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UNITED NATIONS FUND FOR POPULATION ACTIVITIES

PROPOSED PROJECTS AND PROGRAMMES

Recommendation by the Executive Director

Assistance to the Government of Bangladesh

Support of a comprehensive population programme

Proposed UNFPA assistance:	\$20 000 000
Estimated value of the Government's contribution:	To be determined
Duration:	Five years
Estimated starting date:	July 1985
Executing agencies:	Government of Bangladesh Mohammadpur Fertility Services and Training Centre (MFSTC) United Nations Children's Fund (UNICEF) United Nations Development Programme Office of Projects Execution (UNDP/OPE) United Nations Fund for Population Activities (UNFPA) The Population Council
Government co-ordinating agency:	Ministry of Health and Population Control

BANGLADESH

Demographic Facts

Population by sex		Population density (/sq. km.)	702
Total (in 1000)	101,147	Average annual change	
Male (in 1000)	52,137	Population increase (in 1000)	2,585
Female (in 1000)	49,010	Births (in 1000)	4,240
Sex ratio (/ 100 females)	106.4	Deaths (in 1000)	1,654
Population in year 2000 (in 1000)	145,800	Net migration (in 1000)	0
Population by age group		Rate of annual change	
Age 0-14 (in 1000)	46,257	Population change total (%)	2.74
Age 15-64 (in 1000)	51,770	Urban (%)	5.4
Age 65+ (in 1000)	3,119	Rural (%)	2.4
Age 0-14 (percentage)	45.7	Crude birth rate (/ 1000)	44.8
Age 15-64 (percentage)	51.2	Crude death rate (/ 1000)	17.5
Age 65+ (percentage)	3.1	Natural increase (/ 1000)	27.3
Age indicators		Net migration (/ 1000)	0.0
Median age	17.0	Fertility and mortality	
Dependency: age 0-14	89.4	Total fertility rate	6.15
Dependency: age 65+	6.0	Completed family size	7.06
Dependency: total	95.4	Gross reproduction rate	3.00
Youth: 15-24 (in 1000)	19,989	Net reproduction rate	2.11
Women: 15-49 (in 1000)	21,938	General fertility rate (/ 1000)	209
Urban-rural population		Child-woman ratio	866
Urban population (in 1000)	12,008	Infant mortality rate (/ 1000)	133
Rural population (in 1000)	89,139	Life expectancy: male	48.3
Per cent urban (%)	11.87	Life expectancy: female	47.3
Per cent rural (%)	88.13	Life expectancy: total	47.8
Population density (/ hectare of arable land)	8.12	GNP per capita (U.S. dollars, 1982)	140

Sources: Area and population density on arable land: derived from Food and Agriculture Organization, FAO Production Yearbook 1980; Gross 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. On the basis of the findings of the Needs Assessment Mission that visited Bangladesh in March 1984 and on the recommendations of the project formulation exercise undertaken in October 1984, UNFPA proposes to provide assistance in the amount of \$20 million in support of the Government's population programme during the five-year period, from July 1985 through June 1990. This period coincides with the country's third five-year development plan. Bangladesh is a priority country for UNFPA assistance.
2. The Needs Assessment Mission emphasized the importance of continuing external assistance to the Government's population programme to meet the demographic targets set for the 1985-1990 period. The Mission placed particular emphasis on the issue of management of the population programme, including the integration of maternal and child health and family planning (MCH/FP).
3. The proposed programme would be the third UNFPA programme in Bangladesh. Under the first programme (1974-1979), a total of \$10 million was allocated, primarily in support of family planning activities, preparations for the 1981 census and population education and communication activities.
4. The second country programme, approved by the Governing Council in June 1979 for the five-year period 1980-1984, was for the amount of \$25 million, to be supplemented by up to \$25 million from multi-bilateral funding. However, beginning in 1981, due to financial constraints, UNFPA, with the concurrence of the Government, started to make substantial reductions in the budget allocations to the programme. Several project activities had to be extended. Expenditures for the years 1980-1983 totalled \$16.4 million and allocations in 1984 amounted to \$4.2 million. UNFPA intended to allocate \$4.4 million in 1985 to the second country programme, and despite the reductions foreseen in the "Review and reassessment of UNFPA programme for the period 1982-1985" (DP/1982/28) and approved by the Governing Council in its decision 82/20, I, paragraph 2, the second country programme would have been allocated in full by the end of 1985. However, the Government requested that the third country programme start in July 1985 in order to coincide with the third five-year development plan. Thus, the amounts unallocated or unspent at the end of June 1985 will be subsumed under the third country programme. In addition, \$6 million of multi-bilateral funding was mobilized through contributions by the Governments of Denmark and the Netherlands during this period.
5. The second country programme concentrated on strengthening the Government's maternal and child health and family planning programme by supplying contraceptives and equipment, supporting training institutions, meeting local costs of field-workers and providing technical assistance. Other areas of UNFPA support during this period included population education and communication, activities related to the 1981 census and population planning and policy.

6. Under the proposed third programme, UNFPA assistance would, in accordance with Governing Council guidelines (see decision 81/7, I, para. 3) be concentrated in the area of MCH/FP, which is the priority area of the Bangladesh population programme.

7. The proposed programme would contain projects relating to population policy and population development planning; MCH/FP services and training; logistics and supply; advisory support to the Ministry of Health and Population Control; and operations research analysis. It would also include projects in population education in the school system and information, education and communication (IEC) activities aimed at the general public. In large part, these activities are a continuation of projects carried out during the second UNFPA programme in Bangladesh, though emphasis would be placed on increasing the efficiency of the service delivery network through improvements in the logistics system at the field level, and through a more focused population information and education strategy.

8. UNFPA assistance would support a limited number of international experts, expendable and non-expendable equipment and training, both in-country and abroad. Local salary costs would be met partially by UNFPA, with the Government gradually taking over a larger share of these costs each year.

9. All projects under the proposed programme, as in all UNFPA-assisted 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

Demographic and social indicators

10. Population pressures in Bangladesh are among the most acute in the world. According to United Nations estimates, the mid-year 1985 population is estimated at 101.1 million, with a population density at 702 persons per square kilometre, the highest in the world of any nation not a city-state. The population density per square kilometre of cultivable land is 1,123 persons. The annual rate of population increase from 1980-1985 is estimated at over 2.7 per cent. Nearly 90 per cent of the population lives in the rural areas. Net migration is low and the population distribution within Bangladesh is considered satisfactory by the Government.

11. In recent decades, there has been a marked decrease in per capita caloric intake and sharply rising levels of landlessness among the rural population. Emphasis in current development plans is placed on combatting problems of rural unemployment, on increasing food production and on further developing the country's

industrial capacity.

Government policies and plans 1985-1990

12. In a statement outlining Bangladesh's views on population, for the benefit of those attending the International Conference on Population, President Hussain Mohammad Ershad said, "Bangladesh has taken a number of significant steps including announcement of the national Population Policy in 1976 and identification of rapid population growth as the nation's number one problem and its principal obstacle to socio-economic development. The Government of Bangladesh has firmly committed itself to slowing the rate of population increase for accelerating the pace of national development....In a setting such as Bangladesh's with its high population growth, mere provision of family planning services may not suffice to reduce the rate of population increase to an extent which is consistent with its national resources. Structural changes to fundamental socio-economic conditions will be required and we must look to increased levels of community participation to achieve this. Since the Bucharest Conference a number of countries in Asia have succeeded in bringing about significant reduction in population growth rates. For many developing countries including Bangladesh, the "battle" still remains one of life and death for national survival".

13. The Government of Bangladesh has consistently identified rapid population growth as one of the greatest obstacles to the country's socio-economic development and has given its full support to programmes designed to control the rate of growth. Population policy is determined by the National Council on Population Control, headed by the President/Chief Martial Law Administrator. The Council is assisted by an Executive Committee chaired by the Minister of Health and Population Control.

14. Since the formulation of the first national population policy in 1976, a widespread network for the delivery of family planning services has been established, based on the activity of field-workers at the community level supported by paramedics and physicians operating from stationary facilities. About 1,000 health and family welfare centres, each serving a population of 20,000, and 350 larger health complexes, each serving a population of 200,000, are operational. Some 30,000 health and family planning workers have been trained and posted in the field. A full range of contraceptive services is widely available on a voluntary basis and acceptors of permanent and semi-permanent family planning methods are reimbursed transport costs and loss in wages. Through the Social Marketing Project, selected contraceptives are available at approximately 100,000 retail outlets. The Government sponsors multi-media campaigns in favour of family planning, and population education is incorporated into the primary and secondary school curricula.

15. Non-governmental organizations play an important role in the population programme, providing, according to some estimates, 40 per cent of all contraceptive protection. The Government has agreed to allow these organizations to extend their activities further.

16. Increasing acceptance of family planning methods has been shown by the rise

in the contraceptive prevalence rate from 12 per cent of couples at risk in 1979 to an estimated 25 per cent in 1984. The utilization of modern birth control methods (sterilization, pills, condoms, intrauterine devices (IUDs), etc.) has, during this time, risen faster than that of traditional methods (withdrawal, rhythm, abstinence, etc.), with approximately 17 per cent of all eligible couples using modern methods in 1984 compared to 9 per cent in 1979. Of the modern methods, male and female sterilizations, IUDs, condoms and pills are the most widely used. The total number of male sterilizations has recently surpassed that of female sterilizations.

17. The Government's demographic objective under the third five-year plan (1985-1990) is to achieve a total fertility rate of 4.1 by the end of the plan period, with a view to bringing about a net reproduction rate of 1 by the year 2000. In order to achieve this, it is planned to increase the contraceptive prevalence rate to 40 per cent of all eligible couples by 1990.

18. To meet these targets, the Government intends to give priority during the third plan period to improving the extent and quality of the service delivery structure, to continuing mass media campaigns of population education and motivation, to a closer integration of population programmes with other primary health care components and to socio-economic measures, including improving the status of women, designed to contribute to a reduction in the fertility rate. The minimum legal age of marriage has recently been raised to 18 for men and 16 for women.

19. According to government estimates, the cost of the population programme during the period 1985-1990 will be approximately \$560 million, of which 80 per cent is expected to be provided in the form of foreign assistance from bilateral and multilateral donors.

III. REVIEW OF THE PROGRAMME 1980-1985

20. The second UNFPA country programme was approved by the Governing Council at its twenty-sixth session in June 1979 in the amount of \$25 million, which was to have been supplemented by up to \$25 million from multi-bilateral sources for the five-year period 1980-1984. The programme was subsequently reviewed and extended to June 1985. Under the second country programme, activities in the following sectors were supported: maternal and child health and family planning, information, education and communication, basic data collection and formulation and evaluation of population policies and programmes. The majority of projects were executed directly by the Government.

Maternal and child health and family planning

21. Support to the Government's maternal and child health and family planning (MCH/FP) programme. The largest component of UNFPA assistance in Bangladesh has been aimed at strengthening the capacity of the Government's MCH/FP service delivery network by improving the logistics system and extending the service delivery system. In the logistics area, UNFPA has made available to the Government

contraceptive supplies, medical equipment, surgical supplies, vehicles, warehousing equipment and technical advisory services. These have led to substantial improvements in the distribution of supplies to field areas. Shortages still exist, but the system has coped effectively with increases in the demands placed on it following the rise in contraceptive prevalence. Storage conditions at the central and regional warehouses and procurement procedures have been improved and steps are being taken to improve the delivery of supplies at the community level.

22. In the MCH/FP field, UNFPA has provided technical advisory services to the Population Control Directorate to assist the Government to bring about a closer integration between the efforts of the population programme and those of the primary health care programme. UNFPA has, with multi-bilateral funds from the Government of Denmark, supported the salaries of 2,000 field-workers. The total cost of the project was \$16 million; it was executed by the Government and UNICEF.

23. Population manpower development. UNFPA has provided technical advisory services, equipment, fellowships and local salary support to the National Institute for Population Research and Training (NIPORT). NIPORT is the most important training institution in the population programme and is responsible for providing management and technical training directly to various categories of family planning personnel, for co-ordinating the activities of the regional training centres and for overseeing training of field-workers and of traditional birth attendants. During the course of the project, four overseas fellowships have been provided to strengthen NIPORT. In 1983, a mid-term evaluation of the project was conducted by UNFPA and the Western Consortium for the Health Professions. The Evaluation Mission concluded that NIPORT had been significantly strengthened as an institution and recommended that the remaining provision of long-term technical advisory services be converted to more specialized short-term consultancies. The Mission further recommended that the Government consider granting greater autonomy to NIPORT. Circumstances within NIPORT made it possible to implement these recommendations only partially. UNFPA provided \$2.3 million for the project, which was executed by the Government and the Western Consortium for the Health Professions.

24. Family Welfare Visitors Training Institutes. Through multi-bilateral funds provided by the Government of the Netherlands, UNFPA provided assistance to the Family Welfare Visitor Training Institutes, which are responsible for training female health workers in MCH/FP services at the community level. During the 1980-1985 period, 4,000 family welfare visitors (FWVs) were trained. UNFPA support covered the stipends of the trainees and the salaries of the Institute's faculty and support staff. UNFPA also provided technical assistance in the development of the FWV training curriculum. The UNFPA contribution for the government-executed project was \$1.1 million.

25. Health manpower development. UNFPA has also provided technical support and a limited amount of equipment to the National Institute for Social and Preventive Medicine (NIPSOM), in particular to strengthen its MCH/FP and health education programmes. Training has been provided to physicians active in these fields, while the training skills of the NIPSOM faculty have been upgraded. The project's mid-term evaluation by UNFPA and the Western Consortium for the Health Professions

in 1983 found the project to be successful and recommended the continuation of technical assistance to NIPSOM. It also recommended, however, that the assistance be focused increasingly on strengthening the institution as a whole, rather than the MCH/FP department alone. These recommendations were subsequently implemented. The Government and the Western Consortium for the Health Professions executed this project, for which UNFPA allocated \$500,000.

26. Training of medical assistants. UNFPA has provided partial support to the Medical Assistants Training Schools, which are responsible for training the male counterparts to the family welfare visitors. The UNFPA contribution of \$100,000 covered salary support and stipends and equipment and furniture for a selected number of schools. The project was directly executed by the Government.

27. Matlab MCH/FP research project. UNFPA has assisted the International Centre for Diarrhoeal Disease Research, Bangladesh (ICDDR, B) in its project to investigate ways of improving the existing MCH/FP service delivery structure. In the project area where new management and training techniques have been introduced by ICDDR, B on an experimental basis, the contraceptive prevalence rate has risen to almost twice that of the national average. UNFPA has supported ICDDR, B, the executing agency, in the amount of \$300,000 to cover local personnel costs and equipment.

Population information, education and communication

28. The Government has organized a multi-media campaign to promote family planning and to bring information to the public on different family planning methods and their availability. Programmes have also been developed that are targetted at specific groups in order to increase acceptance of family planning services. UNFPA support to these activities is described below.

29. Information, education and motivation. UNFPA has provided assistance to establish and operate both the Information, Education and Motivation (IEM) Unit of the Population Control Directorate and the Population Information Service (PIS). The IEM Unit has overall responsibility for developing and implementing information campaigns to support family planning programmes, while the PIS acts as a clearing-house for population-related information, to be used by planners, policy-makers and researchers. UNFPA has provided equipment required for materials production, audio-visual vans used for screening films in village areas, funds for overseas and local training of materials development and communication specialists, books for the PIS library and salary support for the IEM and PIS staff. Surveys show that 95 per cent of the population of Bangladesh now has some knowledge of family planning. Technical support was given to the IEM Unit by UNDP/Asia and Pacific Programme for Development Training and Communication Planning. UNFPA allocated \$1.1 million to this project, which was executed by the Government.

30. Population education through the school system. With UNFPA assistance, the Government has introduced material on population into the school curricula from the first grade through secondary school. This material seeks to demonstrate the socio-economic consequences of excessive population growth and to introduce students to the concept of family planning. This process has also been extended to

the curricula of the religious schools and teacher-training institutions. The UNFPA-supported project has provided \$1.2 million to cover training for curriculum specialists to develop population materials, training workshops for teachers and equipment for materials production. Under the project, population education materials for use in curricula at the tertiary educational level have been prepared. A mid-term evaluation of the project was made in 1982 and the continuation of the project was recommended. UNESCO provided technical support to the project, which was executed by the Government.

31. Population motivation in the agriculture sector. As part of the Government's multisectoral population programme, UNFPA has provided assistance in mobilizing the resources of the agricultural extension workers for population education and motivation work. The training curricula of these extension workers were expanded to include relevant material on population, and the Ministry of Agriculture's institutional capacity with regard to population education was strengthened. Since 1982, the Ministry has functioned in this area with no outside technical assistance. An evaluation of the population-related activities of agricultural extension workers was conducted in 1983 by a local consulting group. The evaluation concluded that the extension workers were the principal source of family planning information among the target farmer population, and it found that the project had achieved 58 per cent of its target in terms of the number of information/motivational contacts. UNFPA support in the amount of \$200,000 consisted of assistance in revising the training curricula of the extension agents, in organizing training workshops, in materials development and in salary support of staff in the project office. The project, which was executed by the Government, was scheduled to terminate in June 1983. On the basis of the Evaluation Mission's findings, and at the Government's request, the project was extended to June 1985.

32. Population education in the labour sector. In order to extend the scope of the national population programme as widely as possible, the Government has established population projects in a number of sectoral ministries, targetted at specific population groups. With UNFPA assistance, two projects have been established in the Ministry of Labour and Manpower with a view to providing population education and family planning services to particular population groups, namely, workers in the tea gardens of Sylhet and workers at selected major industrial sites. The total target population amounted to 1.5 million persons. The project inputs included the development of appropriate educational materials, training of officials from the Industrial Relations Institutes, salaries of motivational workers, organization of motivational meetings and provision of family planning services. A UNFPA-sponsored independent evaluation of these projects was undertaken in 1982, which recommended that emphasis be placed on institutionalizing the project's activities within the Ministry of Labour and Manpower. Although the projects were initially due to be completed in December 1983, they were extended to June 1985. UNFPA allocated a total of \$700,000 to the project, which was executed by the International Labour Organisation.

Basic data collection

33. Support to the 1981 census. UNFPA assisted the Government with the preparation and implementation of the 1981 census, widely regarded as the first

accurate enumeration of the population since 1961. UNFPA support took the form of vehicles, data processing equipment, local salaries for census enumerators, technical advisory services and stationery supplies. A preliminary census report was published in 1982 and the census results were formally made public in 1984. A total of \$2.9 million was allocated to this project, which was executed by the Government and the United Nations Department of Technical Co-operation for Development.

Formulation and evaluation of population policies

34. Population and development planning. In recognizing the important relationships between various socio-economic variables and demographic growth, the Government of Bangladesh has, with UNFPA support, established a Population and Development Planning Unit, connected with the Planning Commission, to investigate these relationships and to bring them to the attention of planners and policy-makers. The Unit has produced several series of research review and policy papers which have been widely circulated and has also sponsored a number of seminars and meetings. Among the areas investigated are community participation in population programmes; impact of rural electrification on fertility; female labour force participation and fertility behaviour; relationship of landholding and tenure type to fertility; mortality and fertility trends; fertility differentials; educational policy and population programmes; impact of women's programmes on fertility; and urbanization trends and fertility impact. The project has been allocated \$600,000 and was executed by the Government and The Population Council.

IV. PROPOSED PROGRAMME 1985-1990

35. The stated objective of the Government in the population field for the 1985-1990 period is to reduce in the total fertility rate from an estimated 6.15 in 1985 to 4.1 in 1990. This will require an increase in the contraceptive prevalence rate from 25 per cent to 40 per cent of all eligible couples. In order to meet these objectives, the Government intends to improve the extent and quality of the service delivery structure, to continue mass media campaigns of population education and motivation, to closely integrate population programmes with their primary health care components and to introduce socio-economic measures, including improving the status of women, designed to contribute to a reduction in the fertility rate. The cost of the programme over the next five years is estimated to be on the order of \$560 million, of which approximately 80 per cent will be provided by external donors. It is expected that other major sources of assistances to the Government's population programme would include: the World Bank, in collaboration with six donor Governments, with assistance in the amount of approximately \$50 million per year over the five-year period; and the United States Agency for International Development (USAID), with approximately \$30 million per year.

36. In March 1984, UNFPA sent a Needs Assessment Mission to Bangladesh to review the national population programme and to identify needs for future assistance. The Mission recommended that equal emphasis be placed on MCH and family planning and that a consultative panel on MCH/FP be established to provide a continuing dialogue

between the Government and donors. The Mission reviewed the existing incentive system and recommended that, if maintained, the system be extended to cover all family planning methods as well as MCH activities. The Mission also recommended that improved training be given to health service providers and that the present logistics system, particularly the reporting/inventory/placement of orders, be strengthened. With regard to information, education and motivation activities, the Mission felt that a co-ordinating committee should be created and that further support should be given to population education and motivation programmes. It was also recommended that a body be established to co-ordinate demographic and population-related research within the Government. Furthermore, the Mission recommended that a coherent women's programme be developed. On the basis of the recommendations of the Needs Assessment Mission, the proposed programme has been prepared by the Government of Bangladesh and UNFPA, in close consultation with other donor agencies.

37. The particular component inputs of UNFPA to the various areas of the national population programme have been drawn up keeping in mind (a) the expertise of UNFPA in particular programme sectors based on long involvement in those sectors in Bangladesh; (b) the operational advantages enjoyed by UNFPA in certain areas--notably procurement of equipment and supplies--by virtue of its multilateralism; and (c) other donor support to the national programme.

38. UNFPA would provide approximately \$20 million under the third country programme. Additional funds may be mobilized on a multi-bilateral basis; these are not included in the present submission. UNFPA would continue to give highest priority to support the Government's MCH/FP programme, both in the supplies and logistics sector and in the provision of technical advisory services in the area of integrated health and family planning. The second key area of UNFPA assistance would continue to be population information, education and communication. In designing the programme, care has been taken to make use, where possible, of available local expertise and training opportunities. Details of the proposed programme are outlined below.

Maternal and child health and family planning

39. Strengthening of integrated MCH/FP: logistics, supplies and services. If the Government's ambitious target of increasing the contraceptive prevalence rate to 40 per cent of all eligible couples is to be met, the number of family planning acceptors must rise from the current 4.5 million couples to 10.5 million by 1990. The population programmes's supply and distribution system must therefore be further strengthened and family planning must be more closely integrated with other MCH activities over the next five years. UNFPA assistance to this sector would be divided into three components: (a) technical assistance to functionally integrate health and family planning programmes and to strengthen the logistics and distribution system; (b) improvement of the storage, supply and distribution of commodities; and (c) provision of contraceptives and related medical supplies.

40. Under the first component, UNFPA would support an MCH/FP adviser in order to enable the Government to achieve its goal of establishing a fully integrated health and population programme. The Government has already taken organizational steps

for the financial integration of health and family programmes at the sub-district level. Field-worker job descriptions have been revised and team training of health and population field-workers is under way. The MCH/FP adviser would act as a liaison and resource person to provide technical assistance and to facilitate the co-ordination of MCH/FP activities. The Government and donors envisage that this UNFPA-funded post would play a key role in assisting the Government to make an integrated programme operational and effective. A UNFPA-funded senior logistics adviser would provide technical assistance to strengthen the logistics system infrastructure. Through the services of this adviser, UNFPA would continue to be the lead agency in co-ordinating donor assistance to the Government's population programmes in the logistics and supplies sector.

41. Under the second component, UNFPA would completely replace the existing fleet of vehicles at the central warehouse, provide funds for air conditioning part of the central warehouse used for heat-sensitive supplies, provide a micro-computer to improve stock control records and provide forklifts and other equipment needed at the central warehouse. Various training programmes would be organized for training teams and supply officers working at the district level and storekeepers working at the district and Upazila levels. Details of the training programmes would be developed by the logistics adviser. Under the third component, UNFPA would supply medical and surgical requisites for the voluntary sterilization programme and 1.5 million doses of injectable contraceptives. The types of drugs and supplies to be procured would be determined each year on the basis of the requirement for the Government's population programme, while the MCH/FP adviser would identify needed drugs and MCH equipment. UNFPA proposes to allocate \$12.3 million to this project, which would be executed by the Government, UNICEF and UNFPA.

42. Operations research analysis. The Government is seeking ways to improve family planning service delivery and to make the population programme more effective. The operations research analysis project would help the Government to diagnose current problems and examine their underlying causes and to test new approaches to service delivery to ensure their effectiveness. The project would also enable the Government to keep abreast of operations research developments in such experimental project areas as the Matlab districts and to devise ways of introducing successful features of those project areas in other regions of the country. UNFPA would provide \$100,000 to fund national research officers and to sub-contract research projects to Bangladesh research organizations. The project would be executed by The Population Council.

43. Support to Mohammadpur Fertility Services and Training Centre. The Mohammadpur Fertility Services and Training Centre (MFSTC) is a quasi-governmental institution, providing comprehensive family planning services and training to over 45,000 men and women in and around Dhaka. The role of the MFSTC is crucial for the population programme because of its managerial capacity, accessibility to under-privileged groups, an effective system of recording and reporting and high quality of services. After further appraisal of this proposal, UNFPA may assist the MFSTC in providing counselling, family planning and follow-up services; establishing an MCH unit which would offer pre- and post-natal care; and conducting research on identification of family planning-related infections and providing diagnostic

measures to remedy them. The MFSTC would execute this project with support in the amount of \$600,000 from UNFPA.

Population information, education and communication

44. Strengthening information, education and motivation (IEM) activities.

Recent surveys indicate that 95 per cent of the population of Bangladesh has some knowledge of family planning. In large part, this is due to the work of the IEM Unit of the Government's Population Control Directorate, which has launched various programmes to raise general awareness about family planning. Contraceptive use, however, remains relatively low, and over the next plan period the IEM Unit will emphasize media campaigns designed to inform the public about specific contraceptive methods and how to obtain them. UNFPA would, therefore, continue to support the activities of the IEM Unit. UNFPA support would meet the local salary costs of the IEM Unit staff and would provide vans equipped with audio-visual facilities and equipment needed for the production of posters, films and other materials. Funds would also allow technicians to be trained locally and abroad. Technical backstopping support would be provided by the Bangkok-based UNDP/Asia and Pacific Programme for Development Training and Communication Planning, under the execution of UNDP Office of Projects Execution.

45. A sub-activity within the project would focus on establishing interpersonal communication with the population through influential people in communities such as religious leaders. It would aim at enlisting religious leaders as active supporters and promoters of the population programme by instilling the concept of family planning as part of the basic health programme which can improve the quality of life of people in the country. UNFPA proposes to organize population training courses for religious leaders which will draw on pro-family planning messages contained in the Koran and other Islamic teachings and would seek to raise their awareness on population problems in the country. Funds would be provided to train master trainers and to meet the cost of organizing training courses. It is planned that 25,000 religious leaders would be trained in this way. The project would be executed by the Government with support in the amount of \$2.8 million from UNFPA.

46. Population education through the school system. UNFPA proposes to continue the existing project in the school system in order to complete the integration of population material in all curricula of the formal education system. It is also proposed that greater emphasis be placed on the institutionalization of the population education programme in the country's education system. Funds would be provided to train master trainers and resource persons who would be posted to teacher training colleges and primary training institutes which would be responsible for in-service and pre-service training of teachers in population education. Project activities would include development of supplementary reader's and teacher's guides; revision of the training packages; and preparation of communication support materials. UNFPA would provide \$2.2 million to the project, which would be executed by the Government, with technical assistance from the UNESCO Regional Team on Population Education.

Formulation and evaluation of population policies and programmes

47. Population and development planning. In order to ensure that the

development planning process incorporates population factors, and that the interrelationships between population dynamics and other socio-economic variables be understood as fully as possible, UNFPA proposes to continue in a modified form its existing support to the Population and Development Planning Unit of the Planning Commission. While the Unit has functioned well over the past three years, a closer integration of the Planning Commission is required. Accordingly, the Unit would be streamlined and placed under the direct control of the Population Section of the Planning Commission. This would ensure that the findings of the Unit are then fed directly into the planning process. The Unit would focus its work in the following areas: preparing population projections, providing training on population and development planning to other Government officials, maintaining an inventory of population research in Bangladesh and commissioning specific research activities using local experts. UNFPA assistance in the amount of \$500,000 would be used to support two short-term international consultants to assist with the training and research components; to purchase equipment (including a microcomputer); to cover local salary costs; to provide overseas and local training; and to support the cost of research commissioned by the Unit on a sub-contract basis. The project would be executed by the Government and The Population Council.

48. Advisory support to the Ministry of Health and Population Control. As population growth is perceived as the country's foremost problem in its socio-economic development, the Government considers it crucial that the Ministry of Health and Population Control formulate a solid population policy. To this end, UNFPA would provide general advisory support to the Population Control Wing in order to assist the Government to formulate an effective population policy, based on policy-relevant research and performance of past and present population programmes. UNFPA would finance the costs of an international adviser and support staff. Project activities would include preparation of policy papers, review of current population programmes and formulation of policy recommendations. The Government would execute this project, with \$200,000 in support from UNFPA.

Pending projects

49. Discussions between UNFPA and the Government of Bangladesh have been under way concerning the formulation of specific projects with the remaining \$1.3 million under the third country programme. With a part of the remaining funds, UNFPA may support a project under the Ministry of Justice or the Ministry of Women's Affairs which would focus on educating women and men on the legal rights and status of women. The project would aim to improve the status of women by increasing the awareness of people with regard to Islamic and family laws which support the advancement of women. It is envisaged that other projects would be developed with the as yet unprogrammed amount, taking into consideration the recommendations of the Needs Assessment Mission.

Evaluation and monitoring

50. The programme would be monitored according to the revised "UNFPA Instructions on an Integrated System for Monitoring the Implementation of Country Programmes and Country Projects" (UNFPA/RR/78/23, dated 15 September 1978).

Although the instructions emphasize distinct components of the monitoring system (progress reports, tripartite reviews, annual country reviews and a final report), they also include reporting by the UNFPA representatives to headquarters in order to identify problems at an early stage.

Financial summary

51. The proposed total UNFPA contribution, by programme area, subject to the availability of funds, is as follows:

<u>Maternal and child health and family planning</u>	\$
Strengthening of integrated MCH/FP: logistics, supplies and services	12 300 000
Operations research analysis	100 000
Support to Mohammadpur Fertility Services and Training Centre	600 000
Subtotal	<u>13 000 000</u>
<u>Population information, education and communication</u>	
Strengthening IEM activities	2 800 000
Population education through the school system	2 200 000
Subtotal	<u>5 000 000</u>
<u>Formulation and evaluation of population policies</u>	
Population development planning	500 000
Advisory support to the Ministry of Health and Population Control	200 000
Subtotal	<u>700 000</u>
<u>Pending projects</u>	<u>1 300 000</u>
TOTAL	<u><u>20 000 000</u></u>

V. RECOMMENDATION

52. The Executive Director recommends that the Governing Council:

(a) Approve the programme for Bangladesh for the five-year period from July 1985 through June 1990 in the total amount of \$20,000,000;

(b) Authorize the Executive Director to make the appropriate arrangements with the Government of Bangladesh and with the executing agencies.
