children, which was held from 11 to 13 December 2007. At that meeting, the Secretary-General presented a report on “Children and the Millennium Development Goals: progress towards a world fit for children” (A/62/259), which provided new information and analysis on how far the world had come in reducing child and maternal mortality and malnutrition; ensuring universal primary education; protecting children against abuse, exploitation and violence; and combating HIV/AIDS. In his report, the Secretary-General noted that despite progress in many countries, actions are still needed everywhere to accelerate progress towards the goals of the special session.

4. The outcome of the commemorative high-level meeting was the adoption of a Declaration by the General Assembly (resolution 62/88), which reaffirmed the commitment of Governments to the full implementation of the Declaration and Plan of Action contained in the outcome document of the 2002 special session on children. Governments emphasized their commitment to pursuing a common vision of ensuring the well-being of all children in all societies, and with a collective sense of urgency.

5. Follow-up to the commitments of the special session on children is also taking place in the context of other major international conferences and summits. Notable among them are the Climate Change Conference in Bali in 2007, the 2006 High-Level Meeting on AIDS (see resolution 60/262, annex), the 2005 World Summit (see resolution 60/1), and the International Conference on Financing for Development held in 2002 (see resolution 56/210 B).

## II. Progress in the four major areas of “A world fit for children”

6. The goals of “A world fit for children” are supportive of the Millennium Development Goals. In addition, the goals of the special session place emphasis on improvements in child protection which, although reflected in the Millennium Declaration, are not part of the Millennium Development Goals. Furthermore, the

outcome document sets detailed goals for children. The present assessment of progress in the four major areas of the outcome document of the special session on children is therefore in the context of the relationship between two mutually reinforcing sets of goals.

## **A. Promoting healthy lives**

7. The outcome document aims at achieving a reduction of under-five mortality by one third by 2010 (compared with 2000); the fourth Millennium Development Goal aims at a two thirds reduction by 2015 (compared with 1990). Overall, there is progress towards those and other health-related goals, but not at the required pace.

8. Child mortality is declining globally, with the number of children dying before their fifth birthday falling below 10 million in 2007. Several countries have reduced child deaths in a significant way, even at relatively low levels of income per capita.

9. Lessons from the successful countries indicate the necessity of using high-impact, relatively low-cost solutions to accelerate the reduction of under-five mortality, including fully immunizing children, vitamin A supplementation, exclusive breastfeeding and appropriate weaning practices, oral rehydration therapy for diarrhoeal diseases, antibiotics for pneumonia, insecticide-treated mosquito nets and effective antimalarial medicines for malaria, as well as home-based management of major childhood illnesses.

10. Immunization, one of the high-impact solutions, has received considerable attention. Global vaccination coverage trends continue to be positive, with coverage of the three doses of combined diphtheria/pertussis/tetanus vaccine estimated at 79 per cent in 2006. The greatest improvements have occurred in sub-Saharan Africa, where coverage increased from 52 per cent in 2000 to 72 per cent in 2006.

11. Furthermore, the campaign against measles has been an outstanding success. The number of deaths due to measles has continued to fall. The largest percentage reduction in estimated measles mortality has occurred in sub-Saharan Africa, where the number of such deaths declined from an estimated 396,000 in 2000 to 36,000 in 2006. Sub-Saharan Africa has achieved the United Nations goal of cutting measles deaths by 90 per cent well before the target date of 2010. Those gains helped to generate a strong decline in measles deaths worldwide, which fell from an estimated 757,000 to 242,000 in the period from 2000 to 2006.

12. There is also progress in maternal and neonatal tetanus elimination. Vaccination coverage with at least two doses of tetanus toxoid vaccine or tetanus-diphtheria toxoid vaccine was estimated at 69 per cent in 2006, while an estimated 81 per cent of newborns were protected against neonatal tetanus through immunization, up from 79 per cent in 2005. Coverage rates increased in a number of countries through routine immunization systems and campaigns.

13. Wild polio virus cases declined from 1,997 in 2006 to 1,307 in 2007, due mostly to a reduction in the number of cases in Nigeria. Polio transmission was restricted to geographically limited areas in the four remaining polio-endemic countries (Afghanistan, India, Nigeria and Pakistan). More than 400 million children under age five in 27 countries were vaccinated multiple times against polio in those countries and in others with outbreaks in 2007 as well as in other high-risk areas. Partnerships between Governments, the Global Alliance for Vaccines and

Immunization (GAVI), the World Health Organization (WHO) and the United Nations Children's Fund (UNICEF) have enabled marked improvements in immunization. Prospects for further improvement have come through the establishment in 2006 of the International Finance Facility for Immunization.

14. As of the end of 2006, 164 countries had introduced hepatitis B vaccine in routine immunization, while haemophilus influenzae type B vaccine was introduced nationwide in 104 countries. In 2006, GAVI added two new vaccines to its portfolio: pneumococcal conjugate vaccine (for pneumonia reduction) and rotavirus vaccine (for diarrhoea reduction).

15. Nevertheless, the proportion of fully immunized children is far from the 2010 target of 90 per cent set at the special session on children. Across the world routine immunization services still fail to reach some 27 million children below the age of one and about 40 million pregnant women. In particular, immunization coverage has plummeted in countries dealing with emergencies. Many countries have yet to eliminate maternal and neonatal tetanus. Overall, many Governments are struggling to meet immunization targets because of weak health service delivery systems.

16. Other high-impact interventions are also being provided on a much larger scale. There is an increase in the number of countries achieving and sustaining high vitamin A coverage. In preliminary data for 2006, of 74 countries reporting on two-dose coverage, 35 attained at least 70 per cent coverage, compared with 26 in 2004.

17. Increased global attention to malaria has also contributed to greater flows of resources, allowing scaling up of interventions. The use of insecticide-treated mosquito nets is on the increase in sub-Saharan Africa, where 16 of 20 countries with trend data have reported at least a threefold increase in coverage since 2000.

18. Some 34 countries reported over 90 per cent of households consuming adequately iodized salt in 2007, up from 21 in 2002. An additional 28 countries are making progress, having achieved greater than 70 per cent household coverage.

19. However, there are concerns about several other child health and related issues. Diarrhoeal diseases continue to account for some 1.8 million deaths a year among children under five, and an estimated 143 million children under five in developing countries continue to suffer from under-nutrition. The current annual average rate of reduction in underweight prevalence is only 1.5 per cent, indicating that many developing countries will not meet the hunger target of Millennium Development Goal 1.

20. The greatest proportions of children going hungry continue to be found in South Asia and sub-Saharan Africa. Poor progress in those regions means that it is unlikely that the global target will be met.

21. There are improvements in exclusive breastfeeding rates in sub-Saharan Africa and in Central and Eastern Europe and the Commonwealth of Independent States, for which the latest estimates are 30 per cent and 19 per cent, respectively. In many countries, however, rates still remain very low, and the International Code of Marketing of Breastmilk Substitutes is often not fully implemented.

22. Preventing maternal deaths and improving maternal health will also require greater attention, and recent data on maternal mortality show that Millennium Development Goal 5 is far from being reached. Maternal mortality levels remain unacceptably high across the developing world, particularly in sub-Saharan Africa

and South Asia. Every year more than half a million women die from complications of pregnancy and childbirth. Coverage by skilled birth attendants is still low in many parts of the world, although some countries are intensifying their efforts.

23. Child survival and development are also closely linked to the provision of clean water and the achievement of good standards of hygiene and sanitation. Between 1990 and 2004, across the developing world, the proportion of people without access to an improved source of drinking water decreased from 29 to 20 per cent. Nevertheless, more than 125 million children under five years of age still live in households that are using unsafe sources of drinking water.

24. Half the population of the developing world lacks basic sanitation. The Millennium Development Goals require halving the proportion of people without access to safe drinking water and basic sanitation by 2015 (compared with 1990). If trends since 1990 continue, the world is likely to miss the Millennium Development Goal target on sanitation by almost 600 million people. The health, economic and social repercussions of poor sanitation and hygiene and the lack of safe drinking water are immense. Poor sanitation and hygiene and the lack of safe drinking water contribute to about 88 per cent of deaths due to diarrhoeal diseases in children under age five. Infestation of intestinal worms caused by open defecation affects hundreds of millions of predominantly school-age children, resulting in reduced physical growth, weakened physical condition and impaired cognitive functions.

25. The International Year of Sanitation was welcomed by the international community on the first day of January 2008. This commemoration is being used to highlight the need for urgent action on behalf of the more than 40 per cent of the world's population who continue to live without improved sanitation. The year will include major regional conferences on sanitation to share best practices and help accelerate progress, including those that focus on sanitation in schools. It will also help encourage public and private partnerships to help mobilize the comparative strengths of each sector, advocate and raise awareness on sanitation, leverage additional funding and develop country-level plans of action.

26. Overall, the world is still falling short of agreed international child health and related targets. Despite improvements, most of the international goals related to health will not be achieved at the current pace. There is an urgent need to accelerate the scaling up of high-impact, cost-effective health and nutrition interventions for the most vulnerable children and women. There is also the need to pursue the strengthening of health systems in a more aggressive and sustained manner.

## **B. Providing quality education**

27. "A world fit for children" calls for expanding and improving early childhood care and education, especially for the most vulnerable and disadvantaged children. Worldwide, primary and secondary education account for the bulk of education expenditure. To date, about half of all countries have early childhood care and education programmes for children under three. With universal primary education still an elusive goal in many developing countries, investment priorities are unlikely to change.

28. Furthermore, despite progress, the scaling up of successful community and family care practices remains a major challenge in many countries. The coverage of

parenting — or equivalent family and community care — initiatives remains low overall. There is a pressing need for more effective communication for behavioural change towards improved care for children.

29. The goals of the special session also aim at increasing net primary school enrolment or participation in alternative, good quality primary education programmes to at least 90 per cent by 2010 when compared with 2000 levels. The Millennium Development Goals require that by 2015, children everywhere will be able to complete a full course of primary schooling.

30. The net enrolment ratio in primary education in developing regions increased to 88 per cent in the school year 2004/05, up from 80 per cent in 1990/91. Two thirds of the increase occurred since 1999.

31. Though progress has been made in reducing the number of children who are not in school, the number remains high. Based on enrolment data, about 72 million children of primary school age were not in school in 2005; 57 per cent of them were girls. As high as this number seems, surveys show that it underestimates the actual number of children who, though enrolled, are not attending school. Official data are also not usually available from countries in conflict or post-conflict situations. If data from those countries were reflected in global estimates, the enrolment picture would be even less optimistic, and while trends in learning achievement are far from clear, an increasing number of assessments show low and unequal learning outcomes.

32. The children most likely to drop out of school or to not attend at all are those from poorer households or living in rural areas. For example, nearly one third of children of primary school age in rural areas of the developing world are out of school, compared with 18 per cent of children in the same age group living in cities.

33. Sub-Saharan Africa has made significant progress over the last few years in expanding primary school enrolment. However, the region still trails behind others, with 30 per cent of its children of primary school age out of school.<sup>1</sup> A strong push will be needed over the next few years to enrol all children in school and to fulfil their right to a quality education.

34. There have been significant advances towards achieving gender parity. By 2005, some 91 developing countries had achieved gender parity in primary enrolment.<sup>2</sup> Yet, there are still some 50 million girls still not attending primary school, with nearly three quarters of them belonging to various excluded groups. Girls continue to be excluded from education more often than boys. In a majority of developing countries, girls continue to face discrimination with regard to access to school. As a result, they comprise about 57 per cent of all out-of-school children. The absence of water and sanitation facilities in many schools also particularly affects girls.

35. A persistent challenge in several regions is the exclusion suffered by children from disadvantaged groups and backgrounds, who often require additional and targeted measures to ensure inclusion, some beyond the field of education. While

<sup>1</sup> United Nations Millennium Development Goals Report 2007.

<sup>2</sup> UNICEF, *Progress for Children: A Report Card on Gender Parity and Primary Education*, No. 2 (New York 2005).

non-formal and alternative education strategies can provide learning opportunities for many children, they are often inadequately resourced.

36. Quality is a serious concern in the primary education system in many countries. Low performance reflects widespread difficulties in the implementation and financing of education reforms, evidence of which can be seen in inadequate learning materials, unsafe and unhealthy school environments, gender discrimination, lack of child-centred learning approaches and shortages of qualified teachers, particularly those who are female. Teacher shortages are also aggravated by HIV and AIDS in some countries. Teachers are often not provided adequate training and service conditions. Poor education quality profoundly affects prospects for gender equality and women's empowerment.

37. Progress in expanding primary school enrolment has led to increases in the demand for post-primary education. It is estimated that 185 million children of secondary school age are missing out on secondary education and that 127 million of those children are still attending primary school. Inequalities affecting children from rural areas and poorer families are also dramatically magnified at the secondary level. Many countries have limited capacity for the provision of education beyond the primary level.

38. While education responses in emergencies are increasingly contributing to post-crisis recovery, there are often great challenges in the longer-term rebuilding and reform of educational systems. Fragile States have emerged as a key priority in 2005, since 35 such States accounted for 37 per cent of all out-of-school children, and the challenge in these is to find workable delivery and financing mechanisms.

39. Overall, millions of children are excluded from their right to basic education, and in particular to primary education. Access to primary education is still hampered by many factors, including gender, geographical location, income differentiation and social status. In addition, the poor quality of education in many countries continues to constrain the achievement of universal completion rates.

40. There is a need to expand investment in early childhood care and development to ensure that the most marginalized and girls attend and complete school and that schools are child friendly, aiming for quality learning conditions.

### **C. Protecting against abuse, exploitation and violence**

41. There have been documented improvements since the special session in specific issues regarding the protection of children from abuse, exploitation and violence, including reductions in child labour and the adoption of a more focused and coordinated approach to end female genital mutilation/cutting and the recruitment of children by armed groups.

42. Progress has also been made in the generation of data. National data on key child protection indicators are increasingly available. The multiple indicator cluster surveys, Demographic and Health Surveys and other national surveys have provided data on child labour, child marriage and birth registration for some 100 countries. Almost 60 countries have produced national child labour statistics, and special efforts are being made to collect data on children engaged in hazardous work. A total of 29 countries had collected data on child discipline, and 27 on female genital mutilation/cutting, by the end of 2007.



43. Many countries are also strengthening their overall child protection capacities, including legislative and enforcement systems. There is a growing understanding of the significance of systematic approaches to protection, primarily through legal and social welfare systems and through addressing social norms.

44. Significant new legislation and action plans on trafficking and commercial sexual exploitation have been adopted by Governments since the special session in 2002. In 2007, the number of States that had ratified the Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography grew to 124 from 115 in 2006.

45. There has been important progress in national ratification of international instruments on child labour. Convention No. 182 (1999) of the International Labour Organization concerning the prohibition of and immediate action for the elimination of the worst forms of child labour has now been ratified by 167 countries and Convention No. 138 concerning the minimum age for admission to employment has been ratified by 149 countries.

46. Actions to end the exploitation of children in times of conflict continue. In 2007 the number of countries ratifying the Optional Protocol on the involvement of children in armed conflict grew to 119, compared with 110 in 2006.

47. The Paris Commitments, consistent with existing international legal standards and addressed to States, define measures to protect children involved in hostilities and help them reintegrate into their families and communities while the complementary Paris Principles, addressed to practitioners, provide detailed programme guidance. By the end of 2007, 66 States had endorsed the Paris Commitments.

48. The General Assembly adopted resolution 62/214 on assistance and support for victims of sexual abuse and exploitation by United Nations Staff in early 2008. There has also been significant progress in the implementation of the monitoring and reporting mechanism established in application of Security Council resolution 1612 (2005).

49. A detailed 10-year strategic review of the Graça Machel report entitled "Impact of armed conflict on children" (see A/51/306 and Add. 1) was co-convened by the Special Representative of the Secretary-General for Children and Armed Conflict and UNICEF. A special consultation process reached more than 1,000 children and young people in 18 war-affected countries. The findings of the review were submitted to the General Assembly by the Special Representative of the Secretary-General (see A/62/228). The key recommendations will help strengthen partnership efforts to prevent and reduce the impact of conflicts on children.

50. In June 2006, 42 countries signed the Geneva Declaration on Armed Violence and Development, which aims at preventing and reducing armed violence. The Declaration aligns itself with the Millennium Development Goals by committing signatories to achieving, by 2015, measurable reductions in the global burden of armed violence and tangible improvements in human security worldwide.

51. The Secretary-General transmitted the report of the independent expert for the United Nations study on violence against children to the General Assembly at its sixty-first session (A/61/299). The report generated considerable momentum and highlighted the universality and the magnitude of the problem of violence against

children. The 12 overarching recommendations of the independent expert, complemented by additional specific recommendations, offer a road map for the prevention of and response to violence against children in the home and family, educational settings, in care and justice systems, the workplace and the community. The recommendations in the report are stimulating new areas of partnership to improve the protection of children.

52. A global coordinated strategy for the abandonment of female genital mutilation/cutting in one generation was developed in 2007. Important progress was made in 2006 and 2007 in supporting Governments and civil society to strengthen justice systems to the benefit of children in all regions of the world.

53. Continued positive growth is observed in social protection for the most vulnerable families, with social protection initiatives woven into national strategies, including through programmes that embed cash and social transfers within a larger protection scheme of family-based services, Government support and community and municipal distribution.

54. Greater inter-agency collaboration and consensus in child protection, often including non-governmental organizations, have been evident over the last several years, including the Inter-agency Panel on Juvenile Justice, the United Nations study on violence against children, the protection cluster and the Better Care Network.

55. The United Nations Rule of Law Coordination and Resource Group has recently endorsed a note on the United Nations approach to justice for children. The note provides the guiding principles and framework for the organization's activities related to justice for children at the national level that apply in all circumstances, including in conflict prevention, crisis, post-crisis, conflict, post-conflict and development contexts. It is framed within the United Nations mandate to support the realization of human rights, poverty reduction and the Millennium Development Goals, and is a contribution to the Organization's coherence agenda in the rule of law area. The goal of the approach is to ensure that children are better served and protected by justice systems. It specifically aims at ensuring the full application of international norms and standards for all children who come into contact with justice and related systems as victims, witnesses and alleged offenders or for other reasons requiring judicial, state administrative or non-state adjudicatory intervention.

56. However, despite those successes, several challenges persist in protecting children against abuse, exploitation and violence.

57. While many developing countries have now achieved almost universal coverage in birth registration, several still have rates of 10 per cent or below. Globally, the number of unregistered children has remained steady since 2006 at around 50 million. Sub-Saharan Africa has the highest proportion of children under five who are not registered — two out of three. The largest number of unregistered children is in South Asia — nearly 23 million.

58. Lack of measurable progress in social work remains a concern. Progress in addressing issues related to childhood disability continues to be mixed. Challenges persist in the integration of disability across sectors.

59. Data are often hard to gather on activities that are illegal, clandestine or otherwise sensitive. National child protection capacities remain weak overall, and funding is inconsistent and unpredictable. Capacity for routine data collection and for the integration of child protection indicators in public policy is low.

60. While there has been some important progress towards the reduction of child labour, much more remains to be done. Relevant data suggest that while the numbers of such children are declining, child labour, including its worst forms, remains a significant problem in many countries.

61. Furthermore, structural factors continue to slow the elimination of violence against children, including growing income inequality, migration, and threats to health, in particular the HIV/AIDS pandemic and armed conflict. Children continue to be recruited and associated with armed forces and groups.

62. Overall, progress in improving the protection of children has been mixed since the special session. There has been considerable progress in areas such as data gathering, birth registration and reduction of child labour, and many countries are implementing plans to address violence against children. Challenges persist however in several other areas, including the use of children in armed conflict, harmful traditional practices, trafficking and migration.

## **D. Combating HIV**

63. Progress continues to be made towards the goals of the special session on HIV and children, however, at a pace slower than desired.

64. Globally, children under the age of 15 accounted for 2.1 million of the estimated 33.2 million people living with HIV in 2007. Some 420,000 children were newly infected with HIV and 290,000 died of AIDS in 2007 alone. Sub-Saharan Africa is home to nearly 90 per cent of all children living with HIV. Most children are infected with the virus during pregnancy and delivery or while breastfeeding. About 50 per cent of infants who contract HIV from their mothers die before their second birthday. Young people from 15 to 24 years of age accounted for about 40 per cent of new HIV infections among those over the age of 14 in 2007. In the same year, some 5.4 million young people from 15 to 24 years of age were living with HIV, of which 3.1 million were women.

65. In sub-Saharan Africa, the estimated number of children under age 18 who have been orphaned by AIDS more than doubled between 2000 and 2007, currently reaching 12.1 million. The HIV epidemic is a significant cause of child labour while also being one of its consequences in the region.

66. Nevertheless, there has been progress in combating the HIV pandemic since the special session on children. In low- and middle-income countries, the proportion of HIV-positive pregnant women receiving antiretroviral prophylaxis to reduce the risk of transmitting the virus to their children increased from 10 per cent in 2004 to 23 per cent in 2006. In Eastern and Southern Africa, the proportion of HIV-positive pregnant women receiving antiretroviral prophylaxis for the prevention of mother-to-child transmission of HIV/AIDS (PMTCT) increased from 11 per cent in 2004 to 31 per cent in 2006. By the end of 2006, 21 low- and middle-income countries were on track to meet the 80 per cent antiretroviral coverage target for PMTCT by 2010, up from only 11 countries in 2005, and in low- and middle-income countries, an

estimated 127,300 HIV-positive children received antiretroviral treatment in 2006, compared with 75,000 in 2005, an increase of 70 per cent.

67. Furthermore, recent evidence suggests that HIV prevalence among pregnant women from 15 to 24 years of age attending antenatal clinics has declined since 2000/01 in 11 of 15 countries with sufficient data. Those include eight countries in Eastern and Southern Africa.

68. There is also progress in the protection and care of children affected by AIDS in many countries and in access for those children to social services. Progress has also been made in school enrolment rates for children who have lost both parents to the disease, although AIDS-affected children are still more likely than others to fall behind in school, to live in poorer households and to engage in child labour. A growing number of vulnerable children have access to education and social protection.

69. Comprehensive correct knowledge about HIV and AIDS is estimated to have increased by at least 10 per cent among young women in 17 countries and among young men in 5 countries. HIV prevalence among pregnant women aged 15 to 24 has declined in 11 of the 15 most-affected countries. Those declines seem to be consistent with an increase in condom use among young people, and there is some evidence of partner reduction.

70. There has been a rapid increase in mandatory life skills-based education with an HIV component in national school curricula. However, more needs to be done to address the stigma and discrimination related to HIV, with strategies drawing on rights-based communication approaches for social and behavioural change.

71. Although funding gaps persist, Governments and donors alike are allocating more resources to prevention, treatment and protection efforts. In 2007, some \$10 billion were available to combat AIDS, up from \$6.1 billion in 2004.

72. The Unite for Children, Unite against AIDS initiative continued to provide an important mechanism for stronger collaboration and networking on children and AIDS at all levels. International financial commitments to fighting AIDS have also grown impressively, and issues related to children continue to gain momentum. The Joint United Nations Programme on HIV/AIDS, the Global Fund to Fight AIDS, Tuberculosis and Malaria, the United States President's Emergency Plan for AIDS Relief, the Bill and Melinda Gates Foundation and the Clinton Foundation, among others, are making major contributions towards universal access to HIV prevention, treatment, care and support.

73. UNAIDS and its co-sponsors and partners have made real progress in developing a division of labour among different stakeholders. Inter-agency task teams now bring a broad range of agencies together to help develop norms and standards for HIV/AIDS interventions and identify priorities in support of national efforts and systems. There is greater coordination of the technical assistance provided by United Nations agencies to countries experiencing bottlenecks in implementation, and this should be further intensified.

74. However, much more needs to be done to prevent HIV infection among young people and adolescents. Although greater numbers of HIV-positive children and pregnant women are receiving treatment, there is still a long way to go before the promise of an AIDS-free generation is fulfilled.

75. There is an urgent need to implement new initiatives and scale up those that have already been tested and proven effective. Critically, antiretroviral treatment must be provided for women who require it for their own health. This will not only save their lives, but also help to assure the achievement of the target of reducing the proportion of infants who become HIV positive by 50 per cent by 2010. Health systems and the health care workforce must be strengthened. There is also the need to strengthen communities and families whose role is crucial to every aspect of a child-centred approach to AIDS. The reinforcement of education and social welfare systems is also key to the effective provision of support to children affected by HIV and AIDS.

### **III. Ways forward**

76. The goals of the special session on children continue to receive attention from Governments and the international community. This is particularly so because they reinforce the aspirations of the Millennium Declaration as well as present a step towards the fulfilment of the Convention on the Rights of the Child.

77. There have been important successes since 2002, including a significant reduction in the number of deaths of children due to measles, a sharp decline in the number of polio cases and a remarkable increase in primary school enrolment.

78. However, many challenges remain. Overall, most of the goals of the special session, and indeed the Millennium Development Goals, will not be achieved without a greater sense of urgency and an acceleration of proven interventions.

79. Member States should continue to take advantage of rapidly expanding opportunities in strategic global partnerships. They should also earnestly respond to increasing challenges, including those related to rising prices for basic food items, migration and climate change. Focused, effective support for early childhood care and development as well as the provision of clean water and improvements in hygiene and sanitation will be strategic in achieving improved health and nutrition outcomes for children. A renewed focus on gender equality and the quality of services continue to be key to achieving goals in education and child protection.

80. Altogether, common themes underlie the reasons for gaps in achievement of the goals of the special session. These include inadequate attention to the rights of children in the most vulnerable and marginalized sections of society.

81. Emergencies resulting from both man-made and natural causes also pose huge constraints on the achievement of international development goals. Measures to ensure and coordinate disaster prevention as well as rapid humanitarian response and reconstruction should be expedited.

82. Strengthening the capacity of States to expand and sustain the provision of essential services remains one of the most critical factors in achieving the goals of the special session on children. In its resolution on the triennial comprehensive policy review of operational activities for development of the United Nations system (resolution 62/208), the General Assembly emphasized the need for national capacity-building. The implementation of high-impact interventions, as well as sustained efforts for systems development should be pursued simultaneously.

83. Filling funding gaps require attention by Governments and the international community. Recent advancements in resource mobilization, such as for combating HIV, indicate the importance of the timely provision of resources for the achievement of the goals of the special session. At the same time, a renewed focus on communication for development should be pursued more urgently.

84. The key challenge for the forthcoming period is to build on the momentum generated since the special session, and its five-year commemoration in December 2007, to create a greater sense of urgency in communities and Governments and among international development actors to ensure the achievement of the goals for children.

85. The journey to 2010 and 2015, the years in which most targets for children converge, will be demanding. Achieving the goals will require a greater sense of urgency to address surmountable obstacles. Failure to achieve the goals adopted at the special session on children will significantly undermine efforts towards realizing the aspirations of the Millennium Declaration. This calls for scaled up responses by Governments, increased commitments from the international community and broader and more focused partnerships to achieve the goals of the special session on children.

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