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OTHER FUNDS AND PROGRAMMES

UNITED NATIONS FUND FOR POPULATION ACTIVITIES

Recommendation by the Executive Director

Assistance to the Government of Colombia

Strengthening of the maternal and child health and
family planning programme

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| Estimated UNFPA contribution: | \$ 2,899,300 |
| Estimated value of the Government's contribution: | \$ 4.3 million |
| Duration: | Three years |
| Estimated starting date: | June 1980 |
| Executing Agency: | World Health Organization/Pan American Health Organization (WHO/PAHO) |
| Government Co-operating Agency: | Ministry of Health |

I. Summary

1. UNFPA proposes to assist the Government of Colombia in strengthening its maternal and child health and family planning programme with a contribution of \$2,899,300, over a three-year period. The project will follow UNFPA support of the programme from 1974-1980. It aims at improving the services already being provided, and seeks, in particular, to consolidate the regionalization of the national health system, to improve the classification of maternal and child health patients by risk criteria, and to train the paramedical and community health personnel needed to extend services to the rural and marginal urban populations. The greater share of UNFPA assistance will go to training and equipment; some international and local advisers and sub-contracts will be provided as well.

II. Background

2. Colombia, covers 1,139,914 square kilometres, and according to 1979 United Nations estimates has a population of about 26.9 million. Population density averages 23 persons per square kilometre but varies widely, with high concentrations in urban areas and less than one person per square kilometre in the Amazonian jungles and eastern plains. An estimated 70.2 per cent of the population live in urban areas.

3. The estimated annual rate of population growth in the late nineteen-seventies was 2.4 per cent, down from over three per cent in the 1950's and 1960's, as a result of a significant decline in fertility and in emigration. The crude birth and death rates were 33.8 and 7.9 per thousand, respectively. An estimated 49.2 per cent of the women are in the reproductive years (15-49), while an estimated 40.4 per cent of the population are under 15 years of age.

4. Average life expectancy at birth is 62 years. The Government estimates infant mortality at 80 deaths per thousand live births. Although this represents a considerable improvement over 1964, (120 per thousand), infant mortality is decreasing more slowly in Colombia than in most other countries of the region; the leading causes of infant mortality in 1977 remained the same as in 1964. They are infections of the respiratory tract, gastroenteritis, and pneumonia. The Government estimate of maternal mortality is 180 per one hundred thousand live births. For the 1970-1976 period, Government figures indicate an increase of 65.6 per cent in the number of maternal deaths due to abortion.

5. The World Bank estimates per capita gross national product for 1978 at \$870.

6. Colombia was one of the first countries in Latin America to adopt an explicit population policy in 1970. Its general objectives are a more even distribution of the population, a decrease in morbidity and mortality rates, and a reduction of the actual rate of population growth through a decrease in fertility. The current development plan seeks to effect a more equitable distribution of population and economic activity, through programmes of industrial and administrative decentralization, constitutional reforms, and the development of medium-sized cities. Through the local-level operations of the national health plan, the Government hopes to extend health services to the population, under its responsibility, which is not

currently covered; in this context, the Government also emphasizes the Feeding and Nutrition Plan and integrated rural development. The Government provides family planning services through its maternal and child health programme. Emphasis is put on training of family planning personnel in the network of health centres and hospitals, under the jurisdiction of the Ministry of Health, and population education and information is considered basic to the effective regulation of fertility.

7. Health care is provided by the Ministry of Health, covering 76 per cent, the social security system covering 12 per cent, and by the private sector covering 4 per cent. The remaining 8 per cent of the population are considered inaccessible, primarily for reasons of logistics. The national health system, in force since 1975, operates on four levels: national, sectional, regional, and local. The basic aim of the Government, to be assisted by the present project, is to reinforce all the levels of the system, especially the regional and local, in terms of the actual delivery of health services and their potential for reaching great numbers of people. The health system is organized on a regional basis, with regional hospitals at the centre and local hospitals, health centres, posts, and promoters as satellites. At present, there are 102 regional units. Health promoters are numerically the most significant element in this nucleus; their concentration and location are determined by the volume, distribution and accessibility of the population they service. They play a crucial role in reaching the most marginal segments of the population.

8. UNFPA assistance to Colombia, through 1978, totalled \$7.4 million, with an additional \$1.4 million budgeted for 1979. Support has been provided for various stages of the 1973 population and housing census (cumulative expenditures through 1978: \$607,206; 1979 budget: \$119,299), as well as to a project in population education in the Cauca Valley (cumulative expenditures through 1978: \$213,139; 1979 budget: \$10,660). UNFPA also assisted the Regional Population Centre Corporation with research and training in population and development planning (cumulative expenditures through 1978: \$293,934; 1979 budget: \$179,935). Support continues to the Pontificia Bolivariana University for the creation of a research and training oriented Socio-Demographic Studies Centre (cumulative expenditures through 1978: \$20,674; budget 1979-1980: \$34,391). UNFPA has assisted the Ministry of Labour and Social Services in establishing pilot centres that provide basic health, education, and recreation services to migrant workers (cumulative expenditures through 1978: \$4,244; budget 1979-1980: \$93,776). Funds have recently been allocated to the same Ministry for a pilot programme for the analysis of selected labour markets, so as to better define regional employment strategies (budget 1979-1980: \$115,300). Other recent UNFPA-assisted projects include support of the Colombian Family Welfare Association (PROFAMILIA) programme (1979 budget: \$729,000) and training for teachers in human reproduction, sex education, and family planning (1979 budget: \$33,576).

9. In the area of maternal and child health and family planning, UNFPA allocated \$6.7 million to three phases of a project, which ran from 1974 to 1977, and was extended through June 1980. A recent review has shown that the project's strength lies in the delivery of services, the training of personnel, and the population education provided in the clinics and by health promoters. The project proved effective in extending maternal and child health and family planning services to previously

neglected rural areas, where it contributed significantly to a decrease in fertility. While the lack of reliable data does not yet permit an analysis of its impact on maternal and infant morbidity and mortality, the project's pre-natal services were found to be particularly effective.

10. Other multilateral population assistance has been provided by WHO for research and development of family planning. The United Nations Children's Fund (UNICEF) has supported a variety of activities concerned, directly or indirectly, with family planning. Bilateral support from the United States Agency for International Development (USAID) went to a national fertility survey, conducted by the International Statistical Institute/World Fertility Survey (ISI/WFS), in co-ordination with the Regional Population Centre Corporation.

11. Among the many non-governmental organizations providing support to population activities in Colombia are Family Planning International Assistance, the Ford Foundation, the International Development and Research Centre, the International Planned Parenthood Federation (IPPF), the W.K. Kellogg Foundation, the Pathfinder Fund, the Population Council, and the Rockefeller Foundation.

III. The project

12. The overall objective of the proposed project is to support the Ministry of Health in its efforts to improve the health and well-being of the high-risk segment of the population, by reducing morbidity and mortality and by modifying fertility patterns, through population information and education and family planning services. The project will retain the objectives of the 1974-1980 project. However, there would be a shift in operational emphasis away from the hospital to the local level of service delivery. The new project will rely extensively on community workers such as empirical midwives, health promoters, and auxiliary nurses to extend maternal and child health and family planning services. It aims particularly at bringing these services to rural and marginal urban areas and at reaching a target population of 5 million, who are now without health services of any sort.

13. The immediate objectives are: to expand the health services provided to children and women, particularly those identified as high-risk; to expand family planning services, and initiate population information and education programmes for school children; and to consolidate the regionalization of the national health system, while improving the quality of the services through the training of health personnel. The project will also increase supervisory activities and include operational research to evaluate the programme's impact. The quality and availability of equipment and supplies will be improved and information programmes will be developed to motivate people to use maternal and child health and family planning services.

14. The Division of Maternal and Child Health and Population Dynamics of the Ministry of Health will have overall responsibility for the project.

15. The Government has allocated \$4.3 million for various activities under the project, and will also assume responsibility for the salaries of local administrative and support personnel on all levels and for the costs of building maintenance, supplies, and medicine. It should be noted that an estimated 68 per cent of those using the Ministry's services are mothers and children.

16. UNFPA's contribution, over three years, will support international advisers in programme management, public health, maternal and child health, and family planning and local experts in management and maternal and child health. It will also cover sub-contracts for operational research and evaluation of the project to determine, for example, the number of family planning acceptors. The training component will consist largely of seminars for community health personnel (auxiliary nurses, empirical midwives, health promoters), and also seminars for the supervisors to ensure the continuity and quality of the training programme. This component also contains fellowships in family planning, fertility, and child development. In addition, UNFPA will furnish contraceptives and various kinds of equipment, such as kits and related supplies for community health workers, basic expendable and non-expendable medical equipment and supplies for regional and local health facilities, vehicles and materials for population information and education.

17. The expenditure components of the three-year UNFPA contribution will be approximately as follows:

| | <u>1980</u> | <u>1981</u> | <u>1982</u> | <u>1983</u> | <u>Total</u> |
|-------------------------|--------------|---------------|---------------|--------------|---------------|
| | \$ | \$ | \$ | \$ | \$ |
| International personnel | 31 000 | 58 400 | 63 100 | 28 500 | 181 000 |
| National personnel | 30 800 | 73 400 | 95 100 | 31 300 | 230 600 |
| Sub-contracts | 25 000 | 96 800 | 65 000 | 35 000 | 221 800 |
| Training | 59 100 | 120 600 | 118 600 | 51 500 | 349 800 |
| Equipment | 57 000 | 267 000 | 308 700 | 258 600 | 891 300 |
| Contraceptives | 127 400 | 331 400 | 408 600 | 127 400 | 994 800 |
| Miscellaneous | <u>5 000</u> | <u>10 000</u> | <u>10 000</u> | <u>5 000</u> | <u>30 000</u> |
| | 335 300 | 957 600 | 1 069 100 | 537 300 | 2 899 300 |

IV. Recommendation

18. The Executive Director recommends that the Governing Council:

(a) Approve the maternal and child health project in Colombia in the amount of \$2,899,300 for three years; and

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

