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UNFPA

**UNITED NATIONS POPULATION FUND  
PROPOSED PROGRAMMES AND PROJECTS**

Recommendation by the Executive Director  
Assistance to the Government of the Dominican Republic  
Support for a comprehensive population programme

Proposed UNFPA assistance:	\$6 million, of which \$3 million is to be committed from UNFPA's regular resources. If UNFPA's funding situation permits, the balance of up to \$3 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 Government's contribution:	To be determined
Duration:	Four years
Estimated starting date:	January 1991
Executing agencies:	To be determined
Government co-ordinating agency:	National Planning Office (ONAPLAN)

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## DOMINICAN REPUBLIC

Demographic facts

Population Total (000)		Population density (/sq. km.)	14
Total	7,170	Average annual change (000)	
Males	3,644	Population increase	14
Females	3,526	Births	21
Sex ratio (/100 females)	103.3	Deaths	47
Urban	4,329	Net migration	-16
Rural	2,841	Annual population total (% growth)	1.98
Per cent urban	60.4	Urban	3.32
Population in year 2000 (000)	8,621	Rural	-0.25
Functional age groups (%)		Crude birth rate (/1000)	28.3
Young child: 0-4	13.7	Crude death rate (/1000)	6.2
Child: 5-14	24.2	Net migration rate (/1000)	-2.3
Youth: 15-24	20.9	Total fertility rate (/woman)	3.34
Elderly: 60+	5.5	Gross reproduction rate (/woman)	1.63
65+	3.4	Net reproduction rate (/woman)	1.49
Women: 15-49	25.1	Infant mortality rate (/1000)	57
Median age (years)	20.7	Life expectancy at birth (years)	
Dependency ratios: total	70.2	Males	65.4
(/100) Aged 0-14	64.5	Females	69.8
Aged 65+	5.7	Both sexes	67.6
Agricultural population density		GNP per capita	
(/hectare of arable land)	2.31	(U.S. dollars, 1988)	720

Sources: Population density on arable land is derived from two publications issued by the Food and Agriculture Organization of the United Nations: FAO Production Yearbook 1985 and World-wide Estimates and Projections Agricultural and Non-Agricultural Population Segments 1950-2025, ESS/MIS/86/2; gross national production per capita World Bank, World Development Report 1990. Figures for population, total population by sex, population by age group, age indicators, urban-rural population, and population density (/sq. km.) refer to the year 1990; figures for average annual change, rate of annual change, and fertility and mortality are the five-year averages for 1990-1995. These data are from the Population Division, Department of International Economic and Social Affairs of the United Nations, World population prospects: 1988.

## I. SUMMARY

1. The United Nations Population Fund (UNFPA) proposes to support a comprehensive population programme in the amount of \$6 million, of which \$3 million is to be committed from UNFPA's regular resources, over a four-year period, starting January 1991, to assist the Government of the Dominican Republic in achieving its population and development objectives. If UNFPA's funding situation permits, the balance of up to \$3 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 country programme, UNFPA's first in the Dominican Republic, is based on the findings and recommendations of a multi-sectoral Programme Review and Strategy Development (PRSD) mission that visited the Dominican Republic in February 1990, and the recommendations of the National Planning Office's (ONAPLAN) Advisory Committee, as well as a series of studies and analyses undertaken by the UNFPA field office since 1988. The country does not have an explicit national development plan, nor a population policy.
3. The overall aim of the proposed programme would be to contribute to the Government's efforts to improve the living conditions of the population in general. This would be achieved through the following objectives: to reduce the population growth rate; to decrease infant and maternal mortality, teen-age pregnancy and abortion to the lowest possible levels; and to formulate a comprehensive population policy integrating social and demographic variables into sectoral planning within the Government's 1990-1994 development programme.
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 the 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. The Dominican Republic, covering the eastern two thirds of the island of Hispaniola, has an area of 48,449 square kilometres. It currently has a population of 7.1 million, growing at a rate of 2.2 per cent annually. Fertility remains high within the Latin American context, with a total fertility rate of 3.3 children per woman. By the year 2000, population growth is expected to be 1.7 per cent annually, and it is estimated that population size will be around 8.6 million.
6. In the last few decades, the Dominican Republic has experienced continuous rural-to-urban migration. As a result, in 1988 it was estimated that 59 per cent of the population was living in urban areas. At the same time, the urban population is becoming concentrated in a smaller number of cities, Santo Domingo in particular. Life expectancy has risen in the last few years to 67 years of age (1987). Infant mortality stands at 66 per 1,000 and maternal mortality at 6.6 per 100,000 live births. Nearly 70 per cent of these deaths are due to lack of prenatal care but a certain percentage could also be attributed to

illegal abortions, which number 60,000 to 80,000 annually. Pre-marital pregnancy rates and the incidence of juvenile abortion have shown a significant increase in the last few years.

7. HIV infection and AIDS is an increasingly serious problem in the Dominican Republic. Currently, the country is ranked twentieth in the world and fourth in the Western Hemisphere in terms of HIV infection rates; there are 1,400 known cases of AIDS, and an estimated 50,000 people are HIV-positive.

8. The adult illiteracy rate was 22 per cent in 1988; studies undertaken in 1988 indicate, however, that the quality of education is becoming poorer. Moreover, as regards primary education, a growing number of children are repeating school years or dropping out altogether. In rural areas, illiteracy among girls aged seven to nine years (40 per cent) is greater than that among boys of the same age.

9. In recent years, the gross national product has grown at a low, or even negative, rate reaching as low as -1.9 per cent. At the same time, external debt increased from \$ 3.3 billion at the end of 1983 to approximately \$4 billion in 1988. The unemployment rate is estimated at 30 per cent of the work force and underemployment at between 40 and 50 per cent of the employed population. The decline in the economy has resulted in a deterioration of basic social and public services.

10. The Dominican Republic does not have a national development plan, nor a comprehensive population policy or programme. In 1986, ONAPLAN established the Division for Population and Employment, and in 1989, it set up an Advisory Committee to create awareness among key government officials of population activities and of the link between population and development, as well as to develop a population policy. However, most activities in the area of population have been undertaken without a guiding framework. Among the factors inhibiting the effective implementation of population activities in the Dominican Republic are insufficient knowledge about the relationship between population and development variables, a lack of human resources and institutional arrangements to study these relationships and to implement a population programme, lack of funds for research and the inadequacy of the population information system.

### III. REVIEW OF UNFPA AND OTHER ASSISTANCE TO DATE

11. UNFPA has been providing assistance to the Dominican Republic since 1974, contributing approximately \$11 million to projects mainly in the area of family planning. These activities have helped to reduce the fertility rate from 5.3 children per woman in 1974 to 3.3 in 1989. The Fund has supported family planning programmes executed by the National Council for Population and Family (CONAPOFA) and population education projects in co-ordination with the Ministry of Education, Fine Arts and Culture (SEEBAC).

#### Maternal and child health and family planning

12. UNFPA assistance to this sector began in the mid-1970s with support to CONAPOFA's four-year plan (1974-1978), which sought, *inter alia*, to extend family planning services to all health units nationwide and to increase acceptance of such services to 20 per cent of women of fertile age. A second phase of assistance began in 1979 but was disrupted as a result of political uncertainties between 1980 and 1982. In 1983, UNFPA sponsored an independent evaluation of the MCH/FP programme since 1978. The evaluation emphasized the importance of integrating family planning and maternal and child health services.

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The following year, in 1984, the Governing Council approved a new four-year project in the amount of \$2.06 million whose key objectives were to decrease fertility, increase the effectiveness of the MCH/FP programme by improving the quality of services and widening the range of contraceptives offered, and improve the quality of support information activities.

13. The overall demographic goal of the project was to decrease the total fertility rate to less than 3 children per woman by the end of the 1980s, a decline of nearly 30 per cent. This required achieving a contraceptive coverage of 22 per cent of fertile women by 1987 (compared to 18 per cent in 1983), implying an annual average of 55,000 new acceptors for each year of the project. Although the project exceeded expectations in terms of contraceptive prevalence (31 per cent by 1989), extension of services to rural areas and training of staff, it fell far short of its goal of increasing the number of family planning service points from 342 to 624. Indeed, in 1990 CONAPOFA reportedly had a total of approximately 360 clinics nationwide, some of which may not have been functioning at full capacity. UNFPA extended the project through 1989 in order to increase services to the population, particularly in rural and marginal urban areas.

14. In recent years, internal problems within CONAPOFA, resulting in a high turnover of administrative and technical staff, adversely affected the quality of services and the distribution of contraceptive supplies and equipment. As a consequence, project activities had to be suspended pending an evaluation, which took place in October 1990. The evaluation, noting that the demand for family planning services continued despite these problems, recommended that UNFPA continue to support the project, but that it be executed by an external agency. It also reiterated the importance of integrating family planning and maternal and child health services, since this objective had not been met. UNFPA assistance to MCH/FP during 1983-1988 was \$1.7 million, or 80 per cent of total UNFPA expenditures in the Dominican Republic during this period.

#### Information, education and communication

15. Since 1979, UNFPA has provided \$273,000 for population education programmes. The main emphasis of the programmes, executed by SEEBAC and the United Nations Educational, Scientific and Cultural Organization (UNESCO), has been to integrate population components into primary school curricula through the preparation of materials and training of teachers. Between 1987 and 1989, UNFPA also supported the work of a non-governmental organization, PROFAMILIA, in its population education and communication programme in the amount of \$70,000. This included audio-visual equipment for PROFAMILIA's documentation centre which was used to promote family life and sex education outside the formal school system. By the end of the project, PROFAMILIA had completed the proposed training schedule and had developed and published the required number of booklets, leaflets and posters.

#### Basic data collection and analysis

16. Since 1987, UNFPA has assisted the training of nationals in census planning and use of data in policy-making processes in the amount of approximately \$171,500, sending eight Dominican statisticians to the School for Applied Statistics and Computer Technology (ESAYTEC) training programme at the United States Census Bureau.

Other external assistance

17. Between 1984 and 1989, the Dominican Republic received more than \$31.5 million in international support for its population activities. The major donors supporting such activities were the United States Agency for International Development (USAID), UNFPA and the International Development and Research Centre of Canada (IDRC). The United Nations Children Fund (UNICEF) and the World Food Programme (WFP) also supported activities in related areas. More recently, the USAID-funded Cooperation for American Relief Everywhere (CARE) has been expanding its support to include family planning activities.

#### IV. PROPOSED UNFPA PROGRAMME 1991-1994

18. The proposed programme was formulated in close consultation with the Government, and it is designed to address the major structural and institutional problems inhibiting the development of cohesive population activities in the Dominican Republic. According to the PRSD mission that visited the country in February 1990, these include, among others: (a) lack of a comprehensive national population policy; (b) weak institutional infrastructure, both public and private; (c) lack and inefficient use of basic data for development planning, demographic research and population policy and programme design; and (d) the detrimental effects of "brain drain" on the country's ability to execute a national population programme effectively.

19. Programme objectives are outlined in paragraph 3 above. In order to attain these objectives, UNFPA proposes a strategy that would emphasize: (a) reorienting programmes in health and family planning, as well as supporting education and information activities, towards specific target groups; (b) assisting the Government in its efforts to ensure the overall co-ordination and complementarity of MCH/FP information and services; and (c) increasing the knowledge base in demographic statistics for use in development planning, awareness creation and human resource development.

20. Specific lines of complementary government action, as recommended by the PRSD mission and endorsed by the Government, would be: (a) to create awareness among policy makers, planners, parliamentarians and government officials of the interrelationship between population and development and of the need to formulate a comprehensive population policy; (b) to strengthen the national institutional capacity to plan, formulate, implement and manage such a policy; (c) to plan and co-ordinate population activities more effectively by expanding and improving the country's demographic data collection and research and by training staff; and (d) to enhance the skills and status of women to prepare them to deal more effectively with their reproductive and productive roles.

Maternal and child health and family planning

21. UNFPA assistance to this sector would emphasize women's health programmes through support of an MCH/FP programme. The overall goal would be to improve the Government's capacity to address the country's relatively high fertility and birth rates, high incidence of abortion, low MCH/FP coverage and low contraceptive prevalence rates. The programme would have three main objectives: (a) to extend services to priority target groups, such as inhabitants of sugar plantations, workers in industrial free-trade zones, persons living in frontier areas, those in poor rural and urban marginal areas, and adolescents; (b) to improve programme coverage and quality; and (c) to improve programme management.

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22. Achievement of these objectives would require a strengthening of technical and financial support in the following areas: (a) consolidation of efforts to provide MCH/FP services; (b) extension of such services to priority target groups; (c) increase in access to modern contraceptive methods for groups with limited economic resources; (d) development of management information systems; and (e) increase in operations research.

23. As part of the efforts to extend family planning services to priority target groups, UNFPA would specify quantitative targets for contraceptive prevalence and expansion of services. The Fund would also support the development of cultural-specific information so as to ensure better designed activities aimed at each of the groups. In addressing the specific needs of the various target groups, the programme would make use of sources of information and services beyond those provided in MCH programmes. Moreover, in view of the increasingly rapid spread of AIDS and HIV infection in the Dominican Republic, the proposed MCH/FP activities would include, where possible, information and education components on AIDS and HIV infection.

24. UNFPA proposes to provide assistance for the MCH/FP sector in the amount of \$2.6 million, of which \$1,250,000 would be sought from other sources, including multi-bilateral sources.

#### Information, education and communication

25. In the area of population information, education and communication (IEC), the proposed programme would work towards developing an overall IEC strategy for the country. Specifically, UNFPA support would focus on four major activities: (a) continuing the population education programme in the formal sector and extending its coverage where possible; (b) expanding recently implemented activities for young people in the secondary formal and non-formal sectors; (c) initiating new activities to extend IEC programmes to priority target groups; and (d) directing IEC efforts to decision makers. To ensure co-ordination and complementarity of efforts, specific IEC activities would be linked to other programme components such as MCH/FP. Efforts would also be made to ensure that population education was included in the general educational programme supported by the World Bank.

26. The Fund would also support the second phase of the PROFAMILIA programme, which is aimed at developing sex education activities for school drop-outs and for young people outside the formal school system, particularly in marginal urban zones and extremely poor rural areas. These areas tend to have high rates of unwanted adolescent pregnancy, abortion, sexually transmitted diseases and AIDS, among other problems. These efforts would be co-ordinated with the work of other agencies such as the National AIDS Commission, as well as of universities, non-governmental organizations (NGOs) and international organizations.

27. To supplement the activities aimed at specific target groups UNFPA would support a population communication programme aimed at using all channels of communication to promote better birth spacing and the use of contraception. Finally, an awareness-creation programme would be aimed at decision makers at all levels.

28. UNFPA support to this sector would amount to \$1 million, of which \$400,000 would be sought from other sources, including multi-bilateral sources.

Data collection and analysis

29. The PRSD mission findings demonstrated the need to improve the national statistical system at the central level and also census and vital registration information at sectoral and regional levels. UNFPA would provide technical and financial assistance to help improve the quality of socio-demographic statistics and to foster the use and dissemination of population data to assist in the integration of population variables into development planning and facilitate the design of population-related activities.

30. Given the failure to complete the processing of the 1981 census data and to disseminate the results, it is essential that special efforts be made to ensure the success of the 1991 census. Accordingly, UNFPA would provide technical assistance to the National Statistical Office (ONE) to conduct the census; the Government would fund the local costs. If the census were postponed, the Fund would assist ONE in exploring the possibilities for developing demographic and household surveys at the local level. Such information on population density and other characteristics, heretofore unavailable, would assist the Government in its planning for different sectors.

31. UNFPA support to this sector would amount to \$1.45 million, of which \$950,000 would be sought from other sources, including multi-bilateral sources.

Population dynamics and policy formulation

32. The implementation of a national population and development programme requires an adequate number of personnel trained in various aspects of population activities, from programme administration and management to the dissemination of information on population dynamics. Consequently, UNFPA proposes to support a programme of training in population and development for government officials and for those working in population-related fields. UNFPA assistance would also be used to compile inventories of existing information through the creation of a population data bank in ONAPLAN.

33. UNFPA would assist the Government in elaborating a population policy with general and sectoral-specific population and development plans. These would contain concrete aims and measures in relation to identified demographic variables such as fertility, mortality, and population distribution, as well as such related socio-economic factors as education, health, living conditions, and the status of women. Accordingly, the Fund would support the development of appropriate institutional arrangements for the formulation of a population policy and the monitoring and evaluation of its implementation. This would include assistance for awareness-creation activities aimed at policy-makers, government officials, political leaders and trade unions.

34. UNFPA's support to this sector would amount to \$400,000, of which \$100,000 would be sought from other sources, including multi-bilateral sources.

Women, population and development

35. Every effort would be made to ensure that women's concerns were integrated into all aspects of the proposed programme. Moreover, UNFPA would reinforce the efforts of the Government and the private sector by: (a) contributing to the development of a technical plan of action for the General Directorate for the Promotion of Women (DGPM); (b) establishing training courses for public-sector technical personnel in the formulation, implementation and evaluation of women's programmes related to population and family

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planning; (c) supporting research regarding the reproductive role of women; and (d) supporting efforts to raise the socio-economic status of women through pilot income-generating activities.

36. UNFPA would assist government efforts to reinforce the DGPM's technical capacity in the area of women's reproductive health and population issues, as well as to design a work plan with lines of action for each government sector regarding women's activities linked to population-related issues. This would be accompanied by support for the training of a technical team that would oversee the implementation of the work plan. The Fund also proposes to assist the Government in certain pilot activities in order to provide MCH/FP awareness creation and training for women and their families in disadvantaged urban marginal areas.

37. UNFPA support to this sector would amount to \$500,000, of which \$300,000 is to be sought from other sources, including multi-bilateral sources.

#### Programme reserve

38. UNFPA proposes to establish a programme reserve of \$50,000 for new proposals that might be developed within the framework of the proposed programme.

#### Programme co-ordination

39. The Technical Secretariat to the Presidency is responsible for the co-ordination of external assistance to the Dominican Republic. ONAPLAN oversees the implementation of the projects developed by the sectoral ministries. It would therefore co-ordinate the proposed programme. UNFPA would assist the Government in building up its capacity to develop an overall plan for the co-ordination of population activities. It would also support the development of a co-ordinating committee headed by ONAPLAN and composed of officials from each UNFPA-supported project. A UNFPA local office would be set up to monitor the implementation of project activities and to exchange information and experiences.

40. In the context of the Joint Consultative Group on Policy (JCPG) mechanism, regular meetings would be organized with officials of the other United Nations agencies active in the country in a concerted effort to harmonize activities and avoid duplication of assistance.

#### Programme monitoring, evaluation and management

41. In his capacity as UNFPA Representative, the UNDP Resident Representative has responsibility for the overall management of the programme. The Resident Representative would be assisted by the UNFPA National Programme Assistant and the support secretary, who make up the UNFPA local office. The UNFPA Country Director based in Mexico would also provide technical and managerial assistance and guidance and would visit the country periodically.

42. Standard UNFPA procedures would be followed to ensure the effective implementation of the projects included in this programme: progress reports, visits to project sites, participation in seminars, annual tripartite review meetings, and programme and project evaluations, reviews and monitoring meetings as necessary. A continuous monitoring and evaluation system would be set up and implemented for all projects. A mid-term review of the overall programme would be conducted in 1993. Independent evaluations would be integral components of all the larger or innovative projects.

Financial summary

43. As indicated in paragraph 1, a programme of \$6 million is proposed, of which \$3 million would be committed from UNFPA regular resources. If UNFPA's funding situation permits, the balance of up to \$3 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:

	<u>UNFPA regular resources</u> \$	<u>Other resources</u> \$	<u>Total</u> \$
Maternal and child health and family planning	1,350,000	1,250,000	2,600,000
Information, education and communication	600,000	400,000	1,000,000
Data collection and analysis	500,000	950,000	1,450,000
Population dynamics and policy formulation	300,000	100,000	400,000
Women, population and development	200,000	300,000	500,000
Programme reserve	<u>50,000</u>	<u>--</u>	<u>50,000</u>
TOTAL	3,000,000	3,000,000	6,000,000

## V. RECOMMENDATION

44. The Executive Director recommends that the Governing Council:

(a) Approve the assistance to the Dominican Republic in the amount of \$6 million for the four-year period 1991-1994;

(b) Authorize the Executive Director to commit an amount of \$3 million from UNFPA's regular resources;

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(c) Further authorize the Executive Director to provide the balance of up to \$3 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 resources;

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

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