United Nations Population Fund

Proposed Programmes and Projects

Recommendation by the Executive Director

Assistance to the Government of Zimbabwe

Support for a comprehensive population programme

Proposed UNFPA assistance: $10 million, of which $6.5 million is to be committed from UNFPA's regular resources. If UNFPA's funding situation permits, the balance of up to $3.5 million may be provided by UNFPA. If, and to the extent, this is not the case, UNFPA will seek to cover the shortfall from other sources, including multi-bilateral sources.

Estimated value of the Government's contributions: To be determined

Duration: Five years

Estimated starting date: January 1989

Executing agencies:

- Government of Zimbabwe
- United Nations
- United Nations Educational, Scientific and Cultural Organization (UNESCO)
- International Labour Organization (ILO)
- Food and Agricultural Organization of the United Nations (FAO)

Government co-ordinating agency: Ministry of Finance, Economic Planning, and Development
ZIMBABWE

Demographic facts

<table>
<thead>
<tr>
<th>Population Total (000)</th>
<th>8,304</th>
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<tbody>
<tr>
<td>Total</td>
<td></td>
</tr>
<tr>
<td>Males</td>
<td>4,115</td>
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<tr>
<td>Females</td>
<td>4,189</td>
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<td>Sex ratio (/100 females)</td>
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<tr>
<td>Urban</td>
<td>2.039</td>
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<tr>
<td>Rural</td>
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<tr>
<td>Per cent urban</td>
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<td>Population in year 2000 (000)</td>
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<table>
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<th>Functional age groups (%)</th>
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<td>Young child: 0-4</td>
<td>17.8</td>
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<tr>
<td>Child: 5-14</td>
<td>28.5</td>
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<tr>
<td>Youth: 15-24</td>
<td>20.8</td>
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<tr>
<td>Elderly: 60+</td>
<td>4.3</td>
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<tr>
<td>Elderly: 65+</td>
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<tr>
<td>Women: 15-49</td>
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<td>Median age (years)</td>
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<td>Dependency ratios: total</td>
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<tr>
<td>(/100) Aged 0-14</td>
<td>90.6</td>
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<tr>
<td>Aged 65+</td>
<td>5.3</td>
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Agricultural population density (/hectare of arable land) 2.24

<table>
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<th>Population density (/sq. km.)</th>
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<td>Average annual change (000)</td>
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<td>Population increase</td>
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<tr>
<td>Births</td>
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<tr>
<td>Deaths</td>
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<tr>
<td>Net migration</td>
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<td>Annual population total</td>
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<td>Growth rate (%): urban</td>
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<tr>
<td>rural</td>
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<tr>
<td>Crude birth rate (/1000)</td>
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<tr>
<td>Crude death rate (/1000)</td>
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<tr>
<td>Net migration rate (/1000)</td>
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<tr>
<td>Total fertility rate (/woman)</td>
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<td>Gross reproduction rate (/woman)</td>
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<td>Net reproduction rate (/woman)</td>
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<td>Infant mortality rate (/1000)</td>
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<td>Life expectancy at birth (years)</td>
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<td>Males</td>
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<td>Females</td>
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<td>Both sexes</td>
<td>58.3</td>
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<td>GNP per capita</td>
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I. SUMMARY

1. The United Nations Population Fund (UNFPA) proposes to support a comprehensive programme in the amount of $10 million, of which $6.5 million would be committed from UNFPA's regular resources, over a five-year period starting January 1989, to assist the Government of Zimbabwe in achieving its population and development objectives. If UNFPA's funding situation permits, the balance of up to $3.5 million may be provided by UNFPA. If and to the extent this is not possible, UNFPA would seek to cover the shortfall from other sources, including multi-bilateral sources.

2. The proposed programme, which would be UNFPA's second cycle of assistance to Zimbabwe, is necessitated by the Government's increased resolve to address its population problems. It has been developed by the Government in consultation with UNFPA and takes account of: (a) ongoing national efforts to formulate and implement a national population policy and programme; (b) Zimbabwe's First National Development Plan (1986-1990); (c) lessons learned from UNFPA-supported projects to date; (d) recommendations of an international advisory meeting on population policy held in Zimbabwe in October 1988; (e) recommendations of a UNFPA programme evaluation mission to Zimbabwe in August 1988 and of the Fund's 1981 basic needs assessment report; (f) the proposed programmes of other donor agencies such as UNDP, the United Nations Children's Fund (UNICEF), the United States Agency for International Development (USAID), and the World Bank; and (g) the Strategy for UNFPA assistance to sub-Saharan Africa (document DP/1987/37), which was approved by the Governing Council at its thirty-fourth session.

3. The major objective of the proposed five-year programme is to support the Government in its efforts (a) to reduce the rate of population growth from 3 per cent (1988) to a level in line with the rate of growth of the economy; (b) to enhance national expertise in the planning, formulation, implementation, and management of population policies and programmes; and (c) to ensure that Zimbabwe women actively participate in and benefit from national development programmes through the formulation and implementation of appropriate policies and action plans.

4. All projects under the proposed programme, as in all UNFPA-assisted programmes, would be undertaken in accordance with the principles and objectives of the World Population Plan of Action; that is, that population policies should be consistent with internationally and nationally recognized human rights of individual freedom, justice and survival of national, regional and minority groups (para. 14 (d)); that respect for human life is basic to all human societies (para. 14 (e)); and that 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

5. Zimbabwe is a landlocked country covering a total of 390,759 square kilometres, 20 per cent of which is arable. Agriculture is the mainstay of the economy, employing about 40 per cent of the national labour force and contributing 15 per cent of the gross domestic product (GDP) (1982). The major crops are maize, wheat, cotton and tobacco, with the latter two earning 44 per cent of total export income. Mining (mainly gold) and manufacturing are also important sectors of the economy. Zimbabwe is one of the few African countries that have a strong modern industrial framework and large commercial farms, which co-exist side-by-side with small peasant farms. In the late 1970s, largely due to abundant agricultural harvests, the economy grew by about 12 per cent per year. However, during 1981-1984, the economy slumped owing to continued drought, the amount of national income directed to debt servicing, and a world-wide recession. By 1986, economic growth had fallen to just over 2 per cent per year.

6. The 1982 census reported a total population of 7.5 million and an annual growth rate of 3 per cent. With a total fertility rate of 5.6, Zimbabwe’s population is likely to double in 25 years. This will require a corresponding increase in the level of social services and facilities as well as in economic growth. Children under 15 years and adults over 65 years make up 47 per cent and 3 per cent, respectively, of the total population, with only half of the population being of working age. The ratio of females to males is 104:100, and the national literacy rate is 74 per cent, 67 per cent for females and 81 per cent for males. School enrolment for girls and boys is 44 per cent and 55 per cent, respectively, and the gap widens further in favour of boys at the higher educational levels. The incidence of school drop-out is high, and is considerably higher among girls than boys. One of the main causes of this is teen-age pregnancy, which accounts for 33 per cent (1984) of total pregnancies.

7. According to the 1982 census, 57 per cent (comprising mainly indigenous peasants) of the population lives in the communal land and small-scale farming areas; 22 per cent resides in urban areas; and 21 per cent in semi-urban areas, large-scale commercial farms, and resettlement areas. An estimated 70 per cent of the total population depends on subsistence farming for their livelihood. Communal land occupies 42 per cent of total land area, only about 20 per cent of which is suitable for intensive farming.

8. Zimbabwe has also recently experienced increased rural-to-urban migration in search of wage employment, and about 70 per cent of the urban population lives in the three largest cities: Harare, Chitungwiza, and Bulawayo. Based on an average annual urban growth rate of 5.4 per cent (1982 census), 39 per cent of the country’s population is expected to be residing in urban areas by the year 2000. In addition, owing to Zimbabwe’s close proximity to South Africa, it receives a large influx of immigrants (including refugees) from that country. It also attracts immigrants from nearby countries such as Mozambique, Malawi and Zambia.

9. Upon attaining Independence in 1980, the new national Government of Zimbabwe inherited an economy whose development and population distribution
were characterized by a skewed distribution of land and other production resources along racial lines. This was due primarily to the pre-Independence socio-political system in which European settlers controlled national resources, including land. The subsequent massive emigration by the settlers resulted in a serious shortage of skilled manpower in all sectors of the economy.

10. The Government’s Transitional National Development Plan (1982-1985) sought to build a democratic and egalitarian society through land redistribution and population resettlement schemes, expansion of educational opportunities in co-ordination with manpower needs, improvement of preventive health care services, adoption of an urbanization policy and strategy to enhance provision of adequate social services, and promotion of an overall rapid economic growth with equal distribution of income and wealth. The Government also introduced free primary education to assist the rural population.

11. In recognition of the potential role of women in socio-economic development, the Government also undertook legal reforms to improve the status and role of women. Especially significant was the enactment of the Legal Age of Majority Act (1982) which gives women the right to enter into contracts and the freedom from parental control at age 18. The Government also established a Ministry of Community and Co-operative Development and Women’s Affairs to promote policies and programmes for advancing women’s active participation in national development. The Women’s Affairs Unit has now been transferred to the Executive Office of the President. In a related move to improve the health of mothers and children in 1981, the Government granted the local affiliate of the International Planned Parenthood Federation (IPPF) parastatal status under the Ministry of Health, renaming it the Zimbabwe National Family Planning Council (ZNFPC) and expanding and strengthening its functions with emphasis on community-based family planning service delivery and information, education, and communication (IEC) services for rural and semi-urban populations and youth. The Government also provided free contraceptives to all Zimbabweans who earn less than Z$150 per month.

12. In view of the continued increase in population and the dramatic drop in the country’s economic growth rate, the Government has added a demographic component to its national maternal and child health and family planning (MCH/FP) programme with a view to reducing its population growth rate to a level that permits an improved standard of living. The Government accepts family planning as an integral component of MCH services, and its policy is to have all methods of contraceptives (except injectables) offered daily at all health facilities in the country, to improve the quality of MCH/FP services, and to intensify the level of family life IEC activities (especially among men) in order to promote acceptance. In addition, the Government supports the health activities of traditional healers, including traditional midwives.

13. With the present Government’s commitment to primary health care, the quality and coverage of health services (including MCH/FP) provided in Zimbabwe have improved considerably since the country’s Independence and are much higher than that of any country in the sub-Saharan Africa.
14. Despite its lack of an explicit policy on population, the Government of Zimbabwe has consistently recognized rapid population growth as an obstacle to socio-economic development. Accordingly, it has undertaken a number of activities aimed at promoting awareness of the implications of population activities on quality of life, enhancing the delivery of family planning services, and improving national capability in the formulation, implementation, and management of other population-related activities. For example, in 1985, the Government created a Population Planning Unit in its Ministry of Finance, Economic Planning, and Development to enhance effective application of demographic data in national development planning.

III. REVIEW OF UNFPA AND OTHER ASSISTANCE TO DATE

15. The Governing Council at its thirtieth session in 1983 approved UNFPA's first programme of assistance to Zimbabwe in the amount of $3.45 million (1983-1988) to assist the Government in implementing an interrelated set of projects that would provide the data, capability, and machinery required for addressing the country's population and development needs. UNFPA assistance covered: (a) implementation of the 1982 population census, and analysis and dissemination of the results; (b) establishment of a demographic training programme; (c) improvement of national MCH/FP services; and (d) promotion of activities to enhance the role and status of women and youth.

16. The cumulative allocations through 1988 were $2.35 million, and the balance of $1.1 million is subsumed under the proposed second programme (1989-1993). Of this balance, $1 million had been earmarked for promotion of population IEC services. However, due to a number of factors, project proposals that were developed were not implemented. To avoid this problem in the proposed programme, UNFPA has initiated extensive discussions with the Government towards increasing active local participation in identification of national IEC needs, formulation of project requests to address these needs, and setting up an effective mechanism for co-ordinating donor inputs in the IEC sector. The Fund will also assist the Government in incorporating population IEC components into all appropriate development programmes.

Maternal and child health and family planning

17. Recent evaluations of the Zimbabwe MCH/FP programme reveal some weaknesses. First, there are wide disparities in the health status and services in different parts of the country. For example, very high rates of infant and maternal mortality prevail in the communal areas and very
low rates in the urban areas. Second, there is a limited range of contraceptives (85 per cent of modern contraceptive acceptors use the oral pill), a limited field network for delivery of family planning services, and inadequate management of the national family planning programme. Third, substantial potential demand for family planning services is not being met, owing to a desire either to limit family size or to delay pregnancy for at least one year. Fourth, population/family life IEC services are inadequate, especially for men, adolescents (including youth), and women in the high-risk group. Despite these shortcomings, the national programme did succeed in promoting awareness and acceptance of family planning services and in achieving a modern-contraceptive prevalence rate of 29 per cent. The UNFPA MCH/FP programme, described below, provided substantial support for the national programme.

18. Assistance to the MCH/FP programme. The primary objective of this project was to strengthen the capacity of the Ministry of Health (MOH) to integrate family planning into MCH services and to meet the country's contraceptive needs. UNFPA assistance of $839,000 was used for technical advisory services in MCH/FP programme management, two Masters of Public Health fellowships, and supplies of IUD insertion kits and other contraceptives. The project helped to provide integrated MCH/FP services at most MOH service outlets, establish a Co-ordinating Unit within the MCH Department of the MOH, increase national expertise in programme management, and enable the Government to implement its policy of supplying free contraceptives to low-income groups. The project also provided training in family planning to a number of nurses, midwives and health attendants.

19. Assistance to Faculty of Medicine, University of Zimbabwe (Phase I). This project sought to strengthen the capability of the University of Zimbabwe to integrate MCH/FP components into the training of medical students, in-service medical officers, and paramedical personnel, and to develop and implement operational and socio-cultural research. The project further aimed at improving the quality of family planning delivered through obstetrics and gynaecological services at Harare Central Hospital. UNFPA assistance supported technical advisory services, an international workshop on hormonal contraception, and a national workshop on research methodology. The project helped to strengthen the family planning component of medical training, improve the staff at the Faculty of Medicine, and increase the number of post-graduate students in obstetrics and gynaecology. However, owing to delays in the recruitment of additional teaching staff, the University has been unable to institutionalize the project activities.

20. Support to MCH/FP training at the University of Zimbabwe (Phase II). As a follow-up to the above project, a second phase aimed to provide family planning services to 4,000 new acceptors (especially of high-risk groups) each year, to train some 160 medical students and physicians each year in family planning, and to enhance knowledge of family planning services among women at high risk. The project succeeded in establishing a family planning clinic at Harare Hospital. The clinic serves both in-patients and out-patients, as well as the hospital staff. In 1987, the clinic
provided family planning services to about 10,000 acceptors, including
4,400 new acceptors. However, the lack of adequate accommodations within
the hospital constrained family planning service delivery and the training
of medical students.

21. The UNFPA-sponsored country programme evaluation conducted in August
1988 found that the above-mentioned MCH/FP projects have partly succeeded
in achieving their specified objectives, but there remain some weaknesses
to be addressed. These include the changing role of various health workers
in MCH/FP service delivery, the limited role of the Ministry of Health
itself in management, supervision, and monitoring of family planning
services, the inadequate collection and analysis of family planning service
statistics from the MOH service outlets, the limited mix of contraceptives,
and inadequate population/family life IEC activities in support of MCH/FP.
Such weaknesses are believed to have contributed to under-reporting of
family planning acceptance rates and the observed plateauing of family
planning acceptance since 1986.

Basic data collection and analysis

22. 1982 Population Census: Following Independence in 1980, the new
Government of Zimbabwe considered it most imperative to have a reliable
demographic data base for its development plans. Hence, the 1982 census
was undertaken to obtain up-to-date demographic and socio-economic data,
develop national expertise in the collection, processing, analysis and
dissemination of such data, and establish the institutional framework for
carrying out decennial censuses and inter-censal demographic surveys.
UNFPA provided $504,000 in assistance (1982-1988) for technical advisory
services in cartography, demographic analysis, and data processing, as well
as for training, equipment and printing. The census enumeration took place
in August 1982, and a report on the main demographic features of the
population of Zimbabwe, based on an analysis of a 10 per cent sample of
the census results, was published. A national seminar was held to
disseminate these analyzed results. The experience gained from the census
has enabled the Government to undertake a number of post-census demographic
surveys. However, because of unforeseen constraints (e.g., inadequate
computer facilities, high turnover of trained staff), the post-enumeration
phase of the census has been seriously delayed.

23. Law and population. In order to enable Zimbabwe to create a
favourable legal and political climate for the formulation and
implementation of population policies and programmes, this project was
designed to enhance policy-makers’ understanding of the impact of
legislation on population-related activities and vice versa. Among the
activities planned under this project were research studies on various
population topics, a national workshop to discuss the findings of these
studies, and publication of a final report. UNFPA assistance of $45,000
(1985-1986) was to be used for the cost of national consultancies,
seminars/workshops, equipment, printing, and backstopping missions. In
spite of losing two key personnel, most of the research studies have been
satisfactorily completed, and the Government is very interested in
continuing the project.

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24. **Population and Development Planning Unit (Phases I and II).** The pre-project phase (1985-1986) aimed at achieving increased understanding of the interrelationship between population and development and laying the foundation for a national institution to be responsible for integrating population components into development planning. UNFPA allocated $140,000 (1985-1986) to support the costs of technical advisory services, training, office equipment, and printing. The project succeeded in enhancing awareness of sectoral needs for demographic data and population planning, strengthening the national resource base for generating these data, and creating awareness among planners and policy-makers of the need for integrating population factors in development planning. Partly as a result of this, the Government has established a Population Planning Unit (PPU) in the Central Statistics Office (CSO) to promote the flow of data between users and producers of demographic data and to enhance knowledge and expertise in the analysis of population data. As a sequel to the first phase of the project, UNFPA approved a further $513,000 (1987-1989) to assist the Government in strengthening the functions of the PPU. The second phase of the project, which continues to be executed by ILO, has had several notable accomplishments: the training of two national staff in population, human resources and development planning; training of a senior policy-maker in the use of demographic data for development planning; and undertaking of special studies on the interrelationship between population, human resources, employment and development variables.

**Population dynamics**

25. **Demographic training programme.** This project was approved in 1984 to assist Zimbabwe in increasing its level of national expertise in demography. Located in the Faculty of Social Studies of the University of Zimbabwe, the project was designed to fit well into the rest of the University's academic programme. The University successfully developed curricula for teaching two demography subjects, and between 1985-1987, an estimated 150 students had studied demography. Specific short courses on demography were also prepared for post-graduate students in public administration, nursing, business management, and medicine. A library on demography and related issues has also been created in the University.

**Women, population and development**

26. **Workshop for women managers.** Against the backdrop of improving the extent to which women participate in and benefit from national development activities, UNFPA provided assistance for a national workshop on project management for women managers. The workshop was attended by 18 women drawn from the Ministry of Community and Co-operative Development and Women's Affairs and from national NGOs. Because of the different backgrounds of the participants, the training course, while beneficial, could not meet all of the participants' different needs.

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Other external assistance

27. Zimbabwe has also received assistance in the population-related sector from other sources. The World Bank assisted the Government in launching a $52.6 million Family Health Project (1987-1991) aimed at upgrading the capabilities of district hospitals to handle high-risk MCH/FP cases. The project is receiving assistance from the Federal Republic of Germany, Norway, the Netherlands, and the United Kingdom. UNICEF provided assistance for improvement of primary health care and humanitarian relief, enhancement of community education (with emphasis on women), and development of population IEC materials. The World Health Organization (WHO) assisted in the improvement of the national primary health care programme. FAO, in collaboration with the Government of Italy, has supported projects on strengthening women’s role in rural development programmes. The European Economic Community (EEC) has provided assistance to improve water supply and rural resettlement programmes. UNESCO inputs have been expended on establishing a training programme on Broadcasting of Development Issues at the Zimbabwe Institute of Mass Communication.

28. With respect to bilateral aid, the major donors have been the Federal Republic of Germany, Italy, Sweden, the United Kingdom, and the United States. The United States Agency for International Development (USAID) provided $8.2 million (1982-1985) to assist the ZNFPC in strengthening the national family life IEC and MCH/FP programme, including expansion of the national community-based distribution programme. In 1985, USAID provided further assistance of $10 million (1985-1990) to consolidate population IEC and MCH/FP activities and extend these services to the private sector. The IEC activities have emphasized male responsibility in family planning programmes. Sweden has supported national programmes on training of village workers, expanded immunization, and nutrition. The Federal Republic of Germany has supplied contraceptives and is supporting the construction of an IEC audio-visual production centre. In addition, Canada and Denmark have provided assistance to the primary health care programme.

IV. PROPOSED PROGRAMME 1989-1993

29. UNFPA’s proposed programme has been formulated to complement the country’s First National Development Plan, which calls for, among other things, regulation of fertility in order to reduce the relatively high growth rate of population. The long-term objectives of the proposed UNFPA country programme are to assist the Government in: (a) reducing the annual rate of population growth from 3 per cent (1988) to a level more in line with the country’s economic growth; (b) reducing infant and maternal mortality and morbidity rates through strengthening of the quality and coverage of MCH/FP services, especially among disadvantaged groups of the society; (c) lowering the rate of teen-age pregnancy from the present rate of 33 per cent of the total (1988); (d) attaining equitable distribution of the population and preserving optimum environmental conditions; (e) establishing a national secretariat capable of systematically integrating population factors, including women’s concerns, into development planning and co-ordinating the overall national population policy and programme; and (f) adopting and implementing a national policy on improving the status and role of women.

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30. Towards this end, the immediate objectives of the programme are: (a) to have in place by the end of 1990 a draft population policy and a multi-sectoral population programme (1993-1997) and its implementation plan by 1992; (b) to increase awareness of the impact of family planning on family health and of women's status and role in development activities, especially among men and adolescents; (c) to enhance knowledge of population issues among an estimated 68 per cent (about 2.4 million persons) of the secondary-school population (15-19 years) by 1993; (d) to promote knowledge and awareness among planners and policy-makers of the causes and effects of Zimbabwe's migration trends and resettlement programme on the country's environment, population, and socio-economic development; (e) to increase contraceptive prevalence from the present level of 29 per cent (1988) to a level in line with the Government's desired rate of population growth; (f) to develop national capability to formulate and implement appropriate policies and programmes to permit women to participate in and benefit from national development plans; and (g) to improve the capacity of the UNFPA office in Harare to help the Government co-ordinate population-related activities in Zimbabwe.

31. The proposed strategy entails identifying appropriate mechanisms and means for reaching the target groups and co-ordinating the different planned activities in order to achieve overall programme objectives. The programme would embark on a country-wide awareness creation exercise to sensitize policy-makers, planners, and community leaders to the interrelationship between population and development and the consequent need for a comprehensive population policy and programme. In this connection, operational and socio-cultural research would be conducted to generate information on the relationship between population and selected socio-economic variables, including traditional values, environment, land-carrying capacity, employment, agricultural production, and family health. These research studies would focus on target groups in order to determine their special information needs and to design appropriate population IEC programmes to enhance awareness of population issues and to effect positive changes in attitudes, for example of men and adolescents, to sexual behaviour and family planning. The programme would emphasize interpersonal communication, and all IEC activities would address AIDS prevention as well as improvement of the status of women.

32. To reduce prevailing urban and rural differentials in the levels of infant and maternal mortality and morbidity and in the health status of mothers and children, the programme would intensify efforts to fully integrate family planning into MCH services and to extend MCH/FP services to the relatively under-served and high-risk groups (such as migrants and multi-parous women). Research studies would be conducted to help identify evolving national needs (e.g., a wider contraceptive mix) and the special concerns of women (e.g., arranging delivery of family planning services at convenient times, incorporating women's concerns into all population-related projects) and how best to address them. The programme would also promote survey studies on population and human resource development and assist the Government in incorporating the findings in sectoral policies and programmes. The programme would identify alternative sources (such as NGOs, women's groups and workplace-based organizations) of delivering MCH/FP services and ensure a strong MCH/FP component in the job...
description and training curricula of the Village Community Workers and other rural health workers.

**Maternal and child health and family planning**

33. **Strengthening of MCH/FP services.** UNFPA proposed assistance of $2 million to this sector would be used to help the Government achieve the following objectives: to reduce infant and maternal mortality and morbidity rates; to increase the rate of modern-contraceptive prevalence from 29 per cent (1988) to 35 per cent; to reduce the teen-age pregnancy rate; and to restrict the spread of human immune-deficiency virus (HIV) infection. This project would aim at (a) increasing the coverage of post-natal care from 39 per cent (1988) to 60 per cent (1993) in order to facilitate early post-partum entry of women into the family planning programme; and (b) increasing coverage of tetanus toxoid immunization of pregnant women from 50 per cent (1988) to 70 per cent (1993) to help reduce neo-natal mortality. The project would also support related studies and surveys on family planning motivation and promotional services. To achieve these goals, the project would strengthen MCH/FP programme management capabilities at provincial and district levels; support training of mid-level managers and service providers; sponsor operational and socio-cultural research to generate baseline data for programme planning, monitoring, and evaluation; promote IEC activities in support of the MCH/FP programme including messages specifically designed to address AIDS; and provide necessary logistical support.

34. To help bring about the projected increase in both contraceptive prevalence and supervised deliveries, the project would provide training in family planning motivation, contraceptive re-supply, and client referral system for Village Community Workers and a number of health nurses and traditional midwives. This would enable them to serve the country's contraceptive depots and relieve the community-based distributors of routine duties, allowing them to concentrate on family planning IEC and high-risk cases. The project would provide support to the Department of Obstetrics and Gynaecology and the Department of Sociology of the University of Zimbabwe to enable them to assist the MOH in carrying out operational and socio-cultural studies to enhance MCH/FP acceptance and programme management. To promote use of a wider mix of contraceptives, the research would include comparative studies on various contraceptive methods. This would be supplemented by educating the target populations on the results and by providing appropriate clinical training for family planning service deliverers. As recommended by the UNFPA 1988 evaluation mission, the project would provide necessary equipment and contraceptives in co-ordination with the inputs of other donors and international agencies such as USAID, the World Bank, and others. The ongoing Government exercise to establish management information and logistics systems would facilitate monitoring of the MCH/FP programme. The project would be implemented by the Ministry of Health in close collaboration with the ZNFPC; the executing agency would be identified at a later date.
Population information, education, and communication

35. Proposed assistance of $1.2 million to this sector is aimed at raising the level of awareness of population and family life issues among ever-married women, adolescents, and men in order to promote responsible family life behaviour. The IEC programme would be based on the results of socio-cultural research, cover the topic of AIDS prevention, include gender-sensitive issues to highlight women's status, and address male responsibility in population and family life issues. In collaboration with other donors, a knowledge, attitudes and practice (KAP) survey of family planning would be conducted in 1992 to assess changes as well as to determine programme impact. UNFPA assistance would be channeled to two broad areas: population and family life IEC services for the non-formal sector, and population education for the formal school system.

36. Population IEC and family life education services for the non-formal sector. In collaboration with USAID, the World Bank and the Federal Republic of Germany, UNFPA proposes to support Government efforts to establish a national population IEC programme for the non-formal education sector. Planned activities include research on population information needs; development, pre-testing and production of IEC messages and materials; training of various types of fieldworkers in IEC programme development and delivery; organization of population awareness creation exercises; and conduct of attitudinal surveys on population issues. To provide the necessary institutional framework, UNFPA proposes that the Government set up a National Population IEC Committee (with membership from sectoral ministries and NGOs) to prepare policy guidelines and to develop the framework of a national population/family life IEC programme with broad objectives, strategies, and appropriate mechanisms for implementation, monitoring, and inter-sectoral co-ordination. This would complement the formulation of IEC projects in support of MCH/FP, youth advisory services, the mass media and other sectoral projects. The project would seek to identify an appropriate national body to provide technical guidance, undertake common support activities like IEC research and materials development, and co-ordinate the overall programme to ensure its responsiveness to national needs. A United Nations executing agency would be identified at a later date. UNFPA would provide $600,000 for technical advisory services, research, equipment and training.

37. Population education in the formal school system. In order to develop responsible parenthood behaviour among future adults, the Government, with UNICEF support, has developed population education materials for integration into the curricula of primary and secondary schools. Proposed UNFPA assistance would help review the existing teaching materials, develop teachers' guides and monographs and train teachers in various aspects of population education. The assistance would also be used to integrate population education into the curricula of teacher training colleges, to sensitize school administrators and policy-makers on the need for population education, and to conduct periodical evaluations. The project would seek to reach about 68 per cent of secondary-school students (about 2.4 million people). UNFPA assistance of $600,000 would be used for technical expertise, training, equipment and printing. The project would be implemented by Ministry of Education and executed by UNESCO.
Basic data collection and analysis

38. UNFPA proposes to provide $3.7 million to support two projects in this sector with the objectives of strengthening the national demographic data base so as to enrich sectoral and national planning, strengthening the machinery and national expertise to ensure the continuous updating and application of demographic data, and establishing the framework for research, monitoring, and evaluation of the national population programme.

39. 1992 Population and Housing Census. The Government of Zimbabwe would like to conduct a census in 1992 in order to generate updated demographic and socio-economic data to serve as the basis for formulating and implementing sectoral and national development plans. The census exercise, to include both on-the-job training and formal training programmes, is also expected to strengthen national capability to collect, process, analyze, and disseminate large-scale demographic and socio-economic data. Furthermore, the project would enable the Government to upgrade the equipment required for processing and analyzing such data. To address the evaluation mission finding that inadequate lead time hindered the conduct of the 1982 census, the pre-enumeration phase would start as soon as possible with the supply of equipment, updating of cartographic maps, and so forth. This phase would also be used to process outstanding data of the 1982 census and other demographic surveys that have been carried out. The census would be implemented by the Ministry of Finance, Economic Planning, and Development (MFEDP) and executed by the United Nations. UNFPA would provide $800,000 of the estimated total cost of $3.4 million (1990-1994) to cover the costs of training and data-processing equipment. UNFPA would assist the Government in seeking additional assistance for this project from other sources, including multi-bilateral sources.

40. Social sciences research for development planning. In response to the data needs of sectoral ministries, the Government plans to undertake research studies and surveys on, inter alia, migration, employment, land resettlement and environment. The findings will be used to heighten awareness among sectoral planners of the impact of population factors on sectoral activities and vice versa and thus provide data for use in development policies and programmes. The data would further be used in training programmes that address the application of demographic data in development planning. The project would also organize short courses on population and development for planners and policy-makers in collaboration with the UNFPA-supported demographic training programme (see below). The project would be implemented by the MFEDP, which would utilize the infrastructure and expertise to be created under the census project. The United Nations would be the executing agency. UNFPA would provide $300,000 for technical advisory services, research, training and equipment.

Population policy formulation

41. Formulation and evaluation of population policies and programmes. Proposed assistance in the amount of $950,000 to this sector is aimed at supplementing Government efforts to formulate, adopt and implement a comprehensive national population policy and programme. A three-phase plan of assistance is suggested. In phase one, UNFPA would assist the
Government in drafting a national population policy. The policy would ideally contain, among others things, specific sectoral objectives, mechanisms for inter-sectoral co-ordination, and recommendations on the institutional framework required for the effective implementation, monitoring, and evaluation of the policy. UNFPA would support the establishment of an inter-sectoral secretariat responsible for formulating the draft population policy. The secretariat would, among other things, organize a series of national-, provincial-, and district-level workshops for policy-makers, planners and community leaders (including the private sector and NGOs) to explain the Government rationale for a population policy and to solicit views on the objectives, content and scope of such a policy. In phase two, each province and district would prepare a population programme in line with its development plans. During this phase, seminars would be organized to help sensitize sectoral planners and policy-makers to the impact of population on sectoral policies and programmes. The assistance would also cover inter-sectoral activities (such as joint research and meetings) specifically aimed at improving linkages between the various sectors in order to harmonize policy implementation. These activities are to be completed by the end of 1991, by which time the Government is expected to have formally adopted a population policy.

42. During the third phase (1992-1993), UNFPA would assist the Government in reviewing provincial, district and sectoral population plans and in integrating them into the country's envisaged Second National Development Plan (1991-1995). This would require developing a strategic implementation plan embracing sectoral and provincial/district plans. The Government is currently negotiating with the World Bank concerning a possible contribution to this sector. UNFPA would provide $900,000 to cover technical advisory services, training, equipment and printing.

43. Law and population. In order to enhance the knowledge of policy-makers, planners and other decision-makers of the impact of legislation on population activities and to strengthen the machinery for systematic reviews of legislation in support of the national population policy, UNFPA proposes continued assistance to the ongoing research project on law and population. One of the first actions would be to re-examine the existing project design and to modify it, if necessary, to ensure its timely completion. The research findings are expected to be applied in designing population-related policies and programmes, and identifying prevailing legislation and practices that adversely affect women's role and status in the society. UNFPA would provide $50,000 for technical advisory services, seminars, and publications. The Ministry of Justice would continue to implement the project and, if necessary, an executing agency would be selected to provide technical support.

Population dynamics

44. Demographic training programme. This project would seek to consolidate the existing undergraduate-level training programme and to set up a post-graduate programme in demography. At the undergraduate level, the curricula of other departments in the University would be reviewed to
explore the feasibility of exposing more students from different disciplines to demography. At the post-graduate level, the project aims at having in place by 1994 a core of five nationals trained as lecturers in demography at the PhD level and a national training programme capable of producing 10-15 demographers at the Master's level each year (beginning in 1990). In conjunction with the Central Statistical Office, short training programmes on population and development would also be organized for planners and policy-makers, and a job placement monitoring system would be established to monitor the programme’s effectiveness. To achieve these two objectives, the University has developed a four-phase technical assistance project estimated at $1.4 million. The Ford Foundation and The Rockefeller Foundation are contributing $900,000; UNFPA has been requested to provide the balance of $500,000 to be used for fellowships and equipment. The University of Zimbabwe would implement the project, and the United Nations would be the executing agency.

Women, population and development

45. UNFPA proposes to provide $500,000 to assist Government activities in this sector with the objectives of securing an updated data base on women's status, promoting awareness among policy-makers, planners and community leaders concerning women's role and status in national development, and assisting in the formulation of recommendations for policies and programmes to enhance the situation of women. The strategy would be to establish a mechanism for collecting, analyzing, and updating data on women, and for feeding these data into various development policies and programmes to ensure consideration of women's concerns. To achieve these goals, the Government has initiated a three-phase project. Phase one (1989) would aim at developing socio-economic indicators for effective monitoring and evaluation of women's role in and impact on national development. The Government would use these data to formulate pilot action projects in each district. A national workshop is scheduled to disseminate the research findings and launch the pilot projects. Phase two (1990-1992) would be concerned with implementation of the pilot projects, and Phase three (1993) would cover evaluation and preparation of policy recommendations.

46. Each of the projects presented in this country programme makes provisions for consideration of women's concerns; hence this project would be closely co-ordinated with the other projects of the programme to ensure complementarity. The project would be implemented by the Ministry of Community and Co-operative Development and Women's Affairs; an executing agency would be identified at a later date.

Co-ordination

47. The Ministry of Finance, Economic Planning, and Development is responsible for mobilizing, monitoring, and co-ordinating all external assistance to Zimbabwe, as well as for the overall formulation and implementation of national development policies and programmes. The proposed programme provides for the Government to strengthen its machinery for co-ordination of population programmes through the creation of a Secretariat for Population Policy and Development. Furthermore, through
periodical consultations with other donors, the UNFPA Representative co-ordinates the Fund's programme with other population activities.

Monitoring, evaluation and management

48. All projects would have built-in monitoring and evaluation components, and some would be subject to scheduled independent evaluation. The programme emphasizes strengthening of national expertise in population policy and programme design, implementation, management and evaluation. Specific assistance would be provided to the Government to develop indicators for assessing programme impact. On the part of UNFPA, the proposed programme would be managed by a Country Director supported by a full-time National Programme Officer. To ensure the effective management of the expanded programme, UNFPA would consider strengthening its field office, if needed. The UNDP Resident Representative, who also serves as the UNFPA Representative, would provide overall guidance and promote co-ordination with other United Nations agencies with programmes in Zimbabwe.

Financial summary

49. As indicated in paragraph 1, UNFPA would provide assistance in the amount of $10 million, of which $6.5 million would be committed from UNFPA regular resources. If UNFPA's funding situation permits, the balance of up to $3.5 million may be provided by UNFPA. If and to the extent this is not possible, UNFPA would seek to cover the shortfall from other sources, including multi-bilateral sources. The table below shows how the programme would accommodate this level of funding:

<table>
<thead>
<tr>
<th>UNFPA regular resources</th>
<th>Other resources</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternal and child health and family planning</td>
<td>$2,000,000</td>
<td>$2,000,000</td>
</tr>
<tr>
<td>Information, education and communication</td>
<td>$1,200,000</td>
<td>$1,200,000</td>
</tr>
<tr>
<td>Basic data collection and analysis</td>
<td>$1,100,000</td>
<td>$2,600,000</td>
</tr>
<tr>
<td>Population policy formulation</td>
<td>$950,000</td>
<td>$950,000</td>
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<tr>
<td>Population dynamics</td>
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</tr>
<tr>
<td>Women, population and development</td>
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<td>$500,000</td>
</tr>
<tr>
<td>Programme reserve</td>
<td>$250,000</td>
<td>$250,000</td>
</tr>
<tr>
<td>TOTAL</td>
<td>$6,500,000</td>
<td>$3,500,000</td>
</tr>
</tbody>
</table>
V. RECOMMENDATION

50. The Executive Director recommends that the Governing Council:

   (a) Approve the programme for Zimbabwe in the amount of $10 million for the five-year period 1989-1993;

   (b) Authorize the Executive Director to commit an amount of $6.5 million from UNFPA's regular resources;

   (c) Further authorize the Executive Director to provide the balance of up to $3.5 million from UNFPA's regular resources, if such resources are available. If and to the extent they are not, further authorize the Executive Director to seek to cover the shortfall from other sources, including multi-bilateral sources;

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