

UNITED NATIONS DEVELOPMENT PROGRAMME



UNDP

Distr.
GENERAL

DP/1982/33
13 April 1982

ORIGINAL: English

GOVERNING COUNCIL
Twenty-ninth session
June 1982
Agenda item 6 (b)

S U P P O R T

OTHER FUNDS AND PROGRAMMES

UNITED NATIONS FUND FOR POPULATION ACTIVITIES

Report of the Executive Director on implementation and monitoring of selected country programmes

Summary

This support paper provides information on the implementation of selected UNFPA country programmes, as requested by the Governing Council at its twenty-second session (decision 76/42, paragraph (e)), in calling for such periodic reports.

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Introduction

1. The Governing Council, at its twenty-second session 1/, requested the Executive Director to continue submitting periodic reports on the implementation, both quantitative and qualitative, of UNFPA programmes.
2. Accordingly, the present support document contains implementation reports on UNFPA programmes in seven selected countries. This paper is based on information obtained through the core elements of the monitoring systems--the Project Progress Report, the Tripartite Project Review and the Annual Country Review--and provides information regarding achievements and problems involved in the implementation of project activities approved within each country programme. The financial information provided includes operative Governing Council approval, amount expended in 1980 and amounts allocated in 1981, all listed by UNFPA Work Plan categories.

I. Bangladesh

Introduction

3. UNFPA assistance to the population programme in Bangladesh, a priority country for UNFPA assistance, started in 1974. A country agreement in the amount of \$10 million was approved by the Governing Council in 1974 for the three-year period 1974-1976. 2/ This programme was extended through 1979 due to initial delays in programme implementation. During the first country programme (1974-1979), UNFPA assistance was mainly utilized for maternal and child health and family planning, processing and analysis of the 1974 census and preparation of the 1981 census. UNFPA assistance also covered population education activities in the formal and the informal sector through rural co-operatives, salary support to field workers and technical advisory services.
4. Following the population Needs Assessment Mission undertaken in 1977, the Governing Council at its twenty-sixth session authorized UNFPA to allocate up to \$25 million from its regular resources and an additional amount of \$25 million to be mobilized from multilateral sources for the UNFPA second country programme (1980-1985). 3/ The second country programme accords high priority to maternal and child health and family planning services including training, education, communication, a multisectoral population education programme, and the 1981 population census. Viewed as a total package, it is clear that the bulk of UNFPA assistance has gone to strengthen the delivery of MCH and family planning services through

1/ Governing Council decision 76/42, paragraph (e).

2/ Governing Council decision 74/29 (see DP/FPA/1/Add.2).

3/ Governing Council decision 79/28 (see DP/FPA/10/Add.19).

the provision of essential supplies, technical advisory services, and manpower training and development.

5. Programme-wide constraints of a non-technical nature have reduced the potential impact of UNFPA technical assistance. These constraints, identified through project evaluation and TPRs, include: (a) dual chain of command within the health sector; (b) ineffective functioning of the integrated health and family planning workers at the thana 4/ level and below; (c) inadequate Government financial resources to fund support staff and salaries of Government workers now funded by donor agencies; (d) key posts, e.g., counterparts to technical consultants, left unfilled; (e) frequent change and transfer of key programme personnel; and (f) lack of trained manpower and local staff support.

6. UNFPA assistance during the first two years (1980-1981) of the second country programme focused on the following areas: (a) MCH/family planning service delivery; (b) population and family health manpower development; (c) strengthening of information, education and motivation; (d) multisectoral population education programme; (e) support to 1981 census; and (f) strengthening of population planning.

7. For 1980-1981 total assistance to the Bangladesh programme was estimated at \$13,280,000 out of which \$12,100,000 was from UNFPA regular resources and \$1,180,000 from multi-bilateral resources.

The programme - status of implementation

8. MCH/family planning service delivery. Two projects fall in this category. The first project is designed to provide technical advisory services, contraceptives, MCH supplies (drugs), transport and budgetary support to government personnel working in the country-wide programme. The second project provides support to the International Centre for Diarrhoeal Disease Research (ICDDR) in Matlab Thana to investigate the demographic impact (on health, mortality and fertility) of an intensive, integrated delivery of MCH/FP services. There have been few problems with the ICDDR project, but the MCH/FP project has suffered from (a) ineffective integrated services at the thana level and below, (b) lack of effective supervision, (c) uncertain quality of sterilization services, and (d) need for more comprehensive MCH service coverage. The Government is responding to the need for improved quality of sterilization services through: (a) fielding sterilization surveillance teams of highly trained specialists; and (b) approval by the National Technical Commission of a new anaesthesia regimen for sterilization procedures in which new medical graduates are being trained. The project document has been revised to reflect required attention to these needs in the period 1982-1985.

9. Population and family health manpower development. The two projects in this category are: Population Manpower Development and Family Health Manpower Development.

4/ Local municipal unit.

The Population Manpower Development project is designed to develop and strengthen the National Institute of Population Research and Training (NIPORT) as a national training institute for every category of population and family planning staff. The Family Health Manpower Development project is designed to improve the skills of various levels of health and FP workers through faculty development and technical assistance to the National Institute of Preventive Medicine and Medical Assistant Schools. A number of substantive training activities took place during 1980 and 1981 but major project constraints remaining are (a) low quality of training due to insufficient number of professional trainers to fill vacant posts and (b) frequent transfer of faculty members at NIPORT. Responding to these deficiencies, the Government has taken positive steps to fill the vacant posts.

10. Information, education and motivation. The two projects in this category are: Improved Communication Support for the Population Control and Family Planning Division (PCFP) and Population Information Services. The project in Improved Communication Support is designed to create awareness of the population problem through workshops, seminars, and use of formal and indigenous media. The project on Information Services is designed to provide a Population Information Service Facility for concerned governmental authorities. Both projects are proceeding as conceived and are expected to expand and extend their activities in the next phase. Major constraints have been insufficient trained manpower at the field level and insufficient equipment and transport at the field level.

11. Population education. Five additional multisectoral projects in the area of population education are: Population Education for the Formal Education System; Population Education in Work-related Training Programme; Population and Family Welfare Motivation and Services in Industry and Plantation; Population/Family Welfare Education in the Organized Sector Through Industrial Relations Institutes (IRIs); and Population Education for Agricultural Extension Workers and Motivation of Farmers. These projects are designed, as a group, to extend family planning information, education, motivation and services in collaboration with programmes in other sectors that reach large numbers of the population. Population education has been successfully introduced in the formal school system and in Teacher Training Institutes. Major project constraints have been: the failure to fill posts, resulting in non-fulfillment of training targets; overly ambitious project objectives; lack of built-in evaluative mechanisms; and frequent changes in key programme personnel.

12. Data collection. The objective of the Bangladesh Population Census 1981 project is to assist the Government in all phases of the 1981 census. This project was successfully completed by the Government despite late arrival of the data processing equipment, which necessitated hand-tallying of all data; census results were, therefore, substantially delayed. UNFPA financial support to this project ceased as of 31 December 1981. UNDP has agreed to provide its financial assistance to this programme area from 1 January 1982.

13. Strengthening of population planning. Two projects fall into this category: Strengthening Planning and Project Finance Cell, PCFP; and Population and Development Planning Unit. The first project is designed to develop the institutional capacity of the PCFP Division to plan, co-ordinate and analyse the population programme in its entirety. The objective of the latter is to develop a unit within the Planning Commission to assist in integrating the population component into the overall national development plan.

Summary

14. UNFPA commitment to systematic and periodic monitoring has affected all UNFPA-supported programme activities in Bangladesh. It is evident that the extensive evaluation of UNFPA assisted projects has influenced the Government's appreciation of and attention to the problems mentioned above. During the Annual Country Review (ACR) held in Dacca on 19 December 1981, proposals for UNFPA assistance for 1982 - mid-1985 were reviewed and approved by the Government and UNFPA. However, the Government will not be able to absorb UNFPA-assisted local project personnel costs at the rate that was foreseen earlier, due to the unfavorable domestic economic situation.

15. Due to current UNFPA resource constraints, the size of the UNFPA programme for the remainder of the second UNFPA country programme (January 1982-June 1985) has been readjusted under the following criteria: programme review carried out jointly by the Government and UNFPA; priorities identified by the Government in ongoing projects; avoidance of duplication with other donors; and absorptive capacity of each project as identified in TPRs and evaluations.

16. On the basis of the above and in view of the latest guidelines for UNFPA set by the Governing Council, ongoing projects have been revised and updated for 1982-mid-1985 implementation.

<u>Bangladesh</u>	<u>Financial Status</u> (US \$ 000)	
	<u>Governing Council</u> <u>approval 1980-1984</u>	<u>Assistance through 1981</u>
Basic data collection	\$ 6,467	3,056
Population policy formulation	960	2
Family planning	29,835	9,053**
Communication and education	5,442	1,143
Special programmes	48	36
Multi sector activities	-	-
Projects to be developed	7,248	-
	<hr/> \$50,000*	<hr/> \$13,290

* Of which \$25 million is authorized from UNFPA regular resources and \$25 million from multi-bilateral resources.

** Does include \$1,498,282 made available in multi-bilateral funds from Denmark and the Netherlands.

II. Burundi

Introduction

17. UNFPA assistance for population activities in Burundi started in 1972. Assistance was provided for collection and analysis of basic health statistics related to maternal and infant mortality and for reorganization and strengthening of Burundi's demographic and health statistics office through financing of an international expert, administrative support and some office equipment. In 1978, UNFPA supported technical assistance to the Government to develop the recommendations for the inclusion of population and family planning activities in the preventive and curative health programmes of the social security system. UNFPA supported the preparation of Burundi's first country-wide population census; the cartographic work and the pilot census were completed in 1978.

18. Burundi is a priority country for UNFPA assistance. UNFPA conducted a Needs Assessment Mission to Burundi in 1978. Taking into account the Mission's recommendations, a comprehensive programme of UNFPA assistance was prepared. UNFPA assistance in the amount of \$5.1 million over a four-year period was approved by the Governing Council at its twenty-sixth session to aid the Government with demographic data collection, population dynamics and formulation of a population policy, family health and welfare, and population education and communication. 5/

5/ Governing Council decision 79/28 (see DP/FPA/10/Add.22).

The programme - status of implementation

19. Population census and data processing of census results. This project was designed to provide the Government with detailed information on the country's demographic situation, and to train national staff in demography and statistics. The nation-wide census was completed in August 1979, one year later than expected, mainly due to the absence of qualified national counterpart personnel and to logistical difficulties caused by the phenomena of "rugos", small communities scattered throughout the country, where an average of 5.7 persons or 1.3 households reside. In November 1979, a post-census survey was undertaken and data processing commenced. Due to problems with the delivery and installation of the IBM data processing equipment, further delays were encountered and the Government requested additional funds for an extension of the project, now scheduled to terminate in autumn 1982. Total UNFPA assistance for 1979 - 1981 amounted to \$1,323,885.

20. Improvement of civil registration and vital statistics system. Existing legislation in Burundi mandates the declaration of vital events. However, the existing system did not function well and the Government requested assistance to improve it through strengthening the organizational infrastructure and training the registration personnel. The existing registration system was reviewed and a strategy for the complete recording of vital events was tested on a pilot basis in 1980 with a sample of eight communes. In 1981, the improved system was expanded throughout the country. In all 87 communes of the country, the necessary personnel have been recruited and the eight provinces of the country have been provided with a "provincial controller". A communication campaign was undertaken, and teaching material for the training of the controllers and supervisors was published. Three nationals were trained at the University of Louvain. Over-all project activities followed the work plan but were slowed down due to difficulties in recruitment of a national expert and to a cut-back of UNFPA assistance in 1981.

21. Establishment of a Population Research and Training Centre. Given the expansion of the Government's data collection programme, UNFPA was requested to assist in the establishment of this Centre. Activities started in mid-1980 and in 1981 the Centre finalized and published the analysis of the 1979 post-census survey. A course in demographic analysis was given by the international expert at the National University, and training was given at the Centre for University students as well as for the Centre's national staff. The Centre's library was expanded. A national started his 2-year post-graduate fellowship at Louvain.

Summary

22. At an Annual Country Review (ACR) held in October 1981, the achievements and weaknesses of the programme were identified. Among these are the logistical problems caused mainly by the mode of habitat predominant in Burundi, the shortage of national trained manpower and the fact that, once trained, nationals tend not to remain with, or to return to, the project. Also, programme co-ordination and collaboration were weak, especially in the Census and the Population Research and Training Centre projects.

23. The ACR also offered an opportunity to explain to the Government UNFPA's present resource situation and to convey the implications of the shortfall of anticipated resources for the programme of assistance. The resource situation is such that the 4-year programme approved in 1979 will have to be extended over a longer period. Burundi has only become aware of its population problems in recent years and, therefore, requests have reached UNFPA at an accelerated rate just at that moment when the Fund can hardly meet the commitments for its ongoing programmes.

<u>Burundi</u>	<u>Governing Council approval 1978-1982</u>	<u>Assistance through 1981</u>
Basic data collection	\$ 1,050	1,281
Population dynamics	400	168
Population policy formulation	150	-
Family planning	1,750	-
Communication and education	1,150	-
Multisector activities	-	20
Projects to be developed	600	-
Total	<u>\$5,100</u>	<u>\$1,469</u>

III. China

Introduction

24. China began receiving assistance from the United Nations system in 1979. During a UNFPA mission to China in May of that year, a number of areas for population assistance were identified. The first priority was to field study tours for Government officials in each planned area of assistance to examine services, equipment and programmes in other countries. Subsequently, the Government developed project requests for \$45.7 million which were approved in full as part of a total \$50 million four-year programme approved by the Governing Council in June 1980. 6/ A Programme Agreement was signed by Chinese authorities and the Executive Director of UNFPA in September 1980. The 1980 implementation rate was

6/ Governing Council decision 80/13 (see DP/FPA/11/Add.22).

92 per cent of what had been programmed. Expenditures in 1981 are expected to be over \$15 million.

25. The needs of the country, which contains between 20-25 per cent of the world's population, are enormous. The population has had limited access to outside technologies and developments in the past, and to date has received practically no assistance in the field of population from other donors. Accordingly, the UNFPA programme of assistance is extensive and covers a wide range of activities, including assistance to the 1982 population census; demographic training and research; population information, education and publicity; training of family planning personnel; family planning research, statistics and evaluation; and contraceptive production.

The programme - status of implementation

26. Population census. Although China has conducted two previous censuses, in 1953 and 1964, they were more modest efforts and, due to the enormity of the task, full data processing was not done. Therefore, a main thrust of the assistance for this census is to obtain modern computer equipment, and to train personnel in its use. On the basis of the experience of a 1979 study tour of census officials which visited several manufacturers and census offices, and based on bids received, the executing agency UNTCD in early 1980 selected the IBM bid for 21 computers. This will complement the 8 WANG computers which the Government has bought. An export license for the first computer was obtained in late 1980. The export license for the remaining 20 IBM computers was granted in December 1981. A pilot census in Wuxi was undertaken in July 1980 and in almost all other provinces in 1981. Data have been processed in all the provinces which have WANG computers.

27. Plans for census publicity have been made. The massive training programme is being given particular emphasis. Special attention is being paid to ensure that the telecommunications facilities between provinces and Beijing are sufficient. So far, no major problems have arisen. Site preparations for the computers have been delayed somewhat, but since the computers were only recently licensed, this has not created any problems.

28. Demographic training and research. During the recent past, almost all university level education was interrupted, and almost no demographers have been trained in the last decade. In view of the obvious need to foresee the implications of the massive demographic changes which are to be expected as China's one-child family policy is being implemented, this is a most critical need. Therefore, a very wide ranging programme has begun with UNFPA assistance under which 10 universities, as well as the Chinese Academy of Social Sciences, receive assistance for training, consultancies, books, equipment, etc. Another 10 universities also started small-scale demographic programmes, without UNFPA assistance, in 1980, and a Chinese Population Association has been formed. In order to further contacts with prominent demographic scholars and institutions, a demographic conference was held in Beijing in October 1980 with scholars from throughout the world. Several well-known demographers have given short-term

courses on research methodology, and a long-term resident adviser has been assigned in 1980.

29. In 1981 research plans of different universities were reviewed, several study tours were conducted, workshops with foreign scholars were held, and inter-university work groups which discuss such matters as a demographic dictionary, textbook translations, curriculum development, census research, etc., started functioning. This project has one of the largest training components of the China programme, and it has been particularly difficult to find well-qualified fellowship applicants. Another problem is to improve inter-university communication and collaboration.

30. UNFPA assistance to this project was \$502,732 for the period 1980 - 1981.

31. Information, education and publicity. Three projects are under way with different ministries. The Family Planning Commission is in charge of a new Information Centre and a very well-established Family Planning Publicity Programme. The Information Centre was not started until January 1981 due to UNFPA's resource constraints; permanent quarters are still under construction. A study tour was organized to visit other such centres; linkages with other institutions, both domestic and international, have been initiated; mailing lists are being established; and documents being ordered and translated. This project meets the newly-identified need for information exchange and as such is working on establishing linkages. The problems associated with international mail flow, due to a lack of Chinese character addresses, are being overcome.

32. The Family Planning Publicity Project introduces new technologies to strengthen the existing family planning publicity field network. Subsequent to a 1980 study tour which visited manufacturers and programmes, a previous assessment of equipment needed was substantially changed. The year 1980 was mostly spent with planning and training, since no equipment had yet been installed. A large amount of materials, exhibitions etc., were produced in 1981.

33. Population education is undertaken by the Ministry of Education in secondary schools. UNFPA assistance started in January 1981 with ten secondary schools and ten paedagogical institutes chosen as models. Curricula have already been revised and introduced during one semester and will be sent to other schools for adaptation. Population education is seen to include demography as well as physiology and family planning information.

34. Training of family planning personnel. Training is conducted at two national centres in Nanjing and Chengdu; family planning workers are trained in statistics and family planning evaluation, and medical personnel are trained in the clinical applications of family planning methods. The programme in Chengdu is proceeding according to schedule: the centre was built, equipment ordered and curricula developed in 1980, and utilization began in 1981. In Nanjing, delays in construction due to groundwater problems have led to other delays in project

implementation. Fellowship implementation has been delayed in both projects due to a language proficiency problem.

35. Family planning related research. A national institute for family planning research in Beijing has experienced several construction delays but work proceeds in temporary lodgings. Fellowships and research continue on schedule. Active linkages with international research programmes have been established. A uniform reporting system for family planning data was developed in 1980, and is being introduced. A review mission in 1981 conducted courses on sample survey methodology, epidemiology and population dynamics. It also assisted in the design of a sample one-per-thousand survey plan for the Family Planning Commission. The problem of developing a speedy, uniform system of reporting remains. A project designed to improve maternal and perinatal mortality rates has been established in five hospitals. Training courses in maternal and child health were conducted in the five hospitals in 1980 and 1981.

36. A development biology institute is receiving limited assistance from UNFPA, pending assistance from other donors. In 1980, construction of the buildings was well under way, and equipment purchased in 1980 was installed in 1981 to improve the laboratory facilities. In addition, fellows have begun their training, and several consultancies and training courses have been undertaken.

37. UNFPA assistance to these activities in 1980 - 1981 amounted to \$3,847,916.

38. Contraceptive production. Although China produces all its contraceptives, with improved production a greater variety of higher quality contraceptives could be produced and distributed all over the country. In 1980, through study tours and consultancies, major plans for five factories producing contraceptives were finalized and equipment selected; these activities continued in 1981. Trial tests (field samples) were conducted with different types of contraceptives. The projects will add the capacity to serve 16 million couples with improved contraceptives. In the long run, production will be expanded, perhaps leading to export capacity. Though several delays have been encountered both in construction and equipment delivery, over-all the programmes are proceeding on schedule. Total UNFPA assistance to these activities for 1980 - 1981 was \$6,759,963.

Summary

39. With the goal of cultivating horizontal linkages among projects and of obtaining financial data, initial tripartite reviews for all projects were held in February 1981 and an Annual Country Review was held in August 1981. Major features identified at these meetings were: exceptionally high implementation for such a new programme; rapid assimilation of United Nations procedures considering that all project managers are nationals with no previous United Nations experience, that all executing agencies are new to China, and that the UNFPA Office was set up in early 1980; and high commitment by the agencies to facilitate procedures, and to quickly provide financial estimates.

40. At these review meetings, the following factors impeding implementation were discussed: UNFPA resource constraints which were not foreseen at the time of programme design; language proficiency problems with fellowships and study tours; long and cumbersome procedures for equipment procurement; and delays in construction. It should be noted that the Government has been particularly careful to honour its commitments to United Nations-assisted projects in that the Government counterpart contributions to all United Nations-assisted projects have been maintained or increased, whereas over-all Government capital construction has been reduced by 40 per cent.

41. Under the present \$50 million programme of assistance, \$48 million have been approved fully or in principle and another \$1 million is earmarked, leaving \$1 million for cost increases and unforeseen problems in existing projects. The programme period has been extended from four to five years; UNFPA resource constraints have led to large rephasings in work plans which reduced the heavy front loading of the programme.

<u>Financial Status</u> (US \$ 000)		
<u>China</u>	<u>Governing Council approval 1980-1983</u>	<u>Assistance through 1981</u>
Basic data collection	\$15,400	8,437
Population dynamics	3,996	805
Implementation of policies	-	878
Family planning	28,064	16,032
Communication and education	1,482	538
Multisectoral activities	-	246
Projects to be developed	1,058	-
Total	\$50,000	\$26,936

IV. Haiti

Introduction

42. UNFPA initiated its assistance to Haiti in 1971 with support to the Population and Housing Census followed, in 1972, by a project to strengthen the Ministry of Public Health's infrastructure for the delivery of maternal and child health and family planning services. Since that time, UNFPA has collaborated with the Government in the areas of national fertility survey; research on cultural values and population policy; and demographic research, analysis and training. Projects have emphasized the transfer of knowledge to national counterparts and included the provision of basic equipment.

43. A UNFPA Population Needs Assessment Mission was conducted in 1979. The current UNFPA programme of assistance to Haiti is consonant with the recommendations made, with population education and communication as an integral part of each project.

44. UNFPA considers that its assistance over this ten-year period has contributed to the development of better awareness of, and ability to deal with, population issues and problems. Project activities have, however, revealed the magnitude of the difficulties to be resolved in this area and thus the need for continued support to enhance self-reliance both at policy and service levels.

The programme - status of implementation

45. Maternal and child health and family planning programme. UNFPA continued to assist the Government in expanding maternal and child health and family planning services. Extensions of the 1972 programme were approved by the Governing Council in 1974 for two years, 7/ in 1976 for three years, 8/ and in 1978 for one year. 9/ Interim financing was provided from July 1979 through December 1980. In 1981, the Governing Council at its twenty-eighth session approved a new programme for the period 1981 - 1984. 10/

46. The project maintains emphasis on promoting and expanding services in rural and peri-urban areas through the network of primary health care facilities with particular stress placed on training in information/education/communication, in evaluation and monitoring, and in strengthening administrative capability. UNFPA assistance covers international expert services, salaries and supplements for a small number of central staff; modest funds for supervision activities and operational research; training and information/education/communication activities through the mass media; equipment, medical supplies and contraceptives.

7/ Governing Council decision 74/29 (see DP/FPA/1/Add.3).

8/ Governing Council decision 76/42 (see DP/FPA/5/Add.10).

9/ Governing Council decision 78/33 (see DP/FPA/8/Add.5).

10/ Governing Council decision 81/7 (see DP/FPA/12/Add.7).

47. A shortage of medical and trained community staff has affected the progress of the project, and a good number of health facilities still do not provide MCH/FP services. Progress was also affected by UNFPA's resource constraints. Nevertheless, a number of significant results have been achieved and services have been increased considerably. The programme has publicized the importance of maternal-child health and promoted the use of these services and the practice of responsible parenthood, the high levels of morbidity and mortality have been lowered, and the fertility rate has started to decline.

48. Demographic Analysis Unit. In 1976, UNFPA initiated assistance to the Government to establish the Demographic Analysis Unit at the Haitian Institute of Statistics (IHS). The project was intended to establish and institutionalize the capability to collect and analyze demographic information for use in national socio-economic plans and programmes. Particular emphasis was placed on training and on the practical work of demographic analysis. UNFPA assistance consisted of international expertise, funds for training and a modest equipment component. The project has produced a sharper awareness of, and appreciation for, demographic matters and trained a nucleus of national technicians. UNFPA assistance to the project during the period 1979 - 1981 was \$322,375.

49. Population and housing census. UNFPA supported the 1971 population and housing census and is now supporting the 1982 population and housing census as recommended by the needs assessment mission.

50. The census, initially scheduled for 1981, and rescheduled for 1982, is the responsibility of the Haitian Institute of Statistics (IHS). At present the IHS is moving towards the completion of the cartographic work, is reviewing the results of the pilot census, and is concentrating on selecting and rigorously training the staff needed to conduct the enumeration and to process and tabulate the data. Although a number of manpower difficulties and resource restrictions delayed the advancement of activities as planned, the project, which now has a resident advisor in census organization, is now progressing well and on schedule. During the period 1979 - 1981, UNFPA assistance amounted to \$520,016.

51. National fertility survey. UNFPA supported the national fertility survey conducted in 1977 within the context of the World Fertility Survey Programme.

52. The project enhanced national expertise for the analysis of demographic data and provided updated information relevant to socio-economic planning. As a follow-up to the survey, a national seminar was held to discuss its results in October 1981. From 1979 - 1981, UNFPA provided \$10,200 to this project.

Summary

53. UNFPA assistance has made an important contribution to the implementation of public sector population activities in Haiti. At the highest levels of Government there appears to be a much clearer appreciation of the need to formulate and adopt a population policy. In his message to the seminar on the results of the 1977 national fertility survey, the President of the Republic expressed his

concern with the nation's principal problems linked to demographic phenomena and noted the increasing urgency for development of a population policy. In order to explore these issues, a national conference on population and development will be convened in the spring of 1982.

Financial Status

(US \$ 000)

Status of Governing Council Approval

(US \$ 000)

<u>Haiti</u>	<u>Governing Council approval 1981-1984</u>	<u>Assistance through 1981</u>
Maternal Child Health and Family Planning	\$ 3,121	410

V. India

Introduction

54. UNFPA assistance to India, a priority country for UNFPA assistance, commenced in 1975 with Governing Council approval of a programme of \$40 million over a five-year period. 11/ Projects during this phase aimed at improving family planning through training of approximately 185,000 health personnel and of traditional birth attendants and expansion of the infrastructure at peripheral levels; improving the quality of contraceptive services and increasing supplies; promoting family planning in the organized sector by supporting experimental projects in conjunction with the Government; and establishing a Documentation Centre to provide information on current developments in family planning to government scientists, research workers, administrators and programme planners.

55. In 1978, the Fund fielded a Needs Assessment Mission to India. Subsequently, a population programme, prepared for a second five-year period of assistance, was approved by the Governing Council at its twenty-seventh session 12/ in the amount of \$100 million, with \$90 million to be available for programming purposes and \$10 million to be held in reserve. Based on latest plans the Government and UNFPA will programme \$80 million out of the \$100 million approved by the Council. A major thrust of the programme is the concentration of resources in areas of greater need as perceived by the Government through an area-specific approach in the two states of Bihar and Rajasthan.

The programme - status of implementation

56. Support to expansion of sterilization programme. Under this project, partial support was provided to an extended sterilization programme by meeting a proportion of the per case cost of sterilization. The Government sterilization programme has

11/ Governing Council decision 74/29 (see DP/FPA/1/Add.10 and Corr.1)

12/ Governing Council decision 80/13 (see DP/FPA/11/Add.13 and Corr.1 and 2).

been expanding steadily in recent years with a substantial increase in cases in 1981 estimated at 24 per cent above the 1980 figures. In view of the importance of this programme, the Government carries out continuous review of acceptor characteristics, and has introduced a system of field checks to monitor the programme and validate statistics and eligibility data. A significant feature of the recent expansion of the programme is a marked increase in the number of female acceptors for tubectomy operations and the growing popularity of laparoscopic surgery. The demand for female sterilization has increased, although performance levels vary considerably from state to state. Such states as Kerala and Maharashtra have achieved results above their targets, while performance in the Hindi belt states, Bihar, Madhya Pradesh, Rajasthan and Uttar Pradesh, continues to be below target. One of the reasons for the poor performance of these states is said to be the relatively poor infrastructure facilities; even where the facilities exist, access is often difficult. The Government has launched a special area development programme in order to strengthen the infrastructure in these states. UNFPA is assisting the Government in these efforts, particularly in major programmes of the states of Bihar and Rajasthan.

57. Supply of oral contraceptives. This programme is designed to support the expansion of oral pill usage by supplying the raw materials, principally norethisterone acetate, required for the tableting of the oral pill in India. The Government has made the pill available at 6,000 sub-centres and has promoted distribution of the pill by paramedicals in order to decentralize pill distribution. It is expected that approximately 160,000 Community Health Guides will be supplied with oral pills for distribution as soon as an adequate stock of pills is available. UNFPA assistance has provided the raw materials for building up the stocks and for organization of a decentralized distribution system.

58. Supply of IUDs, CuT 200. Under this project raw material, principally high quality copper wire, was supplied to the Government for manufacture in India of the CuT 200. The first batch of samples produced is being tested both in India and abroad. The CuT 200 is proving to be quite popular, representing mainly a change of IUD acceptance from the Lippe's Loop to the CuT 200. The project also supports research and field studies on the reasons for low acceptance of the IUD.

59. Training of traditional birth attendants (dais). The project is designed to involve the community in the Family Welfare Programme by training traditional birth attendants in improved methods of delivery. To date, approximately 350,000 dais have been trained; it is estimated that a further 200,000 will be trained. UNFPA support to the project includes a training stipend and the cost of a birth attendant kit is given to each dai after training. UNFPA will continue to support these activities. Following an evaluation of the project by the National Institute of Health and Family Welfare, the Government may submit a proposal to UNFPA for continued support under the current programme. (UNFPA expenditures in 1979 amounted to \$4,992,629 under the First Country Agreement; about \$6 million may be requested for support under the second agreement depending on the result of the above-mentioned evaluation).

60. Opinion leaders camps. In a major effort to mobilize popular support for the Family Welfare Programme, the Government has developed a new extension strategy based on one-day camps for opinion leaders. During a 12-month period, UNFPA helped finance some 35,000 camps, mainly in rural areas, each attended by about 40 local village leaders. Direct contact was thus established with approximately 1.4 million leaders who in turn are expected to pass on information and advice about Family Welfare to their own community members. UNFPA also supported a comprehensive evaluation of the Opinion Leaders Camp strategy; training; and materials production activities. As a result of the project and the evaluation study, the Government is further refining the opinion leaders' camp strategy for greater impact in the northern states where over-all programme performance has been below national average.

61. Population education. The purpose of this project is to integrate population education into the formal education system of the country. UNFPA assistance is used: to establish a Population Education Cell at the National Council of Educational Research and Training (NCERT) and supporting cells at the State Council of Educational Research and Training (SCERT); to develop proto-type curricula, instructional materials, training packages and audio-visual aides; to translate selected educational materials into the regional languages; to train teacher educators and administrators; to conduct research studies and action research programmes on the impact of population education on the attitude formation of students, and to evaluate and appraise the progress and effectiveness of the programme.

62. The Central Cell at the NCERT has been established and the programme is under way in ten states. Activities are being expanded to eight more states and the Government has now decided that population education should be integrated throughout the national education system. Evaluation of the first year's activities in ten states indicates substantial progress and arrangements are being made for periodic appraisals of project progress and effectiveness by the NCERT with the support of UNESCO's Regional Team on Population Education in Bangkok and the assistance of UNESCO Paris. UNFPA assistance for the 1980-1981 preparatory activities was \$212,610 and was originally approved for UNESCO execution of a pre-project component with start up of main activities due in 1982 under \$4.9 million approved for 3 years.

63. Baseline surveys - Bihar and Rajasthan. UNFPA funds were used to carry out baseline surveys on fertility, mortality and related factors in the districts of Bihar and Rajasthan, selected for development of comprehensive area development programmes. The surveys have been completed and now await coding of the data prior to final report and printing. This project was completed at the end of 1980, one year sooner than anticipated, at a cost of \$58,160.

64. Rajasthan Family Welfare Area Programme. In contrast to Phase I projects, which mainly provided budget support to national-level activities, the Rajasthan programme, comprising two projects, concentrates resources in a specific area. The programme is designed to support the Government's decision to concentrate resources in the five northern states where family planning acceptance is below the national average. UNFPA is assisting the Government in this intensive programme in the states of Rajasthan and Bihar.

65. The programme is being implemented in three districts of eastern Rajasthan with an estimated population of five million. Under the construction project, the number of health and family welfare facilities will be doubled. The project will finance a contract between the state government and the Indian Institute of Management at Ahmedabad, under which detailed diagnosis of the services delivery system will be undertaken; recent disastrous floods in Rajasthan delayed the implementation of this diagnostic survey. Management training for Primary Health Care Centre and district-level medical officers has commenced. The project will provide for the training of dais (traditional birth attendants); for the recruitment, training and posting of additional male and female health workers to staff the new Sub-Centres; and for supervisors, medical officers and specialists for the upgraded primary health centres. Some \$2.7 million has been approved for the service component of Rajasthan for 1982-83 while \$6 million was allocated for construction in 1981-84 (\$698,500 in expenditures in 1981).

Bihar Family Welfare Programme. To establish infrastructure facilities to ensure the provision of MCH/FP services, as well as improvement of services, the projects are designed to assist the Government in intensive programmes in Rajasthan and Bihar as mentioned in paragraph 64. Currently, assistance for strengthening of infrastructure in the 6 districts of Bihar has been initiated in 1981 for which expenditure amounted to \$698,500. A total of \$6 million is envisaged for this activity.

Another component in the Bihar programme relates to assistance to strengthening the services and documentation for this activity and is under formulation during 1982. In general, the activities of the Bihar area have been slow due to various local and administrative constraints.

66. A plan has been drawn up to improve and strengthen the communication sector of the programme, with initial activity focused on a thorough in-service training programme for some 60 staff members. To meet the monitoring and evaluation needs of this complex and important programme, a special cell has been set up in the state headquarters and a detailed monitoring schedule has been drawn up.

67. Integration of Population Education with the Workers Education Scheme of the Central Board of Workers Education Phase II. This project is a continuation of a project in which population education materials were prepared for incorporation in the training programme of the Central Board of Workers Education. The original set of materials was well received leading to a Board of Workers Education decision to incorporate population education as a training component in training programmes throughout India. This requires the translation of material into 13 regional languages and organization of orientation courses for regional Directors and Trade Union Directors.

68. HMS workers population education programme. This project was designed to help trade unions develop the capacity to provide family welfare education to members and to motivate them towards having smaller families. The project was implemented by the Hind Mazdoor Sabha, one of the principal trade union

organizations in the country. UNFPA assistance in 1981 amounted to \$40,357.

69. Co-operation and management of workers in population education and family welfare activities in the industrial sector - All India Organization of Employers. This project is designed to bring employers and workers together in a programme to develop and sustain an effective family and population education programme at the plant level in selected industrial areas. The project is implemented by the All India Organization of Employers in the three districts of Kanpur, Patna and Ludhiana.

Other population education activities. This includes two projects: (1) Tripartite collaboration-Ahmedabad, and (2) Promotion of population education in Plantations-India Tea Association. These two activities were temporarily suspended in late 1981 pending a review of all organized sector projects and no expenditures was reported.

Co-operation and management of workers in population education and welfare activities in the industrial sector - Employers Federation of India. This project is similar to the employer-workers co-operation project described above. The Implementing Agency in this case is the Employers Federation of India and the project is operational in the industrial districts of Pune and Madras.

70. Strengthening of International Institution for Population Studies (IIPS). Project is designed to assist IIPS in building up training programmes and plant and equipment for role in Indian national family planning programme. The project inputs mainly consist of equipment, the procurement of which has met some delay. No expenditure was incurred in 1981 but procurement is expected to be effected in 1982.

Data processing and analysis of Howrah CBD programme. To provide for the processing and analysis of all available data on distribution of contraceptives in the Howrah district, focussing on the variations in performance of contraceptive depot holders.

71. Strong emphasis has been placed on programme appraisal and monitoring during Phase II of the programme. In view of the large financial inputs, special procedures have been completed for monitoring and appraisal of the Comprehensive Area Programme and of the Population Education Programme. Based on a joint assessment by the Government of India and UNFPA of the optimum use of resources under the Phase II programme, two projects have been cancelled; these funds will be reprogrammed for priority activities. In this regard proposals are under consideration by UNFPA: (1) for the supply of one million condoms on an emergency basis to cover a shortfall in local production; (2) assistance for strengthening and monitoring of family planning activities in states with relatively poor performance; (3) additional laparoscopes for the sterilization programme; and (4) supply of finished IUDS and raw materials for production.

72. There has been substantial improvement in the family welfare programme in India over the past two years, though allocations to projects supported by the Fund under the second country programme have remained low. This results from the minimum level of allocations made to the Rajasthan and Bihar programmes during the preparatory phase. It now appears, however, that project activities will be initiated in Rajasthan in 1982-1983 on an extensive level. A mid-term appraisal of the country programme will be undertaken in January 1983.

Financial Status

(US\$000)

<u>India</u>	<u>Governing Council approval 1979-1985</u>	<u>Assistance through 1981</u>
Basic data collection	133	-
Population dynamics	250	-
Population policies	-	64
Policy implementation	11,882	-
Family planning	60,241	5,316
Communication and education	7,494	1,463
Special programmes	20,000	-
Multisector activities	-	313
	<u>\$100,000</u>	<u>\$7,156</u>

VI. Indonesia

Introduction

73. Indonesia, designated a borderline country within the UNFPA priority system, began receiving major UNFPA assistance in 1972, when the Fund formalized its participation in the joint Government of Indonesia/International Development Association/UNFPA population project, under which the Government received \$13.2 million in grants from UNFPA and an equal amount in IDA credits. The programme included construction and equipping of MCH/FP centres and provincial training centres on Java-Bali, strengthening of the research and evaluation capability of the National Family Planning Co-ordinating Board (BKKBN), support and technical assistance for an integrated MCH/FP development project in East Java, vehicles for use by field personnel, recruitment and training of non-medical field workers, and a pilot population education project within the Ministry of Education and Culture. For a variety of reasons, including construction delays, the joint project was extended until late 1981.

74. In 1978, near the originally-scheduled end of the joint project, UNFPA fielded a Needs Assessment Mission to Indonesia, at which time design of an interim package of assistance to prepare the way for a second phase of UNFPA assistance was initiated. Activities under the interim phase included a feasibility study for the expansion of Government-sponsored family planning services to the remaining eleven outer island provinces; design and implementation of a communication project; strengthening of the University of Indonesia's Demographic Institute; expansion of population education activities to include a number of government and non-government agencies not otherwise receiving Ministry of Education assistance; and supply of condoms.

75. Taking into account the findings of the Needs Assessment Mission, a comprehensive second phase of UNFPA assistance to the Government in the amount of \$30 million was designed and submitted to and approved by the Governing Council at its twenty-seventh session. 13/

The programme - status of implementation

76. During the period 1980-1981, UNFPA provided assistance to the Government of Indonesia: (1) through the joint Government/IDA/UNFPA project; (2) for the completion of interim assistance activities; and (3) for initiation of the second phase of UNFPA assistance.

A. Joint project with the World Bank

77. Joint IBRD/UNFPA programme. Savings realized from previous years have been utilized for the purchase of additional population education and family planning motivational materials, a computer for use by the statistical division of the BKKBN and for training of BKKBN staff in management and video techniques. During the period 1980-1981, UNFPA assistance was \$1,000,000.

13/ Governing Council decision 80/13 (see DP/FPA/11/Add.19).

B. Interim assistance

78. Population education. This project aimed to extend population education activities to programmes of the Indonesian Council of Churches, Muhammadiyah, the Ministry of Religious Affairs, the armed forces, the Ministry of Manpower and Transmigration, and BKKBN's division of Education and Training.

79. With the exception of the Indonesian Armed Forces and the Council of Churches, all units encountered obstacles delaying implementation. In some cases, particularly Muhammadiyah, full-time permanent staff were not available to oversee the day-to-day details of implementation. In other cases, the family planning units within the participating ministries were weak, understaffed and poorly motivated. Despite these obstacles, by December 1980 four population education projects had been successfully completed and the two remaining projects were scheduled for completion by 31 December 1981.

80. Communication support to the BKKBN. The primary objective of identifying areas for communications assistance in support of the national family planning programme was not fully realized due to BKKBN's lack of clarity in defining its communication mandate.

81. Assistance to the Demographic Institute. UNFPA supported a national convention of Indonesian demographers, held in 1978; publication of an Indonesian population handbook, completed in 1980; and an international consultant recruited in 1981. Project implementation proceeded on schedule.

C. Second country programme

82. Expansion of family planning services to Outer Islands II. Designed primarily to assist the Government expand its coverage of national family planning services to the remaining 11 outer island provinces joining the programme in 1978, UNFPA agreed to provide vehicles. By the end of 1981, all two-wheeled vehicles had been distributed to the respective 11 outer island provinces. There is some feeling that motorized boats may be more appropriate to local conditions than the four-wheeled vehicles planned. Limited funds were set aside for annual workshops to assess and evaluate family planning progress in these areas.

83. Hospital family planning programme. The objective of this project is to strengthen the role of hospitals, public and private, urban and rural, in provision of family planning services. To date, all medical equipment has been distributed, training of hospital staff has progressed, study tours have been completed, a maternity care monitoring system has been established in West Java, regional and national seminars have convened, and there is a growing commitment among hospital administrators and programme managers to mobilize the full resources of the hospital in support of family planning.

84. It has been necessary to ~~postpone~~ the purchase of audio-visual equipment as well as the development of a proposal for phase two of the project. It is expected that only a small amount of assistance will be provided by UNFPA in 1982, while some aspects of the project, primarily training, will be assumed by the Government.

85. Integration of family planning, nutrition, and primary health services. Under this project, the integrated family planning nutrition concept now in operation in East Java and Bali is being extended to two outer island provinces, West Sumatra and Lampung. The project provides for surveys, study tours by officials and programme managers from Sumatra to East Java and Bali, training in nutrition surveillance, and provision of basic medical equipment and drugs.

86. Substantial progress has been made in fully integrating this activity into the over-all national family planning programme, and most project activities are now handled routinely by BKKBN field staff. It is anticipated that much of the expendable equipment which was to have been purchased with UNFPA resources, will be bought by the Government.

87. Urban family planning programme. The Indonesian family planning effort has achieved its greatest success to date in the rural villages and hamlets, whereas the cities, particularly Jakarta, have lagged behind in terms of family planning.

88. This project addresses this issue through systematic examination and design of innovative projects in the areas of expansion of contraceptive services; creation of urban demand for family planning; and training of programme managers and private sector professionals. The major accomplishment to date has been the forging of a closer alliance of the public and private sector in family planning.

89. Due to UNFPA resource constraints, the second phase of this project will be put off until 1983 unless the Government succeeds in locating other support for what has become its major new programme thrust.

90. Assistance to the national family planning/population communication programme. This project intends to provide integrated communication support to the national family planning programme and to monitor and provide technical assistance to all other communications projects at the BKKBN. A programme of staff development was devised; provision was made for long-term fellowship training; a variety of research activities were developed to support IEC monitoring and evaluation; and materials were to be developed for dissemination through the BKKBN's Information and Documentation Network. During the project's first two years, the level of achievement has been disappointingly low, due in large part to the failure to adequately conceptualize an operational strategy for BKKBN's communication component. However, recent seminars and workshops have brought together all levels of BKKBN staff resulting in a widely-shared consensus on this communications mandate.

91. Assistance to the 1980 population census and related activities. The objective of this project is to assist the Central Bureau of Statistics (CBS) design, implement and analyze data from the 1980 national population census.
92. There were no major obstacles in the implementation of the project except for delays in equipment procurement.
93. Assistance to demographic institutes. The second country programme includes four projects specifically designed to assist demographic institutes in order to strengthen the contribution to the national family planning/population effort. Activities include training of programme managers, evaluative research in support of the national programme and applied research for policy formulation.
94. The project at the Demographic Institute of the University of Indonesia concentrates on establishing a formal programme of demographic training. The major component of the project with the Population Studies Center of the National Institute of Social and Economic Research is support for four research projects on migration and labor force redistribution policies. The third project seeks to strengthen the Population Studies Center at Gadjah-Mada University in Yogyakarta in central Java through improvement of research and skills of programme managers and of personnel from demographic institutes at regional universities. Under the fourth project, the Government is assisted in strengthening five population studies centres in outer island provinces; however, UNFPA has not been able to support activities beyond the initial stage of this project.
95. UNFPA assistance for these activities in 1980-1981 was \$1,095,172.
96. Population and development. Two related projects in this area intend to assist the Government in formulating national population policies which will reinforce the national family planning programme. To this end a Population Division was created within the BKKBN under the direction of the Deputy for Population. Project components include creation of an inter-ministerial and inter-agency Committee for Population and Development Research which would assume primary responsibility for identifying research priorities and for channelling research funds, and institutional strengthening of the BKKBN's Population Division through technical assistance, training, and equipping of a library.
97. To date implementation of these two projects has been less than satisfactory. The Committee for Population and Development Research was established but has not identified research priorities.
98. In-house training has been conducted and has contributed substantially to the ability of BKKBN staff to deal with these issues. Yet, both projects are making slow over-all progress due in part to the newness and vagueness of the idea of population and development policy formulation.
99. Total UNFPA assistance to the projects in 1981 amounted to \$182,940.

100. Women's participation in development programmes. This project is designed to improve the role and status of women in relation to development and especially population and family planning. Attention is addressed to three audiences: women, national policy-makers and programme managers. Three distinct project components are: a three-year pilot project in Java and Bali that encourages creation of economic co-operatives, increases women's knowledge and skills, and improves income-generating opportunities, especially for family planning acceptors; provision of training and education for urban poor women in Jakarta; and an orientation programme for university students.

101. The income-generating activities for rural women have demonstrated how effectively women can organize and manage their own economic activities if given access to capital. Incomes are beginning to rise, investment in non-consumption areas is increasing, and participants are beginning to experience a sense of economic independence they had never before known. The two other components of the project are progressing equally well. The Government has indicated its strong desire to take over most of these activities; the income-generating project has already been absorbed into a larger rural co-operative movement with the support of several Government ministries.

102. UNFPA provided assistance in the amount of \$216,410 during the period 1980-1981 to these activities.

103. Establishment of an Administrative and Co-ordination Unit at the BKKBN. UNFPA provided limited assistance for the formation of a special administrative office to facilitate the co-ordination of activities under the second country programme within the BKKBN.

104. UNFPA assistance for 1980-1981 amounted to \$21,640.

Summary

105. Currently, the reduced UNFPA expenditure ceiling set for 1982, coupled with the fact that nearly 50 per cent of 1982 commitments are to a single project for raw materials for pill production, creates a situation in which there are insufficient funds to meet previous commitments to other projects. Accordingly, a major revision of the second country programme may be necessary, eliminating certain project components with a view to minimizing the detriment to the over-all viability of the population programme while concentrating resources on a few areas where the greatest impact can be achieved. Discussions are already under way to obtain alternative sources of funding for the pill production project. In 1982 negotiations with the Government for a major restructuring of the second country programme will be initiated.

Financial Status
(US \$ 000)

<u>Indonesia</u>	<u>Governing Council approval 1979-1984</u>	<u>Assistance through 1981</u>
Basic data collection	\$ 2,214	1,391
Population dynamics	2,702	1,357
Population policy formulation	665	248
Family planning	17,636	3,452
Communication and education	5,000	1,305
Special programmes	250	216
Multisector activities	149	195
Projects to be developed	1,384	-
Total	\$30,000	\$8,164

VII. Mexico

Introduction

106. UNFPA initiated its assistance to Mexico in 1972 with support for the expansion of family planning services. Since that time, UNFPA has assisted several projects in the areas of research and training in population communication, development of social and population statistics, operational research on labour markets and interregional migration, the formulation and evaluation of population policy, sex education courses and educational materials, commodity assistance and activities to give the less favoured better maternal-child health/family planning services.

107. During the period 1972 - 1979, UNFPA contributed \$14.5 million to population activities in Mexico.

108. At its twentieth session in June 1975, the UNDP Governing Council approved \$8,854,000 for a five-year programme of assistance to the Government of Mexico to support medical services for maternal and child health and family planning. ^{14/} At the end of the first two years, progress of this programme was reviewed by the Government and UNFPA. At its twenty-third session, the Governing Council approved a UNFPA proposal for Phase II assistance to the programme for the remaining years. ^{15/}

^{14/} Governing Council decision 75/33 (see DP/FPA/3/Add. 4).

^{15/} Governing Council decision 77/5 (see DP/FPA/6/Add. 2).

109. At its twenty-second session in June 1976, the UNDP Governing Council approved a multi/bi four-year programme of assistance to the Government of Mexico to support the national programme of sex education, under which the UNFPA administered a contribution of \$2,032,000 from the Government of Sweden under a funds-in-trust arrangement with UNFPA for this programme. 16/

110. At its twenty-sixth session in June 1979, the UNDP Governing Council approved an extension of UNFPA's assistance to the Government's national programme of maternal and child health and family planning in the amount of \$6.3 million for a three-and-one-half year period starting July 1979. 17/

111. The population Needs Assessment Mission to Mexico, conducted in 1979, identified a number of areas requiring support and a comprehensive population programme was submitted to the UNDP Governing Council at its twenty-seventh session in June 1980. The Governing Council approved this programme in the amount of \$10,560,000 for a five-year period. 18/ The programme included projects in the areas of population dynamics, maternal and child health and family planning, education and communication and the integration of women into development.

The programme - status of implementation

112. Maternal and child health and family planning programme. UNFPA has assisted this programme since 1973. The project assists the Government in providing the marginal urban and rural population with improved health services, particularly maternal child care and family planning. The programme has already been very successful in communities of 500 to 2,000 inhabitants, and is now extending such services to communities of less than 500 inhabitants.

113. The emphasis of this phase of the programme is on strengthening the Government's infrastructure for training of community-level personnel. In the small villages, the delivery of primary health care depends on community workers supervised by health auxiliaries. For these workers, the mobile units provided by UNFPA were very useful in attending the dispersed rural population. The main achievement of this project is that it has generated a large-scale national programme. The Ministry of Health has absorbed costs of many items formerly financed by UNFPA such as contraceptive commodities and national personnel.

114. UNFPA assistance to project activities for the 1979 - 1981 period was \$2,642,000

115. Support to the national sex education programme. The first UNFPA multi-bilateral project with Swedish funds was approved by the Governing Council in 1976 for a period of four years. The programme was designed to institutionalize sex

16/ Governing Council decision 76/42 (see DP/FPA/5/Add. 9).

17/ Governing Council decision 79/28 (see DP/FPA/10/Add. 25).

18/ Governing Council decision 80/13 (see DP/FPA/11/Add. 24).

education in those public and private institutions that act as information and education agents on matters related to sexuality. Another objective is to contribute to implementation of the national population policy. The National Population Council (CONAPO), as executing agency, is providing training in sex education to a wide variety of institutions in the strategic sectors of education, health, rural development, adult education and mass media, aimed at institutionalizing the sex education programme as part of the permanent activities of each organization.

116. Very successful results have been obtained in the elaboration and publication of manuals on sex education for schools and universities, the health sector, rural areas and mass media. The institutionalization process is progressing in the sectors of education and health while problems still have to be resolved regarding the introduction of sex education in the rural sector. Well-prepared radio and television programmes on family and sexuality have been transmitted to a growing audience.

117. Due to difficulties involved in the institutionalization process, the project was extended to December 1981. UNFPA assistance for this project was \$1,471,008 for 1979 - 1981.

118. Population communication and rural development. This project initiated in October 1980 assists CONAPO in providing new couples and established families with information on maternal and child health, family hygiene, sex roles, contraceptives and family planning. A Rural Family Manual and a radio programme are being developed and personnel of rural institutions are being trained to carry out the communication programme at the community level.

119. The project encountered a series of difficulties at first which have now been resolved. The first draft of the Rural Family Manual is presently being tested in selected areas.

120. During 1980 - 1981 UNFPA assistance was \$478,000

121. Integration of population policies into development plans and programmes. This project, initiated in November 1980, assists CONAPO in establishing the methodological and institutional basis and co-ordinating mechanisms for the integration of population policy into national and state socio-economic development plans. One of the main activities was the design of a frame of reference for the joint analysis of development plans and population policy. At present, CONAPO is establishing co-ordination mechanisms among the state governmental institutions and relevant programme sectors and preparing specific state population programmes with guidelines on population size, growth, structure and spatial distribution. Simultaneously, training programmes on population and development are carried out for key staff members of the states' planning institutions.

122. Despite delays in implementation of some activities due to personnel changes, the project has shown positive progress. UNFPA assistance to project activities was \$408,000 for 1980 - 1981.

Summary

123. UNFPA assistance is considered by the Government to be a very important contribution to the implementation of Mexico's population policy. The MCH/FP project has generated a large national family planning programme in the rural areas; complete self-reliance in this area is expected in the near future. The National Programme on Sex Education is progressively taking on new dimensions, drawing the attention of many countries in the Latin American region. The MCH/FP and Sex Education programmes are being strengthened by the Project on Communication and Rural Development. UNFPA assistance is a key factor in the integration of population policy into the development plans and programmes at national and state levels.

124. It is apparent, however, that some activities have been hampered due to changes in project staff, political changes at the national and state levels and, above all, UNFPA budget rephasings which required major revision of work plans. During the reporting period the budget of approved and allocated funds has been reduced through rephasals by approximately 60 per cent. UNFPA commitments for the programme amount to \$2,300,000 in 1982. However, due to financial limitations, the level of assistance to Mexico in 1982 will be reduced further, affecting considerably the implementation of the above-mentioned projects.

Financial Status (US \$ 000)

<u>Mexico</u>	<u>Governing Council approval 1979-1982</u>	<u>Assistance through 1981</u>
Family planning	\$ 6,295	2,642
	<u>approval 1980-1984</u>	
Population dynamics and policy formulation	3,770	408
Family planning	3,260	-
Communication and education	2,380	478
Special programmes	1,150	70
Multisector activities	-	45
Total	<u>\$10,560</u>	<u>\$1,001</u>