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Report of the Executive Director on
the evaluation activities of UNFPA

Summary

In response to Governing Council decisions 82/20, I, paragraph 8, and 83/17, I, paragraph 6, this support paper (a) describes the independent in-depth evaluation activities of UNFPA undertaken during the period 1982-1983 with emphasis on the results of these evaluations, (b) discusses the utilization of evaluation results and (c) presents UNFPA's plans for future evaluation activities.

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INTRODUCTION

1. This report has been prepared in response to Governing Council decisions 82/20, I, paragraph 8, which requested the Executive Director of the Fund to supply further evaluation reports periodically, and 83/17, I, paragraph 6, which requested the Executive Director to provide to the Council at its thirty-first session a report on UNFPA's evaluations activities, including information on how the results of such evaluations have been utilized in policy formulation, programming and the implementation process at the project, country and intercountry level.

2. This report is one of a series, as requested by the Council, by the Executive Director on the evaluation activities of UNFPA. It provides general information on past evaluation activities (paragraph 3-10) and future plans (Chapter III) in UNFPA, as well as summaries of the results of independent in-depth evaluations conducted during the period 1982-83 (Chapter I and Annex). Furthermore, it discusses the follow-up and use of evaluation results (Chapter II).

3. Throughout the report, the term "evaluation" is used as defined by E. D. Sohm in Glossary of Evaluation Terms issued by the Joint Inspection Unit in November 1978, as "a learning and action-oriented management tool and process for determining as systematically and objectively as possible the relevance, effectiveness and impact of activities in the light of their objectives, in order to improve both current activities and future planning, programming and decision-making."

4. Evaluation of UNFPA-supported projects/programmes is undertaken in two ways: (a) built-in evaluation and (b) independent, in-depth evaluation. Built-in evaluation is an integral part of the design and implementation of a project and is undertaken by the people responsible for conducting the project activities, i.e., project personnel and other government or agency personnel. Increasing attention is being paid to built-in self-evaluation in new project proposals, as a result of the recognized need to continue to improve both project design and implementation as well as the need to contribute to the goal of government self-reliance. UNFPA has decided that all projects should have basic plans for built-in self-evaluation, but also realizes that the introduction of this concept, new to many project managers, will take time to accomplish. Within UNFPA itself, there is now more awareness of the need for this kind of evaluation, and there is an active dialogue between evaluation, technical and programme staff regarding methodologies for incorporating evaluation plans in new projects. One of the reasons for this heightened interest in built-in evaluation is that the recent independent, in-depth evaluations have shown the usefulness of evaluation for programming purposes (see further Chapter II below).

5. Independent, in-depth evaluations are undertaken of selected projects/programmes only. They are organized by UNFPA and the evaluation missions are composed of persons not previously involved with the project or programme under evaluation. As mentioned in the report (DP/1982/32) to the Council at its thirtieth session in 1982, UNFPA intended to increase the "number and speed of evaluation studies". This was to be achieved through the introduction of (a) a two-year rolling plan for such evaluations, which has made it possible to obtain all parties' agreement on terms of reference and dates of the evaluations at an early stage of the preparations, thereby minimizing delays; and (b) a streamlined system of reporting that concentrates on conclusions and recommendations, and requires the writing of the report during the field visit. UNFPA had planned to undertake eight independent, in-depth evaluation exercises annually, a total of 16. However, during 1982 and 1983, a total of only twelve were actually conducted, partly because of staff vacancies and partly due to the fact that more time than planned was spent on the development of built-in evaluation methodologies and on the completion of the evaluation manual. Nevertheless, it should be noted that the number of evaluation reports produced is considerably higher than in previous years and that many of the evaluations covered several projects (a total of more than 50 projects) rather than just a single project.

6. In accordance with the plans proposed in DP/1982/32, the emphasis in the evaluation work programme for the period 1982-1983 was on country projects and on the family planning and information, education and communication (IEC) sectors. Each usually concentrated on project performance, achievement of the immediate objectives, and adequacy of the project design. For the latter part of the reporting period, the evaluations have also included, as a standard element, study of the role of the executing agency(ies), the role of women, and the possibilities of improving and/or adding components of built-in evaluation. Since most projects seldom have the necessary baseline data or measurable indicators of achievement, the development of the specific methodology needed for each evaluation had to be given much time and attention. The approaches used had to be practical, rather than purely scientific, and the evaluations were based on qualitative, rather than quantitative measurements. Much effort, therefore, also went into finding the most experienced and knowledgeable consultants available for the evaluation missions.

7. The independent evaluations undertaken covered more than 50 individual projects and included one comparative evaluation of the population education projects executed by the ILO in the several countries of the Asia and Pacific region. This evaluation was based on a headquarters study and on field evaluations of country projects in Bangladesh, India and Nepal and, in addition to individual country reports, it produced an overall report with general conclusions and recommendations. Other country evaluations were made of the Cuba country programme, the family planning programme in the Dominican Republic, the population/socio-spatial/regional planning project in Senegal, the Sierra Leone population education project, the family planning programme of Swaziland, the family planning and IEC projects in Thailand, and the family planning and population education projects in Tunisia. Three evaluations were conducted of intercountry projects - the regional advisory services in population education and communication in sub-Saharan Africa executed by the ILO, FAO and UNESCO; the Programme in Family Health executed by WHO Regional office for Africa; and the Regional Advisory Team for Family Planning, South East Asia Region of the WHO. Chapter I and the Annex report on the results of these independent in-depth evaluations.

8. In 1982 UNFPA prepared draft "Guidelines and Procedures for Independent, In-depth Evaluations", explaining the various steps involved in these evaluations and addressed to evaluation consultants, governments, executing agencies and UNFPA. After a year's testing, these are being finalized and will be given a wide distribution.

9. Both kinds of evaluations mentioned above are seen as necessary and complementary. Built-in evaluation, which is now to be included in all new projects funded by UNFPA, is undertaken by persons familiar with the project. Since they are also the users of the evaluation results, immediate feedback is assured. Certain projects and programmes, for example those of an innovative nature, require a more in-depth and independent assessment. The persons undertaking this kind of evaluation are not directly familiar with the project evaluated. They do, however, bring high-level technical and analytical skills to their assignment and can provide an impartial assessment of the project. Since the introduction of built-in self-evaluation in UNFPA-supported projects is relatively recent (see DP/1982/32), the remainder of this report focusses mainly on the results of the independent, in-depth evaluations.

I. RESULTS OF INDEPENDENT IN-DEPTH EVALUATIONS

10. Summaries of the results of the independent, in-depth evaluations conducted during the period 1982-1983 have been presented in the Annex. It is difficult to make generalizations based on these evaluation results, since the findings are usually specific to a particular country and project situation. Nevertheless, some of the same findings, in particular those related to management issues, seem to appear frequently in many of the reports.

11. There was considerable progress in several of the projects under evaluation and many proved to be well on the way to reaching their immediate objectives. Among such projects are those in Cuba, Dominican Republic, Sierra Leone, Swaziland, and Thailand.

12. In a few cases, the objectives were found to be unrealistically high, particularly in terms of the time frame, while in another case, in Cuba, the achievements were above the targets. Revisions of the targets were needed in some projects, for example in Thailand where they had to be adapted to conform to changes in the Government's long-term goals.

13. Most of the population projects evaluated, like many other kinds of development projects, continued to experience problems with project design and formulation. The lack of proper planning means that there are few tools for good management in the implementation of the projects. Furthermore, a better project design would in many cases have prevented such problems as faulty timing of the training components. Although some improvements have been noticed in the project design and formulation in country projects, there is generally a need for better design, with a clear outline of immediate and long-range objectives and work plans that relate to these objectives.

14. The evaluations showed that the intercountry projects in particular had difficulties in achieving noticeable results. This seemed to be related to three factors, viz: (a) differing views between UNFPA and the executing agencies regarding the priorities and roles of the regional advisers; (b) lack of a system for joint planning/programming; and (c) lack of proper monitoring and evaluation. Since all of the evaluation reports emphasized the continuing needs in the countries for the services that can be provided by these advisers, present activities to remedy these problems, mentioned in the Annex, become all the more important. Furthermore, if these projects had been well designed from the beginning, some of the problems would have been discovered and solved at an earlier stage.

15. The problem of insufficient monitoring and evaluation was not limited to the intercountry projects. Many of the country projects, e.g., in the Dominican Republic, Sierra Leone, Swaziland, and Thailand, need better monitoring and evaluation systems (both in terms of content and timeliness of reporting) to permit adjustments during their implementation.

16. The deficiency in monitoring and evaluation is part of the more general problem of deficiencies in planning and management of the projects mentioned in paragraph 13 above. This lack of management emphasis could be attributed to all the parties involved: UNFPA, executing agencies, and governments. There is an increased interest in improving these areas, but an impediment is the lack of trained and experienced personnel in this sector, especially at the local level.

17. Supervision was found to be another weak area, in particular in MCH/family planning projects. In most cases such as in Swaziland, it was insufficient, due to a lack of the necessary machinery and trained personnel. However, in other cases, for example in the Dominican Republic, there were enough supervisory activities but they had to be redirected from a fault-finding kind to one providing more positive guidance to those supervised. Improvements have been noted in some projects, e.g., in Thailand where greater supervision was facilitated by the increased mobility of the supervisory personnel, thanks to the additional project vehicles.

18. Yet another area which is often not given proper emphasis is training in terms of (a) lack of suitably trained personnel to initiate project activities, (b) insufficient attention given to training by all parties throughout project implementation and/or (c) improperly designed training component (e.g., heavy emphasis on overseas training at the expense of in situ practical workshops/seminars).

19. All the evaluation reports discuss the role of the executing agencies (in some cases, the government). Positive experiences are reported, e.g., with PAHO in Cuba and with The Population Council in the Dominican Republic. (In the latter case, the evaluation showed that The Population Council had helped to establish technical self-sufficiency in the

project and, therefore, direct execution was recommended for the future.) Another key role was played by the ILO in the initiation of population education projects in the organized sector in Asia. However, the evaluation report noted that the future role of the executing Agency in this area needs to be reviewed in light of the increased availability of local resources.

20. In other countries, the role of the executing agencies was found to be less positive. In Swaziland, for example, WHO's support to the project was found inadequate and as a result of the evaluation the executing agency now has been changed to the International Planned Parenthood Federation. UNESCO's technical assistance to the Sierra Leone project was also deemed insufficient.

21. The regional projects under evaluation seem to have provided limited support to country projects, although UNFPA considered this to be its main role. For example, the regional WHO office in Africa, AFRO, in the past, had the viewpoint that UNFPA merely provided financial support to a WHO programme, whose priority was training, and therefore did not take into account UNFPA's priorities. These problems have, however, now been solved. Reasons for the limited country activities of the regional teams, other than different priorities between the agencies and UNFPA, also included the fact that UNFPA did not sufficiently involve the agency in its country projects, and that the governments were not aware of the availability of these services. (Note that no regional United Nations projects were included in the evaluations referred to here.)

22. Another factor that has had a negative influence on many projects was the reductions made by UNFPA in the project allocations from 1981 onwards caused by the shortfall in resources and, in the case of intercountry projects, the shift in priorities towards country projects. The reductions were seen to be damaging in many countries - Sierra Leone in particular - and in the intercountry projects. In the latter case, reduced travel funds for the regional advisers limited the necessary visits to the countries in their region.

23. On the positive side, it has been noted that several governments have given strong political backing to their population programmes, in particular MCH/family planning projects, and this support has been a crucial factor in the success of the projects. Examples of this can be found in Cuba, the Dominican Republic, and Swaziland.

24. There has been a considerable increase in the availability of MCH and family planning services, both in terms of physical and human resources, in Cuba, Dominican Republic, Swaziland, and Thailand. The utilization of the services was also generally high.

25. Related to the utilization of services is the expansion of IEC activities that has taken place in many countries. However, there is a need to change the focus of many IEC activities to expand further the use of the services. In Thailand, for example, a new IEC strategy focussing on hard-to-reach groups with more tailor-made programmes was recommended.

II. USE OF EVALUATION RESULTS

26. Evaluations in UNFPA are undertaken for two purposes: (1) to provide one of the inputs to enable the Executive Director to meet the requirements of accountability to the Governing Council; and (2) to provide timely, analytical information as an input into decision-making within UNFPA regarding projects, programmes and policies. The evaluations should benefit governments directly or indirectly by providing information and mechanisms to assist them in improving their projects and programmes.

27. The notion of accountability is in part being met through independent, in-depth evaluations and the reports on their results furnished to the Governing Council. It should be noted that the objectivity and credibility of evaluation reports are heightened by the organizational position of the Evaluation Branch within UNFPA and by its policy of using only consultants who have not previously had any ties with the project being evaluated. Their lack of previous familiarity with the project may, as mentioned in paragraph 5 above, be a drawback, but it is counterbalanced by their expertise, which allows an independent, and impartial assessment.

28. The second purpose of UNFPA evaluation refers to the decision-making at three different levels: (1) for the particular project/programme under evaluation, (2) for similar projects/programmes elsewhere, and (3) for general policy-making regarding different substantive and operational issues. So far, the major emphasis of the evaluation effort has been on the first level. As more evaluations - both independent and built-in - are accomplished in the various regions and Work Plan categories, some information is now becoming available for use at the second level. The utilization of evaluation findings as an input into general policy-making can be achieved in the future as more evaluation experience is gained in various sectors.

29. There have been some difficulties in providing the information required for the decision-making at the first level. As mentioned in DP/1982/32, writing reports on the independent, in-depth evaluations used to be a lengthy process and it was not always possible to provide the evaluation results in time for decision-making in regard to the particular programme/project evaluated. However, the potential for using evaluation results, especially to improve the evaluated projects, has increased because efforts have been made to provide more timely evaluation results for programme purposes.

30. Also, by having these evaluation reports written in the field, UNFPA has found that the results of the evaluation are available to the government and to UNFPA more rapidly. Furthermore, the report is thoroughly discussed with the government before the Mission departs - a factor which has increased the use of the results by the Government itself.

31. Once the evaluation report is submitted to UNFPA, the Fund reviews the recommendations. Since 1978, there is an established system for high-level discussion of each report leading to a final decision by the Executive Director. UNFPA's positions on the evaluation recommendations are then communicated to the government and the executing agency concerned.

32. The number of recommendations in evaluation reports has varied greatly in the past, ranging from few to many. At the moment, an effort to present fewer recommendations is under way, with an emphasis on policy-related issues for the projects and the inclusion of major operational and administrative matters only. A large number of recommendations have been made in the 26 independent evaluation reports produced by UNFPA since 1977. Twelve of these reports referred to evaluations of intercountry projects, while the remainder covered country projects. Two of the latter group referred to multisector country programmes, seven to MCH/family planning, four to population education, and one to a migration project. The intercountry projects included six in population statistics and dynamics, three in MCH/family planning and three in IEC.

34. The Executive Director accepted or endorsed most of the recommendations and rejected only a very small percentage. Almost all of the recommendations rejected related to intercountry projects and UNFPA did not endorse them because they suggested changes in priorities, or the organizational structure of other agencies, which UNFPA had no mandate to address.

35. There is not yet a procedure within UNFPA for systematically collecting information on how the evaluation results are used. In order to respond to the Council's request for a report on the use of the evaluation results, UNFPA conducted an in-house inquiry regarding all evaluations undertaken since 1977. Information was also collected from other sources on an ad hoc basis about the use of some of the reports.

36. The replies to the inquiry showed that the results of recent evaluations had been widely used by the governments, the executing agencies and UNFPA in both country and intercountry projects. For example, the evaluations of the regional WHO teams led to joint programming by WHO, UNFPA and the governments for more efficient use of the advisory services. Among the country projects, there were some for which the executing agency was changed as a result of the evaluations. In several cases, project revisions or extensions incorporated the suggestions made in the evaluations, etc. (further information is provided in the Annex). Generally, there was sufficient information available regarding the use of recent evaluations - due to the fact that the persons who made use of the evaluations were still in the same posts and remembered what was done, but also because of the increased usefulness of the recent reports for programming purposes (see para 31 above). However, since there is not yet an established system for follow-up of the use of evaluation results, information on the use of evaluations undertaken earlier was very limited.

37. The replies to the inquiry focus mainly on the use of the results for the projects that have been evaluated. There are few references to the usefulness of the results in regard to other projects and no mention of any influences on policy decisions, because, as stated in paragraph 28, most evaluations were designed to provide recommendations regarding the evaluated projects rather than general guidelines. Also, considering the limited number of evaluations and the difficulties of generalizing, no organized attempts were made in the past to draw from them overall conclusions to be used for the policy-making in the Fund. However, though it is difficult to ascertain direct linkages, there have been cases when the evaluation results have served as an input for decisions made regarding UNFPA policy guidelines, e.g., in the recent emphasis on support to management of family planning programmes.

III. FUTURE EVALUATIONS PLANS

38. For the future, there is a need to establish a system for collecting and analyzing information on the follow-up and use of evaluation results, for both independent and self-evaluation endeavours. Some attempts have already been made to set up a system for storage and retrieval of information collected through the monitoring system, but so far no satisfactory solution has been found. These efforts will continue and will be expanded to include information in relation to different kinds of evaluation. Furthermore, a methodology for analysis of the data thus collected will need to be elaborated.

39. In addition, there is a need to find out in a systematic manner how the evaluation results are actually being used in the projects evaluated, in similar projects elsewhere and in policy-making. This will require that an analysis of evaluation results by substantive sectors be undertaken. Such an analysis could also serve as the basis for the report requested by the Council at its thirty-third session on the comparative results of past evaluations, according to the major Work Plan Categories, including activities related to women. As mentioned above, it is difficult to make generalizations based on project evaluations, since their results often are specific to a particular country situation. However, with an increasing number of evaluation reports available, both from independent and self-evaluations, there will be a broad enough basis for a study of the possibilities for drawing general conclusions. Some efforts have already been initiated to develop a methodology for such a study.

40. The UNFPA evaluation work programme for 1984-1985 calls for seven to eight independent, in-depth evaluation exercises a year. The selection of the projects/programmes/subjects to be evaluated has been made in such a way that there will be coverage of all Work Plan categories, in order to produce some of the results needed for the study mentioned in the previous paragraph. As requested by the Council, a particular effort is being made to include evaluations of activities related to women. Some of these latter evaluations will also serve as an input into UNFPA's contribution to the Interorganizational Evaluation Study on Women, co-ordinated by UNDP.

41. It is expected that the work in connection with the independent evaluations - planning and design, desk review and field visit, reporting and follow-up - will remain a major task. The development and implementation of built-in self-evaluation is also increasingly important (see paragraph 4). The in-house dialogue about the best way to incorporate evaluation plans in new or revised project documents will continue. To achieve a fully functioning system of built-in self-evaluation, it will also be necessary to train personnel at different levels (UNFPA, executing agencies, Government) in the formulation and implementation of evaluation plans. At present, UNFPA is preparing a simple training package that deals with the formulation of objectives and the elaboration of an evaluation plan and various ad hoc training activities at Headquarters already include some evaluation components. Furthermore, as UNFPA guidelines for project formulation are revised, references to the built-in evaluation are included.

42. Although progress has been made in developing built-in evaluation and making independent, in-depth evaluations more useful, additional improvements are needed. There is a need for further refinement of methodologies and procedures for the independent evaluations (particularly for their analysis and follow-up) as well as for the built-in self-evaluations and training in this area. It must be repeated that efforts are being made within the Fund to deal with these issues. In view of the ever increasing demand for evaluation advice, these efforts will be given additional emphasis in the future.

Annex

SUMMARIES OF EVALUATION REPORTS

1. Below are provided short summaries of the results of the independent, in-depth evaluations undertaken in 1982-1983 as well as some information on their use. More detailed information is given in the individual reports, most of which are available to Governing Council members upon request.

A. Country Programmes/Projects

2. Bangladesh: Population education projects executed by the ILO. See paragraphs 39-41 under comparative evaluation in section B below.

Cuba: Country Programme

Projects evaluated: "Maternal/child health and work on population dynamics" (CUB/73/P01); "Maternal and child health and family planning services" (CUB/79/P04); "Population and housing census" (CUB/79/P01); "Demographic research and analysis for socio-economic planning" (CUB/79/P02); "Programme for training and research in demography at the University of Havana", (CUB/79/P03).

Amount allocated by UNFPA: \$6,430,601 (1975-1981)

Executing agencies: Government, United Nations, WHO/PAHO, UNICEF, UNFPA

National implementing agencies: Ministry of Public Health, State Statistical Committee, University of Havana.

Period covered by the evaluation: 1975-1981

Timing of Evaluation Mission: February-March 1982

3. The Mission concluded that overall the UNFPA-assisted projects in Cuba have been successful in achieving the projects' short-term objectives and in making progress towards the long-term objectives. However, it was noted that some of the objectives - particularly in the MCH and the statistical information projects - had become obsolete over time either because events actually overcame planned performance or because the Government changed its priorities. The Mission therefore recommended a thorough revision of the objectives and activities planned from 1982 onwards, particularly in the case of the MCH and statistical information projects.

4. It was ascertained that UNFPA support, in spite of the fact that it constitutes a rather small percentage of the overall costs of the projects to the Government of Cuba, has been crucial to the success so far achieved. This is because UNFPA support was applied to finance critical components which would have been either impossible or very difficult for the Government to finance. The evaluation also concluded that the UNFPA-assisted programme in Cuba has many aspects that could be duplicated in other developing countries.

5. In the MCH/family planning area, the Mission found that the results obtained in regard to infant and maternal mortality were outstanding and that there was a significant increase in the utilization of contraceptive methods and a simultaneous reduction in the frequency of abortion. The quality of the services appeared to be very high. Areas of lesser success were found in relation to maternal mortality due to abortion and to venereal diseases.

Furthermore the scarcity of information on the behaviour of the population with respect to contraception and abortion was seen to be impeding adequate planning of services. The need to assess the feasibility of local contraceptive production was underlined.

6. Reasons for the success of the health care system in Cuba are the extremely high availability of and accessibility to health services, the uniformly high quality of the services rendered, the active participation of the community in all aspects of health care, and certain aspects of the delivery of health care unique to Cuba, i.e., the delivery of services by population sectors, each sector being assigned to a given medical team; organization of care by level -primary, secondary and tertiary; high risk follow-up practices, etc. However, what is essential for the replication of this model are the political will of the leaders and their commitment to health as a pillar of economic and social development.

7. The Mission found that a substantial number of generally high quality sex education activities (e.g., seminars, conferences, use of mass media) had been implemented over the period under review and that there was a need for the continued expansion of these activities. Resources available for sex education were found to be insufficient.

8. The Mission concluded that the census activities had been well and efficiently carried out with high quality preparations and much training and publicity, but the plans for analysis were less well developed. In the areas of demographic training and research, the Mission found that the quality of the activities was good.

9. In regard to administration and management, the Mission emphasized that the national central programme office, the local PAHO/WHO office and the local UNDP/UNFPA office had performed well, and it recommended, among other things, that these offices jointly prepare annual work/management plans for each of the projects in the programme.

10. The evaluation report was fully accepted by the Government and its recommendations were used as guidelines for subsequent tripartite reviews. Several of the recommendations have already been implemented, for example: A national registry of legal abortion and records of IUD acceptors have been established from January 1984; feasibility studies for local production of contraceptives have been carried out; the Government has expanded the sex education programme by adding more personnel and activities and an exhaustive revision of the school curriculum is in the process; the census activities have been combined with those of its analysis in one institution; the first International Course on Population and Development was held in September-November 1983 and there is a commitment to improve the monitoring reports.

Dominican Republic: Family Planning Programme

Project evaluated: "Expansion of national family planning programme, Phase III (beginning in 1979)" (DOM/73/P01)

Amount allocated by UNFPA: \$5,663,425 (1974-1982)

Executing agencies: Government, United Nations, UNICEF, NGO (The Population Council)

National implementing agency: State Secretariat of Public Health: National Population and Family Council (CONAPOFA)

Period covered by the evaluation: 1978-mid 1983

Timing of Evaluation Mission: June-July 1983

11. The Mission was unable to assess the progress made towards meeting the long-range objectives of reducing the birth rate to 29 per thousand by 1981, since data are incomplete and estimates vary widely. The programme had to a large extent achieved the immediate objectives related to the increase in family planning services and users and to the integration of family planning with MCH.

12. The programme's strengths were: the considerable expansion of the physical and health personnel infrastructure, political and institutional willingness to carry out integrated MCH and family planning programmes, and the great demand for family planning services due, in part, to the transmission of values favouring small-size families by return migrants and the direct influence of the United States mass media. Weaknesses were the absence of a tradition of public health and preventive medicine in the country resulting in inadequate training of medical personnel and consequent lack of motivation for community medicine among physicians, the extreme centralization of the health system, the use of only one make and type of oral contraceptive, the limited number of health centres which were offering IUDs and sterilization, and personnel management.

13. The Mission found that The Population Council had provided valuable technical assistance to the project and that for the most part the project staff now had the technical expertise required to carry on the project. The administrative arrangements, which divided the responsibility for handling and monitoring the use of UNFPA funds between The Population Council and UNDP was ineffective and increased the administrative burden for the national authorities without any concomitant increase in the quality of the financial control.

14. The Mission made a total of 28 recommendations, most of them on substantive and operational matters, including the recommendation that the project now be directly executed by the Government. Most of the recommendations were accepted and extensively used by the Government in reformulating the objectives and strategy of its 1984-1986 programme. UNFPA also accepted most of the recommendations, including that on change in the execution.

15. India: Population education projects executed by the ILO. See paragraphs 41-45 under comparative evaluation in section B below.

16. Nepal: Population education projects executed by the ILO. See paragraphs 46-49 under comparative evaluation in section B below.

Senegal: Population/Socio-spatial/Regional Planning

Project evaluated: "Basic data collection and analysis for establishment of a population distribution policy" (SEN/77/P04)

Amount allocated by UNFPA: \$635,460 (1979-1983)

Executing agency: United Nations

National implementing agency Ministry of Urban Development, Housing and Environment

Period covered by the evaluation: 1979-1983

Timing of Evaluation Mission: Nov-Dec. 1983

17. The evaluation of the above-mentioned project was undertaken late in 1983 and the recommendations were not yet available at the time of the writing of this report.

Sierra Leone: Population Education

Project evaluated: "Integration of population education into school curricula"
(SIL/76/P01)

Amount allocated by UNFPA: \$371,631 (1977-1982)

Executing agency:	UNESCO
National implementing agency:	Ministry of Education
Period covered by the evaluation:	1977-1982
Timing of Evaluation Mission:	Jan-Feb. 1983

18. The Sierra Leone in-school population education project was the first project of this kind in Africa. The Evaluation Mission noted that the project had made considerable progress towards achieving its immediate objective of integrating population education into the social studies curriculum of the secondary schools. Delays encountered were largely due to reductions in the budget for 1981. The achievements were considered quite satisfactory.

19. The Mission found that the integrated social studies curriculum was not fully developed at the start of the project. As a consequence, the project's focus had been expanded to include not only incorporation of population education within the social studies curriculum, but also the development of the curriculum itself. At the same time, the training programme and materials had to be developed for both efforts. However, the Mission considered UNFPA support to such a programme justified, since the proportion of the activities devoted to population was larger than in social studies programmes elsewhere.

20. The Mission found that the strategies as planned and implemented for curriculum development and the different types of training were generally appropriate for Sierra Leone. However, the plans failed to foresee problems that later occurred in printing and distribution of instructional materials and which, unless resolved, could jeopardize the entire project. The other major problem encountered by the project was in connection with budget reductions and rephasings and the way in which they were undertaken by UNFPA. The Mission also found that the executing agency, UNESCO, should have provided better briefing of the project staff and more technical backstopping.

21. The Mission made a total of 21 recommendations. Most of them were accepted by the Government and by UNFPA and as a result UNFPA has decided to provide support for an extension of the project, which, as recommended, concentrates on a consolidation of the achievements in social studies so far, in particular solving the text book problem, before expanding it to the science sector.

Swaziland: Family Planning Programme

Project evaluated: "Assistance to national family planning programme" (SWA/75/P01)

Amount allocated by UNFPA: \$761,128 (1973-1982)

Executing agencies:	WHO, UNICEF, UNDP
National implementing agency:	Ministry of Health
Period covered by the evaluation:	1976-1981
Timing of Evaluation Mission:	November 1982

22. The Mission found that the immediate objectives related to expansion of services had to a large degree been met. The major achievements of the programme were that MCH/FP services were widely distributed throughout Swaziland, that the integration of preventive and curative services was a process clearly in place, that a large (although as yet unquantifiable) percentage of pregnant women attended antenatal clinics, that family planning services had been substantially extended, and that an adequate, though incipient, health education programme was functioning.

23. The Mission found that the strong points of the programme were the Government's commitment to the primary health care concept; the programme strategy; the training component; the number and quality of the staff involved in service delivery; the number of service delivery points; and the system of recruitment and the employment of Rural Health Motivators. Weak points were planning and management - both by the Government and the executing agencies; the lack of solid socio-anthropological knowledge as a basis for the educational strategy; the lack of a focal point for family planning which resulted in this component being weaker than others within the primary health care; insufficient supervision; and the lack of monitoring and evaluation which, if properly undertaken, could have led to changes and adjustments in the programme.

24. The Mission made a series of recommendations which were accepted and utilized by the Government of Swaziland and by UNFPA as guidelines for the formulation and appraisal of a proposal to continue UNFPA assistance to the programme after 1984. One of the recommendations was a change in executing agency and, as a result, IPPF has since replaced WHO in this role.

Thailand: National Family Planning Programme, Infrastructure and IEC Activities

Projects evaluated: "Expansion of family planning services and support for the national family planning programme" (THA/76/PO1); "Communication support for the national family planning programme" (THA/76/PO5)

Amount allocated by UNFPA: \$5.5 million (1977-1982)

Executing agencies: WHO, UNICEF, UNFPA

National implementing agency: Ministry of Public Health

Period covered by the evaluation: 1977-1981

Timing of Evaluation Mission: February 1982

25. The Evaluation Mission found that the National Family Planning Programme has met its demographic goal to decrease the population growth rate from about 2.6 per cent in 1976 to 2.1 per cent in 1981. The target of acceptors and continuing users has also been met. The number of Government service delivery points has increased due largely to the introduction of village volunteers, who deliver contraceptives at the village level. The Mission concluded that the Programme as a whole has reached a mature stage and that new procedures in targetting for the future contraceptive usage and demographic goals were required.

26. In regard to UNFPA assistance to service delivery, the Mission concluded that these inputs did make an impact on the increased practice of contraception in Thailand. The Mission pointed out, however, some shortfalls in UNFPA-assisted activities, e.g., vasectomies delivered through mobile teams have decreased significantly since 1978. Mobile and weekend vasectomy services provided through three medical schools, on the other hand, have generally gone well, both in the quality of service and number of vasectomies performed. In regard to the expansion of family planning services in the Bangkok Metropolis

area, which UNFPA has supported, there was no evidence that the areas targetted for this assistance were better reached by services now than five years ago. The Mission was also concerned with the morbidity and mortality (and high hospitalization costs) associated with the increasing practice of illegal induced abortions, and the need to find preventive measures.

27. In regard to the IEC activities of the NFPP which UNFPA has supported, there was evidence to indicate that the Programme had provided a widespread exposure to the majority of the Thai population in the last ten years. The Evaluation Mission concluded that such an awareness creation effort has reached its optimum, and to convince new acceptors, many of whom may be hard to convince, different information and motivation strategies will have to be developed.

28. In total, the Evaluation Mission made 63 recommendations and a number of suggestions concerning re-programming of 1982 activities. UNFPA accepted/endorsed all the 26 major recommendations made by the Mission and noted the remainder.

29. Most of the recommendations of the evaluation were taken into account in the two new projects which were submitted by the Government for UNFPA assistance. For example, national and provincial workshops were held (1982-83) in Thailand to identify target groups which would be the focus of UNFPA-funded activities, and to specify communication and services approaches that should be used with certain hard-to-reach groups. A study of illegal induced abortion will be undertaken and a symposium will be held to help formulate a national communications campaign to reduce the incidence of such abortions. In order to expand family planning services, the Programme has initiated pilot projects in selected districts to test the use of institutional incentives to increase the acceptance of vasectomy and the IUD. A new project is being formulated to define and implement new IEC service delivery approaches to reach the population of the Bangkok Metropolis area. A technical meeting to examine current procedures through which national goals are translated into family planning programme targets is planned with the purpose of defining a target setting methodology appropriate to the Thailand situation.

Tunisia: Family Planning and Population Education Programmes

Programmes evaluated: First, second and third country programmes, including family planning, medical training and population education projects

Amount allocated by UNFPA: \$8,554,040 (1974-1982)

Executing agencies: Government, NGO (Royal Tropical Institute, the Netherlands)

Consultative agencies: ILO, FAO, UNESCO, UNICEF, UNDP/UNFPA

National implementing agency: National Office of Family Planning and Population (ONFPF)

Period covered by the evaluation: 1974-1982

Timing of Evaluation Mission: September-October 1982

30. The Mission concluded that much progress has been made in Tunisia in the areas assisted by UNFPA. For example, the Mission was favourably impressed with the comprehensiveness of the FP services, i.e., that the different components - IEC, training, service delivery, and research have been developed; with the expansion of service units and personnel resulting in much increased availability of family planning services; with the large number of IEC activities undertaken and with the extensive network of population education co-ordinators in the school sector. Progress made in increasing contraceptive prevalence and in decreasing fertility and birth rates was found to be particularly noteworthy given the cultural context of the programme.

31. In addition to the availability of external funding, the most important factors contributing to the achievements of the FP programme seem to have been: (a) the consistent political and legislative support, and (b) the semi-autonomous status of the National Office of Family Planning and Population (ONPFP) within the Ministry of Health (MOH) providing a flexible institutional framework within which the FP programme could explore alternative means of extending services and at the same time use MOH facilities and staff.

32. The Mission noted that the utilization and cost-effectiveness of the family planning services could be further increased through careful analyses of the strengths and weaknesses of the different service delivery patterns now existing in Tunisia. It was recommended that the current FP programme objectives/targets as well as strategies be carefully reviewed and that the new ONPFP planning and management efforts begun in 1981-1982, be further strengthened.

33. The in-school population education programme has succeeded in integrating population education into approximately 65 per cent of the academic secondary schools. The Mission recommended that the focus in this sector in the future be put on materials development for all levels of the educational system.

B. Comparative Evaluation: Population education projects executed by the ILO in the Asia and Pacific Region

34. UNFPA has provided funds over the past decade to the ILO or to Governments to undertake population education activities directed at the organized worker sector. The magnitude of UNFPA funding for this sector during the period 1969 to 1985 is about \$23.7 million. About 44 per cent of this assistance (about \$10.6 million) has gone to UNFPA-funded regional and country projects in the Asia and Pacific Region. In order to assess the achievements of country level population education projects in the organized workers sector in the Asia and Pacific Region, 21 projects in the Region were reviewed and project evaluations in Bangladesh, India and Nepal were undertaken during 1982 and 1983. The exercise produced four reports: one with general conclusions and recommendations and one for each of the countries visited.

General Conclusions and Recommendations

35. The approach the ILO has developed to reach industrial workers was found to be sound, though there have been some problems in its implementation due to the particular country situations, the type of technical assistance provided and the deficiencies in project design. Approaches for other groups in the organized sector, for the most part, have not yet been developed. As other target groups, e.g., rural workers and casual workers, may be more difficult to motivate, caution should be taken in applying the approach developed for industrial workers to these other audiences. Concerning technical assistance, cost considerations, available national expertise and the changing needs in technical assistance necessitate a reexamination of the present expert service infrastructure. The Mission also noted that in the Asia and Pacific Region, where there is an awareness of the importance of family planning in most countries, it may no longer be appropriate to have purely promotional IEC projects without linkage to service delivery. Lastly, some deficiencies in project monitoring were noted as well as the need to strengthen the evaluation mechanism in projects.

36. The UNFPA accepted or endorsed all the general recommendations of the Mission, with minor amendments. The UNFPA agreed that more emphasis should be given to other worker groups not yet motivated for family planning and that there should be more collaboration among the substantive divisions of the ILO and the specialized agencies in developing approaches to reach these different groups. It was believed that the ILO should define areas of technical assistance where national expertise could be used, and thus limit its own assistance. An assessment of available national resources in IEC was recommended. In response to deficiencies in project design and appraisal, more involvement of the government in drawing up the project document and the development of appraisal guidelines for UNFPA were recommended. Monitoring and evaluation aspects of the ILO projects were also recommended for strengthening.

37. There has been little time to take specific actions on the general recommendations of the Mission, but the ILO independently has proposed new monitoring and evaluation procedures. Recent ILO-assisted projects submitted to UNFPA for funding have shown some improvement in project design. Furthermore, UNFPA is in the process of developing project appraisal guidelines.

Bangladesh: Population education projects executed by the ILO

Projects evaluated: "Family planning services in industry and Plantation" (BGD/74/PO4); "Population and family welfare motivation and services in the industrial sector" (BGD/80/PO3)

Amount allocated by UNFPA: \$611,646 (1974-1983)

Executing agency: ILO

National implementing agency: Ministry of Labour and Manpower

Period covered by the evaluation: 1976-1982

Timing of Evaluation Mission: November 1982

38. Progress was made through the projects in increasing the awareness of population problems/family planning and in motivating workers and their spouses in the main industrial areas of Bangladesh to practise family planning. During the period under evaluation, almost 100,000 workers were enrolled as new family planning acceptors. The number of couple years of protection provided through the project was about 1.3 per cent of the total provided under the national family planning programme. Considering the magnitude of the national programme in terms of budget and personnel compared to the few project officers and worker-motivators working at the plant level and in the community through the project, this achievement was considered significant by the Mission. However, there is some evidence that regular follow-up of new acceptors who fail to return for more contraceptives is not systematically undertaken by project staff.

39. Regarding the institutionalization of project activities in the Ministry of Labour, while some steps have been taken, e.g. the establishment of a Population and Family Welfare Unit in the Department of Labour and the issuance of orders that family planning promotion should be a part of the activities of all labour department officers, the Mission commented that it may be financially difficult for the Government to take over the personnel costs of the project.

40. The recommendations of the Mission were only noted by UNFPA as most of them were addressed to the Government and the ILO. The evaluation report and the recommendations were taken into account by the Government and the ILO in the recent request to extend project activities until 1985. For example, a new financial incentive scheme for volunteer workers

was proposed; regular project meetings at the national and divisional levels are to take place; key management and labour representatives will become more involved in the project; and more training opportunities in family planning will be made available to Ministry of Labour medical staff.

India: Population education projects executed by the ILO

Projects evaluated: "Intensification of population education activities in the organized sector; Central Bureau of Workers Education (Phase III)" (IND/74/PO7); "Promotion of collaboration between management and workers in developing population education and family welfare activities in the industrial sector (All India Organization of Employers)" (IND/78/PO6); "Promotion of collaboration between management and workers in developing population education and family welfare activities in the industrial sector (Employees Federation of India)" (IND/78/PO7); "Promotion of tripartite collaboration for developing population activities in the organized sector: Textile Labour Association, Ahmedabad Mill Owners' Association, State Government of Gujarat" (IND/79/Pl2)

Amount allocated by UNFPA: \$295,646 (1974-1982)

Executing agency: ILO

National implementing agency: Central Board of Workers' Education (CBWE), All India Organization of Employers, Employers Federation of India, Textile Labour Association

Period covered by the evaluation: 1974-1982

Timing of Evaluation Mission: February 1983

41. The two employers' projects organized and carried out a large number of courses for top-level managers, for middle-level personnel and for worker-motivators. There is evidence that the employers and managers of the larger industrial concerns are becoming more involved in the provision of family planning education and services. The CBWE project has provided education materials and has incorporated them into the 43 regional centres for workers' education. The Textile Labour Association project, which was only beginning training activities at the time of the evaluation, showed evidence that the necessary infrastructure was being established to conduct motivational work. Overall, the four projects have produced a cadre of grass-root level educators who now perform concentrated work at the plant level, but in most cases their activities are confined to restricted project areas.

42. The promotion of labour-management co-operation for family planning through the establishment of in-plant labour/management committees in the employers' projects has not been active, though some project activities have reached both groups. The Textile Labour Association project has begun seminars bringing together management and union officials.

43. Concerning institutionalization, the two employers' projects have established central population cells in their headquarters and regional population units in the project areas. The CBWE project has integrated population concepts into the workers education curriculum modules. The Textile Labour Association has set up a population cell in its workers education section and assurance has been given by the Association that activities of the project would continue after UNFPA funding of the project has ended.

44. With regard to impact on actual acceptance of family planning by the workers and their families, the Mission concluded that, while industrial workers, living mainly in urban areas, are exposed to campaigns on family planning from the media and various agencies, the sustained educational work at the plant level may claim part of the credit for the evident increases in family planning acceptance at the factories involved in the project.

45. Besides pointing out the need for the inclusion in the project documents of indicators for measuring the achievement of objectives and impact, the Mission made specific recommendations concerning improvement of project design and implementation. The Mission felt that the positive experience of institutionalization of projects in India, e.g., employers setting up trust funds for family planning activities, should be studied in view of its replication possibilities for other projects. UNFPA noted the recommendations of the evaluation report, and the findings of the Mission have been used by UNFPA and the ILO in assisting the Government in revising the request for support to other worker-oriented family planning projects.

Nepal: Population education projects executed by the ILO

Projects evaluated: "Population education in the organized sector" (NEP/74/PO1);
"Population education through panchayats, co-operatives and training institutions"
(NEP/77/PO2)

Amount allocated by UNFPA: \$811,746 (1976-1982)

Executing agency: ILO

National implementing agency: Department of Labour, Department of Cooperatives, the Ministry of Panchayat and Local Government

Period covered by the evaluation: 1976-1982

Timing of Evaluation Mission: October-November 1982

46. The IEC activities in the organized sector project were aimed at training a cadre of industrial workers to promote family planning acceptance in their workplace and community. This has been achieved. In the other project more attention was given to raising the awareness of population issues among Government officers nationwide in the Panchayat Ministry and the Cooperative Department. While some emphasis was given to reaching the rural population, particularly in the co-operative sector, but more recently also in the Panchayat sector, effective strategies have not yet been developed to reach the rural areas with a population education programme which may motivate couples to use contraception.

47. There has been little effective co-ordination of the projects with the FP/MCH programme. No effective strategy to link the population education objectives of the projects with the delivery of services has been developed. Even the minor upgrading of equipment and staff in factory clinics, which would have substantially improved services in some urban areas, has not been achieved. While the Mission recognized the difficulties of co-ordinating education and services, it pointed to the obvious problems in a situation in which awareness and education run ahead of the provision of services.

48. Institutionalization of family planning education has occurred to some degree in the Ministries and departments involved. Population units have been set up, but these activities are still on a project basis, and no permanence is assured.

49. UNFPA noted all recommendations of the Mission for the consideration of the Government, the ILO and UNFPA. Two new projects have been approved as a continuation of project NEP/77/PO2 -one for the Panchayat sector and one for the co-operative sector. In the extension of both of these new projects, their approval is contingent on the incorporation of the relevant recommendations of the Evaluation Mission.

C. Intercountry Programmes/Projects:

Regional Advisory Services in Population Education and Communication in Sub-Saharan Africa of the ILO, FAO and UNESCO

Projects evaluated: ILO: "Regional advisory services on labour and population - Africa" (RAF/76/PO2 and RAF/79/Pl0); FAO: "Support for regional advisory services on population education, research and communication - Africa" (INT/76/PO3; GLO/81/Pl4/Pl5/P28 and RAF/75/PO1); UNESCO: "Regional sectoral programmes in population education and communication - Africa" (RAF/74/PO7 and RAF/74/PO8)

Amount allocated by UNFPA: \$7,508,247 (1978-1982)a/

Period covered by the evaluation: 1978-1982

Timing of Evaluation Mission: April-May 1983

a/ Includes some activities in other regions (FAO) or sectors (ILO, UNESCO).

50. In the absence of specific and measurable project objectives as well as uniform, reliable and comparable data, the Mission was unable to determine exactly the quality and quantity of the achievements. Nevertheless, it concluded that the achievements of the projects in population education and communication (PEC) in Sub-Saharan Africa have been relatively limited partially because of inherent difficulties associated with the provision of advisory services in this region, i.e., distances, problems in communications within and between countries, the great cultural, linguistic, social and economic variations but more so because of weaknesses in the formulation and implementation of the regional advisory projects.

51. Such weaknesses were: (a) differing views on the part of the executing agencies and UNFPA about the functions of the regional advisers, which have contributed to a situation in which the advisers have multiple supervisors with sometimes conflicting demands; (b) insufficient planning of the regional advisory teams' activities; and (c) recruitment difficulties leading to vacancies and high turnover as well as to the hiring of advisers who are only partially qualified for the post.

52. The Mission also found that the present arrangement for the delivery of regional PEC advisory services, i.e., separate agency teams and the advisers being located in different countries, impedes the effective delivery of these services, since the advisers cannot function as one team. The current arrangement was also found confusing from the point of view of the countries in the region.

53. The Mission found that there are still some specific needs in PEC in Africa which are intercountry in nature. Therefore the Mission recommended that UNFPA continue funding regional advisory services, but that the tasks to be performed by the advisers be more limited and better defined than in the past and that the arrangements allow the advisers in so far as possible to function as one team.

54. The Mission, therefore, recommended that the functions of the regional PEC advisers in Africa be concentrated on assistance to country project formulation, advice on country project management and systematic participation in country project monitoring and evaluation. Regional PEC advisory services were recommended to be provided as follows: one team for PEC in the non-formal (out-of-school) sector composed of four advisers recruited directly by UNFPA and located in one city, preferably Addis Ababa, Ethiopia, or Nairobi, Kenya, and another team for population education in the formal (in-school) sector composed of two advisers recruited by UNESCO and both located at UNESCO's regional office in Dakar, Senegal.

55. The Mission made nine more recommendations, which dealt with, among others, the role of Headquarters vis-à-vis regional advisers, project formulation, recruitment of regional advisers, follow-up and monitoring/ supervision of regional advisers, other intercountry activities and need for resident country advisers. The agencies concerned did not agree with the suggestion for one UNFPA team in the non-formal sector. UNFPA, however, realizing the benefits of the co-ordinated approach, decided that funding should be provided for one interagency team for non-formal PEC to be located in Nairobi and one UNESCO team in Dakar for formal, in-school education. The leadership of the Nairobi team will rotate between the agencies. In line with the evaluation recommendations, a joint work plan for this team, based on the needs in the countries, is presently being elaborated in collaboration between the agencies and UNFPA.

World Health Organization/Regional Office for Africa Region (AFRO) Programme in Family Health

Projects evaluated: "Family health consultant services" (RAF/71/PO3); "Family health, personnel training and advisory services" (RAF/79/Pl5)

Amount allocated by UNFPA: \$1,181,587

Executing agency: WHO/AFRO

Period covered by the evaluation: 1978-1981

Timing of Evaluation Mission: March-April 1982

56. This evaluation included the assessment of AFRO's performance as executing agency for four French-speaking African countries in addition to the performance of the regional team in Benin. Since the objectives and the planned activities of the team in backstopping UNFPA-supported projects and training were stated in very general terms, it was not possible to assess the progress towards the objectives nor the degree of accomplishment of the activities. However, the Mission concluded that the regional team was only partially dedicated to regional activities. The main factors hindering the programme performance were poor project design (too many functions for the 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).

57. Regarding WHO/AFRO's performance as executing agency for UNFPA-supported country projects, the Mission found the project formulation process unsatisfactory and the degree of WHO/AFRO participation varying. The support to the implementation of projects was uneven: stronger in management of fellowships and supplies and weaker in recruitment of personnel (largely due to nationality quota restrictions and inadequate advertising) and monitoring (largely due to the absence of a focal monitoring point).

58. The Mission made a series of recommendations on how to solve the problems identified. Most of the major recommendations were accepted by UNFPA and led to the convening of a regional WHO/UNFPA workshop where some of the problems were clarified and measures to address them agreed upon. The revised extension for the Regional Programme located in Benin incorporated, among others, the Mission's recommendation on the distribution of the time of the regional team between technical assistance missions in the region and training. However, some of the operational problems still persist.

World Health Organization, Regional Advisory Team for Family Planning, South East Asia Region (SEARO)

Project evaluated: "Regional advisory team for family planning (SEARO)" (RAS/71/P03)

Amount allocated by UNFPA: \$2, 313, 304 (1971-1983)

Executing agency: WHO

Period covered by the evaluation: 1978-1983

Timing of Evaluation Mission: April-May 1983

59. The project objectives were not specific enough to permit an exact measurement of effectiveness or impact of the Team's activities, but the Mission concluded that most activities were adequate and of satisfactory quality. According to UNFPA, "the foremost objective of the Regional Advisory Team is to provide technical backstopping support to UNFPA-financed MCH/FP country programmes". The Mission found that the Team had been underutilized in backstopping UNFPA country programmes, though the member countries of the South East Asia Region expressed their continued needs for Regional Advisory Services in Family Planning, in their responses to a questionnaire, sent to them in the context of the evaluation, as well as in interviews with the Evaluation Mission during country visits.

60. The Mission identified three major causes for the underutilization of the Team: (1) the absence of a regional programming process, based on systematic consultations and the tripartite aspect of technical co-operation, (2) the serious deficiencies in monitoring and (3) the lack of co-ordination between UNFPA and SEARO. Consequently, the Mission recommended an extension of the Team for a limited period only, stressing the need and urgency to undertake certain measures, in order to ensure the improvement of the project's effectiveness and relevance before any further extension is considered.

61. The major measures recommended by the Mission were: (a) the development by UNFPA of a system for regional programming based on a consultative, tripartite process, (b) the conscientious application, with immediate effect, of the newly-issued "UNFPA Monitoring Guidelines for Inter-Country Activities" and (c) the establishment of systematic interactions between UNFPA and SEARO, at the Headquarters, regional and field levels.

62. UNFPA endorsed all the major recommendations of the Mission. WHO/SEARO was informed that UNFPA would allocate funds for the Team for 1984, while further funds would only be allocated after a joint programming exercise has been undertaken in order to "identify needs and corresponding activities to be undertaken by the Regional Team". This exercise is now in progress and a joint SEARO/UNFPA workshop recommended by the Evaluation Mission has been agreed upon by both organizations and will be held in Delhi, India, in February 1984.

