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SUPPORT

**UNITED NATIONS FUND FOR POPULATION ACTIVITIES**

**Report of the Executive Director on  
the evaluation activities of UNFPA**

**Summary**

Chapter I of this report responds to Governing Council decision 83/17 I, paragraph 7, by analysing and comparing the results of evaluations of projects in the major work-plan categories and of activities related to women. Despite the difficulties of identifying general lessons that would be applicable to all countries, certain issues, particularly those related to management, seem to be common to different sectors and areas. These are reported under the section "common issues". The report also reviews the results of evaluations in the following sectors: basic data collection, population and development, maternal and child health and family planning, population education and communication and the role and status of women.

Chapter II of the report responds to Governing Council decision 82/20 I, paragraph 8, which requested the Executive Director to supply evaluation reports periodically. It provides information on the evaluation activities of UNFPA during 1984-1985, including independent and internal evaluations and follow-up on their results. It also discusses plans for activities in this area.

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## INTRODUCTION

1. Chapter I of this report responds to Governing Council decision 83/17 I, paragraph 7, which requested the Executive Director to report to the Governing Council at its thirty-third session on the comparative results of past evaluations according to the major work-plan categories and on activities related to women, and to decisions 84/27 I, paragraph 5 and 85/19 I, paragraph 9 which referred to this request. Chapter II responds to decision 82/20 I, paragraph 8, which requested the Executive Director to supply further evaluation reports periodically.

### I. COMPARATIVE RESULTS OF EVALUATIONS BY MAJOR WORK PLAN CATEGORY AND OF ACTIVITIES RELATED TO WOMEN

#### A. Background

2. UNFPA reviewed all 55 evaluations undertaken between 1979 and mid-1985 by the Evaluation Branch, 15 internal evaluations undertaken as part of project management and the report on "Population and development planning: A review of UNFPA experience", prepared by UNFPA for an expert group meeting it convened on the subject in 1985. Although certain lessons on management issues can be identified, it is difficult to draw conclusions that might be applicable to all programmes or projects, particularly regarding substantive matters. An obvious constraint is that, in many cases, projects are implemented in totally different political, social, economic, cultural and geographic circumstances. Thus, factors influencing the progress of a project in one country may be meaningless in another. Some types of projects appear to share common characteristics when developed in a given region, but too few evaluations have been conducted to provide a basis for generalizations. Similarly, the number of evaluations in each work-plan category is small. Even within the same work-plan category, the evaluation reports, tailored as they are to particular projects, may not cover exactly the same issues. It is even more difficult to compare and contrast project achievements and performances between and among evaluated projects in order to determine what strategies or elements might have proved more effective in one project as opposed to another similar project. Evaluation findings to date permit only tentative answers to these questions. Future evaluations will need to employ a standardized set of variables in a given work-plan category, whose links to projects results will be analysed regardless of project objectives. Whenever possible, missions will also need to consider the advantages and disadvantages of alternative approaches for the given project.

3. Conclusions that have repeatedly appeared in evaluation reports are presented below. The analysis focuses primarily on the hindrances to successful project performance so that approaches that have proved ineffective can be avoided. The analysis also identifies some contributors to project success that might be applicable to more than one country or project. Most of the projects evaluated were begun in the early 1970s under extremely adverse conditions; population data were unavailable or incomplete and thus awareness and knowledge of population conditions and problems were minimal. Sometimes Governments saw a conflict between their goals of increasing population for geopolitical and economic

reasons and supporting the provision of family planning services, which was rarely seen as a measure critical to women's health and child survival. The executing agencies themselves had little experience to draw on in these early projects and thus inevitably encountered difficulties and made mistakes. Also, the projects that were evaluated are not necessarily representative of all projects in a given work-plan category. For this reason, the conclusions in this report, based as they are upon comparisons of findings from evaluated projects only, may not hold true for other projects in a work-plan category.

#### B. Common issues

4. Many evaluations indicated that clear and strong government support as expressed in policy statements, provision of qualified national personnel, budgetary commitment, etc., was crucial to project success. Problems arose when national authorities, and specifically those responsible for implementing a project, were insufficiently involved in designing the project. Often, consultants from executing agencies or UNFPA undertook the project formulation, which sometimes created confusion regarding responsibility for implementation and made it appear that the Government lacked commitment. Similarly, in some countries, projects prepared by an interested local non-governmental organization (NGO) were submitted for funding with only a cursory review by the authorizing government office, a situation that led to implementation problems when the need arose to use government infrastructure or work with government staff.

5. Many projects would have benefited from a more thorough analysis of the overall local country situation, including the availability of national resources and knowledge of local policy-making, planning and administrative mechanisms. Many projects included over-ambitious objectives and major problems were not recognized. Some maternal and child health/family planning (MCH/FP) projects were designed without reference to the influence of socio-economic and cultural circumstances on attitudes towards health care and fertility. The role and status of women were often overlooked. A few projects included plans for studying these factors, but few studies were completed. At the operational level, the insufficient assessment of local circumstances led to difficulties in finding suitable candidates for training or staffing, in feeding project results back to policy-making and planning agencies, and in providing the appropriate level of financial assistance, which in some countries was too high for the absorptive capacity of the Government. Many designers of census and policy formulation projects failed to take into account that special legislation was needed to establish the required legal framework for project activities. Many planners of institution-building projects aimed, unrealistically, at simultaneously securing the legal mandate, establishing the basic organizational unit and programme and initiating actual delivery of the product (for example, research studies or educational services).

6. Although some improvements have taken place, many evaluations concluded that project objectives were unclear, the strategy was poorly defined, and the logical links between inputs, activities, etc., were not made explicit. This problem of project design is partly due to the inadequate assessment of needs mentioned above,

and partly a reflection of the difficulties of identifying each step needed to achieve the objectives. As a result, quality and quantity of inputs and activities and the time-table for implementation were often inappropriate or inadequate and the project documents were not useful as a management tool. A related difficulty was that the documents were seldom revised to reflect changes during project implementation. Implementation problems resulted from the lack of clear definitions of the duties and responsibilities of the major parties concerned. Furthermore, all evaluations that looked into the matter concluded that lack of attention to women's concerns on the part of project designers negatively influenced project results, whether in policy formulation (because data collection and/or research projects overlooked women's actual participation and roles) or in delivery of health or educational services (because constraints on women's accessibility to such services were not recognized).

7. Many of the difficulties encountered were related to problems in organizational structure and management approaches of the Government, UNFPA and the executing agencies. In some cases, problems arose because of lack of agreement on priorities. The overall priorities as set by Government, which should have been the overriding concern, were in many cases unclear. Several evaluation missions concluded that some executing agencies perceived of UNFPA funds as supplements to be used in pursuing their own priorities rather than the specified project activities, leading in some cases to the implementation of activities different from those outlined in project documents.

8. The location of the project in the governmental organization or in an NGO affected project implementation and institutionalization. In several cases, relative independence from the regular government bureaucratic machinery provided flexibility and contributed to positive short-term results, in terms of, for example, facilitating the provision of health or educational services. In many cases, however, it appeared that continuity and institutionalization would have been better assured through placement under an existing ministerial department where a project would have benefited from the availability of existing staff and the bureaucratic structure. Problems arose in almost all cases in which institutionalization was attempted after the project had been operating outside the regular governmental structure.

9. Financial management was often a source of problems, partly because of the different rules and procedures followed by Governments, UNFPA and executing agencies, but mainly because the rules and procedures to be followed in the project were not clearly specified at the outset, nor were individual duties and responsibilities defined in advance. In general, the financial procedures need to be simplified and communication increased concerning budget approvals and expenditures between agencies and the field and between UNFPA and the agencies. The most efficient management of project funds locally took place when there was an international expert on the project; the drawback was that the person then undertook more administrative tasks than technical assistance. Many evaluation missions found that the management skills of such experts were sometimes inadequate and that such skills should be part of the requirements for recruitment. Several evaluations pointed to the need for an administrative officer specifically for the

project. Some projects were originally designed with an international post for administration, but the position was later eliminated from the project document, and administrative responsibilities were given to the local UNDP/UNFPA office. That office sometimes performed less well than expected, mainly owing to the shortage of personnel and lack of training in this area.

10. Limited availability of national staff and specialists appeared as a major constraint to project implementation, although significant differences were found between the projects in least developed countries, where people with the basic skills needed for further training were rare, and projects in more developed countries, where there were shortages of middle-level personnel and of specialists. The second most serious personnel problem was attrition among middle-level and field staff; often the result of personnel policies not providing for career advancement and consequently not motivating staff. Projects may also have been hindered by the mobility of higher-echelon personnel from one government sector to another of higher priority. Governments should be encouraged to examine their personnel policies with a view to motivating, training and promoting personnel. They should also be encouraged to examine how these policies affect female personnel.

11. Implementation was greatly facilitated in projects in which training needs had been accurately ascertained from the beginning, provision had been made for meeting these needs locally or abroad and arrangements had been made for drawing upon the skills of the returning trainees. However, such projects were rare. In many, the role of international experts in training national counterparts was neglected; the number and level of local courses and seminars were insufficient; the requirements for trainers, for the proper location of facilities, for equipment and for student housing were inadequately assessed; training abroad was unproductive due to poor timing, irrelevant content and lack of appropriate placement for the returning trainee. Many evaluation reports pointed to the need for cross-training, that is, training for participants from several units, particularly from units other than those implementing the project, with a view to fostering awareness of, and co-operation with, the project. Another issue in training is the need, sometimes unrecognized, for training personnel as new procedures and methods are introduced into an area. Professional personnel and high-level administrators also need training to increase their motivation and their proficiency in running the programme.

12. In some projects staff were paid incentives either for working additional hours or for undertaking additional responsibilities. Although this practice has some advantages, several cases show that incentive payments are not advantageous and may be harmful to the programme over the medium to long-term. In FP programmes, for example, the practice led to conflict, and consequent lack of co-operation, between FP staff and other health workers and furthered the notion that FP was not a regular component of MCH care. Paying incentives for a given task set a precedent that led to difficulties when the task was to become part of the regular activities or services. The situation is of particular concern because in some cases external sources, such as UNFPA, initially paid incentives with the expectation that in time Governments would assume responsibility for such payments, which often has not been possible.

13. Many evaluations have found that the monitoring system did not always trigger corrective action. Although the projects followed the procedures for monitoring, there was insufficient analysis of implementation problems and lack of follow-up by the Governments and executing and funding agencies. At times, key technical and administrative personnel were absent at tripartite reviews. For many projects, the progress reports were tardy. In some cases reports were well done, but central offices provided neither feedback nor action to address problems. Few projects had plans for self-evaluations, and fewer carried them out, apparently because UNFPA and other agencies had insufficiently stressed at the time of project formulation the importance of evaluations as a management tool. In many cases, the responsibilities of each of several donors were not spelled out in the project document, compounding difficulties in monitoring project performance and in evaluating results. Even when evaluation was part of the technical design of a project, it was often neglected in favour of other tasks perceived as more urgent or necessary.

14. Evaluations reports revealed that courses of action that had proved problematic in similar projects in other countries were still being chosen, without regard to longer-term consequences. One reason was the absence of established procedures in UNFPA and the executing agencies for consolidating and applying lessons from past experience. Now that UNFPA has acquired a body of experience, the need is to ensure that the lessons of that experience are shared among countries and international agencies.

#### C. Basic data collection (work-plan category 100)

15. Most evaluations of census projects were planned with comparability in mind. For example, the 1979 evaluation of the African Census Programme (ACP), covered experience in seven country projects and the evaluation of the 1983 census in the Sudan included a comparison with performance in the 1973 census. The first lesson learned through the evaluation of ACP was that it is sometimes necessary to implement projects under less than favourable conditions if the results -- though imperfect -- are of high priority for the countries. As most of the 22 countries participating in ACP had never carried out a complete census and the United Nations Department of Technical Co-operation for Development had never executed such a broad programme before, it was not surprising that the evaluation found many deficiencies in planning and implementation. Yet the overriding conclusion was that census-taking in the newly independent African countries was of paramount importance for planning and political purposes and that UNFPA and the United Nations played a major role in this accomplishment.

16. Evaluations identified detailed planning as the best predictor of a successful census. Many projects in ACP lacked a clear description of the sequence of activities, a schedule indicating realistic lead-times for the various census operations, or an outline of the resources required and their availability. On the other hand, the carefully planned census of Cuba yielded totally satisfactory results.

17. Census-related activities need to be a permanent ongoing concern of Governments, using intercensal periods to strengthen institutional capacity. This process was found to be extremely important in least developed countries requiring massive efforts to undertake censuses. There, the provision of on-the-job training, local courses and fellowship programmes near the census period were largely unproductive because needed personnel were taken away from their immediate tasks, and, probably because of this conflict, the training programmes tended to be superficial. The intercensal period was also the time to carry out the cartographic work, to send staff for long-term training abroad and to ensure the maintenance of equipment for the census. Although all projects of ACP included substantial cartographic work, project designers generally underestimated the magnitude of the task. Thus the results fell below the standards considered desirable by most experts.

18. In terms of project strategy, evaluations found it important to establish (a) the legal authority for the census as early as possible, (b) an administrative network covering the whole country to undertake the census and (c) high-level co-ordinating bodies to provide advice and direction, with members who are not in such high positions as to take only symbolic interest in the census project. It was found crucial to ensure at the formulation stage that Governments would agree to release the initial census tabulations rapidly and unequivocally. In the few countries that undertook pilot censuses, these exercises were found to justify their costs when weighed against later results.

19. Field-work requirements posed a challenge in all countries in ACP; the approach that worked well in many of them was to recruit teachers, students or recent graduates to fill these positions. The evaluation found that training of local personnel for field-work was frequently so brief that they were unable to follow instructions, read maps or find and interview the people living in their enumeration areas.

20. Insufficient attention was paid to the strategies for informing all population groups of the nature and purpose of the census. Mass media approaches sometimes failed to reach isolated rural populations and other groups, such as nomads and illiterates. In the Sudan, an attempt to decentralize the information process included the formation of committees at the regional level and the identification and training of traditional leaders to publicize the census exercise. The evaluation mission observed that the exercise was beneficial, offering a possible lesson for other countries.

21. Evaluation of data to assess their coverage and quality is usually built into censuses through post-enumeration surveys and internal consistency checks. However, few projects undertook such surveys and, often, checks for consistency were made only as part of the data analysis. Users of census data rarely took part in the planning of the census questionnaire. Thus, among users there was usually little awareness of the tabulations and data to be expected and almost no demand for special tabulations, secondary analysis and projections.

22. A comparative evaluation of civil registration and vital statistics projects in sub-Saharan Africa concluded that the production of reliable vital statistics,



that is, those produced in systems with complete registration or at least 85-90 per cent coverage, is an expensive undertaking with high recurrent costs to be borne by the Government. Criteria for undertaking and supporting such projects should be stringent, based on a realistic assessment of the Government's capacity for operating such a registration system. A pre-requisite for establishing a registration system was found to be a unified registration law.

23. Gradually expanding the area of registration was found to be preferable to establishing a nation-wide system from the beginning or to setting up a system in a sample area. In sub-Saharan Africa, except in very large and populous countries, sample registration was unsuitable. A key issue was the choice of the pilot area, which should be small enough in size to permit proper supervision. The area should also cover a major administrative entity. In view of the constraints on the infrastructure and manpower, an alternative to setting up a new system was enlarging the responsibility of an existing organization, such as a ministry of health, which has a large field staff and sufficient supervisory capacity.

24. Public information on the need for registration and a procedure for enforcing registration (for example, by requesting a birth certificate for school enrolment) were found to be important elements. The use of local officials from the rural area, such as village chiefs and traditional birth attendants, to provide information on the need for registration and to assist in registration activities, helped to ensure that registration changed from a passive to an active system.

25. The shortage of registration forms because of shortages or costs of paper was a major constraint; international assistance for buying paper was often required. Most countries in the region now have some computer facilities, which could be made available on a part-time basis for processing data from the registration system; separate facilities solely for registration data were considered unnecessary or inadvisable. Vital events must be tabulated and analysed to permit any corrective action needed in the registration programme. Sample surveys for evaluation purposes were also potentially useful once the project had been in operation for an extended period; as with monthly tabulations, the results should be analysed quickly so that needed design or strategy changes can be made within the project life.

#### D. Population and development (work-plan categories 200 and 300)

26. Several evaluations have been conducted of projects in the work-plan category of population dynamics (200); but only one since 1978 and therefore no comparative up-to-date lessons can be drawn from evaluations of such projects. As for work plan category 300, three independent evaluations were conducted of projects in the subcategory integration of population factors in development planning. Two MCH/FP projects that were evaluated included among their objectives the formulation of a population policy, and one MCH/FP project included implementation of population policy among its objectives. In addition, UNFPA experience in this field was reviewed in preparation for a meeting on population and development convened by UNFPA in early 1985.

27. Regarding policy formulation, it was found that the strategy of placing responsibility for providing MCH/FP services and formulating population policy in a single institution was unsuccessful. In general, the projects successfully expanded FP service coverage, but none yielded an explicit population policy. Sometimes, opposition to clinical FP activities weakened the agency's credibility in providing policy orientation; at other times resources were channelled to clinical services rather than to policy development. "Political sensitivities" was the reason given for the lack of policy-making. Evaluations found that, despite project statements, the formulation of a population policy was low among the government's priorities and the basic data and analysis on which to base such a policy were unavailable.

28. One evaluation covered the International Labour Organisation (ILO) research and action programme concerning population and development aimed at producing research methodologies and data on economic and demographic relationships for policy-makers and planners. The evaluation found that developing countries, though presumed to benefit from the programme, were not always consulted about their needs, their interest and their capacity for integrating population factors into planning. Although the research was to be produced for policy-makers and planners, little effort was made to understand the decision-making system, including how the information and projections would be used. The difficulties of creating a programme aimed at both developing a knowledge base and disseminating results in relatively new fields were underestimated. No schedule of meetings and publications had been planned, nor was any particular audience identified for the research produced.

29. Many country projects aiming at integrating population factors into development planning are pioneers in the field, and the problems reported should be seen against that background. The lessons learned concern mainly project design, since the experience in actual implementation is limited. Most of the projects analysed supported the establishment or the strengthening of a population unit for integrating population into development planning, and most projects were operating in countries that did not have a population policy. In many, policy-makers, planners and top administrators had not yet reached a consensus on the importance of population phenomena in development planning.

30. The evaluations found that the concept of integrating population into development planning needs clarification in operational terms; it is essential to specify what such projects are to accomplish. As these projects did not include clear objectives, numerous problems arose during implementation. Two aspects that were not clarified were the knowledge base needed for the integration process and the analytical framework employed by the planning system. As a consequence, many projects with "integration" as an objective were only able to identify knowledge gaps and produce some of the knowledge base. Insufficient attention was paid in project design to organizational issues, such as the population unit's location within the national bureaucracy; its legal status; the scope of the unit's responsibility; numbers and education of personnel; and to identifying related agencies. As a result, problems arose in implementation. In some countries, the population unit was not a legal entity or was created with financial and administrative powers much more limited than those originally foreseen, leading to

low prestige vis-à-vis other agencies and to conditions of service that were insufficiently attractive to qualified professionals.

31. In many of the projects the research was inappropriate. To be useful for integrating population into development planning, research should be carried out systematically: inventories and reviews of completed research on socio-economic and demographic interrelationships should be prepared; planners should determine their priority research needs; planners from sectoral ministries, universities, researchers and staff of population units should be consulted on the research agendas; research should provide policy orientation, indicating the programmatic initiatives that a Government may undertake. More qualitative and quantitative assessments of policy options should be encouraged. Research findings should be fed back to planners and decision-makers.

32. The training of nationals is crucial in the field of population and development. Although many projects included training, these activities were generally isolated rather than being part of a comprehensive strategy. Evaluations found a shortage of both qualified candidates and training facilities. In many cases the human resource gaps were not identified and therefore neither were the specific training activities to bridge these gaps. Project proposals should identify who should be trained, for what, where, when and over what period of time.

#### E. Maternal and child health and family planning (work-plan category 500)

33. Fifteen independent country evaluations, three evaluations of regional WHO programmes and several internal evaluations of projects in this work-plan category were analysed. The conclusions refer primarily to projects in Africa and Latin America, because most evaluations were in these regions. It is important to keep this regional focus in mind when reading this section, as projects in Asia tend to emphasize FP in their objectives, strategies and results, whereas in Africa and Latin America the MCH component has been predominant. Also, country circumstances differed in many ways that substantially influenced project performance and achievements. These circumstances included: (a) the Government's perception of national population problems; its commitment to reducing the fertility rate when high rates are perceived as unfavourable; and its acceptance of FP programmes as a way of reducing the rate; (b) the existence and content of an explicit population policy; (c) the extent of development of the health system, its infrastructure and human resources; (d) the amount of activity among the private FP agencies before and during the undertaking of a government programme; (e) the level of maturity of the FP programme when the project began, as reflected in the percentage of population aware of or using contraceptives; and (f) literacy rates, in particular those for women; cultural attitudes towards sex, reproduction and the role of women.

34. In some countries FP activities were perceived as a donor activity. This perception significantly constrained overall project implementation. The level of external aid was found to be sometimes too high for the country to absorb effectively. The lesson was that more attention should be paid to ascertaining the level and quality of assistance that would help Governments meet their needs without posing a future burden.

35. MCH/FP projects should include plans for some kind of socio-cultural-anthropological research if information on attitudes and beliefs is unavailable. The lack of such a knowledge base has led to the formulation of service-delivery strategies that were less than totally responsive to what the target populations perceived as their needs. As a result, pre-natal, delivery and post-natal services were sometimes underutilized. The reasons behind the low demand for services were found to include poor quality of patient/provider relationship; inconvenient service hours; lack of staff; restrictions on the provision of the service, because only medical or nursing staff were allowed to provide certain services, and not taking into consideration the consequences of the practice of requiring the husband's consent. The weak knowledge base has also affected the population education and communication (PEC) components aimed at changing the attitudes and behaviour of target populations. PEC strategies were sometimes based on a superficial analysis of the individual country situation and were therefore inappropriate. One important lesson is that educational programmes should begin with the health staff, because they are often not convinced that FP will improve the health of mothers, or that certain contraceptive methods are safe. The attitudes of health staff have been found consistently to be of paramount importance to project results.

36. Some projects lacked an identification of the population groups that should be targeted for services in order to achieve the greatest reduction of infant and maternal mortality rates, or the fertility rate. For example, in Cuba, infant mortality rates had been declining overall except among infants born to teen-agers. Yet adolescents had not been targeted for services. Similarly, in some countries, despite the network of MCH/FP clinics, maternal mortality rates were not declining because higher-risk groups of women had not been targeted for services.

37. In some countries, as a result of a low demand for contraceptive services and the ambivalent attitude of health personnel, the FP component of integrated MCH/FP services was less vigorously implemented than the other components. In general, this situation was found in countries, particularly in Africa, lacking policies aimed at reducing fertility rates. The health rationale for FP was less likely to induce government support to FP programmes than was the goal of reducing fertility. However, in at least one case (Malawi), an initially strong anti-family planning attitude changed because the MCH project led to the realization that unmanaged fertility was jeopardizing child survival and maternal health.

38. All evaluated projects included training activities. The UNFPA budgetary contribution to training as a percentage of total project budgets is relatively low and evaluations consistently show that training efforts were not substantial enough, that accomplishments -- in quantity or in quality -- fell short of expectations and that shortage of qualified staff posed major problems for the projects. With regard to local training, in those few countries (for example, Swaziland and Tunisia) that had large training centres for health personnel, MCH/FP projects benefited from this massive investment in infrastructure, equipment and teaching staff. There, results in terms of number and quality of national trainees were exceptional. In other countries (for example, Costa Rica) training in the local universities was good in theory but sometimes inappropriate for the conditions under which the trainee would eventually be working.

39. Institutional arrangements for delivery of services sometimes created conflict and delays as, for example, in countries where the central MCH/FP unit at the ministry of health has no authority over service delivery at peripheral points. There were also many problems in supervision. In some projects, the need and system for supervision was never identified. In others, a system was in place but did not work, either because staff was unavailable or unqualified, or transportation was unavailable or because the institutional arrangements were poorly defined. In some countries supervision, when undertaken, tended to be concerned with fault-finding rather than with training, motivating and supporting the field staff. Sometimes, local initiatives to address local health problems were discouraged without any assessment of whether they would help because they did not coincide with approaches developed at the central level. Many supervisory staff were burdened by too many tasks.

40. Evaluations found that planning for supplies was generally inadequate. For example, in Swaziland six types of pills were ordered (too many) and in the Dominican Republic only one (too few); elsewhere, the planning overlooked normal lead times for delivery and thus supplies were unavailable when needed; lack of planning for storage and distribution facilities sometimes caused problems when supplies arrived. Some projects included plans to switch users from pills to intra-uterine devices (IUDs), but the IUDs or the IUD inserters needed were unavailable.

41. Particularly in Africa, figures on coverage had to be considered only indicative because the service statistics systems were still rudimentary, registers were incomplete, tallying and reporting were often inaccurate. Moreover, the systems were periodically revamped or modified, and as a consequence data produced at different times were no longer comparable. For this reason, trends were difficult to identify, as well as absolute coverage, and the data were not useful for programme planning and target-setting. Some countries had efficient systems for collecting service statistics. Yet little effort had been devoted to analysing the data for use in setting national goals, and then translating those goals into service targets for the health staff monitoring project performance at the subnational and clinic levels. In contrast, in Thailand, when contraceptive practice was just beginning to take hold, service data were collected, fed into a computer system and converted into targets for the programmes. However, the evaluation concluded that the relevance of this earlier exercise to the new, more mature national programme was at best unclear.

42. Of particular concern to MCH/FP projects is the frequent discrepancy in priorities given to different components of the projects undertaken with the World Health Organization (WHO) as executing agency. A large part of UNFPA funds approved for MCH/FP projects was channelled through WHO. UNFPA provided, for example, more than 90 per cent of all the funds WHO disbursed for MCH/FP in Africa. Evaluations found many instances of family planning components being eclipsed by other activities that WHO considered of higher priority. In some cases, activities not included in the approved project document took precedence over planned ones. However, the large number of evaluations of WHO-executed country and regional projects have had a direct and substantial effect on improving the relationship between UNFPA and WHO and the management of programmes. To this

end, UNFPA and WHO conducted regional workshops to improve management of MCH/FP programmes, initiated joint regional programming and extensively revised the regional programmes as well as many country projects.

F. Population education and communication (work-plan category 600)

43. Eleven independent evaluations and four internal evaluations have been conducted of PEC projects in schools, in out-of-school programmes and in mass communication. A common finding was that, because FP information was often a component of PEC projects, particularly in out-of-school projects, co-ordination and co-operation between the organizations carrying out PEC activities and those responsible for FP service delivery (ordinarily the ministry of health) was crucial. Close linkage with service delivery, as in Tunisia, improved project implementation, whereas the lack of linkage weakened projects elsewhere. In like manner, PEC projects based in the ministry of health need to be linked to the activities of other ministries in order to widen exposure to PEC.

44. With regard to the training of teachers and motivators, the evaluations noted that in the early stages of projects workshops were effective; for immediate implementation of PEC projects in-service training was in order; and for institutionalizing PEC, pre-service training was necessary. The shortcomings included inadequate follow-up and backstopping of personnel after they have received their initial training. In many projects designed with quantitative training targets, activities were sometimes carried out as ends in themselves and qualitative aspects were neglected.

45. Most evaluations noted cases in which information and curriculum materials were irrelevant or inappropriate in the circumstances of the particular country. The logistics of printing and distributing such materials often received insufficient attention in planning and many problems were encountered. For example, in Cuba, printed materials were in short supply and many went out of print (because of lack of funds). In China, the distribution of materials was sometimes inappropriate, resulting in shortages in some places and accumulation in others.

46. In many countries several PEC projects or PEC-related activities were launched simultaneously, each project aimed at a particular target group. Evaluations found that co-ordination, either between the participating institutions or between the activities, was lacking in all projects. It is premature to draw conclusions about the effectiveness of "umbrella projects" -- country projects servicing several country projects in PEC and designed to facilitate co-ordination and use resources efficiently -- as experience is still limited. However, evaluations have identified some prerequisites for success in such projects. First, PEC project designers must identify their needs for technical assistance, training and materials and propose a schedule for meeting these needs. Then there should be a consensus that an umbrella project is indeed the proper co-ordinating mechanism. Finally a decision must be made on the institution that will lead the endeavour.

47. The evaluations did not attempt to measure the impact of PEC projects on target audiences because not enough time had elapsed for the behavioural changes to occur that would alter statistics, such as the fertility rate. However, many evaluations pointed out that measurements of such impact would be impossible even later, because of the lack of baseline data.

48. As for in-school projects, the evaluations found that there was no common strategy for introducing population education into the curriculum. The level into which population education is introduced, whether it should be integrated into various subjects or introduced as a separate topic, how it should be taught and institutionalized -- all these questions were treated variously in the projects. In some countries, population topics were introduced in primary as well as secondary schools to ensure exposure to the subject among pupils dropping out after primary schooling. In others, population topics were introduced only at the secondary level. There, the subject was seen as relevant to pupils' personal lives and as reaching the future policy-makers of the country. Generally, evaluation missions found the former approach more advantageous, but recognized that country circumstances might warrant the latter, particularly in the early stage of the programme. In most cases population was integrated into existing school subjects such as geography, natural science, social studies, health or religion, based on the understanding that an integrated approach has the advantage of treating population in an interdisciplinary fashion and as a part of the regular curriculum. A disadvantage to this approach was the dilution of the message, leaving fragmented impressions rather than a coherent concept of population and its relevance. However, this dilution can be avoided in part by incorporating well developed core messages into different subjects as is now being done in some countries in Asia, or by requiring that population content is included in the final examination.

49. The timing of introducing population education into the regular curriculum was important. When the regular curriculum was undergoing revision, as it was in Sierra Leone, for example, the incorporation of population contents was facilitated. On the other hand, when the curriculum was to be redesigned only to accommodate population content, as it was in Costa Rica, for example, the obstacles were formidable. Aside from introducing population concepts into the regular curriculum, the pedagogical approach employed in population education projects, requiring active student participation and initiatives, helped to revitalize teaching methods and offered the promise of contributing to overall improvement in the educational system.

50. Evaluations found that the complete institutionalization of in-school population education required an official ministry of education policy vis-à-vis such education. It was not necessary, however, to have an explicit policy before population education could be introduced -- a lesson learned in the evaluation in Caribbean countries. Successful population education projects conducted on the basis of an implicit endorsement by the Government can, by themselves, create a better atmosphere in which to elicit formal Government sanction.

51. Out-of-school population education and communication was far less uniformly structured than school programmes. Evaluations covered projects varying from PEC for rural workers in Thailand to literacy and vocational education for women in Democratic Yemen, from family planning motivation for industrial workers in India to family-life education (both in- and out-of-school) for adolescents in the Caribbean. Given such a broad spectrum and the small number of evaluations, there were few common lessons. Nevertheless, one general conclusion was that careful selection of the institutional base for the project was decisive not only for successful implementation but also for the maintenance of activities beyond the lifetime of the project. PEC projects launched using an existing network or structure were generally better and more rapidly implemented.

52. In most workers' projects, the worker-motivators are the cornerstones of successful communication and education. Some evaluation reports pointed out that insufficient attention had been given to their roles, selection and training. In one case in India, rather than being nominated by fellow workers, they were appointed by employers, possibly diminishing their colleagues' confidence in them. In Bangladesh, the volunteer worker-motivators had limited access to training and information materials. Many evaluations of worker education projects found that efforts to identify and direct information to "hard-to-reach" groups were inadequate. In Tunisia, for example, the audio-visual materials, though diverse, were aimed at literate urban industrial workers and were ill-suited to rural agricultural workers. In India, a workers' education manual that had been translated into many regional languages failed to change the illustrations to match the various ethnic groups.

53. Mass communication -- through printed materials, radio programmes and large meetings -- was found to be most effective in countries where PEC and FP were still relatively new concepts. There, the immediate concern was to inform as many people as possible of the rationale behind population messages and of the availability and range of FP services. In countries where awareness is extensive, as in China and Thailand, evaluations questioned whether mass media could have the same impact as face-to-face communication and suggested that a different strategy be designed to communicate with non-acceptor groups through outreach workers. In general, better efforts are needed to keep information materials up to date and to carry out research to identify target groups and their specific needs and to use results from these studies in the designs of programmes. In countries such as Bangladesh, Thailand and Tunisia, despite research studies on the knowledge, attitudes and practices of different population groups, there was little evidence that the information collected was used for the planning of communication programmes.

#### G. The role and status of women

54. This analysis is based on two independent evaluations of women, population and development projects, evaluations of the role of women in four UNFPA-supported country programmes and brief sections on the role of women in other evaluations. These evaluations showed that most of the projects were formulated with no effort to include women's components or awareness of the need to direct employment or



training towards women. Until recently the only project documents that discussed the expansion of women's role in any detail were those in the work-plan category "status of women".

55. Evaluations of projects in this latter category found, in the case of Indonesia, that the projects which focused on income-generation and the establishment of co-operatives succeeded in helping women to earn more income and improve the welfare of their families; strengthened women's ability to manage funds; and increased family planning acceptance and continuation rates while promoting a shift to more reliable contraceptive methods. In Nepal, the women's project somewhat improved women's access to paid employment and to agricultural extension services; strengthened women's role as field-workers; extended population education; and incorporated women's issues, including quantitative educational and economic goals, into government development plans. Although these projects expanded women's options, it cannot be assumed that all projects designed for women do, in fact, benefit women. Care must be taken to ensure that this kind of project alleviates rather than increases women's work-load, provides significant, long-term economic and social benefits rather than only immediate ones and does not contribute to further gender segregation.

56. The evaluations of basic data collection projects showed that women had made significant contributions to the vital statistics and civil registration projects through educational activities and through reporting of births by midwives, traditional birth attendants and maternity assistants. In countries where vital statistics were the responsibility of the ministry of health, women were holding positions in which they could significantly influence project design and implementation. In data collection activities, minimal base-line data on women were being produced. Moreover, potentially useful data concerning fertility, marriage, literacy and division of labour were rarely generated, and women's economic activity was frequently misclassified and/or underestimated. These projects often generated temporary employment for women as pollsters, enumerators, clerks and data processors.

57. The evaluations of population and development projects noted that, although the long-term objective of integrating population factors into development plans and programmes should benefit women in the process, there was little assessment of women's needs in the population and development projects, nor was attention paid to the role of women in project design. Nevertheless, large proportions of women professionals were working on project implementation; a number of project fellowships in were awarded to women; and some research studies examined women's role and status. A national fertility survey and a symposium on family, population and development were among the principal activities of one project, with women well represented as pollsters (with male supervisors) in the survey and as organizers and speakers in the symposium, which provided a degree of previously lacking visibility for professional women. No efforts had been made to establish a system for monitoring project effects on women in any of these countries.

58. The evaluations of MCH/FP projects noted that the proportions of women working in the health sector were usually high, and women were contributing

extensively to project implementation. They were well represented in project staffing, though often underrepresented at policy-making and supervisory levels. Women were the main beneficiaries of MCH/FP training programmes, which often provided expanded professional opportunities as well as heightened status. However, these training programmes usually reinforced the gender divisions in employment patterns. Women (and their children) were the main beneficiaries of project activities in MCH/FP, gaining improved access to health services. It appears that efforts were not always made to ensure that women and staff understood the reproductive system and the implications of contraceptive decisions; furthermore, research designed to make services more responsive to women's needs was lacking. There was, in addition, a tendency in projects to place the entire responsibility for health care on women; mothers, not fathers, were involved. Such an approach minimizes male responsibility for the health and welfare of the family, leading to increased gender stereotypes of women as caretakers as well as increasing the woman's burden of responsibility, adding clinic visits and follow-up to her schedule.

59. The evaluations of population education projects indicated that women were usually involved in the design and implementation of projects, at least at the service level. The training that girls and women were receiving in population education frequently reinforced a view of women as primarily home-makers and of population education as a "women's issue". Population education activities often did not reach or attempt to reach the male population. It appears that deliberate attempts to change women's image in population and other educational materials, as China has undertaken, can be effective in promoting women's equality.

60. In summary, the needs and concerns of women were not adequately taken into account and the participation of women in all phases of projects and their access to project benefits were not equal to those of men. In projects addressed to both men and women, women's needs received little attention with no attempt to link project objectives to ameliorating women's condition. When they were the main targets of project activities, women were more visibly engaged in the project and benefited from it; often, however, the project philosophy and approach increased, rather than alleviated, the burdens that women bear for the health, education and welfare of the family.

61. The following factors appeared to be deterrents to the inclusion of issues related to women's roles and status in most projects: (a) the planners' lack of sensitivity to, or adequate knowledge about, women's issues and the factors likely to be detrimental to women, with the result that women's issues are ignored or isolated from the planning and programming process at all levels, particularly at the community level; (b) the lack of technical skills needed for formulating, implementing, monitoring and evaluating projects that respond to women's needs; (c) the lack of consultation with women and their lack of participation as decision-makers in planning and implementing projects; (d) the stereotyping of women's and men's roles in family, household and community; (e) the shortage of data broken down by gender, which would permit accurate assessments of women's needs and of their contributions to the family and the community; and (f) the lack

of reliable research on women and on cultural patterns related to fertility and to women's role and status and of operational research on women's programmes and the long-term effects of other programmes on women.

62. Regarding UNFPA support for women, population and development activities, these evaluations suggested that the Fund should further publicize and ensure that projects conform to the existing UNFPA guidelines on women, population and development projects or issue updated guidelines; include provisions on women in other programme guidelines; provide "how-to" training on topics related to women, population and development concerns to those engaged in project planning, implementation, monitoring and evaluation; and include women's concerns as a standard item in briefings for all UNFPA consultants and field staff. The two strategies -- designing projects specifically for women and integrating women's concerns into all projects -- should be pursued simultaneously. It is not enough to promote projects specifically for women if little, or no, attention is devoted to women's concerns and participation in other projects; nor can reducing support to women's projects be justified on the pretext that these concerns are integrated into all other projects.

## II. EVALUATION ACTIVITIES 1984-1985

63. Seventeen independent evaluations were undertaken in 1984-1985. The results of these evaluations have been reported in documents DP/1985/28 (part II) and DP/1986/32 (part II).

64. With regard to the actual use of evaluation results, the Fund is pleased to report progress over the last two years in establishing systematic follow-up, particularly in using recommendations for improving implementation of the project evaluated. The system developed includes a calendar for systematic consultations to ascertain and record the extent to which the recommendations in independent evaluation reports had been implemented. This pilot system has already permitted the identification of needed actions: for example, the institution of more systematic follow-up in the field of the recommendations of independent as well as internal evaluations, via the regular monitoring system (Project Progress Reports, Tripartite Progress Reviews), emphasizing the reasons for lack of implementation, or the achievements in implementation. The remaining task now is to inform and train all staff concerned and to expand the system to the field level.

65. The follow-up of the 1984 independent evaluations a year after the presentation of the reports showed that they have indeed been used in reprogramming the evaluated projects. For example, in Democratic Yemen, the Government, in accordance with suggestions in the evaluation report, initiated measures to enhance the use of resources. The Government also decided that all projects should include consideration of their pertinence to women. The results of the evaluation were also used in a UNFPA needs assessment exercise as well as by programming missions, and the new country programme reflects many of the evaluations' recommendations. In other cases, recommendations have not yet been fully implemented. For example, in Malawi the follow-up showed that despite the Government's positive attitude towards the recommendations, little action has been possible chiefly because the

recommendations need to be reconciled to the different strategies of other large donors (World Bank, United States Agency for International Development) vis-à-vis the same programme. This explanation underscores the evaluation mission's recommendations for increasing co-ordination among donors.

66. UNFPA is now increasingly emphasizing the use of evaluation results for general programming and policy-making beyond the project (and/or country) concerned. In view of this need for consolidated evaluation results, UNFPA has increased its efforts to analyse the reports of both independent and internal evaluations and to draw lessons that may be applicable to a range of projects. Recent independent evaluations have been planned with a view to drawing general lessons, and this aim has been included in the terms of reference for the missions. This approach requires evaluation of the same type of project in more than one country; for example, MCH/FP projects in Malawi and Zambia have been evaluated together and the results of this exercise, together with those of previous evaluations of MCH/FP projects in Botswana and Swaziland, have served to produce general lessons. To the same end, information produced in the form of internal evaluation reports has been collected and reviewed, and the lessons learned from these cases have been recorded. Although generalizing from individual project evaluations is difficult because their results pertain to a particular country, as more evaluation reports become available and as more independent evaluations are being planned to permit comparisons and generalization, there should soon be a basis for drawing more widely applicable conclusions and for examining alternatives.

67. Strengthening the internal evaluation of projects is an ongoing concern in the Fund. UNFPA guidelines for project formulation are now being revised to include, among other things, a requirement for built-in evaluation plans. These guidelines are seen as the first step in improving the quantity and quality of internal evaluations and in planning for systematically training staff at UNFPA, executing agencies and Governments. It is clear that project design and evaluation are intimately linked and that training should simultaneously address both issues. To this end, in 1984 and 1985 joint UNFPA/WHO workshops were held to train government, WHO and UNFPA officials. Also, in 1985, the Evaluation Branch provided direct technical assistance to one country for the formulation of a project to strengthen the institutional capacity for evaluation of projects in health and population.

68. A 1984 review of the activities of the Evaluation Branch conducted by a consultant showed that the independent, in-depth evaluations were perceived within the Fund as the Branch's most useful activity and that these evaluations have become more valuable in recent years: more evaluations are being done and in more timely fashion, the reports are more succinct and relevant, the debriefings in the field have been useful and comparative evaluations have yielded important lessons aiding programming. Most of the consultant's recommendations on how to analyse "lessons learned", follow-up, strengthen evaluation capability within the Fund, and strengthen the role of the Evaluation Branch in monitoring and evaluation, etc., have been implemented.

69. The guidelines and procedures for independent, in-depth evaluations (UNFPA/CM/84/43), published in English, French and Spanish, were widely distributed and continue to be well received. Guidelines for the evaluation of the women's dimension in regular UNFPA programmes, prepared and tested in 1984 and 1985, will soon be published. Draft guidelines were also developed in 1984 for the evaluation of country programmes to strengthen the focus on the institution-building aspects of such programmes. These guidelines will be revised and further tested in 1986. Other Evaluation Branch activities have included contributions to in-house guidelines (needs assessment and programme development, project design, monitoring and evaluation); participation in the Task Force on Monitoring and Evaluation; assessment of evaluation plans in certain new project requests; collaboration in establishing a general consultants' roster in UNFPA; and increased linkages with other United Nations agencies.

70. For the future, there is a need to strengthen the system for follow-up of the implementation of independent evaluation recommendations. A standard methodology will be necessary for analysing the evaluation reports to permit greater consistency in the coverage and presentation of results. Efforts to produce a body of lessons learned from independent and internal evaluations will continue. Internal evaluation reports more systematically collected and examined, as well as the reports of independent evaluations, are sources of information on what approaches work under which circumstances. Such examinations would also provide quality control of internal evaluations. Improvement and expansion of internal evaluation exercises will receive new impetus with the official issuance of revised guidelines for project formulation. New monitoring and evaluation guidelines are being prepared and should be available by mid-1986. The monitoring and internal evaluation procedures will follow as closely as possible those of UNDP to ensure that the demands on Governments and executing agencies are consistent. Briefing and training of personnel carrying out the development, implementation and evaluation of projects will emphasize the link between design and evaluation.

71. The Evaluation Branch's major task will remain the organization of independent evaluations: planning and design, desk review and field visit, reporting and follow-up. The 1986-1987 work programme calls for eight independent evaluations a year. Most of these will examine entire country programmes or compare similar activities, for example, MCH/FP training, in various countries. The Evaluation Branch will also increasingly undertake the analysis and dissemination of evaluation findings, the follow-up of the use of such results, the development of guidelines and other activities mentioned in paragraph 70.

72. Finally, UNFPA will pay special and increased attention to using the results of evaluations, both internal and independent, in its policy-making and programming. In this context, the analysis of evaluation results and their implications for policies and programmes summarized in chapter I of this report will be particularly useful. A more comprehensive report on this analysis of comparative results will be given wide distribution.

