Thirty-fifth session
6 June-1 July 1988, Geneva
Item 6 of the provisional agenda
UNFPA

UNITED NATIONS POPULATION FUND
REPORT OF THE EXECUTIVE DIRECTOR FOR 1987

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Interregional programmes and projects (continued)

86. Concerning NGO-executed interregional activities, NGOs continued to be active in the dissemination of information and the promotion of awareness of population issues. Several NGOs brought out high-quality publications that were meant to draw attention to critical population issues. For example, the Population Crisis Committee, with UNFPA financial assistance, released an issue paper entitled "Access to Birth Control: A World Assessment", which was well covered by the print and broadcast media throughout the world. Also, the Population Institute was engaged in a publication programme that sought both to highlight critical population issues and to ensure that relevant publications were translated into the appropriate languages.

87. Other NGO-executed activities concern the Annual Review of Population Law, a joint publication of the Harvard University Law School and UNFPA since 1985; research and training sponsored by the International Union for the Scientific Study of Population (IUSSP); improvement of civil registration and vital statistics systems by the International Institute for Vital Registration and Statistics (IIVRS); co-operative research among national population research centres, organized by the Committee for International Co-operation in National Research in Demography (CICRED); integration of family planning into parasite control activities, organized by the Japanese Organization for International Cooperation in Family Planning, Inc. (JOICFP); and activities of the World Association of Muslim Scholars dealing with development, health and population.

II. REVIEW OF THE PROGRAMME BY PRIORITY PROGRAMME AREA

A. Family planning

In 1987, UNFPA assistance in this area totalled $73.3 million or 54.8 per cent of total programme allocations, compared to expenditures of $52.8 million or 52.1 per cent in 1986. During the period 1969-1987, UNFPA assistance in this area reached $682.3 million or 47.4 per cent of total assistance.

88. During 1987, UNFPA supported nearly 500 country and intercountry family planning projects, assisting and responding to those Governments in need world-wide. Assistance in MCH/FP was provided in the following areas: delivery services and service-related information and communication; training; contraceptive supplies; clinical/office equipment; local salaries; programme management; technical backstopping; operational programme research; and evaluation. While concerted efforts were made throughout the year to extend MCH/FP assistance by expanding the accessibility of delivery services especially to remote rural areas and urban slums in developing countries in all regions of the world, the Fund continued to pay special attention to the sub-Saharan Africa region, where the pervasively high prevalence of maternal and infant mortality requires urgent assistance from the international community in order to provide for safer motherhood and better family health.

89. UNFPA continued to focus its assistance on training, an area ever in demand at all levels of MCH/FP programme development and indispensable for all
types of people engaged in MCH/FP programmes. At the Regional Training Centre for Family Planning Health in Mauritius, for example, the first series of training programmes newly revised to include clinically oriented fertility management were conducted in both French and English for Francophone and Anglophone countries in Africa. The three-month MCH/FP training courses in French were conducted at the University of Brussels (ULB). In 1987, the University increased the number of courses from one to two per year. At the same time, it added a new pedagogy module to the training course to meet the increasing demands of the Francophone countries in Africa.

90. UNFPA also paid attention to improving the opportunities for and quality of training in the fields of pedagogy, management, health education, and communications, as well as adolescent health for French-speaking countries, particularly in Africa. In this connection, visits were made to identify possible collaborations with various universities and institutions.

91. As more Governments in Africa become engaged in family planning programmes, there is a growing demand for all types of training programmes. In order to respond to these demands effectively, UNFPA decided to assess overall MCH/FP training needs in the region, contracting with the Margaret Sanger Center of Planned Parenthood of New York City, one of the most experienced organizations in the field world-wide, to carry out this important task. Under the terms of the contract, the Center will review existing training programmes and resources and identify new training programmes that are needed for French- and English-speaking countries. In this endeavour, the International Planned Parenthood Federation (IPPF) African regional office will co-operate with the Center. The study is expected to be completed some time in 1988.

92. In early November of 1987, a joint meeting of Governments, UNFPA, and WHO was held in the WHO regional office in Brazzaville, Congo. A total of 90 people representing African countries and agencies participated in the meeting to review mandates, roles, and strategies of the organizations; to analyze MCH/FP programme issues and new directions; and to identify ways to improve mutual collaboration and to reduce difficulties in implementing UNFPA-funded projects in Africa.

93. During 1987, much attention was paid to improving contraceptive technologies. The bulk of UNFPA's assistance in this area went to research activities of the WHO Special Programme of Research, Development, and Research Training in Human Reproduction. UNFPA's assistance was also extended to The Population Council to support the production and distribution of NORPLANT contraceptive subdermal implants. Technical assistance for the initial training programme on NORPLANT was undertaken in such countries as Indonesia and Thailand. The Population Council began to explore strategies and funding alternatives for model training projects in the Dominican Republic and Ecuador which could eventually be adapted for use in other countries. New projects on pre-introduction trials were initiated in Mexico, the Republic of Korea, and elsewhere. In the area of male fertility regulation, UNFPA provided assistance to the International Organization for Chemical Sciences in Development (IOCD) to continue IOCD's efforts to search for a male fertility regulation agent through chemical syntheses. At present, 13 laboratories world-wide are involved in the research.
94. During 1987, UNFPA continued to support information, education, and communication activities in support of MCH/FP delivery services at all stages in all countries where family planning programmes are undertaken.

95. In light of the current international concern with respect to the spread of the Human Immunodeficiency Virus (HIV) and its relationship with MCH/FP programmes, UNFPA has established formal means of co-operation and co-ordination with WHO, in particular with WHO's Special Programme on AIDS (SPA), now called the Global Programme on AIDS, of which the Fund has become a member of the Committee of Participating Parties, along with Governments concerned about the matter. UNFPA has participated in several meetings to discuss more specific issues (such as the interaction between contraceptives and AIDS (acquired immune deficiency syndrome) or between MCH/FP programmes and AIDS) and has established policy guidelines on AIDS (see section on AIDS below). These guidelines, available in English and French, were distributed to all UNFPA field offices for their broad use. Considering the importance of assuring condom quality, both for use as contraceptives and for protection against the transmission of AIDS, data on the condom quality assurance audit carried out during 1987 by six laboratories were analyzed by the Program for the Introduction and Adaptation of Contraceptive Technology (PIACT), an executing agency of UNFPA-supported programmes, in order to improve the quality of condoms.

96. This is the last programme cycle year for many UNFPA-supported projects, particularly so for all intercountry projects. Thus, new four-year intercountry programme proposals were formulated and submitted to UNFPA by WHO. New programmes concentrated on designing and improving tools and interventions for better MCH/FP management (including the establishment of a new micro-computer data base for UNFPA-funded projects) and better modalities (group approach) for service-oriented problem solving; improving training programmes (including the development of effective training materials); improving maternal health through the reduction of maternal mortality; improving health of adolescents; and offering effective technical backstopping to country programmes and projects. Emphasis is to be placed on establishing effective programme linkages between interregional and country programme activities, in order to ensure that the two complement each other. In this connection, there will be a meeting early in 1988 between WHO headquarters and its regional offices to discuss practical means and ways for improving their co-ordination and capacity to implement projects in MCH/FP. UNFPA will attend that meeting.

B. Information, education and communication

In 1987, UNFPA assistance in this area totalled $18.7 million or 14.0 per cent of total programme allocations, compared to $15.6 million or 15.5 per cent of expenditures in 1986. During the period 1969-1987, UNFPA assistance in this area totalled $181.0 million or 12.6 per cent of total assistance.

97. The main aim of UNFPA support to population information, education and communication activities is to facilitate informed decision-making regarding population issues, both by family members and by leaders of societies. For
this reason, IEC projects cover a wide range of field activities and involve participants with varied concerns and interests, and at all levels of government, industry and society: students, teachers, farmers, home-makers, workers, employers, administrators, and policy-makers.

98. The Fund was hard-pressed in 1987 to keep pace with the demand for resources in population IEC, particularly in the Africa region. As a means of meeting the region's immediate needs for educational materials and for use as reference materials in the process of developing similar materials locally, a number of prototype teachers' guides developed recently in Latin America were translated into English and French and distributed to interested African and Middle Eastern countries.

99. During 1987, UNFPA responded to the need for adequate training facilities in population communication for francophone African programme personnel, taking steps with francophone institutions in Belgium, Canada and France to establish suitable short- and long-term courses for them.

100. The Fund continued to support efforts in 1987 to incorporate population education into agricultural extension systems in all regions, working closely with FAO in this regard. A key activity was the holding of a global FAO workshop at FAO headquarters in Rome from 18 to 22 May to develop plans and strategies for this purpose and to create outlines for country-level pilot projects in Egypt, Honduras, Jamaica, Kenya, Malawi, Morocco, Rwanda, Sri Lanka, Thailand, and Tunisia. The workshop produced immediate results, and before the end of the year, a number of countries had expressed interest in going beyond the pilot stage. FAO conducted similar workshops geared primarily towards integrating population education into rural youth programmes, the focus being Africa at the outset.

101. Until now, population programmes around the world have made services available primarily to motivated and easy-to-reach target populations. The challenge now is to extend these services in order to deal with the unmet needs of the remaining populations-at-risk. UNFPA has encouraged the use of a variety of approaches to gain an understanding of the concerns of would-be family planning acceptors, using this information to design communication programmes that will better respond to acceptors' needs. One of the more productive techniques employed for this purpose has been the use of focus group discussions in selected community settings. The Fund has also encouraged a number of agencies and NGOs to conduct such exercises on their own and to tailor new service delivery programmes accordingly.

102. UNESCO continued its UNFPA-funded efforts in 1987 to generate integrated communication activities in support of national population programmes in some 30 countries. At the same time, projects in population education were being implemented in the national education systems of 55 countries. A number of UNESCO's intercountry projects completed their programming cycles, thereby providing a valuable comparative study of project development strategies in population education. As a result, a handbook for teacher training in population education, family life and sex education has been produced and distributed in English, French, Spanish and Arabic versions. Moreover, training kits in population education were designed, and distribution in
English, French and Spanish versions is scheduled for early 1988. UNESCO has also adopted guidelines to promote educational programmes regarding AIDS and its prevention, and is collaborating with WHO in this important area.

103. The regional inter-agency population IEC team of advisers based in Nairobi, Kenya, expanded its functions, assisted by multi-bilateral funding from the Government of Canada. The Dakar arm of the team, comprising staff from ILO, FAO and UNESCO, became operational in 1987, setting-up joint operations in the UNESCO regional office.

104. "Policy guidelines for UNFPA support to population information and communication" were issued in 1987. They state UNFPA's view of these related fields and broadly outline the activities UNFPA will support in population information and communication. They also provide operational guidelines for the components for which UNFPA provides assistance in population communication projects.

105. ILO concluded its 1984-1987 programme cycle of UNFPA-supported activities promoting population education and family welfare in the work-setting. The focus of much of the training was upon personnel managers and trade union officers. In 1987, workshops were successfully implemented among personnel management associations in five countries. This innovative approach to population education will be expanded under the next programme cycle (1988-1991) to include both the urban sector and small-scale entrepreneurs in agri-business.

C. Basic data collection

In 1987, UNFPA assistance in this area totaled $10.5 million or 7.9 per cent of total programme allocations, compared to $9.0 million or 8.9 per cent of expenditures in 1986. During the period 1969-1987, UNFPA assistance in this area totalled $201.1 million or 13.9 per cent of total assistance.

106. The World Population Plan of Action (Bucharest, 1974) recognized the crucial role that population data play in advancing national and international understanding of the interrelatedness of demographic and socio-economic factors in development and the effect such interrelationship has on the attainment of overall goals of advancing human welfare. This was reaffirmed 10 years later by participants at the Mexico Conference of 1984. As a result, Governments have become more aware of their responsibility for providing national statistical services that would make available reliable and up-to-date population data that are indispensable for effective social and economic planning.

107. UNFPA has continued to provide a significant level of assistance to strengthen developing countries' self-reliance in data collection and analysis and to increase their capacity to undertake the functions of planning, designing and implementing basic data collection under integrated statistical systems which include population censuses, intercensal demographic surveys, vital statistics and civil registration. In 1987, UNFPA support for basic data collection included assistance to 57 countries and territories for work on population censuses; to 14 countries for undertaking population surveys; to...
108. In providing assistance in basic data collection, UNFPA strives to ensure that the data collected, tabulated and analyzed lend themselves to analysis by gender. Furthermore, UNFPA strives to ensure that data are made available to national planners and researchers in a usable format. To this end, UNFPA continues to support the establishment of population data-bases at the country level, as well as the development of intelligent and easy-to-use software packages for the retrieval of these data.

109. Throughout 1987, UNFPA continued to provide assistance to different components of population census-taking, particularly in sub-Saharan Africa. The experience gained so far in co-ordinating the various multilateral and bilateral assistance to the sub-Saharan Africa Census Programme has been encouraging. Indeed, through the generous contribution of the Government of Canada, a special training programme on census-taking analysis and dissemination has been established for countries in the sub-Saharan African region. UNFPA assistance has not only helped to make much-needed population data available for effective integration into development planning but, most importantly, has also served to strengthen national capacity and self-reliance in most of the developing countries to plan, design, implement, evaluate, analyze and disseminate quality population data in a timely and usable fashion.

110. In 1987, $10.1 million, or 75.3 per cent of UNFPA assistance to population data collection, went for technical assistance including payment for services of international experts and consultants, as well as for training and equipment. With the 1990 round of the population census approaching, UNFPA support to basic data collection activities at the country level is expected to increase in the coming few years. This will concentrate on technical assistance, training activities and the provision of supplies and cartographic and data-processing equipment. With regard to sub-Saharan Africa countries, however, UNFPA will continue to consider providing support for local costs in addition to technical assistance, in a manner carefully co-ordinated with other donors and in compliance with its policy guidelines.

111. In 1987, UNFPA support for basic data collection in the sub-Saharan region included assistance to 26 countries for work on population censuses, to 2 countries for undertaking population surveys and to 7 countries for establishing or strengthening civil registration and vital statistics systems on pilot scales. UNFPA technical assistance to sub-Saharan Africa countries, including payment for services of international experts and consultants, and for training and equipment, amounted to $3.2 million for censuses, $68,600 for population surveys and $230,350 for civil registration and vital statistics.

112. In 1987, UNFPA continued to provide support for demographic analysis and training, providing assistance to 52 countries for work in this area, 19 of which are in sub-Saharan Africa. Technical assistance amounted to $7.1 million, 40 per cent of which, or $2.83 million, went to sub-Saharan Africa countries.
D. Utilization of population data and population research for policy formulation and development planning

In 1987, UNFPA assistance to (a) population dynamics totalled $15.1 million or 11.3 per cent of total programme allocations, compared to $10.8 million or 10.6 per cent of expenditures in 1986; (b) formulation and evaluation of population policies and programmes totalled $9.4 million or 7.0 per cent of total programme allocations, compared to $8.3 million or 8.1 per cent of expenditures in 1986; and (c) implementation of policies totalled $.25 million or 0.2 per cent of total programme allocations, compared to $.23 million or 0.2 per cent of expenditures in 1986. During the period 1969-1987, UNFPA assistance in these areas totalled (a) population dynamics, $152.7 million or 10.6 per cent of total assistance; (b) formulation and evaluation of population policies, $84.1 million or 5.8 per cent of total assistance, and (c) implementation of policies, $9.9 million or 0.7 per cent of total assistance.

113. UNFPA assistance in these three programme areas seeks to create and/or strengthen the national capacity of countries to undertake the research and analysis and to set up the institutional arrangements required for the formulation and implementation of comprehensive and effective population policies and programmes supportive of overall national development goals. The activities to which support was provided in 1987 include: analysis of socio-economic and demographic data; research on the determinants and consequences of fertility, mortality and migration; studies on the social and economic consequences of population trends, including migration, urbanization and employment; the interrelationship between population, environment, resources and development; the formulation and evaluation of population policies; and the integration of population factors into national development strategies, policies and plans. Training courses on demography and on population and development at interregional, regional, and country levels, to enhance national capability and self-reliance, were also the focus of UNFPA assistance.

114. Among the different activities supported by UNFPA related to the integration of population factors into development planning, the largest proportion of assistance was devoted to the establishment or strengthening of institutional arrangements required to achieve such integration, such as national and sub-national population councils, population units within the national planning system, and other population and development entities. In 1987, UNFPA provided assistance to 39 countries for such activities.

115. UNFPA also provided funds for a variety of research at the interregional, regional and national levels. While research at interregional and regional levels is undertaken primarily to clarify concepts and develop methodological techniques at the country-level, the Fund supported research, mainly through the Population Division of the United Nations, FAO and ILO, on the relationship between socio-economic development and fertility decline in developing countries; demographic change and the changing roles and status of women; key issues of mortality in developing countries; integration of population with rural development; economic-demographic modelling; individual country experience in integrating population variables into development...
planning; demographic consequences of development projects; the impact of urbanization and rural migration on food supply and rural development; and migration and employment.

116. At the country level, the most relevant research activities were oriented towards population growth and future trends; determinants and consequences of migration; human resources development; employment and development planning; the status of women; fertility trends and determinants; aging; economic-demographic development models; and integration of population factors into development planning. Assistance totalling $1.8 million was provided to 18 countries for research activities in the area of population dynamics, with Egypt, Indonesia, Jordan, Mexico, the Philippines, Viet Nam and Zaire receiving substantial amounts. Assistance totalling $270,000 was extended to 10 countries for formulating and evaluating population policies and programmes, with Cape Verde, Egypt, Fiji and Malaysia being the major recipients.

117. The need to overcome the lack of personnel trained in demographic analysis and in integrating population factors into development planning was also an important target of UNFPA assistance in 1987. Therefore, UNFPA supported interregional, regional, and national training courses in these areas. While continuing to support different ongoing courses at all levels, UNFPA started in 1987 the Global Programme of Training in Population and Development at three international training centres -- Catholic University of Louvain, Belgium; the Centre for Development Studies, Trivandrum, India; and the Institute of Social Studies, The Hague, the Netherlands. The UN/USSR Training Programme on Population and Development continued in 1987 with two courses, representing an important effort to train decision-makers/planners on the interrelationship between population and development planning.

118. At the country level, support was provided to countries to undertake training activities in the fields of demographic analysis and population and development planning. UNFPA assistance for such activities was provided to 35 countries.

E. Special programme interests

In 1987, UNFPA assistance in this area totalled $3.6 million or 2.7 per cent of total programme allocations, compared to $2.1 million or 2.1 per cent of expenditures in 1986. During the period 1969-1987, UNFPA assistance in this area totalled $25.4 million or 1.8 per cent of total assistance.

1. Women, population and development

119. The highlight of the activities in the Women, Population and Development sector during 1987 was the approval by the Governing Council at its thirty-fourth session of the "Implementation strategy to strengthen the capacity of the Fund to deal with issues concerning women, population and development" (DP/1987/38). The document, which was prepared in response to the Council's decision at its previous session, was called by the Council "a milestone" in UNFPA's history. The strategy provides a step-by-step plan for the implementation of UNFPA's basic policy to ensure that women's concerns are...
incorporated into all aspects of population policies and programmes and that women are given opportunities to participate actively at all levels of population and other developmental efforts and to benefit from the results.

120. The strategy, which covers a four-year period (1987-1990), calls for the revision of all sectoral policies, programme guidelines and programming procedures to reflect the Fund's basic policy concerning women. Included among the essential elements of the strategy are training for all levels of UNFPA staff and their national counterparts; participation of all organizational units within the Fund; increased co-operation and joint activities with other United Nations agencies; and increased involvement of NGOs. The document also includes annual work plans with verifiable objectives as well as resource requirements.

121. Training for the staff concerning women in development has been extended to national programme officers as well as to headquarters senior and middle-level staff; and plans are under way to hold training seminars in January 1988 for the senior UNFPA field representatives in the Africa and Middle East regions. A similar training seminar was scheduled for February 1988 for the field representatives of the United Nations Children's Fund (UNICEF), World Food Programme (WFP), UNDP, the International Fund for Agricultural Development (IFAD) and UNFPA.

122. Among the sectoral policies and guidelines that have been reviewed and revised are the "Guidelines for UNFPA policies and programmes in the field of women, population and development". This document provides information on the justification for and the nature of UNFPA's support to projects explicitly designed and implemented to benefit women.

123. During 1987, 67 new projects were approved. Most of these projects aim at providing women with educational training and skill development, as well as with improved health and well-being for themselves and their families. The first two objectives are closely associated with the status of women within the family and within the society; the latter two with demographic factors such as fertility, maternal and infant mortality, age at marriage, which are of special interest to UNFPA's mandate.

124. In the category of special projects designed and implemented to benefit women are also those aimed at increasing the awareness of members of the media, policy-makers and planners as well as the general public on the important contributions women make to the national development process and the significance of gender considerations for the achievement of development objectives.

125. The types of projects supported at the national level include, inter alia, Data collection and analysis on the situation of women (Algeria); Training women for participation in development (Costa Rica); Improving situation of rural women (Gabon); Assistance to activities of the National Council of Women (Ghana); Clearinghouse for information on women in development (Malaysia); Establishment of a clearinghouse for information on women (Uruguay); Training workshop for women managers (Zaire); National high-level conference on women, population and development (United Republic of Tanzania); Employment promotion of women and MCH/FP programmes (Kenya);
Establishment of women's corporations (Morocco); Non-formal population education for women (Peru); and Increasing the participation of women in IEC activities of family planning (Portugal). Those at the regional and global level include, among others, Regional Conference on Better Life for Women (Asia); Regional Conference on Women, Population and Development (Latin America); Support to training and other activities for improving the situation of rural women; Regional research and publications on improving the quality of family planning services addressed to women; Regional seminars on definitions and analysis of information on female-headed households.

2. Youth

126. The Fund is aware that many of the issues confronting youth today are of interdisciplinary and intersectoral dimensions, and therefore UNFPA underscores the need for continued co-ordination and information in its youth-related programmes and projects. Thus, the Fund provides assistance for research into specific problems of youth. Among these are an adolescence pregnancy survey executed by IPPF, and an interregional study project in collaboration with WHO which is expected to help prevent adolescent pregnancies, promote reproductive health and also encourage appropriate fertility-related education and service programmes. UNFPA along with other organizations is working under the global leadership and co-ordination of WHO to develop programmes for the prevention and control of AIDS among youth.

127. In accordance with its experience and mandate, UNFPA has strengthened its support to youth-related programmes and projects in the education and communication areas. Most UNFPA-supported youth projects deal with population and family life education, communication and, to some extent, family planning. Some of these projects are included in formal education structures, others in non-formal education programmes, channelled through organized youth groups or community activities organized for and by young people. Among these projects are population awareness and family welfare training for youth workers, family welfare education through development activities for young women, and a comprehensive national training programme for youth in population education. UNFPA also provides assistance for the establishment of sex education programmes and the development of IEC materials for youth.

3. The question of aging

128. In carrying out its support at the international, regional and national levels to a variety of projects in the field of aging, UNFPA within its policy guidelines worked closely with organizations and entities of the United Nations system which are concerned with various aspects of aging. The Fund, in 1987, continued its support to a small number of projects that are examining the progressive aging of societies and the multifaceted impact that the aging of populations will have on the structure, functioning and further development of societies. Among the projects funded by UNFPA in 1987 was a comparative examination of the composition and structure of the economically active population in selected countries throughout the world focusing in particular on the deterioration in ratios between the economically active and unemployed sectors of society and how it affects those dependent on these sectors. This interregional project, a collaborative effort between UNFPA and ILO, will help determine, among other things, policies for the fair allocation
of national resources to different age groups, requirements for the financial solvency of social security systems, retirement ages in different societies, and strategies for increasing the productivity of older persons. The Fund sustained its support to the United Nations Population Division for its examination of the growing evidence that aging population structures can heavily affect a society's socio-economic development potential, particularly when real dependency rates among the elderly are high. The Fund also continued its support to the United Nations Economic Commission for Europe, which is analyzing the implications of the aging of populations in the European region. A similar collaboration was undertaken with the United Nations Economic and Social Commission for Asia and the Pacific (ESCAP). UNFPA provided further assistance to a variety of projects examining the causes and the implications of steady increases in the numbers and proportions of older people, including a project in China, a conference in Spain, advisory missions to Brazil and Mexico, and consultancy services to establish an international institute on aging in Malta.

4. AIDS

129. During the course of 1987, the emerging AIDS pandemic became universally recognized as the century's most devastating infectious disease. Such recognition has been due in large part to the coalescence of the interest and commitment of several entities under the leadership and direction of WHO. The 40th Health Assembly, in May 1987, approved the creation of a Special Programme on AIDS (SPA) and endorsed the Global Strategy for the Prevention and Control of AIDS formulated by WHO. Affected countries and those eager to prevent the spread of AIDS, developing and developed alike, as well as the international assistance community in its bilateral, multilateral and non-governmental forms, were mobilized to an extent previously unseen in response to a single disease.

130. UNFPA had earlier announced that it would work in ways complementary to the strategies set by WHO for the prevention and control of AIDS and within the scope of the resulting national plans. In May, UNFPA participated for the first time in the Third Meeting of Participating Parties, the main advisory committee in the WHO Special Programme of AIDS where country representatives, bilateral and multilateral agencies and NGOs are brought together.

131. In view of the close relationship between AIDS programmes and maternal and child health, family planning, and population education and information, UNFPA prepared special policy guidelines in support of AIDS activities. The guidelines suggest ways in which AIDS-related activities can be effectively incorporated into all pertinent programmes supported by UNFPA. Information and education on AIDS, for example, could be made part of similar activities in MCH/FP, of training programmes directed at health workers and of population and sex education programmes in the schools and in adult-education settings. In addition, UNFPA could support the increased distribution of condoms and help provide means for protecting health workers from contamination with the AIDS virus. UNFPA has also included in its policy the support of studies directed towards the determination of the demographic impact of the syndrome and its social and economic correlates.

132. At the end of the year, UNFPA was engaged in co-ordinating its actions with those of UNDP and UNICEF and in defining the nature and scope of its
interventions in the process of the development of national plans and programmes as set between Governments and the WHO Special Programme on AIDS. The recent arrangements formalized between UNDP and WHO for concerted action at the field level open a substantial operating opportunity for an effective involvement on the part of UNFPA.

III. REVIEW OF OTHER ASPECTS OF THE UNFPA PROGRAMME

A. Policy and programme co-ordination

133. Following the directive of the thirty-fourth session of the Governing Council (decision 87/30 I, 9), the Fund continued, as in previous years, to give strong attention to co-ordination and co-operation with other organizations and agencies, notably within the Joint Consultative Group on Policy (JCGP) and the wider United Nations system. Moreover, under the personal leadership of the Executive Director, collaboration and co-ordination with all partner organizations and agencies has become a key element of the new programme strategy of UNFPA.

134. As Chair of JCGP for 1987, UNFPA's participation in the work of the Group continued very actively. A large number of important initiatives and issues were on JCGP's agenda during the year, including, inter alia, women and development; the social dimension of structural adjustment policies and programmes; collaboration on operational activities, particularly in the sub-Saharan Africa region; harmonization of programming procedures as well as issues of common interest in regard to field services and field premises. In follow-up to the Inter-organizational Top Management Seminar on Women and Development (held in New York in December 1986), attended by the Executive Heads of UNICEF, WFP, UNDP, and UNFPA, as well as by the Director-General for Development and International Economic Co-operation, all the preparatory work was completed in 1987 for the first regional seminar on this topic for field representatives of the four funding organizations in Africa, which was held in February 1988.

135. UNFPA continued collaboration with UNICEF and WHO including work on a joint policy statement on adolescent reproductive health, participation in the essential drugs programme and policy work on family planning/birth-spacing. In October 1987, Dr. H. Mahler, Director-General of WHO, visited UNFPA and discussed with all staff ways and means to improve programmes. Close collaboration continued with all other partner agencies/organizations, particularly ILO, FAO, UNESCO, the World Bank, as well as IPPF.

136. New initiatives were started in 1987 with systematic joint programme consultations between all regional bureaus of UNDP and the Geographical Divisions of the Fund. Region-specific agreements have been reached on issues such as joint presentations to various meetings, collaboration on programming and monitoring, management issues, joint briefings and so forth. Another new initiative was launched on co-operation between the United Nations' Department of International Economic and Social Affairs (DIESA) and UNFPA starting with the setting-up of institutional links and procedures for collaboration on programmes, including a Steering Committee responsible for developing a programme of co-operation and monitoring its implementation.
137. In the same spirit of strengthening ties with all partners and improving collaboration, the Executive Director held programme consultations with FAO, UNESCO, WHO, IFAD, the United Nations Centre for Social Development and Humanitarian Affairs (CSDHA), and others.

138. During 1987, UNFPA collaborated together with a number of other sponsoring organizations on two major international conferences: the Safe Motherhood Conference (WHO, the World Bank, and UNFPA in association with UNDP, and several other sponsors); and the International Conference on Better Health for Women and Children through Family Planning (WHO, the World Bank, UNICEF, UNDP, UNFPA, IPPF, The Population Council and other donors) /see section on conferences and meetings below/.

B. Staff training and development

139. Staff training and development activities received increasing attention throughout 1987. A series of in-house training workshops were developed and successfully convened. For example, 28 field staff members from 26 countries successfully completed the UNFPA Field Staff Orientation and Training Programme in New York from 19 to 30 October 1987. The programme was designed to expand staff knowledge of organizational policies and procedures and equip staff with operational guidelines for programmes and projects with specific reference to field application. Twenty-four headquarters staff attended the UNFPA Workshop on Approval, Monitoring and Evaluation held in New York on 11 to 15 May 1987. This workshop focused on developing basic programming skills in substantive areas of monitoring and evaluation. Moreover, 19 field administrative and finance staff completed the UNFPA Training Course for National Finance/Accounting Personnel, Asia and the Pacific Region, held in Bangkok, Thailand, from 9 to 15 December 1987. The purpose of this workshop was to conduct new and refresher training for staff directly responsible for implementing, monitoring and reporting on UNFPA finance, accounts and procurement operations and procedures. The Fund also provided extensive training in the use of PC softwares (Lotus 1-2-3; dBase III; multimate, among others), in particular to the General Service staff.

140. Such practical training exercises have proved invaluable in the Fund's efforts to improve the implementation and reporting of UNFPA-assisted programmes world-wide. Furthermore, it was not only the participants who benefited from these training activities; the resource persons, all of whom were UNFPA staff, benefited as well. Indeed, the interaction of staff that took place during the preparatory and organizational work for the training sessions inspired team spirit and a healthy exchange of views, all of which contributed to the development of the content and organization of the workshops.

141. Special efforts to increase staff programme attention to specific programming issues concerning women in population and development through training were included in all service training courses. In addition, a special workshop on Women in Development was convened for 29 headquarters staff in New York from 14 to 16 December 1987. By applying a carefully developed case-study methodology, the workshop provided a practical framework...
in project planning by which programme officers can examine the specific needs of women in particular development settings and design programme aspects accordingly.

142. In support of future training and staff development, the Fund's Office for Programme Co-ordination, Management and Field Support began preparation in 1987 of training and orientation handbooks and manuals. These supporting documents concentrate on the self-instructional learning method and emphasize particular functional areas of organizational policies and procedures. Used together with carefully tailored training modules that emphasize specific organizational staff duties, they are a cost-effective and efficient training device.

C. Promotion of awareness and exchange of information

Publications and audio-visual aids

143. The most important story for UNFPA in 1987 was that during the year world population passed five billion. UNFPA devoted its State of World Population Report to the implications of a world of five billion, and declared 11 July 1987, the "Day of the Five Billion". On that day, UNFPA asked countries, organizations and concerned individuals to pause for a moment to consider the future. The theme -- A Day to Celebrate, a Day to Contemplate -- was taken up by over 90 countries, which marked the occasion in their own ways. Observances ranged from sports events to national rallies and special TV and radio programmes.

144. Highlight of the Day was the welcome by the Secretary-General of the United Nations to "Baby Five Billion" in Zagreb, Yugoslavia, on 11 July. The Secretary-General, accompanied by the Executive Director of UNFPA, later attended a special concert for the occasion.

145. A feature of the Day was a television special prepared by Turner Broadcasting System with the participation of several heads of state, leading intellectuals and music stars. Intercut with accurate and moving documentary footage, the programme was a unique illustration of the theme of the Day. Broadcast worldwide by satellite, it was seen in over 80 countries on or around the Day of Five Billion. It was aired again in many countries on United Nations Day, 24 October, and continues to be used as a valuable visual record of a milestone in human history.

146. The State of World Population Report itself was a tribute to the memory of Rafael M. Salas, whose last official document it was. It was the subject of a media seminar in London on 16 and 17 May and was published on 19 May with appropriate publicity, including news conferences in several European countries and in Japan. The Report was translated into 22 languages as well as Arabic, English, French and Spanish among the United Nations official languages.

147. There was world-wide coverage of the Report matching the importance of the subject-matter. In subsequent weeks -- particularly as the Day of Five Billion drew closer -- media coverage increased. The final total of known print and electronic media coverage far exceeded any similar exercise in
UNFPA's history, and served not only to draw attention to the global population situation, but to make the name and role of UNFPA better known throughout the world.

148. A sad beginning to the year, as UNFPA bade farewell to its first Executive Director, thus turned into a triumphant justification and celebration of his work.

149. Among regular UNFPA publications, Populi, on the theme of world population reaching 5 billion, carried the State of World Population Report, and articles on the implications of a world of 5 billion. The quarterly also presented several other important issues during the year: population policies in development planning; perspectives on Asian population; the field experience of UNFPA throughout the world; and women population and development.

150. The UNFPA newsletter, Population, carried regular updates on the Five Billion campaign, and on UNFPA projects and activities including conferences and meetings. An increasing number of articles feature country experiences in population.


Conferences and meetings

152. The Fund sponsored or co-sponsored six major conferences during 1987.

153. The International Safe Motherhood Conference, held in Nairobi, Kenya, in February, called for commitments and initiatives from all parties concerned -- Governments, international agencies, and donor countries alike -- to participate in global efforts to solve the critical problems related to the tragedy of deaths of mothers during pregnancy and in childbirth. Although women have been dying such deaths since time began, only recently have sufficient data and information on this critical issue been gathered. Indeed, the Conference revealed that, at present, half a million maternal deaths take place every year, 99 per cent of them in developing countries, where there are 300 to 1,000 maternal deaths per 100,000 live births, a rate 50 to 100 times greater than that of women in the developed world. The meeting closely examined the nature of the causes (many of which are rooted in the social, cultural, political, and economic environments of these societies) and made recommendations for actions to be taken by both developing and developed countries alike in order to prevent the continuation of this tragedy. Following the Safe Motherhood Conference, a series of committee meetings were held among the representatives of the national and international organizations concerned in order to follow-up on the Conference.

154. A workshop for French-speaking parliamentarians of sub-Saharan Africa was held in March, with UNFPA and UNICEF support, in Abidjan, Cote d'Ivoire. The workshop, organized by the Global Committee of Parliamentarians on Population and Development, was attended by parliamentarians from Benin, Chad, Cote d'Ivoire, Gabon, Madagascar, Mali, Rwanda, Togo, and Zaire. Observers from Botswana, France, Liberia and Zimbabwe also participated.
155. The International Forum on Population Policies in Development Planning, which was held in Mexico City from 4 to 7 May 1987, was attended by some 200 ministers, high-level development planners and population experts from 45 developing countries, as well as a large number of representatives from intergovernmental and non-governmental organizations. The Forum was organized by UNFPA in collaboration with the National Population Council (CONAPO) of Mexico. It considered issues concerning population growth and population distribution, as well as issues regarding the implementation of integration. The Forum adopted a series of action-oriented recommendations that called upon Governments to enhance their commitment at the highest level to the integration of population and development through appropriate political decisions. In addition, it recommended greater attention to the areas of training, research, institutional framework and building up of further awareness of interrelationships between population and development planning.

156. The Asian Conference on Population and Development in Medium-sized Cities was held in the City of Kobe, Japan, from 11 to 14 August 1987, to discuss ways of relieving population pressures on major cities in the region through the development and expansion of medium-sized cities in order to promote better distribution of population, development of economic resources and higher standards of living. With over 100 participants and/or observers from 11 countries (Bangladesh, China, India, Indonesia, Japan, Malaysia, Pakistan, the Philippines, Sri Lanka, Thailand and Viet Nam), the Conference recommended that, because of the important role medium-sized cities play in the overall development process, they should be included in development planning strategies at all levels of Government and that international agencies should give special attention to providing assistance to medium-sized cities. UNFPA was requested to give special attention to assistance in health and family planning services to these cities. The Conference also proposed the establishment of an Asian information network for the exchange of ideas and experiences among officials of medium-sized cities throughout the region. Preparatory work has been initiated by the City of Kobe.

157. The Second Conference of the Asian Forum of Parliamentarians on Population and Development was held in Beijing, China, from 23 to 25 September 1987. Parliamentarians from 23 countries participated (Australia, Bangladesh, China, Democratic People's Republic of Korea, India, Iraq, Japan, Malaysia, Maldives, Mongolia, Nepal, Pakistan, the Philippines, Republic of Korea, Sri Lanka, Syria, Thailand, and Viet Nam; as well as Bhutan, Cyprus, Indonesia, Kiribati, and Tonga as observers).

158. The Forum in its "Beijing Declaration" reaffirmed the goal of 1 per cent annual population growth rate by the year 2000. Participants also pledged to reduce mortality rates, and specifically infant mortality, by 50 per cent by the year 2000; to effect a balanced distribution of population in Asian countries, through policies designed to accommodate urban growth and stem migration from rural to urban areas; to improve the status of women, especially in the areas of health, education and employment; and to create public awareness and acceptance of the changing role of women in Asia.

159. Primary speakers at the Forum were: Mr. Zhao Ziyang, Premier of China; Mr. Takeo Fukuda, former Prime Minister of Japan and Chairman of the Global...
Committee of Parliamentarians on Population and Development; Dr. Nafis Sadik, Executive Director of UNFPA; and Mr. Takashi Sato, Chairman of the Forum.

160. The International Conference on Better Health for Women and Children through Family Planning was convened in Nairobi, Kenya, in October in order, first, to examine the latest available information concerning the interactions among family planning, family formation, and women's and children's health and, second, to consider how to apply this information in policies and programmes directed at improving the lives of women, children, and adolescents. At the meeting, participants discussed the significant role that family planning plays both in improving family health (particularly through child spacing, avoiding pregnancies at ages too young and too old, and avoiding the risks associated with abortions) and in reducing the needless deaths of mothers and children. Each year, approximately 10 million infants around the world do not live to their first birthday; another 4 million small children fail to reach their fifth birthday; nearly all of these deaths take place in the developing world. Participants also reviewed the current status of various related areas, including contraceptive prevalence and technology, women's roles in family health care and education, and infertility. A series of follow-up meetings similar to those held after the Safe Motherhood Conference were scheduled, the first having met in December 1987.

Consultations with non-governmental organizations

161. In 1987, consultations with NGOs continued to provide the opportunity for NGOs and UNFPA to learn of each other's relevant plans and activities as well as to discuss how collaboration could best be strengthened. The thirteenth NGO/UNFPA Consultation in Europe was held in the Hague, Netherlands, on 26–29 March. It was attended by representatives from 32 NGOs, most of which are international NGOs based in Europe, and officials of the Dutch Government. Moreover, representatives from more than 100 NGOs based in North America participated in the Sixth annual NGO/UNFPA Consultation in New York on 22 May.

162. Such consultations have given UNFPA the opportunity to inform NGO representatives of UNFPA's policies and activities, as well as to obtain their support for UNFPA's initiatives. The year saw a tremendous response world-wide to UNFPA's initiative on the World of Five Billion, and NGOs, particularly those at the country level, have actively participated in the exercise.

D. Evaluation of UNFPA programmes and projects

163. The Fund is in the process of shifting its substantive analysis from individual projects to country and intercountry programmes. This has been accompanied by a similar shift in focus in the activities of the Evaluation Branch, which is moving away from evaluation of individual projects to evaluation of country programmes, intercountry programmes and technical areas/issues in global comparative perspective. During 1986, for example, two programmes were evaluated: the country programme of the United Republic of Tanzania, and the interregional programme of WHO. Field studies for the comparative evaluation of training in MCH/FP were concluded, and a global report on the findings is being prepared. The Fund also carried out a desk...
study for a comparative evaluation of population and development activities world-wide and fielded its first regional mission accordingly. Brief information on the results of the evaluations concluded in 1987 is provided below. Further details are contained in DP/1988/36.

164. During 1987, a system for feedback and use of evaluation results, as presented to the Council in DP/1987/39, was under preparation. The classification system has been finalized; and evaluation reports are being collected and analyzed. The computerization of information is under way, and full implementation is expected to take place in 1988. The report on comparative results of evaluations (see DP/1986/37) was translated into French and Spanish and distributed widely. Follow-up of the use of the results of independent, in-depth evaluations continued, and the "Guidelines on monitoring and evaluation of UNFPA-supported projects and programmes", issued in 1986, were translated into French and Spanish and distributed for testing. The guidelines for country programme evaluations were revised and will be further tested in 1988.

Programme evaluation results

165. **United Republic of Tanzania country programme.** While UNFPA projects in the MCH/FP sector had achieved much progress in integrating child spacing (CS) into MCH centres, utilization of those services was generally unsatisfactory. One reason for the low utilization was the arrangement in most clinics whereby CS clients were made to wait in separate areas from those attending for other MCH services. Other reasons included the confusion among health workers as to who was allowed to provide certain types of contraceptives, the weakness of the outreach programme and the failure to make use of other opportunities, such as child immunization, to provide information and instruction in child spacing.

166. The mission found that the IEC projects had been instrumental in raising awareness about population issues and in bringing about positive change in attitudes towards family planning within the political leadership circles. However, such awareness has not yet reached the public at large. The mission noted in particular the institutionalization of family life education (FLE) within the Prime Minister's office in the form of the Family Life Education Programme Office, the introduction of FLE in the curricula of some key training institutions and, most important, the commitment of the Prime Minister's office to assume a leading role in the implementation of the country's future population policy. Among the main weaknesses identified by the mission were insufficient educational materials and a reluctance, owing to the sensitivity of the subject, to address family planning issues, especially those concerning male responsibility.

167. The mission found a clear awareness on the part of the Government of the need to involve women in all aspects of the programme and to address their concerns in the implementation of various projects. The mission noted that projects directly aimed at women but not originally included in the country programme had been devised and implemented. One such project sought— with good results—to create a cadre of women leaders with capabilities for leadership and management of population and development issues. Another
project, the Shinyanga Integrated Development Programme, a JCGP initiative jointly funded by FAO, UNICEF, WFP, UNDP, and UNFPA, was found to address in a comprehensive and innovative manner issues affecting women, such as heavy workload, malnutrition, low income and poor health.

168. The WHO Interregional Programme. Four projects were selected for in-depth evaluation. The mission found that the activities undertaken in the main project, which was to use a team composed of international experts to provide technical and managerial support to national MCH/FP programmes, have been numerous and varied, but that certain difficulties existed, for example due to differences in the mandates of WHO and UNFPA. The mission concluded that the team composition and its funding as a separate project were appropriate. The main issue requiring attention was the need to create a co-ordinated UNFPA-supported WHO intercountry programme, with mutually complementary country, regional and global efforts, in order to utilize inputs in the most cost-effective manner.

169. The second project consisted of studies on maternal mortality and unmet needs in maternal health. The mission found the project's activities well planned and well implemented. The third project was a continuation of previous support to risk-approach studies with the addition of a few new activities, such as the adaptation of methodologies for community involvement. The mission found that while certain components in the project had shown some degree of success, the many years of efforts to apply the risk-approach methodology to bring about health service reorientation had not produced the expected results. The fourth project consisted of studies and workshops on reproductive health in adolescents. The implementation of this project was quite successful, engendering interest and concern in a controversial and sensitive area, on the one hand, and triggering activities at the national level, on the other.

Comparative evaluation results

170. Evaluation missions visited a total of 16 countries in three regions in order to examine health planning and human resources development, curricula of training programmes, training methodologies and technical assistance. The results of the regional evaluations are as follows:

171. Asia. Two of the six countries visited had human resources planning units, but forecasting in these countries was still difficult due to the lack of accurate data on personnel, facilities and services. Training in the six countries was often decentralized, which generally not only made it more attuned to local needs but also tended to create a network of trainers at different tiers throughout the system. According to recommendations of various missions, however, to be successful such decentralized training requires strong technical and financial support from the central unit.

172. The mission also found that while the curricula of training programmes usually included components of MCH/FP, MCH/FP had not, as a rule, been fully integrated into such programmes. As for pre-service training there was typically a gap between the training provided and the requirements of the job, probably due to the lack of involvement of the Ministry of Health in the
development of curricula. While most of the countries had sufficient numbers of trainers, these trainers had not always been adequately trained, in particular on teaching methodology. Teaching materials were usually of good quality, though more abundant in South-East Asia than in South Asia. The role of technical advisers had progressed to that of facilitators for national staff, a positive development.

173. **Sub-Saharan Africa.** Because of the lack of appropriate data on needs, services and coverage, among other things, only a minority of the six countries visited had formal health plans. As a result, many of the primary health care initiatives, such as MCH and the expanded programme of immunization, remain separate, vertical programmes, with little or no horizontal interaction. This usually meant that the main category of service provider was increasingly burdened with performing additional primary health care functions and providing training in them. Training was decentralized, especially in Anglophone countries, which was seen as a positive development in those areas where the regional authorities were active and had the backing of a strong central unit. In some countries, the private sector not only provided training, but also absorbed the trainees once they had completed their training courses. The mission recommended, therefore, that the private sector in such cases be included in national health planning. The mission stressed that better links between training and personnel deployment were needed. Pre-service training tended to be theoretical and focused on curative rather than on preventive health. In-service training generally covered too many topics, gave inadequate attention to population communication and often neglected to include physicians. Nevertheless, some of the courses in the Anglophone countries maintained a good balance between theory and practice. Fellowships for training abroad constituted a major form of technical assistance, and attrition was not a major problem. However, Governments could benefit more if they had central units keeping track of the fellows during and after training. Some co-ordination between donors was taking place, but the mission concluded that such co-ordination could be fully successful only when there is a national MCH/FP programme and a strong government focal point.

174. **Latin America.** While training was considered an essential component in the strategies to extend health coverage in all countries visited, the mission found that the level of support for training varied from country to country. Public sector MCH/FP programmes were generally delivered through existing social security systems as well as through the Ministries of Health. Most countries, however, experienced problems in co-ordinating these services. Moreover, data on the numbers and types of health workers available or required to meet health needs were incomplete, and open admission to universities in some countries contributed to an oversupply of physicians and nurses there. The mission also found that large, university-level training programmes were generally autonomous, with independently developed curricula; thus the depth and scope of MCH/FP coverage varied considerably, and medical personnel acquired most MCH/FP skills through in-service training. The training curriculum in two countries emphasized family planning and adolescent health, while that in another country devoted more time to child health than to maternal health and family planning. None of the four countries visited had in place a systematic process for revising curricula. The in-service...
training — seminars or workshops ranging from one to seven weeks — was seldom aimed at developing competency, attempting instead to provide rudimentary knowledge. Little follow-up of those persons trained took place because of poor record-keeping in some countries and lack of personnel and vehicles in others. Finally, the mission noted that UNFPA-assisted MCH/FP projects throughout the region included major training components. While international donors frequently paid for the operational expenses of training, support for follow-up and supervision of trainees, particularly those in the front-line health delivery system, was inadequate.

E. Technical co-operation among developing countries

175. UNFPA continues to give full support wherever and whenever possible to promote the identification, formulation and implementation of TCDC in the framework of the Buenos Aires Plan of Action, adopted in 1978. This is based on the recognition that technical co-operation among developing countries is an important element of self-sustained, longer term development, which can best be generated and directed by developing countries themselves often sharing experiences and co-operating with one another.

176. The UNFPA mission on TCDC that visited 12 countries in Latin America and the Caribbean in late 1986/early 1987 identified institutional and individual resources that have expertise in the population field which can be utilized in the future implementation of TCDC strategy in the region. As a result of the mission, UNFPA is now able to delineate more clearly which types of activities have the greatest potential for TCDC, in particular those activities that lend themselves to joint action between the UNDP/UNFPA field offices, government TCDC focal point officers and headquarters programme/project officers. The mission noted the importance of the UNFPA-supported project that established a data bank/clearinghouse for population materials in the English-speaking Caribbean at the Caribbean Family Planning Affiliation in Antigua. The mission also helped to update the UNDP Information Referral System (INRES) in the population field in the Caribbean region. During 1987, UNFPA continued to work closely with such institutions in the region as the Latin American Demographic Centre (CELADE), the Economic Commission for Latin America and the Caribbean (ECLAC) and the Caribbean Community Secretariat (CARICOM) in the evaluation of experts from developing countries for possible use in training programmes and in technical programme support.

177. UNFPA continues to support efforts to strengthen the Population Unit of the Organization of African Unity (OAU), which serves as a nerve centre of the African network in the demographic field, especially in the formulation of population and development planning policies in African countries. Moreover, during this reporting period, UNFPA helped to organize study tours to China for African MCH/FP and IEC workers so that they could observe the organization of similar activities there.

178. The establishment of the African information network, with funds from UNFPA, through the Inter Press Service (IPS) Third World Media, has enabled many African journalists to come together to exchange reporting techniques and knowledge on population matters. The Women's Feature Service, an affiliate of
IPS Third World Media, provided opportunities for women journalists and communication media specialists to build their own networks in population and development reporting with special focus on integrating women's concerns into development journalism, throughout Africa, Asia and the Pacific and Latin America and the Caribbean.

179. The TCDC focal point officer at UNFPA maintains a close working relationship with the United Nations Special Unit for TCDC. The officer also works with officers from other United Nations agencies and national staff to improve procedures for using TCDC components in population and development programmes. Programme and project officers in the Fund's Geographical Divisions have also taken an active role in promoting TCDC. The check-off box for TCDC that was put in the "Instructions for Preparation of UNFPA Projects" two years ago has helped considerably in keeping track of TCDC activities in the Fund.

F. Procurement of supplies and equipment

180. All procurement within UNFPA was consolidated in 1987 under the authority of the Procurement Unit. The total value of goods and services processed during the year amounted to $24,514,649. The procurement activities break down in the following main categories:

<table>
<thead>
<tr>
<th>Category</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Headquarters procurement for directly executed projects</td>
<td>$18,184,841</td>
</tr>
<tr>
<td>Procurement service for NGOs</td>
<td>$4,005,617</td>
</tr>
<tr>
<td>Authorized local procurement</td>
<td>$1,389,000</td>
</tr>
<tr>
<td>Publications and audio-visual services</td>
<td>$446,506</td>
</tr>
<tr>
<td>Administrative purposes</td>
<td>$488,685</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$24,514,649</strong></td>
</tr>
</tbody>
</table>

181. The figure for directly executed projects increased substantially over the previous year in part due to the dramatic change in the value of the U.S. dollar against most major currencies. But there have also been significant increases in volume in the supply of contraceptive tablets, injectables, IUDs, vehicles and medical equipment. Included in the procurement of medical equipment are orders placed directly with UNICEF/Copenhagen in accordance with the new agreement between UNICEF and UNFPA. The Procurement Unit has acted as agent for the Kreditanstalt fur Wiederaufbau (KfW) in procuring 31 million cycles of oral contraceptives valued at $4 million and funded through Federal Republic of Germany bilateral assistance to Bangladesh. UNFPA was compensated with a 2 per cent commission. Authorizations for local procurement grew modestly, as the standing authority for purchases up to $5,000 delegated to the field continues to have some impact.
182. Major commodities processed in 1987 by the Procurement Unit: (1986 in parentheses)

\[
\begin{array}{llll}
\text{Commodity} & \text{1987 (in 1000)} & \text{1986 (in 1000)} \\
\hline
\text{Oral contraceptive tablets} & 5,362 & (894) \\
\text{Medical equipment} & 5,284 & (943) \\
\text{Contraceptive intrauterine devices} & 4,169 & (3,095) \\
\text{Vehicles} & 2,497 & (1,250) \\
\text{Contraceptive injectables} & 2,504 & (1,176) \\
\text{Condoms} & 756 & (2,865) \\
\text{Pharmaceuticals} & 530 & (231) \\
\text{Hormones} & 333 & (309) \\
\text{Contraceptive implants} & 193 & (418) \\
\text{Audio-visual equipment} & 136 & (1,431) \\
\text{Office equipment} & 110 & (249) \\
\text{Computer systems} & 196 & (205) \\
\text{Miscellaneous} & 119 & (277) \\
\hline
\text{Total} & 22,190 & (13,344)
\end{array}
\]

G. Multi-bilateral funding of population activities

183. In 1987, there was an addition of 12 new multi-bilateral funded projects, raising to 58 the cumulative total of such projects since the inception of the multi-bilateral programme in 1976. In 1987, UNFPA oversaw and monitored some 42 projects, with allocations totalling $4.9 million.

184. Australia, a new multi-bilateral donor in 1987, supported a project in Viet Nam and joined the Netherlands, Canada and the United Nations Development Fund for Women (UNIFEM) in funding an interregional project to establish a micro-computer data base on women, population and development. The other 1987 first-time multi-bilateral donor, Belgium, supported an MCH/FP project in Bangladesh and established a regional population and development training centre at the Catholic University of Louvain, Louvain-la-Neuve.

185. Joining the countries and organizations listed above were continuing multi-bilateral donors, Finland, Italy, Norway, the United Kingdom and the Organization of Petroleum Exporting Countries (OPEC). Recipient countries included Bangladesh, China, Colombia, Ethiopia, Nepal, Nicaragua, Pakistan, Peru and Somalia. New multi-bilateral recipients in 1987 were the United Republic of Tanzania, Turkey, Viet Nam and Zambia.

186. Several new projects are on the drawing board for multi-bilateral funding in 1988 by most current multi-bilateral donors, including Sweden which renewed its support, and new donor Luxembourg. Among new recipients will be Kenya and Mozambique. A recent major new commitment of note is an approximately $3.1 million family planning project in Pakistan supported by the United Kingdom and four projects in Kenya supported by Canada. Both Norway and the Netherlands are maintaining a substantial number of multi-bilateral projects.