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OTHER FUNDS AND PROGRAMMES

UNITED NATIONS FUND FOR POPULATION ACTIVITIES

REPORT OF THE EXECUTIVE DIRECTOR FOR 1982

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The Year in Review

The UNFPA was encouraged by the "Declaration of the Seven Heads of State and Government and Representatives of the European Communities" at the end of their Versailles meeting in June 1982 that indicated "We will give special encouragement...to programmes to address the implications of population growth". This was reinforced dramatically by increases in contributions to the Fund by several governments.

The global resource situation, however, remains and will probably remain, in the next few years, constrained. It is a predicament that affects all voluntary funds within the United Nations system because the need for international population assistance has not diminished. As time passes, the complexity of population issues increases and the need to respond to them adequately comes into a sharper focus.

As I pointed out to the Second Committee of the General Assembly in October, these include:


- Family planning programmes, including natural family planning, need further extension, better methods of delivery, and comprehensive application in almost all developing countries.
- Rapid urbanization and uncontrolled urban growth will call for fresh policies.
- The large increase in the numbers of aged in both developed and developing countries has to be considered within appropriate social policies.
- Internal and international migration and the impact of such movements demand adequate research and responsive policies.
- Programmes aimed at strengthening the role and participation of women in population and development activities, especially those relating to education and employment opportunities, must be vigorously pursued.
- Community involvement in family planning programmes must be further extended.
- Bio-medical research into new methods of contraception is much in need of funds to pursue promising leads.

It is particularly appropriate that the planning for the International Conference on Population to be held in Mexico City in 1984 has proceeded smoothly in 1982, since many of these emerging issues will be discussed in this forum.

As Secretary-General of the forthcoming Conference, I reported to the Economic and Social Council in October that fundraising for the Conference has been on schedule. The Conference budget calls for a total outlay of \$2.3 million of which \$1.5 million is to be raised from extra-budgetary sources and the balance of \$800,000 is to be provided from the United Nations regular budget. By the end of 1982, fifteen countries had agreed to contribute \$509,000 towards the costs of the Conference; the list includes thirteen developing countries.

Another major event in which UNFPA was involved in 1982 was the solicitation in November for nominees for the first annual United Nations Population Award to be presented in 1983 to an individual or individuals or to an institution for "the most outstanding contribution to the awareness of population questions or to their solutions". As Secretary of the Committee for the United Nations Population Award, which includes on its membership the following Member States - Australia, Bangladesh, Burundi, China, Colombia, Egypt, Japan, Mexico, Tunisia and Yugoslavia, I reported that 71 nominees were put forward at the end of the year.

It is well to remember as 1982 ends, that great strides in population activities have taken place during the past 15 years. But to keep the momentum of this pace, we must not just renew but redouble our efforts in the years ahead.


Rafael M. Salas
Executive Director

I. THE UNFPA PROGRAMME IN 1982

A. A general overview

1. Like other voluntary organizations within the United Nations system, the UNFPA has been affected by the general international economic conditions that began in 1980 and have continued. While contributions to the Fund in national currencies have increased on a yearly basis at about a 10 per cent level, the global inflation rate, the losses due to currency devaluations and the strength of the U.S. dollar in relation to other currencies have meant, in real terms, practically no increase in resources.
2. Because of the institution in 1982 of tighter managerial and financial controls over the available resources, the UNFPA was able to reverse the programme trends of last year which resulted from extensive reprogramming and rephasing in 1981 due to the shortfall in resources.
3. Family planning as a percentage of total allocations increased by almost 9 percentage points over 1981's allocation figure of 31.8 per cent. The area of communication and education remained at about the same level as in 1981. The percentage of total allocations for basic data collection declined by more than 7 percentage points from 1981's allocation figure of 23.4 per cent. These increases and decreases are in line with the directive of the Governing Council as outlined in decision 81/7, I, paragraph 3, at its twenty-eighth session in June 1981, indicating the priority areas in which the UNFPA should concentrate its assistance.
4. At the same time, in 1982, for the first time, the UNFPA reached - and exceeded - the goal approved by the Governing Council that two-thirds of country programme resources be made available to priority countries. The percentage of allocations for 1982 for the priority countries totalled 69.0 per cent.
5. In terms of geographic areas, there was an increase in the percentage of allocations to Africa, Asia and the Pacific and the Middle East and Mediterranean and a decrease to the Latin America and Caribbean region as well as to interregional and global programmes.
6. In terms of intercountry activities, there was a decline of almost 3 percentage points from 1981 - from 32.4 per cent of allocations in 1981 to 29.6 per cent of allocations in 1982, and a decline of more than \$7 million in total allocations to this area of activity.
7. Naturally, the resource situation has continued to affect the total programme. However, any adverse impact on country programmes has been kept to a minimum. The major problem has been the imbalance between requests for assistance and available resources. Wherever possible, the UNFPA has been phasing out long-term population programme assistance and providing assistance to countries - particularly priority countries - that heretofore have received only minimal population assistance.

B. An overview by geographic region

AFRICA (SUB-SAHARAN)

8. Activities in the field of data collection, representing 32.8 per cent of UNFPA allocations, continued to decline compared to previous years (38 per cent of expenditures in 1981) as most census operations were in their final stages. Zimbabwe completed its census enumeration while 21 countries were still engaged in activities related to processing and analysis of data from previously conducted UNFPA-supported censuses. Six countries - Angola, Equatorial Guinea, Gambia, Ghana, Ethiopia and Zaire - were involved in preparatory activities regarding their forthcoming national population censuses. Other ongoing assistance to data collection included: demographic survey activities in 4 countries - Benin, Mauritania, Nigeria, Rwanda; and civil registration activities in 6 countries - Burundi, Congo, Kenya, Sierra Leone, Swaziland and the United Republic of Tanzania.

THE UNFPA IN 1982
PROGRAMME AND FINANCIAL HIGHLIGHTS

Pledges and contributions

- Income in 1982 totalled \$130.5 million, compared to 1981 income of \$125.5 million, an increase of almost 4 per cent over 1981.
- Pledges totalled \$128.7 million, an increase of \$8.1 million over 1981 and a percentage increase of 7 per cent over 1981. At year's end, cumulative pledges through 1982 totalled \$976.1 million from a cumulative total of 132 donors.
- The number of donors in 1982 totalled 89, compared to 94 in 1981. There were 2 first-time donors (Sierra Leone and Upper Volta) in 1982, compared to 9 in 1981.
- The Fund continued its efforts to seek additional resources for population projects and programmes through multi/bilateral arrangements. See paragraphs 109-112 of DP/1983/19/Add.1.

Programme: allocations and expenditures

- Total programme authority given by the Governing Council for 1982 was \$144 million, compared to \$147 million for 1981.
- Project allocations in 1982 totalled \$120.4 million, including \$8.8 million in unexpended allocations carried over from 1981. Project allocations in 1981 amounted to \$131.2 million, including \$13.9 million in unexpended allocations carried over from 1980.
- Expenditures (provisional) in 1982 totalled \$123.7 million, compared to \$136.4 million in 1981. The 1982 figure included \$69.2 million for country programmes, compared to \$74.9 million in 1981; \$32.5 million for intercountry programmes, compared to \$42.7 million for 1981; \$4.6 million for the budgets of the UNFPA Deputy Representatives and Senior Advisors on Population, compared to \$4.8 million in 1981; \$6.7 million for overhead payments, compared to \$4.5 million in 1981; and \$10.7 million for the administrative budget, compared to \$9.5 million for 1981.
- The project implementation rate (provisional) was 88.3 per cent, compared to 93.3 per cent in 1981.
- 290 new projects were approved in 1982, amounting to \$15.6 million, compared to 209 new projects in 1981 amounting to \$11.3 million.
- At year's end, UNFPA was assisting 1,659 projects: 1,257 country and 170 regional (30, Africa; 70, Asia and the Pacific; 41, Latin America and the Caribbean; and 29, Middle East, Mediterranean and Europe); 84, interregional; and 148, global. In 1982, 390 projects were completed, bringing the cumulative total of all projects completed through 1982 to 1,766.
- Allocations in 1982 - by major function, by geographical area, and by country category - see tables, p. 6.

Country activities

- 200 new country projects were approved in 1982, amounting to \$13.1 million or 15.4 per cent of total allocations to country projects, compared to 150 new country projects in 1981 amounting to \$8.3 million or 10.3 per cent of total expenditures for country projects in 1981.
- Allocations to continuing country projects amounted to \$71.6 million or 84.6 per cent of total allocations to country projects compared to expenditures for continuing country projects amounting to \$71.4 million in 1981 or 89.7 per cent of total expenditures for country projects.
- For allocations to country activities, by Work Plan category, and by priority and non-priority country and regional activities, see individual tables for each geographical area.

Priority countries

- By decision 82/20, adopted at its twenty-ninth session in June 1982, the Governing Council, *inter alia*, approved a revision of the criteria for designation of priority countries for UNFPA assistance. Under the new criteria, 53 countries have been given priority status, compared with 40 priority and 13 "borderline" countries under the criteria which went into effect in 1977 with the initiation of the priority system. By geographic area, these priority countries number: Africa, 30; Asia and the Pacific, 16; Latin America and the Caribbean, 2; and Middle East and Mediterranean, 5.
- Total allocations in 1982 to the 53 priority countries amounted to \$58.5 million, compared to \$51.7 million in expenditures for these 53 countries in 1981.
- Of the total amount of resources allocated to country programmes and projects in 1982, 69.0 per cent was allocated to these 53 priority countries, compared to 65.0 per cent of expenditures for these 53 countries in 1981.
- For allocations to priority countries in 1982 by region, see individual tables for each geographical area.

Evaluation and monitoring

- Six major evaluations were conducted. See paragraphs 95-99. 279 tripartite project reviews and 18 annual country reviews took place. See paragraph 100.

Intercountry activities

- Allocations for intercountry activities (regional, interregional and global) totalled \$35.7 million in 1982, compared to \$42.8 million in expenditures in 1981. By category of activity, these allocations were: regional, \$16.1 million in 1982, compared to \$18.5 million in expenditures in 1981; interregional, \$8.3 million in 1982, compared to \$12.1 million in expenditures in 1981; global, \$11.3 million in 1982, compared to \$12.2 million in expenditures in 1981.
- By functional category, allocations for intercountry activities in 1982 were: (1) technical assistance and backstopping, \$14.6 million or 41 per cent, compared to \$18.0 million or 42 per cent in 1981; (2) training, \$6.8 million or 19 per cent, compared to \$6.0 million or 14 per cent in 1981; (3) research, \$9.6 million or 27 per cent, compared to \$12 million or 28 per cent in 1981; and (4) information exchange activities through clearinghouses, population information networks, etc., \$4.6 million or 13 per cent, compared to \$7.0 million or 17 per cent in 1981.
- Intercountry programmes represented 29.6 per cent of 1982 total allocations, compared to 34.9 per cent of expenditures in 1981. Regional projects represented 45.2 per cent of intercountry activities, compared to 43.3 per cent in 1981; interregional, 23.2 per cent, compared to 28.2 per cent in 1981; and global, 31.6 per cent, compared to 28.5 per cent in 1981.
- If the UNFPA contribution of \$2.0 million to the WHO Special Programme of Research, Development and Research Training were not included in the calculation of the percentage of total allocations to intercountry programmes, the percentage would be 27.9 per cent, as compared to 33.7 per cent of expenditures in 1981.

Execution of projects

- The number of projects directly executed by governments numbered 444, compared to 458 in 1981 and totalled \$27.1 million or 22.5 per cent of total programme allocations, compared to \$24.7 million or 20.2 per cent in 1981.
- For allocations in 1982 by executing agency, see table, page 6.

Population needs assessment

- In 1982, UNFPA undertook needs assessment missions to 3 countries (one in Africa - Central African Republic, a priority country; one in Asia and the Pacific - Lao People's Democratic Republic, a priority country; and one in Latin America and the Caribbean - Peru, a non-priority country), compared to 8 in 1981 (four in Africa and four in Asia and the Pacific), bringing the total conducted since 1977 through 1982 to 70 (43 needs assessment missions to 42 of the 53 priority countries, including one repeat - Viet Nam and 27 to other countries, including one repeat - Thailand).
- By geographic area, a summary of all needs assessment missions shows: Africa, 23 to priority countries, 4 to non-priority countries; Asia and the Pacific, 14 priority, including one repeat; 9 non-priority, including one repeat; Latin America and the Caribbean, 1 priority; 8 non-priority; Middle East and Mediterranean, 5 priority, 6 non-priority.

Administration and personnel

- In 1982, administrative expenditures, including both headquarters and field staff, were \$15.3 million or 11.7 per cent of the 1982 total income of \$130.5 million, compared to \$14.3 million or 11.4 per cent of the total 1981 income of \$125.5 million.
- At year's end, total headquarters staff numbered 166 - 83 professionals and 83 general service staff, the latter of which consists of 25 staff members at the administrative and programme assistant level and 58 staff members at the secretary/clerical level. UNFPA field staff numbered 33, which included three vacancies at the end of the year, compared to 39 in 1981.
- The percentage of women on UNFPA's professional staff at headquarters and in the field was 36 per cent, compared to 39.5 per cent in 1981, and continued to remain one of the highest percentages among the United Nations agencies and organizations.
- UNFPA continued to maintain a close operational relationship with UNDP, which also provides administrative support, on a reimbursable basis, for financial and computer services, personnel, travel, and the processing of Governing Council documents. Following agreement between UNDP and UNFPA on the subvention arrangement, approved by the Governing Council at its twenty-ninth session, UNFPA reimbursement to UNDP for these services was set at \$1.3 million in 1982, compared to \$741,569 in 1981.
- Heino E. Wittrin, a national of the Federal Republic of Germany, assumed his new duties as Deputy Executive Director with the rank of Assistant Secretary-General at the beginning of 1982.
- On 8 February 1982, the Secretary-General approved the promotion of Dr. Nafis Sadik, Assistant Executive Director of the UNFPA, who has served with the Fund since 16 October 1971, to the rank of Assistant Secretary-General with effect from 1 January 1982.

UNFPA PROGRAMME IN 1981 AND 1982: AT A GLANCE
(Data for 1981 are expenditures; data for 1982 are allocations^{1/})

UNFPA assistance by major function^{2/}

	<u>In million US\$</u>		<u>Per cent of total programme</u>	
	<u>1981</u>	<u>1982</u>	<u>1981</u>	<u>1982</u>
Family planning	38 832	48 787	31.7	40.5
Communication and education	15 242	13 975	12.4	11.6
Basic data collection	29 612	19 494	24.2	16.2
Population dynamics	13 147	14 215	10.7	11.8
Formulation and evaluation of population policies	7 318	7 969	6.0	6.6
Implementation of policies	1 345	1 058	1.1	1.0
Multisector activities	14 764	13 459	12.0	11.1
Special programmes	2 283	1 491	1.9	1.2
	<u>122 543</u>	<u>120 448</u>	<u>100.0</u>	<u>100.0</u>

UNFPA assistance by geographical region^{2/}

	<u>In million US\$</u>		<u>Per cent of total programme</u>	
	<u>1981</u>	<u>1982</u>	<u>1981</u>	<u>1982</u>
Africa	19 217	20 081	15.7	16.7
Asia and the Pacific	48 040	51 555	39.2	42.8
Latin America and the Caribbean	17 570	15 537	14.3	12.9
Middle East, Mediterranean, and Europe	13 431	13 707	11.0	11.4
Interregional	12 080	8 269	9.8	6.8
Global	12 205	11 299	10.0	9.4
	<u>122 543</u>	<u>120 448</u>	<u>100.0</u>	<u>100.0</u>

UNFPA assistance by country category, all regions

	<u>In million US\$</u>		<u>Per cent of total country programme</u>	
	<u>1981</u>	<u>1982</u>	<u>1981</u>	<u>1982</u>
Priority country ^{4/}	51 787	58 500	65.0	69.0
Other country	27 921	26 247	35.0	31.0
	<u>79 708^{3/}</u>	<u>84 747^{3/}</u>	<u>100.0</u>	<u>100.0</u>

UNFPA assistance by executing agency

	<u>In million US\$</u>		<u>Per cent of total programme</u>	
	<u>1981</u>	<u>1982</u>	<u>1981</u>	<u>1982</u>
Governments (directly executed)	24 722	27 116	20.2	22.5
United Nations	30 243	24 749	24.7	20.6
Regional Commissions	6 160	6 142	5.0	5.1
ILO	6 326	6 175	5.2	5.1
FAO	2 391	1 702	1.9	1.4
UNESCO	6 322	4 730	5.2	3.9
WHO	18 660	19 467	15.2	16.2
UNIDO	5	--	--	--
UNICEF	2 680	3 541	2.2	2.9
UNFPA	12 059	17 257	9.8	14.3
Non-governmental organizations	12 975	9 569	10.6	8.0
	<u>122 543</u>	<u>120 448</u>	<u>100.0</u>	<u>100.0</u>

1/ Expenditure data for 1982 are not available until after the due date for submission of this document to the Governing Council.

2/ Totals include expenditures (1981) and allocations (1982) for Deputy Representatives and Senior Advisors on Population, overhead for government-executed projects and infrastructure. Thus, the actual proportions allocated by Work Plan category are somewhat higher than the figures given. For breakdown within each individual region, see tables in "Overview" section.

3/ Totals include expenditures of \$4.8 million for 1981 and allocations of \$4.6 million in 1982 for budgets of Deputy Representatives and Senior Advisors on Population.

4/ With the approval by the UNDP Governing Council at its twenty-ninth session of changes in the criteria for the determination of countries to be placed on the priority list, the UNFPA priority country list was expanded from 40 to 53 in June 1982. Figures given are for all 53 priority countries for both 1981 and 1982.

(Continued from page 3)

UNFPA expenditures (1981) and allocations (1982) in the
Africa (Sub-Saharan) region, and percentage comparison

<u>By major sector</u>	<u>1981</u> <u>(in \$US 000)</u>	<u>1982</u>	<u>Per cent of total</u> <u>programme, 1981</u>	<u>Per cent of total</u> <u>programme, 1982</u>
Family planning	3 655	5 215	19.0	26.0
Communication and education	1 904	1 474	10.0	7.3
Basic data collection	7 300	6 579	38.0	32.8
Population dynamics	3 177	3 336	16.6	16.6
Formulation and evaluation of population policies	590	823	3.0	4.1
Implementation of policies	2	-	-	-
Multisector activities	2 197	2 405	11.4	12.0
Special programmes	392	249	2.0	1.2
Total	19 217	20 081	100.0	100.0
<u>By country category</u>				
Priority country (30)	11 361	12 431	59.1	61.9
Other country	3 639	3 192	18.9	15.9
Total country	15 000	15 623	78.0	77.8
<u>Regional</u>	4 217	4 458	22.0	22.2
TOTAL REGION	19 217	20 081	100.0	100.0

Priority countries: Angola, Benin, Burundi, Central African Republic, Chad, Comoros, Equatorial Guinea, Ethiopia, Gambia, Ghana, Guinea, Kenya, Lesotho, Liberia, Madagascar, Malawi, Mali, Mauritania, Mozambique, Niger, Rwanda, Sao Tome and Principe, Senegal, Sierra Leone, Uganda, United Republic of Tanzania, Upper Volta, Zaire, Zambia, Zimbabwe.

9. In contrast to data collection, activities in the field of maternal and child health increased compared to previous years, absorbing 26 per cent of UNFPA assistance to the region compared to 19 per cent of expenditures in 1981. This dramatic change is an indication of the growing concern on the part of many governments to reduce the high infant mortality and maternal morbidity and to improve the health of mothers and children through child spacing activities. During the year, Angola, Burundi, Ethiopia, Guinea, Rwanda, Senegal, the United Republic of Cameroon and Upper Volta were given assistance to initiate family health activities. During the year, UNFPA also supported an independent evaluation mission to some of the UNFPA-supported, WHO/AFRO executed projects (see paragraph 98 below) with the view to improve project implementation in the growing area of maternal and child health care activities in the African region.

10. Activities for the integration of population education into the formal school and into out-of-school programmes continued to be supported with 7.3 per cent of the allocations to the region. Assistance was provided to population education/communication projects in Cape Verde, Gambia, Guinea, Ivory Coast, Lesotho, Mali, Nigeria, Sierra Leone, Swaziland, the United Republic of Tanzania, Upper Volta and Zambia. Elsewhere, UNFPA continued supporting ongoing activities in the Congo, Kenya, Mali, Sierra Leone, Swaziland, the United Republic of Cameroon, Upper Volta, Zaire and Zambia.

11. UNFPA provided assistance to Mali, Senegal, Sierra Leone, and the United Republic of Cameroon for the development of population units within their respective national ministries of planning. UNFPA also provided support to Zimbabwe to develop a proposal in this area.

12. In order to enable the United Nations Economic Commission for Africa (ECA) and the specialized agencies' bureaux in the region to provide technical backstopping to national activities, UNFPA continued to provide assistance for various intercountry activities. Support was given for fellowship programmes and teaching staff to the United Nations regional demographic training and research institutions: the Regional Institute for Population Studies (RIPS) in Ghana, and the Institut de Formation et de Recherche Démographiques (IFORD) in the United Republic of Cameroon. Support was also given for personnel infrastructure and regional technical advisory services to the Population/Statistical Division and Women's Centre of the ECA, while regional advisory services were supported for the regional bureaux of ILO, UNESCO and WHO in order to enable these organizations to help countries plan and implement population and development projects within their respective mandates. At the sub-regional level, UNFPA continued to finance technical assistance to the Institut du Sahel in Mali, for the integration of population considerations into the recovery development plans of the Sahelian countries affected by the drought. Furthermore, as in previous years, assistance was provided to the Regional Centre for Population Studies of the Union Douanière et Economique de l'Afrique (UDEAC) to assist in the co-ordination and harmonization of population programme activities among Member States of the Union, namely the Central African Republic, the Congo, Gabon and the United Republic of Cameroon.

13. During 1982, UNFPA project formulation missions were sent to 5 countries to assist in the development of project activities in various population sectors. Also, a UNFPA population needs assessment mission was undertaken in the Central African Republic.

14. A continuing concern of the governments in the region is the high mortality rates, especially among infants. Another special concern of many countries is internal and international migration which has led several countries to launch migration studies and activities related to population distribution.

ASIA AND THE PACIFIC

15. As in past years, but to an even greater extent, the bulk of UNFPA assistance to the Asia and Pacific region in 1982 went to family planning/MCH activities, absorbing well over half of total UNFPA allocations. This consistent concentration of UNFPA assistance to such activities is due to the recognition accorded to demographic factors in development efforts by the governments of the region. The bulk of MCH/FP assistance has gone to countries which have adopted explicit policies to curb rapid population growth. UNFPA also continued to assist the MCH/FP programme of one country - Mongolia - that has indicated that it favours increased population growth, to be achieved by increased fertility levels and the reduction of infant mortality, while providing access to modern contraceptives for the purpose of family welfare.

16. The second largest part of the UNFPA support in this region was provided for population information, education and communication activities. Fifteen countries continued to receive such assistance, including Bangladesh, China, India, Nepal and Sri Lanka, for population education activities in the school systems. Efforts to introduce population education into out-of-school programmes and into organized sectors were also supported by UNFPA in a number of countries, including Bangladesh, Fiji, India, Nepal, Pakistan, Samoa and Thailand. Most countries of the region also continued to receive assistance for population information activities utilizing mass media.

17. Support for population data collection and analysis as well as for formulation, implementation and evaluation of population policies and programmes received a proportionately smaller share of assistance from UNFPA in 1982. This decline is concomitant with the increasing self-reliance of countries in the region in these areas. UNFPA support was extended to support, among other activities, the census data analysis in a number of island countries in the South Pacific and the integration of population considerations into the development planning process in such countries as Bangladesh and Nepal.

18. Two major population events of 1982 took place in the region. First, China undertook its first modern population census on 1 July 1982. Prior to the census, the Government undertook several pilot tests covering a total population of 3.6 million. For the census itself,

the Government mobilized some four million enumerators and one million supervisors. UNFPA assistance included support for the pilot census, training of personnel, and provision of computers. Initial tabulations, according to a Government announcement of 27 October 1982, revealed a total population of over one billion - nearly one-quarter of the total global population. Census data tabulation has proceeded with no major problems.

UNFPA expenditures (1981) and allocations (1982) in the
Asia and the Pacific region, and percentage comparison

<u>By major sector</u>	<u>1981</u> <u>(in \$US 000)</u>	<u>1982</u>	<u>Per cent of total</u> <u>programme, 1981</u>	<u>Per cent of total</u> <u>programme, 1982</u>
Family planning	19 459	28 937	40.5	56.1
Communication and education	6 302	6 146	13.1	11.9
Basic data collection	12 475	5 995	26.0	11.6
Population dynamics	2 428	3 193	5.0	6.2
Formulation and evaluation of population policies	2 252	2 104	4.7	4.1
Implementation of policies	591	454	1.2	0.9
Multisector activities	3 924	4 378	8.2	8.5
Special programmes	609	348	1.3	0.7
Total	48 040	51 555	100.0	100.0
<u>By country category</u>				
Priority country (16)	35 321	39 574	73.5	76.8
Other country	6 995	6 351	14.6	12.3
Total country	42 316	45 925	88.1	89.1
<u>Regional</u>	<u>5 724</u>	<u>5 630</u>	<u>11.9</u>	<u>10.9</u>
TOTAL REGION	48 040	51 555	100.0	100.0

Priority countries: Afghanistan, Bangladesh, Bhutan, Burma, China, Democratic Kampuchea, India, Indonesia, Lao People's Democratic Republic, Maldives, Nepal, Pakistan, Samoa, Solomon Islands, Sri Lanka, Viet Nam.

19. A second major population event in the region was the Third Asian and Pacific Population Conference, which was sponsored by the Economic and Social Commission for Asia and the Pacific (ESCAP) with financial assistance from UNFPA, and held in Colombo, Sri Lanka, 20-29 September 1982. With the theme of "an integrated approach to population and related development issues", this regional intergovernmental meeting - the first such held since 1972 - reviewed the progress made by countries of the region in achieving the goals and implementing the recommendations of the World Population Plan of Action. The Conference adopted a regional "Call for Action" which, inter alia, proposed the achievement of replacement level of fertility in the region by the year 2000. The "Call for Action" is expected to be an input for the forthcoming International Conference on Population to be held in 1984.

20. One of the major concerns of many of the countries of the region is the increasing demand for contraceptives as their family planning programmes are expanded and made more extensive. The Fund continued to support studies designed to enable governments to assess more accurately their contraceptive needs. The information gathered should help countries in their efforts to become self-reliant in terms of contraceptive supplies. In 1982, UNFPA assisted the Government of Thailand in conducting such a study, the results of which contributed to the decision of the Government to increase its budget allocation for the purchase of the required contraceptives. A contraceptive demand survey supported by UNFPA was also utilized by the Government of Sri Lanka to estimate the contraceptive needs of the country.

21. Reflecting concern within the region for improved management capabilities of countries, the Fund supported a sub-regional study undertaken by the International Committee on the Management of Population Programmes through a private management consultant firm in 1982. The study identified a set of management problems affecting the performance of population/family planning programmes in Bangladesh, India, Pakistan and Sri Lanka. Preparations were begun for organizing in close consultation with the concerned governments, management interventions to help improve programme performance.

22. UNFPA continued to support regional activities to provide technical backstopping for countries in the region. Such technical assistance was extended through regional advisory teams of the United Nations system, including ESCAP, in the fields of family planning and maternal and child health; population education; labour and population; rural development and population; and basic data collection and analysis.

23. UNFPA also supported the regional training and research activities of the ESCAP Population Division to develop and apply appropriate research methodologies to monitor population trends, including migration; to study the determinants of fertility; and to strengthen population programmes in the region. UNFPA assistance also enabled ESCAP to disseminate population information within the region and to help establish or strengthen national population information clearinghouses. The International Institute for Population Studies (IIPS) in Bombay continued to receive UNFPA assistance through ESCAP to train students from ESCAP countries in demography.

24. Recognizing particular needs of sub-regions of the Asia and Pacific region, UNFPA continued to support the last phases of the ongoing project of the Association of South East Asian Nations (ASEAN). The Fund also supported a comprehensive programming exercise in ASEAN countries to develop population strategies for future funding. In view of the shortage of trained personnel and substantial external migration in the countries of the Asia and Pacific region, UNFPA provided on a sub-regional basis, through the South Pacific Commission, support for training and research activities in demographic data analysis for population policy formulation and in the field of migration and employment.

25. The integrated primary health/family planning projects supported by UNFPA and executed by the Japanese Organization for International Cooperation in Family Planning in eight countries in Asia made significant progress in 1982. Some of them are expected to be self-sustaining in the near future. JOICFP will, however, continue to provide technical assistance, in particular to expand and/or replicate the projects, as appropriate.

26. While a major concern of many governments of the region remains high population growth rates in their countries, many are also increasingly aware of problems related to internal migration, urbanization and international migration. Many are also concerned with changes in their population structure - the increasing proportion of both youth and the aging as a percentage of the total population. These emerging population issues in the region will require more sophisticated population programmes with trained manpower.

LATIN AMERICA AND THE CARIBBEAN

27. In 1982, as in previous years, governments in the Latin America and Caribbean region placed priority emphasis on activities in the area of maternal/child health and family planning. During the year, UNFPA was assisting such projects in 24 countries and territories of the region. The majority of these projects are of a comprehensive nature whereby family planning services are offered as an integral part of maternal/child health activities. In general, the main aims of UNFPA assistance in this area have been to increase the coverage of services and to improve their quality through training of medical and paramedical personnel and field workers.

28. Two other goals in the implementation of maternal/child health and family planning projects are the improvement of both programme management and service statistics. Advances in these two areas have been made through support of training and technical advisory services.

UNFPA expenditures (1981) and allocations (1982) in the Latin America and Caribbean region, and percentage comparison

<u>By major sector</u>	<u>1981</u> <u>(in \$US 000)</u>	<u>1982</u>	<u>Per cent of total</u> <u>programme, 1981</u>	<u>Per cent of total</u> <u>programme, 1982</u>
Family planning	6 549	6 582	37.3	42.4
Communication and education	1 581	1 275	9.0	8.2
Basic data collection	3 498	1 877	19.9	12.1
Population dynamics	2 367	1 852	13.4	11.9
Formulation and evaluation of population policies	2 166	2 516	12.3	16.2
Implementation of policies	-	-	-	-
Multisector activities	1 294	1 282	7.4	8.2
Special programmes	115	153	0.7	1.0
Total	17 570	15 537	100.0	100.0
<u>By country category</u>				
Priority country (2)	939	1 004	5.3	6.5
Other country	10 850	10 831	61.8	69.7
Total country	11 789	11 835	67.1	76.2
<u>Regional</u>	<u>5 781</u>	<u>3 702</u>	<u>32.9</u>	<u>23.8</u>
TOTAL REGION	17 570	15 537	100.0	100.0

Priority countries: Dominica, Haiti.

29. In 1982, increasing interest in the field of natural family planning methods was made evident through the submission to UNFPA of a series of requests for assistance. During the year, UNFPA began funding projects in Chile and in Ecuador, involving information, education and training in natural family planning methods.

30. UNFPA support to data collection activities continued in 1982 in 22 countries and territories of the region. Haiti and Paraguay undertook their respective census enumerations in 1982. The processing of data for the 1980 Eastern Caribbean Census, which includes data from 12 countries and territories of that sub-region, was begun in Barbados. Assistance to Nicaragua in 1982 was directed towards preparations for the census enumeration now scheduled for 1984, including updating of the country's cartography.

31. In 1982, UNFPA was supporting a total of 13 projects in 11 countries aimed at enhancing the integration of population policies into development plans and programmes. Two countries established new institutional arrangements to co-ordinate this integration. The Government of Ecuador created a population division in the National Development Council (CONADE), and the Government of Peru established the National Population Council. After preparation of a national demographic diagnosis and investigation into the interrelationship between demographic and socio-economic variables, Bolivia, Brazil, Mexico, and Panama have demonstrated interest in programmes designed to facilitate methodological, institutional, and administrative integration. Interest in the exchange of experiences in this area has led to the undertaking of three seminars in 1982, held in Ecuador, Mexico and Panama.

32. In the field of population education and communication, UNFPA was assisting 18 projects in 12 countries of the region. Projects leading to the incorporation of population components into the school curricula were being supported in the Dominican Republic, El Salvador, Honduras, Nicaragua and Paraguay. Population education projects directed to adolescents and geared towards education in the area of responsible parenthood have continued to be supported in the English-speaking Caribbean in Antigua and Barbuda, Jamaica, and Saint Kitts-Nevis. Other population education and communication projects in Ecuador, Guatemala, Honduras, and Mexico

were directed at out-of-school groups, and some of these included activities geared towards improving the status of women.

33. A majority of countries in the region have received some form of support in the undertaking of national intensive courses in demography, in the development of demographic training and research capabilities at the university level, or in the creation of demographic analysis units within statistical and planning bodies. In 1982, support for demographic training and research was extended to projects in Cuba, Haiti, Honduras, Mexico, Panama, Paraguay, and Uruguay.

34. Country activities continued to receive technical support from a pool of UNFPA-financed regional advisers located in the regional offices of the various specialized agencies and at the Economic Commission for Latin America (ECLA).

35. The Pan American Health Organization (WHO/PAHO) provided technical assistance to the English-speaking countries of the Caribbean for activities related to family life education, including family planning, and to the training of paramedical personnel. With financial support from UNFPA, in 1982 PAHO also started offering technical assistance in the management and administration of national MCH/FP programmes. Two UNESCO teams - one in population education and another in population communication - assisted countries in the preparation of teaching materials, in the design of communication strategies and, more generally, in the introduction of population components in school curricula. The Latin American Demographic Centre (CELADE), which continued to receive substantial UNFPA assistance in 1982, provided support to countries through technical assistance, training and operational research in such areas as: the preparation of population estimates and projections; the processing of demographic data; the organization of population censuses and surveys; and the formulation, implementation and evaluation of population policies and programmes. A team at the ILO Regional Programme of Employment for Latin America and the Caribbean (PREALC) (Programa Regional del Empleo para América Latina y el Caribe) offered technical assistance for the integration of population variables with employment policies and planning. A small project with the Inter-American Children's Institute, a specialized organ of the Organization of American States (OAS), provided training and technical assistance to improve existing systems of civil registration and vital statistics.

MIDDLE EAST, MEDITERRANEAN AND EUROPE

36. In 1982, as in past years, the largest portion of UNFPA resource allocations in the Middle East and Mediterranean region supported maternal and child health and family planning activities. Efforts continued to be made to expand the coverage of MCH and family planning services to rural areas through in-service training for medical and paramedical personnel and traditional birth attendants. Emphasis was placed on strengthening the teaching of MCH and family planning in medical and paramedical schools.

37. In Morocco, special attention was given to the establishment of a service delivery programme utilizing mobile units to supplement the limited number of Government health centres, especially in the rural areas. In Egypt, UNFPA continued supporting an innovative project with the purpose of "Linking Population Objectives to Development Planning Efforts at the Community Level". Based on the results of the national census, each governorate was advised of the number of women in the reproductive age group (ages 15-49) in each village. It was also indicated that to help achieve the national objective of reducing the birth rate, there should be a designated increase in the number of acceptors of family planning each month. Furthermore, the Government created a Community Assistance Fund to offer interest-free loans as an incentive to communities meeting or surpassing the indicated increase in acceptors, to enable them to implement developmental projects perceived as priority to the community within the village. This approach has been successful in creating the opportunity for members of the community to participate in achieving national objectives, as proven by the remarkable increase in the number of acceptors at each village. The UNFPA-supported project now covers 12 governorates/provinces with a total population of approximately 14.5 million.

UNFPA expenditures (1981) and allocations (1982)
in the Middle East, Mediterranean and Europe
region, and percentage comparison

<u>By major sector</u>	<u>1981</u> <u>(in \$US 000)</u>	<u>1982</u>	<u>Per cent of total</u> <u>programme, 1981</u>	<u>Per cent of total</u> <u>programme, 1982</u>
Family planning	3 824	3 610	28.5	26.3
Communication and education	1 694	2 061	12.6	15.0
Basic data collection	3 587	3 405	26.7	24.8
Population dynamics	1 726	1 876	12.9	13.7
Formulation and evaluation of population policies	716	766	5.3	5.6
Implementation of policies	59	67	0.4	0.5
Multisector activities	1 711	1 847	12.7	13.5
Special programmes	114	75	0.9	0.6
Total	13 431	13 707	100.0	100.0
<u>By country category</u>				
Priority country (5)	4 166	5 491	31.0	40.1
Other country	6 437	5 873	47.9	42.8
Total country	10 603	11 364	78.9	82.9
<u>Regional</u>	<u>2 828</u>	<u>2 343</u>	<u>21.1</u>	<u>17.1</u>
TOTAL REGION	13 431	13 707	100.0	100.0

Priority countries: Democratic Yemen, Egypt, Somalia, Sudan, Yemen.

38. In the area of basic data collection and analysis, analysis and publication of census results continued in Democratic Yemen, Jordan, Morocco, the Syrian Arab Republic, and Yemen, while preparatory activities for the censuses in Djibouti, Somalia and the Sudan were initiated. In most countries where UNFPA supported a census, special efforts are being made to organize "users' workshops" to ensure the utilization of up-to-date, accurate population data in sectoral planning. Several technical studies are being initiated with UNFPA support to refine and improve the methodology for incorporating population variables in development planning efforts.

39. The introduction of population education and curricula development into formal educational systems has continued with an emphasis on the development of teacher training manuals in Arabic to facilitate the teaching of population concepts at various school levels. At the regional level, UNFPA continued to support during 1982, though at a level reduced from 1981, regional activities executed by ILO, mainly covering population education for the organized sector and human resources management and manpower planning. For communication activities, a project based in Tunisia was under way to train broadcasters and to transmit information on population through the network of the Arab States Broadcasting Union and its training programmes. The project also provides backstopping for information/education/communication projects in the region.

40. WHO continued to assist countries in improving the evaluation and management of MCH/FP programmes and assists the improvement and strengthening of the teaching of MCH/FP in medical and paramedical schools and colleges. The population programme of the Economic Commission for Western Asia continued at the same pace as in previous years with emphasis on collection and analysis of population data in countries of the region, and on the follow-up and monitoring of the World Population Plan of Action by various countries.

41. Projects in the Europe Region. The majority of the projects in the region were in family planning and support communication. For example, the Fund continued to support training in contraceptive methods for public health physicians and nurses in Portugal. UNFPA support

for supplying the assorted contraceptives was intended to cover up to 8 per cent of the service population. In Greece, a training programme for physicians, public health nurses, midwives and social workers in contraceptive methods, counselling and outreach was initiated, and training in family planning support communication was also provided. In Yugoslavia, two projects, one in the Socialist Republic of Serbia and one in the Socialist Republic of Macedonia, were being carried out to determine the knowledge, attitudes and practice of a sample population group in regard to family planning, the results of which are expected to provide the basis for designing a family planning training and services programme. Two other projects in Yugoslavia were concentrating on responsible parenthood and sex education. In one, the entire school curriculum was being revised to exclude sex-biased material and to incorporate new modules on equality of the sexes and responsible parenthood. Yugoslavia is one of the countries which has taken full advantage of the BACHUE demographic/economic model in national as well as republic-level planning. In Bulgaria, UNFPA-supported projects on sterility/infertility, screening of newborns and family planning counselling for at-risk families were coming to completion as were two other projects in support of a socio-economic and a biometric survey of the population.

42. In regard to interregional projects, the population and development training course for students from French-speaking developing countries at the Centre Demographique ONU-Roumanie (CEDOR) in Romania is continuing. Beginning in 1983, two courses a year instead of one for middle-level government planners from developing countries are expected to take place under the Demographic Training and Research Programme in Population and Development Planning at Moscow State University.

43. UNFPA support for two projects executed by the United Nations Economic Commission for Europe (ECE) to (1) undertake comparative analysis of World Fertility Survey-type fertility surveys undertaken in assessing nuptiality and fertility trends in the region and factors contributing to their change, and (2) to study determinants of fertility other than nuptiality, came to an end in December 1982, as scheduled.

INTERREGIONAL AND GLOBAL

UNFPA expenditures (1981) and allocations (1982) for interregional and global activities, and percentage comparison

<u>By major sector</u>	<u>1981 (in \$US 000)</u>	<u>1982</u>	<u>Per cent of total programme, 1981</u>	<u>Per cent of total programme, 1982</u>
Family planning	5 345	4 354	22.0	22.3
Communication and education	3 761	3 016	15.5	15.4
Basic data collection	2 752	1 638	11.3	8.4
Population dynamics	3 449	3 959	14.2	20.2
Formulation and evaluation of population policies	1 594	1 759	6.6	9.0
Implementation of policies	693	538	2.9	2.7
Multisector activities	5 638	3 640	23.2	18.6
Special programmes	1 053	664	4.3	3.4
Total	24 285	19 568	100.0	100.0

44. Most of the UNFPA-supported interregional and global projects executed by the United Nations and the specialized agencies were in the third year of a four-year programming cycle during 1982. Virtually all of these projects had undergone budget reductions during 1980 and 1981 in order to bring allocations in line with resources and to attempt to reach the 25 per cent limitation on intercountry activities set by the Governing Council. As a result, there were often cancellations of activities in many projects and delays in the implementation of other portions of their work plans. Further efforts were made in 1982 to bring the total, together with the total of regional projects, closer to the level of 25 per cent of total UNFPA allocations. At the same time, UNFPA worked closely with the United Nations and the specialized agencies in revising the work plans and re-directing the programme objectives of

many of the UNFPA-funded projects they were executing in order that such projects would be completed at the end of 1983.

45. These efforts will help to ensure that the Governing Council's instructions regarding substantive programme directions and assistance to intercountry activities are fully reflected in the UNFPA intercountry programme beginning in 1984. (Further information on the UNFPA-funded intercountry activities of the Fund's principal executing agencies is included in DP/1983/19/Add.1 .

46. In further efforts to implement the Council's decisions in these areas, in 1982 the Fund established internal working groups to review the needs at the intercountry level in each of the programme areas and the means by which these needs might best be met. The principal objective of this exercise is to bring about a better alignment between activities supported at the intercountry level and those at the country level.

C. An overview by priority programme area

47. In extending assistance for population activities, UNFPA's primary consideration is to develop and strengthen country/national resources - including national institutions - with the aim of improving capacity for long-term national action. This has also been the major thrust of regional projects, the main purpose of which are to provide technical assistance and back-stopping, training, research and information exchange for national programmes. This is in line with the UNFPA objective, as defined by both ECOSOC and the General Assembly, "to promote the recipient countries' self-reliance". Through its efforts to promote the self-reliance of recipient countries, UNFPA has increasingly relied upon the developing countries themselves to execute directly their own population programmes and projects. Wherever possible, UNFPA has also supported the building up of technical assistance networks between and among developing countries, as recommended in the Buenos Aires Plan of Action for Promoting and Implementing Technical Co-operation among Developing Countries. Assistance to interregional and global projects has tended to support research studies on an international scale, the results of which can be - and have been - applicable and disseminated to all regions and to countries within each region. In this context, the following table (next page) shows the percentage of UNFPA allocations in 1982 by Work Plan category according to country, regional and interregional and global categories, that is, for example, the percentage for family planning for country programmes, taking the total amount allocated for family planning during 1982, was 85.6 per cent; for regional programmes, 5.4 per cent; and for interregional and global programmes, 9.0 per cent.

FAMILY PLANNING

In 1982, UNFPA assistance in this area totalled \$48.8 million or 40.5 per cent of total programme allocations, compared to \$38.8 million or 31.7 per cent in expenditures in 1981. During the period 1969-1982, UNFPA assistance in this area totalled \$392.9 million or 43.4 per cent of total assistance.

48. In line with Governing Council directives, in 1982 family planning programmes continued to be the number one priority area in the field of population for the Fund. A major emphasis of UNFPA-assisted family planning programmes in 1982 was on extension of service delivery to rural areas as well as on the integration of family planning with maternal/child health care services.

49. These programme emphases also reflect the strategies for family planning activities outlined in the "Guidelines for UNFPA Support of Family Planning Programmes", which were being finalized at the end of 1982. The "Guidelines" indicate that

"UNFPA supports all modes for the delivery of family planning services as long as they are feasible and effective. It supports the provision of all methods of fertility regulation, technically approved by WHO, in accordance with the policies of requesting governments. It encourages the support for the provision of information and services to the disadvantaged, particularly to the rural and the poor in forms which are both socio-culturally acceptable,

and accessible with regard to distance and cost. UNFPA also emphasizes support to activities directed towards population groups such as adolescents, newlyweds, men and low-parity women which have often been overlooked in traditional service programmes.

"Recognizing the important role of the community in the success of a national family planning programme, the UNFPA encourages, as appropriate, activities to strengthen community participation in programmes. In this connection, support may be given for training of staff in community skills and community involvement and for community-based motivation and contraceptive distribution systems.

"The provision of services may be undertaken as specialized family planning programmes or as integrated programmes. Family planning may be integrated with maternal and child health care in the context of primary health care, or with other socio-economic development programmes".

UNFPA Allocations 1982
(as at 31 December 1982)

	<u>Per cent of allocations</u>			
	<u>Country</u>	<u>Regional</u>	<u>Total</u>	<u>Interregional/Global</u>
			<u>Country/Regional</u>	
Family planning	85.6	5.4	91.0	9.0
Communication and education	47.9	30.5	78.4	21.6
Basic data collection	84.0	7.6	91.6	8.4
Population dynamics	45.9	26.2	72.1	27.9
Formulation and evaluation of population policies and programmes	51.1	26.8	77.9	22.1
Implementation of policies	49.2	-	49.2	50.8
Multisector activities	59.9	13.2	72.4	26.9
Special programmes	48.6	6.8	55.4	44.6

50. During the year, UNFPA continued to focus its attention on, for example,

(a) personnel development and training at the country level, particularly for administrative, management, service, research/evaluation and other technical personnel. In this area, countries are at various stages of development. By and large, Asian countries have achieved a relative sophistication in human resources development for family planning, having focussed attention on this area, in some cases, for over two decades.

(b) preparation of training materials and methodologies. A special attempt has been made through country, regional, interregional and global projects to develop training guidelines, curricula and methodologies for use in teaching MCH/FP to medical professionals, para-professionals including auxiliary health personnel and agents sometimes found outside of the formal health infrastructure such as traditional birth attendants and village primary health care workers.

(c) management and evaluation. Emphasis is being placed on the management and evaluation of family planning and integrated MCH/FP programmes in order to ensure that such programmes are cost effective.

(d) contraceptive and family planning research. During 1982, UNFPA continued its support of the WHO Special Programme of Research, Development and Research Training in Human Reproduction with an allocation of \$2.0 million, bringing the total allocated to the Programme by UNFPA to \$8,150,000. UNFPA has also supported applied research in family planning and contraceptive development through selected national research institutions and through non-governmental organizations such as the Program for the Introduction and Adaptation of Contraceptive Technology (PIACT). Such research tends to have as a focus the adaptation of contraceptive technology and its information and education support materials to local social and cultural conditions and to the differing delivery systems through which such technology and materials will be provided. Additional projects in this area involve the investigation of the economic and technical feasibility of various plans for local production of contraceptives and technical backstopping services for such ongoing local production programmes as those

located in China and Indonesia. (A separate paper - DP/1983/21 and DP/1983/21/Add.1 - on the future role of the United Nations system in family planning research, including contraceptive research and development, is being submitted to the Governing Council at its thirtieth session.)

51. As part of its wider focus on the many varieties of contraceptive techniques, the Fund, on 29-30 March 1982, co-sponsored with the World Health Organization an ad hoc meeting in New York on natural family planning (NFP). The meeting brought together leaders and representatives of a number of international, regional and national NFP organizations, as well as representatives of selected international agencies and technical experts for an exchange of information and views on the present state of NFP methods and activities around the world. The discussion focussed on research and programme issues, including such areas as the psycho-social aspects of natural family planning; the relationship of NFP to breastfeeding and the menopause; and the refinement of methods for measuring and monitoring the prevalence and effectiveness of natural family planning.

52. With regard to management issues, needs for assistance are seen to be particularly great for identifying and implementing locally appropriate supervision and logistics systems, mechanisms for selection and retention of personnel, schemes for financing services, organization of MCH/FP services including integration and/or other innovative delivery modes, and management information systems.

53. Additionally, the need was recognized for technical support for many types of family planning-related research at the country level including investigations of adolescent fertility levels and of programmes to meet the needs of this group; operational research especially on service delivery alternatives, supervision, training and IEC; focussed knowledge, attitudes and practice (KAP) studies designed to reinforce IEC efforts; contraceptive prevalence surveys; studies of the acceptability and accessibility of services; and studies of infant and maternal mortality and morbidity which tend to demonstrate the need for family planning.

54. Goals in this area of population activity continue to be those of increasing access to family planning in both rural and urban areas and of reducing maternal and infant morbidity and mortality. While service delivery in many national programmes has improved considerably, much remains to be done. Training of personnel in family planning activities, in community-based distribution of contraceptives, and in programme management and evaluation needs to be reinforced not only in developing countries with new family planning programmes but also in many developing countries in which the family planning programmes are of a relatively sophisticated nature.

POPULATION EDUCATION AND COMMUNICATION

In 1982, UNFPA assistance in this area totalled \$14.0 million or 11.6 per cent of total programme allocations, compared to \$15.2 million or 12.4 per cent in expenditures in 1981. During the period 1969-1982, UNFPA assistance in this area totalled \$100.0 million or 11.0 per cent of total assistance.

55. The number of countries indicating interest to the UNFPA in initiating population education and communication activities continued to grow in 1982. In addition to assistance in this area from UNFPA, multi-bilateral funding is also being utilized, viz., a population education programme for women through the agricultural extension network in Nepal being funded by the Government of the Netherlands and the population awareness programme in Africa through the establishment of an African information network being funded by the Government of Italy.

56. A major problem has been the fact that the growing population education and communication needs of governments have outstripped the capacity of the regional education and communication advisers - the source for most technical backstopping - to handle them. In the educational area, needs have been partially met by the establishment in all regions of permanent regional mobile teams. In the communication area, wherever possible, needs are being met through the development of a multisectoral or multi-institutional approach.

57. These developments have become particularly important as programme emphasis in many regions has shifted from urban to rural areas in many developing countries. But delivering quality services in both population education and communication remains a major problem.

58. Education. In Africa, only six countries (three of them priority countries) had ongoing school population education projects in 1982. All of them required technical backstopping from UNESCO's regional advisers stationed in Dakar and Nairobi and one government anticipated a continuing need for such technical services. Fourteen additional countries in Africa (eight of which are priority countries) have expressed interest in instituting population education programmes.

59. In Asia and the Pacific, sixteen countries (one-half of which were priority countries) had official population education projects in operation in 1982. Major projects in this area are taking place in China and India. Although there are still some fourteen countries in this region which have not yet undertaken population education projects, six have expressed interest in launching such activities during the next five years. Great strides have been made in most countries in the institutionalization of population in the school systems. A major development in 1982 was the publication of a 346-page UNESCO document on population education activities in 19 countries. The document was prepared for officials of the ministries of education throughout the region and was issued under UNESCO's regular programme budget with a small financial input from UNFPA.

60. In Latin America and the Caribbean, 11 countries were implementing population or sex education projects in schools in 1982, with requests expected from at least six additional countries over the next five years. Technical backstopping was provided to 16 countries, some of which were involved in project development, some in limited locally-funded activities, others in follow-up to national projects, and the remainder in full-scale project implementation. A significant development in 1982 was the publication of a regional reference manual, or sourcebook, on population education designed by UNESCO in collaboration with some of the Latin America region's outstanding scholars in various development fields. UNESCO's regional advisers in population education have undertaken to ensure the productive use of the sourcebook. In countries where national projects were under way, "sourcebook discussion" seminars served to strengthen the school curriculum and to ensure the collaboration of university scholars who might otherwise have remained distant from the project. Where no projects were under way or foreseen for the immediate future, this approach served to introduce population issues as relevant concerns for the key educators responsible for designing and upgrading school curricula.

61. In the Middle East and Mediterranean region, seven countries, four with UNFPA priority status, had school population education projects under way. Because of the dearth of teaching materials, a major concentration has been on the development of such materials, particularly in Arabic, in such areas as family life and sex education.

62. At the interregional and global level, a major project being executed by FAO in seven countries in four regions involves the introduction of population concepts into the curricula of agricultural institutions, that is, university faculties of agriculture, rural training centres, colleges and so on. With UNFPA funding, UNESCO is executing two major projects in the population education area: (a) a draft handbook to improve teacher training and teacher training techniques in population education, and (b) a two-year study to document the experience of project administrators in population education programmes on overcoming obstacles to the successful implementation of country projects.

63. Communication. In this area of activity, as the shift in emphasis has moved from urban to rural programmes, communication theorists have increasingly begun to perceive that motivation cannot rely exclusively, particularly in rural areas, on mass media, but rather on the need for face-to-face encounters between well-trained extension workers and/or community opinion leaders and the persons to be motivated. The use of the mass media as an adjunct to the motivation process is vitally important, but cannot be relied upon to do the whole job.

64. For this reason, population communication has increasingly become regarded as a multi-

faceted exercise, involving many different governmental and non-governmental institutions as well as several distinct skills. As indicated in the Annual Report of the Executive Director for 1981, while in the past, communication as well as education programmes and projects have been formulated more or less in isolation from other population activities, with one institution responsible for executing the total programme or project, now the trend is towards a programme or project that involves a wide spectrum of ministries or agencies - agriculture, health, education, labour, etc. - and their constituencies, thus enabling greater outreach than would an approach utilizing a single ministry.

65. A major problem is finding the communication specialist who can plan media and extension activities in an integrated way, who can utilize management techniques for co-ordinated communication programmes, along with social scientists and service delivery personnel, and who can identify specific target groups and develop materials and messages for them through channels accessible to each group.

66. On the government side, lack of the new additional planning and management skills, such as a broader approach implies, has caused problems in the implementation of such programmes. On the United Nations system side, this broader approach has led to two responses on UNFPA's part: increased emphasis on support to strengthening governments' capacity to plan, manage and implement such programmes; and increased emphasis on the simultaneous involvement of two or more executing agencies. Thus, UNFPA has been working with the specialized agencies to further strengthen co-ordination among the agencies' inputs at country level. One channel through which to strengthen this co-ordination will be the regional projects which have a crucial role to play in backstopping country communication programmes.

67. In Africa, there is both an accelerating trend towards communication in support of family planning and an ongoing emphasis on communication programmes in support of other population activities. A major need is for regional-level technical assistance that embraces all aspects of communication and non-formal education. A number of countries have instituted multisectoral information, education and communication programmes, but project development has generally suffered from a lack of co-ordination and cohesion.

68. The Asia and Pacific region has been notable for its relatively long history of multi-sectoral communication programmes, although such programmes have been stronger in the organized sector than in the agriculture sector. In view of the large rural populations in the countries of the region, a major new emphasis is expected to be on drawing ministries operating in the rural sector into the multisectoral programmes in order to utilize rural-based extension workers in population communication activities in rural areas.

69. In both Latin America and the Caribbean and the Middle East and Mediterranean regions, the major need is for regional backstopping for in-country communication activities. Because of the diversity of countries with differing population programmes at different stages of development - some actively supporting family planning, some with pro-natalist policies - and because of the largely rural or nomadic populations in the Middle East, regional backstopping in most communication skills will continue to be needed.

70. At the intercountry level, most of the projects in the communication area in the past have been on promotional activities. But with the more precise conceptualization of communication that has developed in the past few years, more emphasis is being placed on systematic regional backstopping of country activities. This has been particularly true in the Asia and Pacific region. Other regions tend to be greatly understaffed for backstopping of country activities in the area of information, education and communication, and it is believed that in view of the shortage of expertise in this area more emphasis needs to be placed on the wide-ranging services that such regional advisers can provide, even at the cost of limiting interregional and global activities in other areas.

strategies and the management and co-ordination of population and related activities. Several countries in Latin America and the Caribbean are actively involved, with the assistance of UNFPA, in the development of methodologies for the integration of population policies into their development plans and programmes. In addition, during the year the Fund initiated assistance to a number of countries for the creation or strengthening of national capacity for the evaluation of population activities.

84. In the category of implementation of policies, UNFPA support has been mainly in the area of collection and analysis of migration data, research on the causes and consequences of migration, and strengthening national capabilities to formulate and implement national policies and programmes rather than the actual implementation of such programmes.

SPECIAL PROGRAMME INTERESTS

In 1982, UNFPA assistance in this area totalled \$1.5 million or 1.2 per cent of total programme allocations, compared to \$2.3 million or 1.9 per cent in expenditures in 1981. During the period 1969-1982, UNFPA assistance in this area totalled \$15.4 million or 1.7 per cent of total assistance

85. Below are reports on three subjects that cut across the spectrum of UNFPA Work Plan categories that show the special programme interests of UNFPA.

86. Women, population and development. It has long been recognized that women's role and status in the community and in society are of primary importance to the success of population programmes. The increased well-being of women, including higher levels of education, health and literacy, and increased community participation and access to the decision-making process, act as both cause and consequence of women's ability to exercise their "basic right to decide freely and responsibly the number and spacing of their children and to have the information, education and means to do so", as indicated in The World Population Plan of Action. Thus, in 1982, the Fund continued to support the fuller integration of women into the activities covered by the various UNFPA Work Plan categories.

87. "Special programme" assistance to women in 1982 comprised assistance to ongoing, often Governing Council-approved, projects which aim to enhance women's participation in national population and development activities. A large number of governments are actively promoting the status of women as an integral part of their national population programmes. Among the countries assisted by the Fund in this type of programme are Bangladesh, the Congo, Egypt, Indonesia, Jordan, Mali, Mexico, Nepal and the Solomon Islands.

88. As indicated earlier, assistance to "women's projects" cuts across the boundaries of most UNFPA Work Plan categories. For instance, in the field of population communication, UNFPA provided support for a seminar of the Arab States Broadcasting Union in order to give practical training for developing integrated communication strategies for enhancing women's roles and participation in development. Participants from the Middle Eastern region included those involved in both population and women's projects and in women's communication projects.

89. In the family planning area, it is women and their children who tend to benefit most directly from increased access to family planning services. For instance, child spacing integrated with maternal and child health care is becoming increasingly important in the African context for improving the health of both mothers and children. In several African countries, UNFPA was assisting government MCH promotional activities. The supported activities included a full range of information and education on nutrition, family health and child spacing for the health of mothers and children. And in China, for example, the UNFPA assisted a seminar organized by UNESCO and the All-China Women's Federation on social communication for women professionals involved in China's population programme.

90. At the global level, a major interdisciplinary research project on demographic change and the role of women in population and development is being undertaken by the International Labour Organisation with funding from UNFPA. The major aim of the project is to develop policy ideas and proposals which can actively promote the status of women and their gains from development. Particular emphasis is being placed on the economic contribution of women and its relationship to fertility and women's roles. Background papers commissioned for the research were published in 1982 in a volume entitled Women's Roles and Population Trends in the Third World.

91. Youth. Like women, youth are an important recipient of UNFPA assistance at the country level and, as such, projects or components of projects particularly directed at youth are not confined to a single UNFPA work plan category. Activities with an emphasis on youth are commonly included in family planning and family life education projects, and in information, education and communication projects, including in- and out-of-school population education. The overwhelmingly young age structure of most developing country populations adds to the urgency of giving youth the tools necessary for making informed and responsible decisions regarding their family life.

92. Assistance to youth programmes has been given to the Government of Kiribati for a comprehensive national training programme for youth in such areas as family education and welfare, family planning, home economics and job skills. In addition to enhancing the general well-being of rural youth in Kiribati, these activities aim to help reduce rural-urban migration by lessening the disparities between the countryside and towns. Projects in Antigua and Barbuda, Jamaica and Saint Kitts-Nevis directed primarily at the 13-24 age group, include activities for the training of family life educators, the establishment of a youth centre to house family life education activities, and the integration of these activities into existing educational activities. Additionally, the Fund has participated in a number of preparatory activities related to the International Youth Year (IYY) in 1985. This has included participation at the inter-organizational and expert group meetings, contributions to a number of reports and so on.

93. Aging of populations. Among the provisions of the International Plan of Action on Aging, adopted by consensus by the World Assembly on Aging held in Vienna, Austria 26 July - 6 August 1982, the Assembly noted that: "Aging is a population issue which affects development and which requires increasing international assistance and co-operation and, therefore, the United Nations Fund for Population Activities is urged, in co-operation with all organizations responsible for international population assistance, to continue and strengthen its assistance in that field, particularly in developing countries". Furthermore, the General Assembly, at its thirty-seventh session, by resolution 37/51, inter alia, urged UNFPA, "in co-operation with all organizations responsible for international population assistance, to strengthen its assistance, within its mandate, in the field of aging, particularly in developing countries".

94. In the field of aging, in 1982 support was given for activities undertaken in connection with the World Assembly on Aging. In addition, assistance was given to Opera Pia International, a non-governmental organization, to support regional workshops bringing together scholars, government officials and the Catholic Church for in-depth consideration of aging as a component of national population and development planning.

OTHER ASPECTS OF THE PROGRAMME

Evaluating and monitoring UNFPA programmes and projects

95. Evaluation. During 1982, UNFPA supported the undertaking of six major independent, in-depth evaluations of UNFPA-funded programmes:

96. (1) Support to Infrastructure and IEC activities of the National Family Planning Programme of Thailand. The evaluation found that the programme had met its demographic objective of reducing the country's growth rate from 2.6 per cent in 1976 to 1.95 by the end of 1981. However, for the programme to meet its new objective of further reducing the growth rate to 1.5 by 1986, the evaluation noted that more emphasis needed to be placed (a) on reaching the hard-to-reach non-contracepting groups with motivation for family planning and services, (b) on

promotional activities suggesting that women adopt more permanent methods of contraception, and (c) on motivating the population to adopt a two rather than three-child family. It also recommended a shift in the communication programme away from a broad-based mass media approach to more differentiated messages responding to the informational and motivational needs of specific target audiences.

97. (2) the UNFPA country programme in Cuba. The Evaluation Mission concluded that, overall, the UNFPA-assisted projects in Cuba had been successful in achieving their short-term objectives and in making progress towards the long-term objectives. For example, the results obtained in regard to infant and maternal mortality were considered outstanding. Similarly, the policy of making family planning services more accessible has resulted in a significant increase in the utilization of contraceptives supplied by the Government and an almost parallel reduction in the frequency of abortion. It was noted that some of the targets - particularly for the MCH and the statistical information projects - needed to be readjusted either because performance had already surpassed targets or because the Government had changed its priorities. The Mission recommended a thorough revision of the objectives and activities planned from 1982 onwards.

98. (3) the regional programme of the World Health Organization/Regional Office for Africa Regional Programme in Family Health, located in Benin. This evaluation included the assessment of AFRO's performance as executing agency, based upon an in-depth study of UNFPA-supported country projects in four French-speaking Africa countries - Benin, the Congo, Mauritania, and Togo. The Mission concluded that poor project design (too many functions for the Benin-based regional team and little planning), discrepancy between UNFPA's and AFRO's understanding of the team's priorities (UNFPA opted for more backstopping; AFRO, for more training) and operational problems (highly centralized management at WHO's regional headquarters in Brazzaville (Congo) complicating the work of the Benin-based regional team) jeopardized the pursuit of regional activities and impaired the collaboration and mutual trust between the agencies. The Mission also found AFRO's performance as executing agency uneven, stronger in management of fellowships and supplies and weaker in recruitment of personnel (largely due to nationality quota restrictions and poor advertising of availability of posts) and monitoring (largely due to personnel arrangements in Brazzaville leading to the absence of a focal point for project monitoring). The Mission made a series of recommendations on how to solve these problems.

99. In addition to the three evaluations noted above, the UNFPA also undertook evaluations of (a) the family planning and population education programme in Tunisia, (b) workers' education projects in Bangladesh and Nepal, and (c) the MCH/FP project in Swaziland. Field visits for these three evaluations took place during the latter part of 1982 but reports were not finalized at the writing of this Annual Report. A manual for UNFPA evaluations was field tested during the course of the three evaluations noted immediately above. Several evaluations for 1983 were in an advanced stage of preparation, e.g., an evaluation of the population education project in Sierra Leone and a second evaluation of workers education projects in the Asia and Pacific region.

100. Monitoring. Monitoring of projects through project progress reports, tripartite project reviews (TPRs) and annual country reviews (ACRs), is a continuing process during the life of a programme or project. It helps to ensure that input deliveries, work schedules, targetted outputs, and other required actions are proceeding according to plan, and to identify problems and difficulties, in order to enhance the implementation, efficiency and effectiveness of UNFPA-assisted programmes and projects. Monitoring also provides feedback information which may be necessary for adjustments in work plans and budgets, as well as information on future programme and project needs. During 1982, the following number of TPRs and ACRs took place, compared with 1981:

	1982		1981	
	TPR	ACR	TPR	ACR
Africa	79	10	57	12
Asia and the Pacific	113	7	158	5
Europe	-	-	2	3
Latin America and Caribbean	47	1	47	2
Middle East and Mediterranean	40	-	28	3
	279	18	292	25