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UNITED NATIONS FUND FOR POPULATION ACTIVITIES

PROPOSED PROJECTS AND PROGRAMMES

Recommendation by the Executive Director

Assistance to the Government of Nicaragua

Extension of the Coverage, and Improvement of the

Quality, of Maternal and Child Health and

Family Welfare Services

Proposed UNFPA assistance:	\$6 000 000
Estimated value of the Government's contribution:	\$47 127 645
Duration:	Four years
Estimated starting date:	January 1985
Executing agencies:	World Health Organization/Pan American Health Organization (WHO/PAHO) United Nations Fund for Population Activities (UNFPA)
Government co-operating agency:	Ministry of Health

NICARAGUADemographic Facts

Population by sex		Population density (/sq. km.) .....	25
Total (in 1000) .....	3,272	Average annual change	
Male (in 1000) .....	1,636	Population increase (in 1000) .....	100
Female (in 1000) .....	1,636	Births (in 1000) .....	134
Sex ratio (/ 100 females) .....	100.0	Deaths (in 1000) .....	29
Population in year 2000 (in 1000) .....	5,251	Net migration (in 1000) .....	-3
Population by age group		Rate of annual change	
Age 0-14 (in 1000) .....	1,530	Population change total (%).....	3.32
Age 15-64 (in 1000) .....	1,660	Urban (%) .....	4.7
Age 65+ (in 1000) .....	82	Rural (%) .....	1.5
Age 0-14 (percentage) .....	46.7	Crude birth rate (/ 1000) .....	44.2
Age 15-64 (percentage) .....	50.7	Crude death rate (/ 1000) .....	9.7
Age 65+ (percentage) .....	2.5	Natural increase (/ 1000) .....	34.5
Age indicators		Net migration (/ 1000) .....	-1.3
Median age .....	16.5	Fertility and mortality	
Dependency: age 0-14 .....	92.1	Total fertility rate .....	5.94
Dependency: age 65+ .....	5.0	Completed family size .....	N/A
Dependency: total .....	97.1	Gross reproduction rate .....	2.90
Youth: 15-24 (in 1000) .....	656	Net reproduction rate .....	2.43
Women: 15-49 (in 1000) .....	735	General fertility rate (/ 1000) .....	198
Urban-rural population		Child-woman ratio .....	840
Urban population (in 1000) .....	1,944	Infant mortality rate (/ 1000) .....	85
Rural population (in 1000) .....	1,328	Life expectancy: male .....	58.7
Per cent urban (%) .....	59.41	Life expectancy: female .....	61.0
Per cent rural (%) .....	40.59	Life expectancy: total .....	59.8
Population density (/ hectare of arable land) .....	0.85	GNP per capita (U.S. dollars, 1982) .....	920

Sources: Area and population density on arable land: derived from Food and Agriculture Organization, FAO Production Yearbook 1980; Gross national product per capita: World Bank, World Development Report 1984; Completed family size: Noreen Goldman and John Hobcraft, "Birth Histories", in Comparative Studies, No. 17 (International Statistical Institute: Voorburg), 1982; all other data: Population Division, United Nations Department of International Economic and Social Affairs, Demographic Indicators by Countries as Assessed in 1982 (computer printout, 1 November 1983) - "population by sex" through "population density (/sq. km.)" as of 1985, and "average annual change" through "life expectancy: total" as of 1980-1985.

## I. SUMMARY

1. UNFPA proposes to provide assistance to the Government of Nicaragua in the amount of \$6,000,000 over a four-year period, 1985 to 1988, to improve the quality, and extend the coverage, of maternal and child health and family planning (MCH/FP) services throughout the country. The achievement of these dual objectives is expected to substantially decrease infant and maternal morbidity and mortality rates and contribute to a modest decline in the total fertility rate. Improving the quality and extending the coverage of MCH/FP services is to be accomplished through the training of medical, paramedical and volunteer health personnel; the provision of MCH/FP equipment and supplies, including contraceptives, throughout the Unified National Health System; improved programme management; and education and communication activities at the grass roots level designed to promote community participation in the Government's MCH/FP programme.

2. This project, as in all UNFPA-assisted projects and programmes, will be undertaken in accordance with the principles and objectives of the World Population Plan of Action, that is, population policies should be consistent with internationally and nationally recognized human rights of individual freedom, justice and the survival of national, regional and minority groups (paragraph 14 (d)), respect for human life is basic to all human societies (paragraph 14 (e)), and all couples and individuals have the 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 (paragraph 14 (f)).

## II. BACKGROUND

3. Nicaragua, a largely tropical country, covers 148,000 square kilometres extending from the Atlantic to the Pacific Ocean. Its 1985 population is estimated by the United Nations to be 3.3 million. Population density is 25 persons per square kilometre, making Nicaragua the least densely populated country in Central America. On land suitable for food production, the density is currently estimated to be 0.9 persons per hectare. The annual rate of population growth is approximately 3.3 per cent--the highest in Central America.

4. According to the United Nations Population Division, the Government considers current rates of fertility and natural increase satisfactory. Its principal population concern is with the high levels of morbidity and mortality, and this has contributed to its decision to assign priority to the expansion of health services. Family planning services are also provided by the Unified National Health System, established in 1979 under the direction of the Ministry of Health to manage health services throughout the country. Moreover, the Government supports the activities of private organizations in this area. The level of international migration is considered to be satisfactory and not significant, but reduction in the level of emigration is sought. The Government also seeks to improve the geographical distribution of the population by decelerating the movement of migrants from rural to major metropolitan areas.

5. In a statement outlining Nicaragua's views on population, for the benefit of those attending the International Conference on Population, Daniel Ortega Saavedra, then Co-ordinator of the Governing Junta of National Reconstruction, said, "We shall surely have to call for an end to such [arms race] investments so that these resources can be used to help meet man's basic needs and guarantee his basic rights with regard to food, health, housing and employment. This right of people is indissolubly linked with the struggle for the maintenance of peace which would enable them to develop fully in dignity and independence, on the basis of total respect for the rights of each people to freely choose its own destiny".
6. From 1971 through 1984, UNFPA made available approximately \$4,100,000 in population assistance to the Government of Nicaragua, including about \$1,775,000 in multi-bilateral funds provided by the Governments of Finland, Italy and Norway.
7. From 1971 through 1979, UNFPA provided \$603,845 to the following projects: support for the publication of the 1971 census results (\$41,622); technical assistance in civil registration and statistics (\$60,816); and training in demography (\$86,133). Other UNFPA-supported projects in this period included the first national demographic survey (\$237,534); improvement of social and demographic statistics (\$25,920); and emergency preparatory assistance to the initial phase of the maternal and child health and family planning project described below (\$151,820). (These dollar amounts represent cumulative expenditures.)
8. On the basis of the findings and recommendations of the Needs Assessment Mission that visited Nicaragua in 1979, the Governing Council, at its twenty-seventh session in June 1980, approved a \$4 million comprehensive programme for the four-year period 1980 to 1983, with an estimated government contribution of \$18.8 million. The programme consisted of projects in the areas of maternal and child health and family planning, population education, basic data collection and population dynamics. From 1980 through 1984, about \$3.6 million of the \$4 million had either been expended (up to the end of 1983) or allocated (in 1984), while the remaining balance of \$0.4 million had been allocated for projects in 1985 in the areas of basic data collection, population in development and population education. By the end of 1985, all allocations authorized by the Governing Council in 1980 will have been made. The new project, herewith submitted, began in January 1985. Allocations in 1985 would thus be made concurrently under both Governing Council approvals.
9. Completed projects included in the 1980 programme are: a UNFPA-executed demographic training course (\$25,092); a United Nations-executed project which assisted with the pre-enumeration stages of the currently suspended population and housing census (\$568,161, including \$89,523 in multi-bilateral funds from the Government of Finland); and a UNESCO-executed population education project (\$433,986). The programme currently consists of: a United Nations-executed national demographic survey (\$238,146); an ILO-executed project to improve the Government's capability to incorporate demographic variables in the planning process (\$222,450); a follow-up project executed by UNESCO in the area of population education and communication (\$280,400); a Government-executed project consisting of a series of sex education seminars for adolescents (\$21,150); and the WHO/PAHO and UNFPA-executed project aimed at expanding and improving MCH/FP

services (\$2,298,897, including \$1,687,283 in multi-bilateral support from the Governments of Finland, Italy and Norway).

10. Project progress reports and reports from annual tripartite meetings indicate that the MCH/FP project, which absorbed over 65 per cent of allocations from 1980 through 1984, has recorded significant achievements towards its goal of expanding the coverage and improving the quality of MCH/FP services throughout the country, inter alia:

(a) Statistics on prenatal care reveal that increasingly services are being provided earlier in the pregnancy: from 1981 to 1984 the percentage of women receiving initial treatment in the first three months of their pregnancy rose from 27 to 34 per cent. Expansion was also recorded in the treatment of underweight and malnourished infants. Likewise, the total number of visits provided by doctors has increased in recent years;

(b) In terms of the family planning component, the number of family planning services in 1984 represented a six-fold increase over 1981 figures. Family planning coverage is still low, however, with about 10 per cent of women of childbearing age using these services. In this regard, it is worth noting that by the end of the extension phase of the project (i.e., 1988) this coverage is expected to expand to 23 per cent of women of childbearing age, due to training of professional and paramedical staff in family planning, education programmes conducted at the community level and the provision of significant quantities of contraceptives;

(c) Considerable emphasis has also been placed on training national personnel in various aspects of the MCH/FP programme. For example, in 1984 a total of 849 medical and paramedical personnel participated in courses and workshops. These included an 11-month course on MCH/FP for 700 auxiliary nurses, a 9-month course on health statistics for 99 technicians, a risk approach workshop for 25 health personnel and an 11-month course for 8 cytologists. In addition, 28 man-months of fellowships were granted in 1984 in such areas as MCH/FP programme administration, risk approach research, sex education and family planning.

(d) Significant advances were also recorded in the control of communicable diseases, largely as a result of the Government's massive immunization campaigns that have been supported, in part, by vaccines provided by UNFPA. For instance, from 1980 to 1983, reported cases of smallpox declined from 3,784 to 102, whooping cough from 2,469 to 90 and no polio cases have been reported since 1981;

(e) In the area of operational research, survey data from a field study in one health region have been analysed to identify risk factors for women of childbearing age and children under the age of six. The risk approach methodology has been subsequently applied in studies in four other health regions and two special zones. The results of this study are being used to strengthen the system of referral and counter-referral among the primary, secondary and tertiary health levels, to prepare revised MCH/FP norms and to train medical and paramedical personnel in identifying individuals and sub-groups at high risk of falling ill or dying. It is also expected that the information gathered from the study will be

used in restructuring the Government's MCH/FP programme.

11. While UNFPA is the major source of multilateral population assistance to the Government of Nicaragua, external support in the field of maternal and child health and family planning has also been provided by several international and non-governmental organizations. The World Health Organization/Pan American Health Organization (WHO/PAHO) and UNICEF have developed formal co-ordination mechanisms and are jointly carrying out activities in such areas as control of diarrhoea, immunizations, breast-feeding, infant growth monitoring, oral rehydration therapy and operational research studies. The Latin America Perinatal Centre has assisted in processing data from the risk approach study and in conducting other research tasks. Other organizations which have supplied resources, training or expertise in the population field in recent years include the Institute for Nutrition for Central America and Panama (INCAP), the Inter-American Development Bank (IDB) and the International Planned Parenthood Federation (IPPF). The Nicaraguan Demographic Association (ADN), an IPPF affiliate, is involved in such areas as MCH/FP, women's development and community development.

### III. THE PROJECT

12. The project has as its major objectives: (1) to expand the coverage of family planning services on a nation-wide basis; (2) to expand the coverage and improve the quality of MCH/FP services; (3) to enhance administrative, supervisory and evaluative aspects of the MCH/FP programme, which includes improving the referral and counter-referral system among the primary, secondary and tertiary levels of the Unified National Health System; (4) to promote active community participation in the MCH/FP programme and in developing good health care habits and responsible parenthood; and (5) to implement the Government's policy of providing MCH/FP services throughout the country on the basis of the risk approach strategy in order to rationalize health resources and improve programme efficiency and effectiveness.

13. In accordance with these objectives, specific project performance goals have been established, including contraceptive coverage of 23 per cent of women of childbearing age by 1988 as compared to the current level of 10 per cent. If this target is reached, it is estimated that the total fertility rate will decline between 1985 and 1990 from 5.9 to 5.5. Plans also call for the yearly training of 300 medical and paramedical personnel in family planning techniques; 180 doctors and nurses on selected gynaecological, obstetric and neonatology topics; 20 cytologists; 200 nursing auxiliaries; 500 medical and 300 nursing students in MCH/FP; and a total of 2,070 educators, representatives of community organizations and health volunteers in selected MCH/FP topics. In addition, 280 professional and paraprofessional staff will participate in two annual meetings to analyze the progress of the project. The work plan also calls for the distribution of significant quantities of MCH/FP equipment and supplies to 100 health centres and 26 hospitals located throughout the country and for the provision of basic health kits to 800 nursing auxiliaries who administer MCH/FP services at the primary level.

14. In order to achieve these objectives, a work plan has been formulated. Major activities include: (1) training in MCH/FP for professional and paraprofessional staff and volunteer health personnel at the national and international levels; (2) phased introduction of MCH/FP equipment and supplies into existing health establishments and new units that will be constructed during the next four years on the basis of the primary health care and risk approach strategies; (3) earlier detection and treatment of uterine and breast cancer as part of family planning consultations; (4) improved programme supervision and evaluation, including a UNFPA sponsored in-depth evaluation of the programme in 1987; (5) strengthening the MCH/FP information system; (6) community-based education programmes; (7) improved information materials for both formal training of medical and paramedical staff in MCH/FP, as well as for the communication programme at the community level; and (8) continued application of the risk approach study.

15. The Government counterpart contribution, totalling \$47,127,645, includes the payment of staff salaries and operating costs, the construction of 26 health posts in priority areas, the remodelling and enlargement of primary and secondary health units and the expansion of environmental health projects.

16. WHO/PAHO would be the primary executing agency for this project, with UNFPA continuing to procure contraceptive supplies and vehicles. The UNFPA contribution of \$6,000,000 would provide for a resident international adviser, short-term consultants (24.5 m/m) and local personnel posts for the first three years of the project. Sub-contracts are also envisioned with the National Commission for Risk Research and with the Department of Popular Health Education and Communication of the Ministry of Health. Other components that would be funded include training activities for professional and paramedical staff and voluntary personnel working at all levels of the health system. Basic maternal and child health and family planning equipment and supplies (including contraceptives) would also be provided to improve existing MCH/FP services, permit an expansion of these services and facilitate project supervision. In addition, data processing equipment to upgrade the MCH/FP information system and audio-visual equipment for use in training and communication activities would be supplied.

17. The proposed UNFPA contribution, by components, subject to the availability of funds, is as follows:

	\$
Consultants	350 640
Local personnel	63 000
Sub-contracts	280 000
Training	1 373 936
Equipment	3 783 589
Miscellaneous	<u>148 835</u>
TOTAL	6 000 000 =====

18. The Executive Director expects that about \$4.8 million will be made available for this project from multi-bilateral sources so that the maximum amount required from UNFPA's regular resources would be about \$1.2 million.

19. The status of project development, as of June 1985, is expected to be as follows:

	\$
Approved and allocated	896 445
Approved for allocation pending Governing Council decision	<u>5 103 555</u>
TOTAL	6 000 000 =====

#### IV. RECOMMENDATION

20. The Executive Director recommends that the Governing Council:

(a) Approve the project in Nicaragua in the amount of \$6,000,000 over a four-year period, 1985 to 1988; and

(b) Authorize the Executive Director to make the appropriate arrangements with the Government of Nicaragua and the World Health Organization/Pan American Health Organization.

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