

# UNITED NATIONS DEVELOPMENT PROGRAMME



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## OTHER FUNDS AND PROGRAMMES

### UNITED NATIONS FUND FOR POPULATION ACTIVITIES

#### Recommendation by the Executive Director

#### Assistance to the Government of India

#### Comprehensive population programme

Estimated UNFPA contribution:	\$ 100 million
Estimated value of the Government's contribution:	\$ 850 million
Duration:	Five years
Estimated starting date:	January 1980
Executing Agencies:	International Labour Organisation (ILO) United Nations Educational, Scientific and Cultural Organization (UNESCO) United Nations Children's Fund (UNICEF)
Government Co-operating Agency:	Ministry of Health and Family Welfare

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## I. Summary

1. UNFPA proposes to support a second population assistance programme in India in the amount of \$100 million over the period 1979/1980 to 1985. India is a priority country for UNFPA assistance.
2. A five-year programme was approved by the Governing Council in 1974 <sup>1/</sup> and the Council approved the allocation of funds to the remainder of the programme after a review <sup>2/</sup> in 1976. The proposed new programme, based on the findings of a population needs assessment mission, contains several new initiatives: comprehensive intensive programmes in selected districts of two States where social and economic problems are more acute than the national average and where family planning programme performance has been especially poor; and a commitment to design co-operative projects with community and non-governmental organizations. It also continues some activities supported under the previous programme (1974-1979), namely training of personnel and improving facilities for maternal and child health and family planning services; improving voluntary sterilization services and contraceptive supplies, and developing programmes in the organized sector.

## II. Background

### Demographic and other indicators

3. According to United Nations estimates, the population of India in 1978 was 694 million, and population density was 187 persons per square kilometre. The annual rate of population growth was 2.3 per cent. According to United Nations projections (medium variant), India will have a population exceeding one billion by the year 2000, and a population density of 323 people per square kilometre; the growth rate will still be high, at 1.8 per cent.
4. The estimated crude birth and crude death rates in 1978 were about 37 and 14 per thousand respectively. The population is young, with children under 15 constituting 41 per cent of the population; women aged 15-49 account for 48.6 per cent of all women. According to Government family planning programme statistics, 24 per cent of married women in the reproductive ages are using contraceptives.
5. Available data indicate that the accelerating trend of population growth during the past half-century has been the result of a progressive reduction of mortality, which nonetheless remains high. Life expectancy at birth was estimated at about 52 years. Infant mortality was estimated in 1976 at 129 deaths per 1,000 live births, with a rural rate of 139, compared with an urban rate of 80. Nutrition levels are very low; women and children are the most disadvantaged.
6. The World Bank estimates the per capita gross national product for 1978 at \$180. The literacy rate is 29.5 per cent overall (urban, 52.2 per cent; rural, 23.7 per cent; males overall, 39.5 per cent; females overall, 18.7 per cent).

<sup>1/</sup> DP/FPA/1/Add.10

<sup>2/</sup> DP/FPA/Add.3

Although urbanization has been increasing gradually since the early years of this century, India's 600,000 villages still contain about 78 per cent of the population.

7. Some statistics for Bihar and Rajasthan -- States where UNFPA is developing comprehensive programmes in selected districts -- are relevant. In 1971, Bihar, the second most populous State in the Union, had a population of 56.4 million, with a density of 324 persons per square kilometre. Rajasthan's population was 25.8 million, but its density was lower than in Bihar, namely 75 persons per square kilometre. The total fertility rate was above the national average (5.8) in Rajasthan (6.98) and below it in Bihar (5.07). The social and economic conditions in both States are extremely depressed, and there is very limited availability of maternal and child and family planning services.

8. As UNFPA inputs, under its first phase of assistance, coincided with the Fifth Development Plan period (1974-1979), it is of interest to compare some of the data illustrating India's family planning accomplishments over that period: the growth rate decreased from 2.48 per cent in 1974/1975 to the 1978 estimate of 2.3 per cent; the crude birth rate decreased from 38.7 per thousand to the estimated 1978 figure of 37, and the general fertility rate dropped from 169.9 per thousand to 158.8. During the same period, the national family planning performance figures show that the percentage of eligible couples effectively protected rose from 14.9 to 22.8. The figure had risen to 23.9 per cent during the programme surge, under the National Emergency (1976-1977), but it has fallen back since.

#### National development plan and population issues

9. The Government is fully aware of the consequences of excess population growth and of the complexity of controlling it. India was the first national Government to adopt family planning as an integral part of its development plan, in 1952, and subsequent development plans have consistently accorded this problem high priority. Population policy has been framed within the long-term objective of reaching a net reproduction rate of 1.0 by the year 2000, but even if this goal is reached, it would take India about another 50 years before the total population would cease to increase.

10. In the revised draft of the Sixth Development Plan (1980-84) the strategy is to provide family planning on a strictly voluntary basis and to integrate it increasingly with health, nutrition, intensive rural development and socio-economic services. The promotion of different methods of contraception will follow an "open choice" approach, and communication and education are to be the means used to encourage acceptance of the small family norm. States with a weak infrastructure and with high birth and infant and maternal mortality rates are to receive special attention.

11. The total Government allocation made for the family welfare sector, during the years covered by the Fifth Plan (1974-1979), was about \$662 million. In the present plan period (1980-1984), this figure will be increased to \$850 million, exclusive of external assistance.

Previous and ongoing UNFPA assistance

12. Allocations under UNFPA's first country programme (1974-1979) totalled about \$40 million. Projects during this period can be grouped into four categories, according to their main objectives: improving service delivery; improving the quality of contraceptive services and increasing supplies; promoting family planning through the organized sector (primarily trade unions); and establishing a documentation centre.

Improving service delivery

13. During the previous plan period, the Government's revised strategy of delivering an integrated package of health and family welfare services at the local level necessitated the in-service retraining of approximately 185,000 health personnel, who had been working in separate development programmes. The training helped to expand substantially the coverage of maternal and child health care and family planning. By the end of 1979, about 105,000 such multipurpose workers had completed their training, through a project to which UNFPA allocated slightly over \$7 million which covered training stipends and teaching materials. With the continuing UNFPA support as now proposed, the entire retraining programme is scheduled for completion by 1983.

14. Field services were further strengthened by two other projects: one, to which UNFPA allocated \$7.8 million for training stipends and delivery kits, assisted the training of about 170,000 traditional birth attendants (dais); the other provided \$5 million in partial payments of local salaries to support the appointment of some 3,000 additional auxiliary nurse midwives, thus improving the ratio of these workers to the population from 1:10,000 to 1:8,000. UNFPA proposes to continue support for the training.

15. To strengthen the infrastructure of the peripheral service delivery system, UNFPA allocated about \$3.7 million to the construction of family planning service wings at 865 rural health and family welfare centres. Another allocation, \$670,000, supplied 100 locally-made jeeps to increase the mobility and outreach of maternal and child health care service delivery in rural areas.

Improving the quality of contraceptive services and increasing supplies.

16. Historically, sterilization has been adopted as a major method of fertility control by acceptors under the Indian programme. UNFPA assistance, totalling \$13.8 million, provided partial support to improve the quality of the Government's sterilization programme, by meeting a portion of the local costs of diet, dressings, drugs and transportation. More than 14.6 million sterilizations (in recent years four-fifths of them females) were performed during the five-year period of UNFPA assistance, with very minimal medical side effects, according to Indian medical authorities. Further assistance is proposed under the new programme. At the same time, UNFPA has significantly helped to expand the variety of contraceptive methods offered; oral contraceptives, not previously distributed in rural areas, are now freely available in about 4,000 health centres and are being prescribed by para-medics, under the supervision of physicians. UNFPA allocated \$479,000 under this programme, largely for the supply of raw materials to be

tabletted within India.

17. The Government is now making arrangements to manufacture Copper-T intra-uterine devices in India, with UNFPA assistance. Over 1.5 million units were supplied, along with some equipment for domestic production, under the first assistance programme, at a cost of \$904,533. UNFPA also allocated \$1,633,500 in equipment and construction costs to support expansion of the Government's condom production capacity. While condom production has now reached adequate levels, UNFPA's continued support for other contraceptive services and contraceptive supplies (raw materials for orals and for IUDs) is proposed under the second-phase of the programme.

#### Projects within the organized sector

18. In 1975 UNFPA launched five experimental projects in conjunction with the Government to promote, and in some cases, to provide family planning services through trade unions. Approximately \$882,000 was allocated to support training, some national personnel costs and training-related equipment and activities, including population awareness seminars; also towards support of direct trade union involvement in population programmes, and towards combined population education and service delivery efforts in major labour welfare institutions and selected industrial complexes. The projects, executed by ILO, were imaginatively drafted, but the scale of operations has proved to be small. For future development of these activities one lesson seems clear: in the vast Indian sub-continent, individual programmes, however well conceived, tend to be limited in their effect. The Executing Agency has therefore been attempting to develop comprehensive programmes in selected and responsive States where in an integrated approach all the components of the organized sector, as well as the supporting services of the health infrastructure could reinforce each other.

#### Establishment of a documentation centre

19. This project was designed to set up a documentation centre at the National Institute of Health and Family Welfare, New Delhi, to provide information on current developments in family planning to Indian scientists, research workers, administrators and programme planners. After a somewhat slow start, the centre is now functioning according to plan. Three fellowships for technical training have been awarded, and the centre has been supplied with equipment to the value of \$221,000. The possibility is now being discussed of using the centre for regional training. UNFPA assistance for the project totalled \$285,000.

#### Other population assistance

20. Among other international agencies, which have supported population-related activities during India's Fifth Plan period are the World Bank, the Swedish International Development Agency (SIDA), the World Food Programme, the World Health Organization (WHO), and UNICEF. India has received other bilateral assistance from Denmark, the Federal Republic of Germany and Norway.

21. A number of non-governmental organizations have also assisted India's family welfare and population programmes during the same period; they include the Co-

operative for American Relief Everywhere (CARE), Christian Church (Disciples of Christ), Church World Service, The Ford Foundation, International Alliance of Women, International Association of Schools of Social Work, International Council of Women, International Fertility Research Programme, International Planned Parenthood Federation, Oxfam, Pathfinder Fund, Population Concern, The Population Council, Population Crisis Committee, Rockefeller Foundation, World Young Men's Christian Association (YMCA) and World Neighbours.

### III. The programme

22. UNFPA's second programme of assistance has been designed on the basis of programming exercises conducted jointly by UNFPA and the Government; it also takes into account the findings and recommendations of the needs assessment mission that visited India at the end of 1978 and studied the country's population requirements, within the framework of the Government's Sixth Development Plan. The guiding principle in the development of the programme is the promotion of national self-reliance in population-related matters.

23. The new programme includes projects, begun under the first programme (1974-1979), which provide training for different cadres of health and family welfare personnel working in population programmes, improve the delivery of maternal and child health/family planning services, and strengthen the national capacity for contraceptive production. The new projects, representing high-priority concerns of both the needs assessment mission and the Government, include programmes in selected districts of two States (where a comprehensive and integrated approach will be adopted), as well as the development of programmes involving community and non-governmental organizations. The programme also gives high priority to training aimed at the strengthening of managerial and administrative capabilities, and to individual projects exploring innovative approaches to a variety of population problems. The individual projects are described below.

#### Strengthening and expansion of the national-level programme

24. The components described below represent a continuation of the UNFPA assisted maternal and child health and family planning programme; some are extensions of earlier projects and some are new.

25. Training of multipurpose workers to strengthen maternal and child health and family planning services: To complete the training effort already begun with UNFPA support, the following health personnel would be trained: 59,000 health workers, 12,000 health assistants, 2,450 block extension educators and 7,000 medical officers. UNFPA proposes allocating \$3,130,000 to this Government-executed programme for training, stipends and teaching materials.

26. Training of traditional birth attendants (dais) Approximately 300,000 dais would be trained in aseptic techniques of midwifery and in family planning techniques during 1980-1982, completing the training of this category of worker. Each trainee will be provided with a simple kit. The cost of this continued project, including stipends for training and production and distribution of kits, would be \$15 million, with direct Government implementation of the project.

27. Broadening the outreach of maternal and child health and family planning services: Improving the mobile capability of the rural family welfare centres is essential to the effective delivery of services. UNFPA would supply 600 vehicles for this purpose, at a cost of \$4.5 million, to ensure that medical and paramedical staff can make regular visits for their supervisory work. The Government would implement this continued project directly.
28. Improving the quality of sterilization services: UNFPA proposes allocating \$8 million to this continuing Government-executed project to partially meet the cost of drugs, diet, dressings and transportation expenses for the period 1980-1983. It is estimated that approximately 2.2 million vasectomies and 4.8 million tubectomies would be performed during this period. The Government pays sterilization acceptors for loss of wages, as this aspect of the programme is specifically excluded from UNFPA support.
29. Support for contraceptives: Under the new programme, continued UNFPA assistance, covering external supply and domestic production of Copper-T 200 intrauterine devices, would be made available, at a cost of \$830,153. One million units are to be supplied from abroad and copper wire is to be purchased for the local production requirements. Procurement would be handled by UNICEF and the over-all project would be executed by the Government. It is also anticipated that UNFPA will continue to supply imported raw material for local manufacture of oral contraceptives, and that it would give additional assistance for the introduction of lubricated condoms and for the improvement of condom packaging facilities.
30. Expansion of the maternal and child health/family planning programme through the reduction of infant and maternal mortality: The Government and the needs assessment report both view efforts to reduce infant and maternal mortality as fundamentally related to attaining widespread acceptance of the small family norm. A new activity, for which pre-project funding began in 1979, is providing essential immunization and vitamin supplements to mothers and young children. In all, UNFPA would provide \$11.8 million to this directly executed project, covering vaccines, iron and folic acid tablets and vitamin A solution.
31. Strengthening the national capacity to promote demographic studies and evaluation of family planning activity: The Government has decided to strengthen the national component of its International Institute for Population Studies (IIPS), Bombay. As part of this effort, UNFPA has allocated \$250,000 for a new, directly executed project to provide electronic data processing equipment.

Education and communication activities at national level:

32. A major new project is proposed to introduce population education into the curriculum of the school system. A pre-project component costing \$423,000 would provide for a central cell in the Ministry of Education to develop curricula, as well as prototype teaching materials and organizational links with 19 States. Funding components would cover consultancy services, local administrative costs, fellowships and other training for key personnel, sub-contracts to develop prototype software, audio-visual equipment and two vehicles.

33. In the field of communication, the Government has decided to stress an interpersonal/extension approach to promote the population programme. The approach is based upon the development of small group meetings, or camps, for village opinion leaders. UNFPA proposes to support a pending pre-project request for \$1.59 million which would cover group training, sub-contract for evaluation and expendable equipment for educational materials. The cost of the full programme is estimated to be \$5 million.

34. Another foreseen project involves the Government's ambitious programme to provide adult education for some 100 million persons during the period of the Sixth Development Plan. UNFPA is expected to provide assistance for the incorporation of population education components into this programme.

#### State-level comprehensive programmes in Bihar and Rajasthan

35. The needs assessment called attention to the poor programme performance in some States, notably Bihar and Rajasthan, and it recommended that UNFPA direct some of its resources to comprehensive activities in both of these States. The new projects described below should be of considerable help in expanding and improving services in maternal and child health care and family planning. The proposed support would be concentrated in three districts of Bihar. Involvement by UNFPA at State level represents a major innovation in the pattern of its assistance to India.

36. Projects within the selected districts of both States are designed to strengthen the health and family welfare infrastructure to serve the rural sector, paying special attention to mothers and young children; improve and reorient information, education and communication efforts on behalf of the population programme; and improve the managerial efficiency of the family planning programme. The projects are described below.

37. Construction of health sub-centres: This directly-executed \$21.6 million activity would provide construction costs to establish adequate space for delivery of maternal and child health and family planning services in the selected districts of both States. A total of 1,882 health sub-centres would be built in Bihar and 406 in Rajasthan, lowering the ratio of sub-centres to population from one per 10,000 to one per 5,000. The project represents the start of the UNFPA comprehensive programmes in the States; other elements, including staffing, training and delivery of services, are now being developed and implementation would be timed to coincide with completion of the sub-centres.

38. Staffing of the new facilities in both states: The objective would be to recruit and, as necessary, train staff for the new centres in the selected districts of each State. Training stipends, State-level staff costs and support for supervisory personnel would be required. Cost estimates are now being developed.

39. Baseline surveys in both States: Such surveys are required at an early stage to properly develop the comprehensive programmes. UNFPA assistance, in the amount of \$133,000 would provide for national staff in-country travel, and processing of data derived from questionnaires.



40. Supply of equipment: The expanded State-level infrastructure described above would require equipment -- medical and motivational equipment, vehicles, furnishings -- for the delivery of maternal and child health and family planning services. Projects covering these requirements are now being developed.
41. Information, education, and communication: The present communication plans of both States must be broadened by: drawing upon all development-oriented activities of Government agencies; using opinion leaders within the communities as a bridgehead for family welfare activities; decentralizing the communication planning process to develop local responsibility in each district; reviewing the current mass media plan and designing a strategy to reinforce it; and through an interpersonal communication programme involving such familiar change agents as teachers, farmers, and religious and political leaders. Consultancy services, mobile publicity vans and local staff costs would be required for such activities. These projects are now being developed.
42. Improving State level management: The needs assessment mission also pointed out the difficulty of managing a family planning programme in a country as socio-culturally diverse and complex as India. It will be necessary to examine the management systems now in use to identify and develop strategies for dealing with factors that impede efficiency. UNFPA would be expected to arrange for a long-term association with a management institute to assist in this effort. Financing of consultancies, sub-contracts, and training costs is envisioned at an approximate cost of \$1 million. As part of the effort to improve management, a special organization would be established in each State to administer programme activities and facilitate the rapid implementation by designating special project officers located in the District Collector's office in each of the selected districts.

Activities involving trade unions and employer organizations

43. As already mentioned above, comprehensive population projects, which mobilize workers, management and trade unions in co-operation with State Labour administrations and health services, may prove more successful than isolated efforts within the organized sector. The new programme is expected to contain some projects of this type and to continue support of individual innovative projects. For all projects in this sector, ILO will be the Executing Agency.

44. All-India Organization of Employers industrial sector project:

This project, for which an allocation of \$61,370 is proposed, was designed to generate awareness of population issues among workers and to develop greater collaboration between employers and employees in the promotion of family welfare and health. UNFPA inputs will cover national personnel costs, training for workers, and audio-visual equipment.

45. Co-operation between management and workers in population education and welfare activities in the industrial sector: This project, involving the Employers' Federation of India, also aims at creating broader awareness of population problems and greater collaboration between management and employees in the conduct of family health and family planning activities. UNFPA has already allocated \$66,210 for this project. Assistance covers national personnel, training sessions for workers and modest audio-visual equipment.

46. Hind Mazdoor Sabha (Trade Union Centre) population education programme: UNFPA proposes allocating \$121,040 to this project, to promote family planning as a "way of life" for the half million members. Support will cover honoraria for national personnel and training programmes to motivate workers.

47. Other foreseen projects in the organized sector, for which proposals are being formulated, would deal with family welfare and population education for industrial and plantation workers. The components to be funded would cover salaries for national personnel, training, educational materials, audio-visual equipment, vehicles, surveys and grants to institutions.

#### Programme reserve

48. The total anticipated cost of all projects for national-level, state-level and organized sector activities would come to \$80 million. Two special reserves are, however, proposed beyond this total; their purpose and nature are outlined below.

#### Projects involving community and non-governmental organizations

49. Experience in other countries has demonstrated the significant contributions community and non-governmental organizations can make to achieve national population goals. The Government of India has given considerable encouragement to the involvement of these organizations; however, the role they actually play in the Indian family planning programme remains small. UNFPA, therefore, proposes to set aside \$10 million to be used exclusively for encouraging and developing population-related projects involving the voluntary sector and falling within UNFPA's mandate. While actual project development may take some time, the Government and some of the principal voluntary organizations are now studying designs of suitable mechanisms for this purpose. Projects could include community-based distribution of contraceptives; activities to promote functional literacy and employment opportunities for women; youth activities; community incentive schemes; and experimental projects in development activities that have a strong bearing on fertility.

#### Other special activities

50. Additional projects may be foreseen as the second programme of assistance progresses. These may include, for example, strengthening the Registrar-General's office; further strengthening of the International Institute for Population Studies; providing management training activities at national level and special programmes for women and youth. UNFPA proposes to set aside a reserve of \$10 million for such projects.

#### Institutional and administrative arrangements

51. All external assistance programmes in India are co-ordinated by the Department of Economic Affairs within the Ministry of Finance. The Ministry of Health and Family Welfare has been put in charge of the UNFPA programme and has over-all responsibility for administrative arrangements for directly-executed projects (those

for which there is no United Nations Executing Agency). The Ministry will designate relevant agencies or Government departments to assume specific responsibility for administration and execution of each national-level project. In addition, the States of Bihar and Rajasthan will, under the general supervision of the Ministry of Health and Family Welfare, be responsible for the execution of the special area projects.

52. While the bulk of the second programme of assistance is to be directly executed by the Government, ILO will serve as Executing Agency for projects within the organized sector, UNESCO will be the Executing Agency for population education projects, and UNICEF will assist the procurement of IUD supplies and raw materials for oral contraceptives.

Other major external assistance during the period of UNFPA's new programme

53. The Government co-ordinates all external assistance for health and family welfare. In 1978, it determined that external resources might be directed to area projects in the different States. This direction is reflected in UNFPA's proposal for its new programme of assistance and it may also be noted in the programme of other major external donor agencies.

54. The World Bank, in collaboration with the Swedish International Development Agency (SIDA), will be supporting a project for health and family welfare infrastructure development in six districts each in of the States of Uttar Pradesh and Andhra Pradesh. Assistance is expected to total \$70 million.

55. The Overseas Development Administration (ODA) of the United Kingdom will provide \$23 million in similar assistance to a project covering five districts of the State of Orissa; while the Danish International Development Agency will assist eight districts of Madhya Pradesh and two of Tamil Nadu in a \$38 million project for infrastructure development. The United States Agency for International Development (AID) will be providing some \$40 million in infrastructure development assistance in the States of Maharashtra, Gujarat, Haryana, Himachal Pradesh and Punjab; the Norwegian Agency for International Development (NORAD), which has been assisting post-partum centres in hundreds of district hospitals, will be making further aid available for an as yet undetermined period beyond 1981. A similar NORAD project at the sub-district level is also planned to start in 1981 for a trial period of three years.

Financial data

55. UNFPA's proposed assistance, by year and category, is shown in the following table:

	<u>1979/1980</u>	<u>1981</u>	<u>1982</u>	<u>1983</u>	<u>1984</u>	<u>1985*</u>	<u>Total</u>
	\$	\$	\$	\$	\$	\$	\$
Basic data collection	133 200	-	-	-	-	-	133 200
Population dynamics	250 000	-	-	-	-	-	250 000
Implementation of policies	10 882 000	-	-	-	-	1 000 000	11 882 000
Family planning and maternal and child health activities	5 614 361	14 290 308	15 765 911	12 243 490	7 629 800	4 696 805	60 240 675
Population education and communication	1 366 255	525 290	710 040	2 315 660	1 576 880	1 000 000	7 494 125
Special programmes (non-governmental organization activities and special reserve for other governmental activities as necessary)	-	418 750	1 500 000	4 000 000	9 500 000	4 581 250	20 000 000
	18 245 816	15 234 348	17 975 951	18 559 150	18 706 680	11 278 055	100 000 000

56. The status of programme development for the programme at the time of writing was as follows:

	<u>1979/1980</u>	<u>1981</u>	<u>1982</u>	<u>1983</u>	<u>1984</u>	<u>1985*</u>	<u>Total</u>
	\$	\$	\$	\$	\$	\$	\$
Formulated	15 416 188	3 392 058	3 853 511	1 664 190	-	1 000 000	25 325 947
Pending	2 829 628	11 042 290	12 622 440	12 894 960	9 206 680	-	48 595 998
Foreseen	-	800 000	1 500 000	4 000 000	9 500 000	10 278 055	26 078 055
	18 245 816	15 234 348	17 975 951	18 559 150	18 706 680	11 278 055	100 000 000

\* Figures in this column reflect first-quarter 1985 activities fitting into the India 1984-1985 fiscal year which ends 31 March 1985.

IV. Recommendation

57. The Executive Director recommends that the Governing Council:

(a) Approve the programme for India in the amount of \$100,000,000 for five years;

(b) Authorize the Executive Director to allocate the funds and to make the appropriate arrangements with the Government of India and the Executing Agencies.