



**Governing Council
of the
United Nations
Development Programme**

Distr.
GENERAL

DP/FPA/CP/1
27 February 1987

ORIGINAL: ENGLISH

Thirty-fourth session
26 May-19 June 1987, New York
Item 6 of the provisional agenda
UNFPA

UNITED NATIONS FUND FOR POPULATION ACTIVITIES

PROPOSED PROJECTS AND PROGRAMMES

Recommendation by the Executive Director

Assistance to the Government of Thailand

Support of a comprehensive population programme

Proposed UNFPA assistance:	\$5.5 million from UNFPA's regular resources
Estimated value of the Government's contribution:	\$8,354,000
Duration:	Five years
Estimated starting date:	January 1987
Executing agencies:	International Labour Organisation (ILO) World Health Organization (WHO) United Nations Educational, Scientific and Cultural Organization (UNESCO)
Government co-operating agencies:	Family Health Division and Rural Health Division, Ministry of Public Health Office of Policy Planning, Ministry of Interior Ministry of Education National Economic and Social Development Board

THAILAND

Demographic facts

Population by sex		Population density (/sq. km.) .	100
Total (in 1000)	51 411	Average annual change	
Male (in 1000)	25 798	Population increase (in 1000)	860
Female (in 1000)	25 614	Births (in 1000)	1 256
Sex ratio (/100 females)	100.7	Deaths (in 1000)	396
Population in year 2000 (in 1000)	65 503	Net migration (in 1000)	0
Population by age group		Rate of annual change	
Age 0-14 (in 1000)	18 627	Population change total (%) .	1.61
Age 15-64 (in 1000)	30 904	Urban (%)	4.3
Age 65 + (in 1000)	1 880	Rural (%)	0.9
Age 0-14 (percentage)	36.2	Crude birth rate (/1000)	23.5
Age 15-64 (percentage)	60.1	Crude death rate (/1000)	7.4
Age 65 + (percentage)	3.7	Natural increase (/1000)	16.1
Age indicators		Net migration (/1000)	0.0
Median age	21.0	Fertility and mortality	
Dependency: age 0-14	60.3	Total fertility rate	2.73
Dependency: age 65 +	6.1	Completed family size	6.52
Dependency: total	66.4	Gross reproduction rate	1.33
Youth: 15-24 (in 1000)	11 295	Net reproduction rate	1.20
Women: 15-49 (in 1000)	13 284	General fertility rate (/1000)	89
Urban-rural population		Child-woman ratio	N/A
Urban population (in 1000)	10 173	Infant mortality rate (/1000)	39
Rural population (in 1000)	41 239	Life expectancy: male	62.2
Per cent urban (%)	19.8	Life expectancy: female	66.2
Per cent rural (%)	80.2	Life expectancy: total	64.2
Agricultural population density		GNP per capita	
(/hectare of arable land)	2.17	(U.S. dollars, 1984)	860

Sources: Area and population density on arable land: derived from Food and Agriculture Organization of the United Nations, FAO Production Yearbook 1980; gross national product per capita: World Bank, World Development Report 1986; 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, World Population Prospects, Estimates and Projections as Assessed in 1984 (United Nations publication, Sales No. E.86.XIII.3) - "population by sex" through "life expectancy: total" as of 1985-1990.

I. SUMMARY

1. The United Nations Fund for Population Activities (UNFPA) proposes to continue assistance to the Government of Thailand in the amount of up to \$5.5 million over a period of five years, 1987-1991, to strengthen the Government's comprehensive population programme. This will be the fifth in a series of programmes in Thailand since 1971 when assistance was first extended to the country. The assistance now proposed is based on the priorities identified in the newly initiated sixth five-year national development plan, 1987-1991, and on the findings and recommendations of the needs assessment update undertaken in February and March 1986.

2. Under the new programme, UNFPA will direct considerable attention to the unmet family planning needs of various subsectors of the population, including minority groups residing in the south and north as well as adolescents. Assistance will be provided for population information, education and communication (IEC) with particular emphasis on addressing the needs of adolescents for sex education and the needs of minority group leaders in the south for maternal and child health (MCH) and birth-spacing information. In addition, renewed efforts will be made to broaden the base of institutional awareness, commitment and support for population and family planning, especially within the Ministry of Interior. Development planners will be sensitized to the population implications of development planning, enhancing their capability to achieve population objectives through development planning. New activities will be launched which are directly related to strengthening the role of women in development in order to improve their economic status and modify their fertility behaviour. Women's concerns will be taken fully into consideration in all activities of the programme. Their involvement will be ensured through their participation in activities such as training and project management.

3. 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 (para. 14 (d)), respect for human life is basic to all human societies (para. 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 (para. 14 (f)).

II. BACKGROUND

4. Thailand's population policy is based in large part on its five-year development plans. In the third five-year plan, 1971-1976, the Government formulated a national population policy aimed at reducing the population growth rate through voluntary acceptance of family planning. This policy has been put

into practice primarily by setting successively lower growth rate targets: 2.5 per cent by the end of the third plan, 2.1 by the end of the fourth plan, 1.5 by the end of the present plan and 1.3 by the end of the sixth plan. Increasingly, however, the Government has underscored the relationship between population-related factors and overall social and economic development. Therefore, the current development plan has among its objectives not only reducing the growth rate, but also influencing population distribution, improving the quality of life and human resource development. The measures and strategies through which these objectives would be achieved include improved IEC; expansion of family planning programmes with special focus on selected target groups; population education both in and out of school; legislative actions consistent with national population policy; and special programmes for remote areas, slum areas and minorities in the north and south.

5. In recent years, the rate of population growth has been declining steadily, largely as a result of the successful national family planning programme. Thus, between 1970 when the programme officially commenced and 1985, knowledge and acceptance of family planning have become nearly universal. The prevalence of contraceptive use has increased steadily, and some 65 per cent of all married couples of reproductive age were estimated in 1985 to be protected. Furthermore, the most recent contraceptive prevalence rate survey (1985) reports that more than four out of every five current users are obtaining services and supplies through government channels. The fertility consequences of this effort have been dramatic. The total fertility rate for the nation as a whole declined from a high of about 6.2 in the late 1960s to about 3.3 in 1984. The crude birth rate declined from over 4 per cent prior to 1970 to an estimated level of 2-2.5 per cent in 1985. Likewise, the rate of natural population increase has been nearly halved with the 1986 rate estimated to range between 1.5 and 1.8 per cent.

6. During the past decade and a half, the country has greatly strengthened its self-reliance, especially in population matters. It now has a well-trained and internationally respected corps of population researchers, specialists and training institutes. The non-governmental sector is dynamic and works closely and effectively with the national government in a variety of innovative and experimental programmes. The government sector, led by the Ministry of Public Health, has created a strong and pervasive infrastructure capable of delivering health and family planning services to nearly every corner of the nation. The total government contribution, estimated at \$8,354,000, is indicative of the supportive role played by UNFPA and the level of government commitment to these priority areas.

7. Notwithstanding the impressive accomplishments to date, the Government has set for itself in the sixth five-year plan, 1987-1991, the ambitious goal of further reducing the rate of natural population increase to 1.3 per cent by 1991. As the needs assessment update mission concluded, in order to achieve this objective it will be necessary for the national family planning programme to improve service to current users of contraception through improved management and service delivery. Attention will be paid to ensuring that the full potential fertility effects of high contraceptive prevalence rates (65-75 per cent) are realized in areas and

subgroups of the population which are now underserved by the programme (southern Muslims, northern hill tribes and adolescents). The participation of both governmental and the non-governmental sectors must be enlisted to broaden institutional commitment to and support of family planning. It has also been determined that Thailand should now move from its present relatively narrow population policy focus on family planning to larger issues of population and development planning, sensitizing development planners to the interrelationships between development processes and population change.

III. REVIEW OF UNFPA AND OTHER ASSISTANCE TO DATE

8. The first country agreement covered the period 1971-1976 with UNFPA support of over \$5.45 million and was followed by a second phase through 1978 with UNFPA inputs of about \$2.91 million. The third phase of assistance, based on a needs assessment mission undertaken in 1978, covered the period 1978-1982 with UNFPA providing inputs of \$9.7 million. An independent UNFPA evaluation was undertaken in 1982 of two large family planning and family planning communication projects. This evaluation, along with a second needs assessment mission in 1981, provided the basis for support to the fourth country programme, 1983-1986, valued at \$5.9 million. Expenditures for 1983-1985 under this country programme were \$4.7 million and allocations for 1986 were \$1 million. Major features of the UNFPA-assisted programme, 1983-1986, are listed below.

Maternal and child health and family planning

9. Support to the national family planning programme for improved programme management and expansion of family planning and contraceptive delivery service. UNFPA assistance for this Government/WHO-executed project was designed to improve management and the delivery of family planning services through improved communications between field and central staff of the national family planning programme, better management in target-setting, data collection and utilization, research on abortion as it affects female mortality and morbidity and sex counselling for adolescents. Because of the varied nature of the activities, the project provided a source of flexible funds which could be reprogrammed to meet unforeseen contingencies. The adolescent counselling component of the project has brought reproductive health education and services to more than 10,000 college and university students in Bangkok, established peer-counselling services in three universities and two teacher training colleges and served as a model for further expansion of adolescent services through the Ministry of Public Health and non-governmental organizations as proposed in the new country programme. Perhaps the major contribution of the project has been to desensitize the issue of sex education and adolescent counselling to the point that the Ministry is now prepared to include it in its family planning mandate.

10. Support to national family planning programme for improvement and evaluation of training programmes. Under this project, a human resource development plan was formulated and the training of trainees and field-level personnel in 42 poverty-stricken and border provinces was undertaken. In addition, a monitoring and evaluation system to assess the impact of training programmes was devised and implemented. This project was executed by the Government and WHO.

11. Health care and family planning for Thai hill tribes. An innovative and low-cost health care/family planning delivery system for the northern hill tribes was expanded beyond its original single-district pilot phase to include a large proportion of hill tribes residing in five adjacent provinces. More importantly the project, executed by the Government, has effected a number of significant structural improvements in addressing the needs of the hill-tribe minority, including co-ordination of government and donor assistance earmarked for the hill tribes, recruitment of indigenous tribesmen as community health workers, modification of training and refresher training curricula, health facility blueprints and provision of medicines tailored to the particular health needs of the minorities. In large part because of the attention brought to bear by UNFPA on the needs of the northern hill tribes, other donors, both bilateral and multilateral, are making considerable new resources available to address the hill tribes' overall development needs, including integrated health and family planning. In terms of concrete achievements, contraceptive prevalence in the hill-tribe areas covered has jumped dramatically during the life of the project and government health care services have been improved for this population with little previous access to them.
12. Expansion of MCH and birth-spacing programme in the four southern provinces of Thailand. A new programme, executed by the Government and the Food and Agriculture Organization of the United Nations (FAO), was undertaken in the four border provinces in the south which are inhabited primarily by Thai Muslims for whom acceptance of family planning has been lagging behind the rest of the country. Programme strategy now focuses on support of birth-spacing for MCH rather than fertility limitation. Intensified MCH and birth-spacing services have been provided through mobile motivation and service teams which are staffed primarily by Muslims. The intensified MCH/FP inputs have had mixed results. Total new family planning acceptors in the south increased by 25 per cent from 1984 to 1985 overall, but in 14 out of 34 districts in the targetted provinces progress has been negligible. In these areas it was decided to concentrate almost exclusively on improved MCH services with only modest counselling for acceptance of birth-spacing and services provided only on demand. In addition, the support of local religious teachers and leaders needs to be enhanced.
13. Communication support for family planning activities. This programme, executed by the Government and WHO, has supported three nation-wide campaigns relating to increased motivation and acceptance of intra-uterine devices (IUDs), vasectomy and two-child families. Activities included assistance for the design and testing of innovative prototype materials; special efforts to enlist the country's mass media in support of family planning; strengthening the Government's communication planning and management capacity; and new efforts to promote family planning acceptance in the eight southern provinces.
14. Pilot survey and cost-benefit analysis of family planning and welfare services for women workers in the manufacturing industry. A small project was undertaken in collaboration with the Institute for Population and Social Research, Mahidol University and ILO to assess the family planning needs of female factory employees, especially in the modern industrial sector.

Population information, education and communication

15. Support of population training and other population-related activities in the southern region. To complement the intensification of MCH/birth-spacing services in the four predominantly Muslim border provinces, a population education/awareness creation project, executed by FAO, was undertaken in conjunction with the Prince of Songkla University. The objective of this activity was to sensitize Muslim religious leaders and teachers to the interrelationship between increased utilization of MCH/FP services and an overall improvement in the health of mothers and children. The project also aimed at enlisting the support of governors and district officers in promoting family planning through improved co-ordination of programme inputs. While considerable success has been achieved in enlisting the commitment of such local government authorities, less success has been registered in gaining support from local Muslim leaders and teachers.

16. Population education through rural agricultural extension network. In collaboration with FAO, UNFPA also supported the creation of an overall management process for the incorporation of population education into the extension agent training activities of the Ministry of Agriculture; the creation of a manual and training scheme; and the training of trainers. UNFPA stressed the need to further the institutionalization and integration of population education in the training programmes of the extension workers through the development of a core team of population education specialists; training of extension personnel; production of audio-visual materials; and adaptation of the training manual. Following an evaluation in May 1985, it was concluded that the project had achieved its objectives and had greatly assisted the Ministry of Agriculture and its outreach extension agents in incorporating population concepts in development activities. However, the continued absence of a clearly defined national policy vis-à-vis the integration of population and agricultural development activities was identified as the major obstacle to the long-term integration process.

17. Development and implementation of population education programmes. In accordance with the priorities of the fifth five-year development plan as well as the recommendations of the 1981 needs assessment mission, the project, executed by UNESCO, aimed at institutionalizing population education in regular education programmes. The project also endeavoured to link efforts related to population matters within and outside the education sphere and to strengthen all agencies working directly in population education. In addition to producing and distributing teachers' manuals, supplementary readers for elementary and secondary school students, newsletters and wall-sheets, the project aimed at incorporating population education into the teacher training curriculum at different levels. The major shortcomings of the population education programmes, however, are that population education courses remain electives for both secondary students and teachers in teacher training colleges, with the result that students seldom elect population courses and teachers have little incentive to specialize in population education. Furthermore, there would definitely appear to be a need to broaden the definition of population education to include sex education, a subject the Ministry of Education has been reluctant to address.

Population dynamics

18. Preparation of population projections and targets for the sixth five-year development plan. A small grant was made to the National Economic and Social Development Board to assist in the preparation of national and regional population projections as a planning tool for the formulation of the population component of the sixth five-year plan.

Other external assistance

19. Other external assistance for population activities has been provided by a wide variety of multilateral and bilateral agencies, including the World Bank, the Australian Development Assistance Bureau, the United Kingdom Overseas Development Administration, the Canadian International Development Agency (CIDA), the Governments of the Federal Republic of Germany, Norway and Sweden, the United States Agency for International Development (USAID), Family Planning International Assistance (FPIA) and a number of international non-governmental organizations, such as the Association for Voluntary Surgical Contraception, International Development Research Centre (IDRC), International Planned Parenthood Federation (IPPF), the Japanese Organization for International Co-operation in Family Planning (JOICFP) and The Population Council. During the period 1982-1986, total grant and loan assistance to the national family planning programme by the major external agencies totalled approximately \$30 million or about 40 per cent of all financing.

IV. FINDINGS OF THE NEEDS ASSESSMENT MISSION

20. In February and March 1986 a needs assessment update was conducted in Thailand. The preliminary findings can be summarized as follows.

21. For the 65 per cent of married couples of reproductive age now using contraception, increased efforts should be made to improve the fertility effects of such use, including research on areal differences, strengthening the quality and delivery of information, continued efforts to promote acceptance of permanent and semi-permanent methods and strengthening the campaign approach to service delivery.

22. The emphasis of the national family planning programme strategy should be shifted in poorly performing areas from the provincial level to districts. Better understanding of district-to-district variations should be encouraged as should the transfer of experience from successful to lagging districts. A more innovative approach is called for as is involvement of the Ministry of Interior and other development agencies in support of voluntary family planning efforts.

23. The mission recommended continued support for addressing the needs of special groups, including the southern Muslims, the hill tribes, adolescents, factory and construction workers, residents of unorganized slums and private purveyors of contraceptives, such as pharmacists and pharmacy sales personnel.

24. The mission recommended that the Government pay particular attention to the financial, managerial and staffing implications of increasing the current

prevalence rate from its present level of 65 per cent to the target level of 75 per cent by 1991. In particular, greater effort needs to be directed towards "educating the educated" about the mutual gain to be derived from relating population and family planning objectives to sectoral objectives.

25. The population education programme in the formal school sector still needs strengthening and broadening, especially in vocational schools and Islamic religious institutions, and its contents should be expanded to include sex education to meet the growing needs of adolescents. Similarly, population education for men and women in the non-formal sectors should be strengthened to sensitize ever larger portions of the population to their role in alleviating population problems.

26. Demographic research and data collection as a whole largely reflect the immediate needs of the population programme and are characterized by attention to practical implications. However, continued support should be given to such activities as sample demographic surveys, strengthening the vital registration system, the creation of a national data bank, research on basic demographic processes, such as infant and child mortality and MCH care, programme issues such as abortion, family planning management, regional and subregional variations in family planning acceptance and fertility decline, future funding requirements to meet projected family planning targets and so forth. In accordance with UNFPA policies in the collection and analysis of these types of data, it should be ensured that the information is provided in gender-specific form.

27. Attention was drawn to human resource development needs in data collection and demographic research communities and the need to project future skill and personnel requirements.

28. Although contraceptive prevalence rates were high, fertility decline seemed to be levelling off. Hence greater focus should be directed to the persisting social and economic supports for higher-than-replacement fertility.

29. The mission recommended that co-ordination of population activities be introduced at the highest level of the Government and should encompass the Ministries of Health, Interior, Education and Agriculture as well as the Ministries of Finance, Economic Affairs, Commerce and Transportation. Equally, more work was needed in the areas of demographic and socio-economic policies and policy instruments for the purpose of establishing to what extent they were complementary with a view to maximizing effectiveness.

30. Training was recommended for high- and middle-level programme development managers, both directly and indirectly involved in the planning process. In this context, efforts will be made to ensure the inclusion of women in training programmes. The mission also urged that a data bank be established in order to make data more accessible to policy-makers. In addition, a more effective mechanism should be established for ensuring that important research findings, implications and recommendations reach the right persons promptly.

31. The mission identified four general areas requiring additional work: female labour, female education and training, female health and the impact of social and political legislation and activities on the full participation of women in the development process. The mission also recommended the creation of a data bank on women's issues and more action-oriented research and small-scale projects addressing the management of specific programmes benefiting women such as skill development and vocational and gainful economic activities.

V. THE PROPOSED PROGRAMME

32. As indicated above, the Thai population programme has been very successful. Nevertheless, the Government of Thailand aims at further reducing its rate of natural population increase. Moreover, the Government wishes also to improve its services in areas that have been lagging behind and to subgroups which are now underserved. The proposed programme addresses these points.

Maternal and child health and family planning

33. Institutionalization of maternal and child health and birth-spacing services in selected districts in the south. This project's objectives are to improve MCH care and increase contraceptive prevalence from 35 per cent to 55 per cent in selected districts in the south, which represents a shift in emphasis from the earlier project's four-province focus to a more selective district approach not confined to the border area. In many districts in the intervention area, the population is now sufficiently motivated to accept direct family planning services. In addition, in the conduct of these activities close co-operation will be established with the activities planned for the project on improvements in the living conditions of rural women. However, a number of districts remain unchanged in their resistance to family planning, MCH or birth-spacing services. It is in these more resistant districts, especially those with large proportions of minority groups, that the mobile motivation and service teams funded by the earlier project will concentrate their activities, with particular emphasis on the provision of MCH services, motivation for birth-spacing for MCH purposes and the provision of birth-spacing services on a demand basis. The Ministry of Public Health, the implementing agency, will provide population education and motivation to religious leaders and teachers in order to gain their support for both MCH and the concept of birth-spacing as opposed to fertility limitation. An amount of \$777,000 has been proposed for this activity for five years mainly for training provincial and village health staff, regional leaders, travel costs for supervisory staff and motivators, research studies and some expendable equipment. An external evaluation of the project is planned.

34. Strengthening of the institutional structure at the Ministry of Public Health for the management of the hill-tribe health and family planning programme. Considerable progress has been made in the way the Ministry of Public Health provides services to hill-tribe minorities in the north, and this success has also attracted substantial bilateral funds to the region. Although the lack of resources is no longer a major obstacle, the creation of the institutional capability for co-ordinating resources and work plans and for providing technical

backstopping to provincial and sub-provincial authorities for the more effective utilization of resources remains problematic. Following the recommendations of the needs assessment update, the project is designed to provide advisory services and some local support with the aim of assisting the Ministry of Public Health to develop a comprehensive health care/family planning programme for the entire north and for backstopping provincial health authorities through the Hill-tribe Health Development Centre which has recently been established. This will be a two-year project and an amount of \$291,000 is proposed mainly for the salary of a full-time field co-ordinator, the training of community health workers and provincial, district and Hill-tribe Health Development Centre staff. Some equipment including data-processing equipment will be provided. The project will be implemented by the Ministry of Public Health. An external evaluation of the project is planned.

35. Preparatory assistance to an integrated MCH/FP and rural development programme for hill tribes. Another project, begun in late 1986, is primarily a joint programming effort among UNDP, UNFPA, the United Nations Fund for Drug Abuse Control and the United Nations Children's Fund (UNICEF) designed to support integrated rural development in a hill-tribe area where opium production and addiction pose major problems. Although the larger project aims at the development of physical infrastructure and crop-substitution, the health/family planning component, identical to that provided through the preceding project (see para. 34), is central to the success of the larger project and will be funded by UNFPA as its contribution to the combined United Nations agencies' undertaking. It is proposed that an amount of \$124,000 be allocated for this four-year project for the training of community health workers, village health volunteers, village leaders and equipment for health stations.

36. Strengthening the capacity of the national family planning programme to deliver and evaluate special programmes and improve service delivery through strategic planning. In order to respond to relatively modest needs for flexible funding, an omnibus project is being proposed for the family health division of the Ministry of Public Health. The objectives of this project are to enable the national family planning programme to undertake experimental work on issues of national policy relevance, such as cost recovery of contraceptives, to intensify activities in selected districts in the non-Muslim south to bring family planning performance more in line with the national average, to address the longer-range human resource development needs of the Ministry, to undertake studies and projects to strengthen the monitoring of programme performance, especially in the growing private sector and to strengthen the utilization of relevant research findings. An amount of \$910,000 is proposed for five years, mainly for training, both in-country and abroad, research and some equipment. The project will be implemented by the Ministry of Public Health. Regular monitoring of the project will be undertaken by the Government with the assistance of the UNFPA office and an evaluation of the project by the Government is planned.

Population information, education and communication

37. Population education in schools. The needs assessment update made several recommendations for further strengthening population education in and out of school. Although it is not possible for UNFPA to fund all the identified needs,

additional assistance will be provided in order to make population education compulsory rather than elective for both students and teacher trainees. Support is proposed for the development of population education teaching aids and packages currently being undertaken in the Division of Teacher Training of the Ministry of Education. This involves the development of new population education curriculum and training modules both for use by prospective teachers in teacher training colleges as well as for in-service training of elementary and secondary school teachers of population education. In addition, in order to address the growing problem of adolescent sexuality, an in-service training programme on adolescent sex counselling will be implemented, perhaps in conjunction with a non-governmental organization, for vocational school counsellors, nurses and physical education teachers, all of whom have been identified as sources to which students sometimes turn for advice. An amount of \$350,000 is being requested to support these school-related activities.

Basic data collection and analysis

38. Creation of a national population data bank. The need for a national data bank for population-related information was reiterated in the needs assessment update. The National Statistical Office has recently organized a data bank division whose objectives are now confined to categorizing and storing various data now collected by the office, including censuses, housing surveys and other periodic surveys. There is, however, a need systematically to train personnel in how to create and maintain a truly user-friendly system to ensure that information is fully used in decision-making. It is proposed that \$200,000 be set aside to assist the Office to develop a national data bank and to strengthen its institutional capability to manage such a facility.

Population policy formulation

39. Establishment of a technical team in the Ministry of Interior to accelerate national family planning programme efforts. In line with the needs assessment update recommendations and the sixth five-year plan, this project aims at creating a functional awareness among Ministry of Interior officials, both at the central office and in selected provinces, of particular population problems and at addressing the informational needs for monitoring population change and specific policy and programme interventions to assist the Ministry of Public Health's family planning programme. It is proposed that an amount of \$738,000 be allocated, mainly for training costs, subcontracts and some equipment. An external evaluation of the project is planned.

40. Integration of population factors and human resources into development planning. Based on the needs assessment update recommendation that the institutional structure for population policy and planning be strengthened, this project, executed by ILO, is designed to enhance the capacity of the relevant government agencies to integrate population and human resource planning. Assistance will be made available to the National Economic and Social Development Board for the establishment of a population development unit whose staff would be trained both in-country and abroad and then in turn provide training for the various sectoral units within development agencies. The unit would also undertake

an inventory of population and development-related research, identify research needs and commission outside researchers to conduct the work. It would also be the primary user of the policy options formulated by the Thailand Development Research Institute described below (see para. 41). An amount of \$350,000 is proposed for short-term consultancies, training, research grants and equipment. An external evaluation is planned.

41. Strengthening the capacity of the Thailand Development Research Institute to consider and analyse development planning and population policies. The Thailand Development Research Institute is a private think tank with financial backing from the Government of Canada and anticipated future support from the Government of Japan. It has strong linkages with the National Economic and Social Development Board. The Institute is responsible for a variety of economic studies which identify options upon which government policy-planners can base their development priorities and programmes. The Institute however lacks a particular population focus and as a result has neither the staff nor the programme for building population into its economic modelling work. The objective of this project is to build up demographic capability within the Institute by recruiting four additional senior and middle-level staff with a background in population. In addition an ambitious research programme has been proposed which sets out to incorporate population parameters in the Institute's general equilibrium model, now widely used by Thai planners. The model will in turn generate various population scenarios or consequences of development planning which can be used by government planners in their decision-making process. The Board will be invited to second several staff members to work with the Institute in order to ensure that they understand the processes involved and can use the policy options so derived. An amount of \$500,000 is being requested for this three-year project, mainly for research, training, hiring of local experts and equipment. An evaluation of the project by the Government is planned.

Population dynamics

42. Socio-economic consequences of fertility decline for Thai families. A small two-year research project is proposed to further understanding of the socio-economic consequences of Thailand's dramatic fertility decline at the micro level. The findings will help in assessing the extent to which the original rationale behind the fertility reduction and family planning policy is being met and in developing population and socio-economic policy options for the future. Thailand is an ideal setting for empirical research into the importance of lowering population growth rates as a means of fostering development and improving family and individual welfare. The findings will be of considerable importance to demographers and planners elsewhere. An amount of \$68,000 is requested for training, hiring of local short-term expertise and some equipment.

Women, population and development

43. Improvements in living conditions of rural women through education and training activities. The objective of this project is to improve the living conditions of rural women and their families in the south through education and training in business skills and extension of credit for income-generating activities. The project will help in redefining the role of women within the

family, increasing rural employment and reducing infant mortality and birth rates. It has been proposed to extend an existing project which is supported through Women's World Banking in New York and the Bangkok Bank Ltd. The project is designed to provide rural women running family-owned small businesses with access to formal credit markets for unsecured loans. UNFPA would contribute up to \$100,000 to the loan guarantee fund which, with other contributions, would bring the total amount of loans available to \$400,000. In addition, the National Council of Women of Thailand will enlist its strong network of non-governmental organizations, especially in the south, to promote the project, recruit and screen loan applicants, assist in the processing of loan applications and provide managerial and technical training to loan recipients. A total of \$260,000 has been requested for this three-year project for training, travel costs of project personnel, the loan guarantee fund and some equipment. An internal evaluation is planned by the implementing agency, the National Council of Women of Thailand.

44. Expanded family life education counselling programme for adolescents. The project is designed to reduce sex-related problems among adolescents and increase their knowledge of contraception and reproductive health, thus contributing to the achievement of national targets of at least a 75 per cent contraceptive prevalence rate by 1991. It is proposed that the Ministry of Public Health's core family planning programme in six provinces with regional MCH centres be expanded to include adolescent counselling and services to in- and out-of-school youth. Health personnel will be trained and outreach services, primarily in universities and colleges will be provided in conjunction with peer groups. In addition, various promising innovative leads in reaching adolescents with information and services will be supported, as will innovative strategies for reaching rural and out-of-school youth. Supporting the service component of the project will be a carefully designed research component examining the various causes and consequences of adolescent sexuality. An amount of \$825,000 is proposed for this five-year programme for training counsellors, refresher training for MCH/FP staff involved in the programme, school administrators, grants to participating institutions, including hospitals and equipment. The project will be implemented by the Ministry of Public Health. WHO will be invited to assist as a technical resource agency and in monitoring. An external evaluation is planned.

Monitoring and evaluation

45. Realizing the need to ensure effective and efficient utilization of resources, periodic and structured evaluation is a built-in component of all UNFPA-supported projects, both ongoing and new. All projects include a plan for monitoring and evaluation with, in most cases, specific indicators of progress. All projects will also prepare progress and internal self-evaluation reports for discussion at tripartite review meetings. Those projects working with the hill tribes, with counselling programmes for adolescents and with the Thailand Development Research Institute include innovative activities and will be closely assessed in this process. Periodic country reviews with Government and UNFPA participation are also planned.

Financial summary

46. As indicated in paragraph 1, a programme of \$5.5 million is proposed from UNFPA regular funds. This UNFPA commitment of \$5.5 million to the Government of Thailand for the five-year period 1987-1991, by project area within each work plan category, subject to the availability of funds is as follows:

	\$
<u>Maternal and child health and family planning</u>	2 102 000
<u>Population information, education and communication</u>	350 000
<u>Basic data collection</u>	200 000
<u>Population policy formulation</u>	1 588 000
<u>Population dynamics</u>	68 000
<u>Women, population and development</u>	1 085 000
<u>Unprogrammed reserve</u>	<u>107 000</u>
Total	<u><u>5 500 000</u></u>

IV. RECOMMENDATION

47. The Executive Director recommends that the Governing Council:

(a) Approve the assistance to Thailand in the amount of \$5.5 million for the five-year period, 1987-1991;

(b) Authorize the Executive Director to commit the amount of \$5.5 million from UNFPA regular funds;

(c) Authorize the Executive Director to allocate the funds and to make the appropriate arrangements with the Government of Thailand and with the executing agencies.

