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**UNITED NATIONS POPULATION FUND
PROPOSED PROJECTS AND PROGRAMMES**

Recommendation by the Executive Director
Assistance to the Government of Gabon

Proposed UNFPA assistance: \$1.7 million, \$ 1.2 million from regular resources and \$500,000 from multi-bilateral and/or other, including regular, resources

Programme period: 4 years (1998-2001)

Cycle of assistance: Third

Category per decision 96/15: B

Proposed assistance by core programme areas (in millions of \$):

	Regular resources	Other	<i>Total</i>
Reproductive health	0.9	0.5	1.4
Population & development strategies	0.2	-	0.2
Programme coordination & assistance	0.1	-	0.1
Total	1.2	0.5	1.7

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GABON

INDICATORS RELATED TO ICPD GOALS*

		Thresholds*
Births attended by health professional (%) ¹	79.0	≥60
Contraceptive prevalence rate (15-44) (%) ²	29.0	≥55
Access to basic health services (%) ³	90.0	≥60
Infant mortality rate (/1000) ⁴	94.0	≤50
Maternal mortality rate (/100,000) ⁵	190.0	≤100
Gross female enrolment rate at primary level (%) ⁶	74.8	≥75
Adult female literacy rate (%) ⁷	44.8	≥50

* AS CONTAINED IN DOCUMENT DP/FPA/1996/15 AND APPROVED BY THE EXECUTIVE BOARD IN DECISION 96/15.

¹ WHO, *Coverage of Maternal Care*, 3rd ed., 1993. Data cover the period 1983-1993.

² United Nations Population Division, *World Contraceptive Use 1994*, ST/ESA/SER.A/143. Data cover the period 1986-1993.

³ UNICEF, *The State of the World's Children 1995*. Data cover the period 1985-1993.

⁴ United Nations Population Division, *World Population Prospects Database 1950-2050, 1994 Revision*. Data are for 1992.

⁵ UNICEF, *The State of the World's Children 1995*, which is based on data compiled by WHO. Data cover the period 1980-1992.

⁶ United Nations Statistical Division, *Women's Indicators and Statistics Database, Version 3 (CD-ROM), 1994*, which is based on data compiled by UNESCO.

⁷ UNESCO, 1996, *Education for All: Achieving the Goal: Statistical Document*. Two dashes (--) indicate that data are not available.

Demographic Facts

Population (000) in 1995	1,076	Annual population growth rate (%)	2.77
Population in year 2000 (000)	1,235	Urban	4.69
Sex ratio (/100 females)	97.5	Rural63
Per cent urban	51	Crude birth rate (/1000)	37.6
Age distribution (%)		Crude death rate (/1000)	14.3
Ages 0-14	38	Net migration rate (/1000)	4.3
Youth (15-24)	17.2	Total fertility rate (/woman)	5.40
Ages 60+	8.9	Life expectancy at birth (years)	
Percentage of women aged 15-49	45.2	Males	53.8
Median age (years)	21.7	Females	57.2
Population density (/sq. km.)	4	Both sexes	55.5
		GNP per capita (U.S. dollars, 1994)	3,550

Sources: Data are from the Population Division, Department of Economic and Social Information and Policy Analysis (DESIPA) of the United Nations, *World Population Prospects: the 1996 Revision*; Annual population growth, including urban and rural data are from DESIPA, *World Urbanization Prospects: the 1996 Revision*. GNP per capita is from UNDP. Two dashes (--) indicate that data are not available.

1. The United Nations Population Fund (UNFPA) proposes to support a population programme for the period 1998-2001 to assist the Government of Gabon in achieving its population and development objectives. UNFPA proposes to fund the programme in the amount of \$1.7 million, of which \$1.2 million would come from UNFPA regular resources, to the extent such resources are available. UNFPA would seek to provide the balance of \$500,000 from multi-bilateral and/or other resources to the extent possible, consistent with Executive Board decision 96/15 on the allocation of resources. This would be UNFPA's third cycle of assistance to Gabon.

2. The proposed programme has been developed in full collaboration with government authorities, non-governmental organizations (NGOs) and other development partners working in Gabon. The programme takes into account: (a) the Government's overall socio-economic objectives, as stated in the three-year socio-economic development policy framework document and in the National Health Policy adopted in 1995; (b) the Country Strategy Note and Advisory Note elaborated by the United Nations system under the leadership of the Resident Coordinator; (c) the findings and recommendations of the 1997 Programme Review and Strategy Development (PRSD) exercise; and (d) the lessons learned from UNFPA-supported activities to date. The proposed programme is in harmony with the programming cycles of UNDP and UNICEF. Gabon is classified as a category "B" country, as defined by UNFPA's resource allocation criteria.

3. The overall goal of the proposed programme is to improve the reproductive health of the Gabonese people. Its purposes are to contribute to the Government's efforts in: (a) defining the national framework for reproductive health activities; (b) improving the quality and increasing the accessibility of reproductive health information and services in three selected provinces; (c) fostering support from policy makers, parliamentarians, civil society and public opinion leaders for the utilization of reproductive health information and services, especially by youth and adolescents; and (d) developing a national population policy. UNFPA's assistance will focus on reproductive health, including family planning and sexual health. Advocacy and IEC components will contribute to achieving the purposes of the programme.

4. All activities under the proposed programme, as in all UNFPA-assisted activities, would be undertaken in accordance with the principles and objectives of the Programme of Action of the 1994 International Conference on Population and Development (ICPD), which was endorsed by the General Assembly through its resolution 49/128.

Background

5. The population census of 1993 estimated the total population at slightly more than 1 million inhabitants. At the current annual growth rate of 2.5 per cent, the population will reach 2 million by the

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year 2021. The average population density, estimated at 3.8 persons per square kilometre, conceals large differences in regional population distribution. Approximately 40 per cent of the population is under 15 years of age. The total fertility rate (5.2 children per woman) is lower than the subregional average but is increasing. Foreigners represent 15 per cent of the population. The rural-urban exodus has contributed to the high rate of urbanization, and today Gabon is one of the most urbanized countries in Africa -- 73 percent of the population lived in urban areas in 1993 against 39 per cent in 1980. The capital, Libreville, accounts for 43 per cent of the country's population.

6. The coverage in health infrastructures is very good in Gabon, with more than 90 per cent of the population having access to a health facility. However, the health facilities and their equipment are badly maintained even though the resources allocated by the Government for health activities are quite high (\$170 per capita a year). There is a shortage of qualified personnel in rural health facilities. With the exception of the big cities, 40 per cent of dispensaries are non-operational. Of medical staff working for the public sector, 76 per cent are concentrated in the two principal cities of Libreville and Franceville. The public health system offers a limited range of reproductive health services, pre- and postnatal care, growth monitoring, vaccination, health education and natural family planning methods.

7. Maternal mortality, estimated at close to 200 deaths for 100,000 live births, and infant mortality, 94 per 1,000 live births, are as high as in other countries of the subregion. Maternal mortality is due mainly to hemorrhage and infectious complications after delivery and abortions. The number of HIV-infected persons was estimated at almost 20,000 in 1996, and the number of declared AIDS cases was 1,627 in 1997. The prevalence of HIV infection in Libreville increased from 1.88 per cent in 1986 to 2.8 per cent in 1991 and will reach 3.7 per cent in the year 2000 if current trends are maintained. Infertility, which is a major problem in the central African subregion, has been significantly reduced over the last three decades -- from 31.9 per cent in 1960 to 17.2 per cent in 1993.

8. Gabonese women play a very important role in the socio-economic development of the country. While they represent 50.5 percent of the population, they constitute more than 66 percent of the agricultural workforce. As a result of migration and urbanization, an increasing proportion of women are now heads of households -- about 30 per cent. The Gabonese Constitution proclaims equality between men and women in all spheres of political, economic, social and cultural sectors. However, a 1997 study on the social and legal status of Gabonese women supported by UNFPA has identified a list of laws and traditions that are discriminatory or unfavourable to women. Gabon has limited data on gender issues, but the 1993 population census estimated the illiteracy rate to be 20.6 per cent for men and 34.3 per cent for women. (United Nations statistics show the female illiteracy rate to be 45 per cent.)

9. Gabon has not yet formulated a population policy, and there is a strong current of pronatalist opinion in the country. Due to the existence of legal barriers against family planning, modern

contraceptive methods are available only in private pharmacies and are consequently accessible to only a small elite of women. As a result, abortion is often resorted to in the case of unwanted pregnancies, especially among adolescents and young women. By age 18, 32 per cent of women have been pregnant at least twice. According to a survey conducted in 1995 with UNFPA support in Estuaire province, the country's most populous province, 50.5 percent of the women surveyed have had at least two abortions. Repeated abortions increase the likelihood of secondary sterility and contribute to the high level of maternal mortality. Given these health problems, official attitudes towards population issues and reproductive health are changing: the Government has requested UNFPA's technical assistance in the elaboration of a national population policy, and a law for liberalization of family planning is currently being discussed by the Government.

Previous UNFPA assistance

10. The second country programme, originally approved for 1992-1996 for the amount of \$2 million, was extended by one year without additional resources in order to harmonize it with the programme cycles of the other members of the United Nations Development Group (UNDG). The PRSD mission found that the programme had contributed to increasing the level of awareness on population issues and reproductive health, particularly among parliamentarians, political leaders, heads of non-governmental organizations (NGOs), and the Ministry of Health staff. The UNFPA programme also assisted the Government in: (a) successfully carrying out the 1993 census; (b) organization of the first national forum on the reproductive health of adolescents and youth in 1997; (c) elaboration and validation of the national information, education and communication (IEC) strategy on population, including family life education for schools; (d) training of 40 trainers and 120 health agents in reproductive health in Ngounie and Haut-Ogooué, two provinces covered by the programme; (e) carrying out research activities, including a sociocultural survey, a study on the social and legal status of Gabonese women, and a study on the conditions of pre- and postnatal care and delivery in two provinces.

11. The constraints and difficulties encountered in implementing the past programme included: (a) over-ambitious objectives; (b) an unfavourable legislative environment for the provision of family planning services; (c) poor coordination of population activities; (d) high mobility of personnel, which has negatively affected efforts to build national capacity; (e) the limited range of reproductive health services in the public sector; (f) absence of a national framework for reproductive health and population activities; and (g) difficulties in responding to adolescent and youth reproductive health needs.

12. The results of the surveys undertaken under the previous programme have revealed the extent of the problems in the reproductive health field and the urgency of addressing the specific reproductive health needs of adolescents and youth. The main lesson learned from the implementation of the

previous programme is that the multisectoral approach to IEC and the development of advocacy activities directed towards political and opinion leaders has a positive impact on the Government's attitudes towards delivery of reproductive health services and needs to be continued if the proposed programme is to be successful.

Other external assistance

13. In the field of population, the country's principal partners include UNDP, UNICEF, WHO, UNFPA, the European Union and France. The Government of Gabon requested and obtained co-funding from the European Union (\$330,000) and French Cooperation (\$180,000) for the 1993 population census. UNICEF in its previous programme supported the primary health care system as well as advocacy activities for the ratification of the Convention on the Rights of the Child. The major objective of UNICEF's ongoing programme (1997-2001) is the survival, protection and development of children and women through the promotion and implementation of social reforms. UNICEF will provide \$750,000 a year for its five-year programme cycle. The African Development Bank will finance the construction of 30 dispensaries and 15 maternal and child health (MCH) centres in the provinces of Ogooué-Ivindo, Ogooué-Lolo and Nyanga. The European Union supports the health system rehabilitation project. It also finances research projects on AIDS and supports the prevention, screening and treatment of sexually transmitted diseases (STDs) in MCH centres in Libreville. An extension of this activity to other areas is planned for the second phase. France supports activities related to AIDS prevention.

Proposed programme

14. The proposed programme will focus on three provinces, Estuaire, Haut Ogooué and Ogooué Maritime, which include the country's three most important cities and contain 60 per cent of the country's population and 55 per cent of the MCH centers. The emphasis will be on the central level before reaching out to the local level. Gender issues and IEC will be mainstreamed into all activities. In addition to the above, UNFPA will provide technical assistance to a joint UNDP, UNICEF and UNFPA project on gender, population and development. This project will promote gender equity, equality and empowerment of women and contribute to bringing about positive behavioural changes.

15. Reproductive health. The purpose of the reproductive health subprogramme is to contribute to the Government's efforts to implement the National Health Policy by integrating reproductive health services into existing health facilities and by improving the quality and increasing the use of reproductive health information and services in selected geographical areas. In order to achieve this, it will be necessary to define a national framework for reproductive health activities and gain the support of policy makers, parliamentarians, civil society leaders and public opinion for the utilization of reproductive health information and services, especially by youth and adolescents. These purposes are

in conformity with the objectives of the Government's health policy, which considers family planning as a priority of the national health policy.

16. The above-mentioned purposes will be achieved through the following strategies: (a) reinforcing the technical capacity of the Ministry of Health and Population with a view to operationalizing reproductive health programmes; (b) formulating an integrated national reproductive health programme; (c) strengthening sensitization and advocacy efforts through NGOs to enlist the support of political leaders, parliamentarians, journalists and civil society for the implementation of reproductive health activities and to promote male involvement; (d) popularizing the results of previous research on gender inequality in order to raise awareness of the issues; and (e) promoting reproductive health services and information with a focus on Estuaire province, including Libreville, and two other major cities: Franceville and Port Gentil.

17. The following activities will be supported by UNFPA: (a) elaboration of the national integrated programme of reproductive health; (b) assessment of the training needs of the Ministry of Health; (c) training of health staff in reproductive health, especially in the priority regions; (d) provision of reproductive health services in the three regions of focus, including family planning, prevention and treatment of HIV/AIDS and post-abortion counseling; (e) promotion of advocacy and IEC activities to create awareness on reproductive health issues and to rally support for population issues; (f) experimentation with family life education in the formal school systems and development of related didactic materials on reproductive health issues; (g) creation of 20 counseling centres for adolescents and youth and support to the youth reproductive health network as means of reducing the high prevalence of abortions among these age groups; (h) support for community-based distribution of condoms; and (i) conduct of a baseline survey on the contraceptive prevalence rate in the three priority areas at the beginning and end of the programme and small-scale research on the question of infertility.

18. Of the total amount committed to the reproductive health subprogramme, \$350,000 of UNFPA regular resources will be used for the improvement of reproductive health services; \$50,000 for support for adolescent reproductive health information and services; and \$500,000 for IEC activities. If the \$500,000 from multi-bilateral sources are obtained, \$280,000 will be allocated to reproductive health services, \$100,000 to adolescent reproductive health and \$120,000 to IEC activities.

19. Population and development strategies. UNFPA will support through advocacy and technical assistance from the Country Support Team the Government's efforts in developing a national population policy. The expected output is a strengthened national capacity to formulate and manage the national population policy. The output will be achieved through: (a) providing training to the national staff in collecting and analysing the data necessary for formulating and implementing population policies, with particular emphasis on the reproductive health dimensions; (b) setting up of a "Population and

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Development” committee of journalists and a parliamentary group on population issues; and (c) providing limited support to a demographic and health survey that will be undertaken by the Government in order to make sure that the data required for the measurement of the ICPD goals are included in the survey and that the data will be analysed and used for policy purposes, with special attention being given to gender issues. A total of \$200,000 will be devoted to this subprogramme.

20. Implementation, coordination, monitoring and evaluation. Coordination of population activities will be assumed by the Ministry for Planning, Environment and Tourism through its Division for General Planning. An advisory committee made up of representatives from UNFPA, Government and NGOs will be set up to oversee the implementation and monitoring of UNFPA programme activities. NGO participation in the execution of certain components of the programme, especially of advocacy and IEC activities, will be encouraged. The involvement of private enterprises and trade unions will be tested.

21. UNFPA’s country office will have overall responsibility for country programme management. The office currently includes a national programme officer and a secretary. The UNDP Representative is also the UNFPA Representative, while the UNFPA Representative in Congo assumes the function of Country Director in Gabon. The proposed programme will be implemented in accordance with UNFPA guidelines and procedures, which include annual project reviews, regular project evaluations, field monitoring visits, and project and field office auditing. The country programme’s mid-term review is scheduled for early 2000 with the participation of all parties involved in population activities. The programme will benefit from technical support from the CST teams and from available regional and subregional consultants.

Recommendation

22. The Executive Director recommends that the Executive Board approve the programme of assistance to the Government of Gabon as presented, in the amount of \$1.7 million over the period 1998-2001, of which \$1.2 million would be programmed from UNFPA's regular resources to the extent such resources are available, and the balance of \$500,000 would be sought from multi-bilateral sources and/or other resources to the extent possible, consistent with Executive Board decision 96/15 on the allocation of UNFPA resources.
