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

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

Proposed UNFPA assistance: \$20 million, of which \$10 million would be programmed from UNFPA regular resources. UNFPA would seek to provide the balance of \$10 million from a combination of UNFPA regular resources and other resources, including multi-bilateral resources, when and to the extent such additional resources become available.

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

Duration: Five years

Estimated starting date: January 1992

Executing agencies: Government of Egypt
United Nations and United Nations agencies and organizations
National and international non-governmental organizations (NGOs)

Government coordinating
agency: National Population Council (NPC)

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EGYPT

Demographic facts

Population Total (000)	
Total	52,426
Males	26,644
Females	25,782
Sex ratio (/100 females)	103.3
Urban	24,466
Rural	27,961
Per cent urban	46.7
Population in year 2000 (000)	64,210
Functional age groups (%)	
Young child: 0-4	14.5
Child: 5-14	24.9
Youth: 15-24	18.5
Elderly: 60+	6.5
65+	3.9
Women: 15-49	23.7
Median age (years)	20.6
Dependency ratios: total	76.2
(/100) Aged 0-14	69.3
Aged 65+	6.9
Agricultural population density (/hectare of arable land)	8.88

Population density (/sq. km.)	52
Average annual change (000)	
Population increase	1,192
Births	1,708
Deaths	505
Net migration	-9
Annual population total (% growth)	2.15
Urban	3.69
Rural	0.71
Crude birth rate (/1000)	30.8
Crude death rate (/1000)	9.1
Net migration rate (/1000)	-0.2
Total fertility rate (/woman)	4.00
Gross reproduction rate (/woman)	1.95
Net reproduction rate (/woman)	1.64
Infant mortality rate (/1000)	57
Life expectancy at birth (years)	
Males	60.4
Females	62.8
Both sexes	61.6
GNP per capita (U.S. dollars, 1989)	640

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 of Agricultural and Non-Agricultural Population Segments 1950-2025, ESS/MIS/86/2; gross national product per capita: World Bank, World Development Report 1991. 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: 1990.

I. SUMMARY

1. The United Nations Population Fund (UNFPA) proposes to support a comprehensive population programme in the amount of \$20 million, of which \$10 million would be programmed from UNFPA's regular resources, over a five-year period, starting January 1992, to assist the Government of Egypt in achieving its population and development objectives. UNFPA would seek to provide the balance of \$10 million from a combination of UNFPA regular resources and other resources, including multi-bilateral resources, when and to the extent such additional resources become available.

2. The proposed programme would be the fifth cycle of UNFPA assistance to Egypt. It is based on: (a) government population policy, as embodied in the 1987-1992 Population Plan; (b) the findings and recommendations of the Programme Review and Strategy Development (PRSD) mission undertaken in October 1991; (c) the experience of the fourth UNFPA country programme; and (d) discussions with senior officials of the National Population Council (NPC) and other government agencies, NGOs, United Nations organizations and agencies and multi-bilateral donor agencies concerned with population-related activities in Egypt. The programme would be an integral part of the national population programme, complementing and supplementing activities therein. The proposed UNFPA programme cycle for Egypt would overlap with UNDP's programme, now scheduled for 1993-1996, and UNICEF's programme of 1990-1994 and would coincide with the next national development plan cycle.

3. The objective of the UNFPA programme is to assist the Government in reaching its population goals of: (a) reducing population growth rates; (b) improving population characteristics; and (c) achieving a more balanced population distribution.

4. All projects under the proposed programme, as in all UNFPA-assisted programmes, would be 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. Demographic trends. According to United Nations estimates, Egypt's population was about 54 million in 1991. The annual growth rate, projected at 2.15 per cent on average for 1990-1991, has varied between 1.9 and 2.6 per cent during the last three decades. The medium variant United Nations projection puts the population at 64 million by the year 2000. Population distribution is extremely uneven: only 4 per cent of Egypt is inhabited, and 98 per cent of the population lives in the Nile valley and delta or along the Mediterranean coast. In general, both fertility and mortality have been declining. However, in the more conservative and poorer region of Upper Egypt, fertility is considerably higher than average. Urbanization is a continuing process, and almost half the population now lives in urban areas.

6. Social and economic factors. As of 1989, per capita gross national production (GNP) was \$640. For the period 1986-1988, primary school enrolment was 100 per cent for boys and 79 per cent for girls. In 1985 illiteracy of persons 15 years and older was 40 per cent for males and 70 per cent for females. Access to health care has improved considerably and infant mortality has come down to about 57 per 1,000 live births.

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Egypt seems to be on the verge of a demographic breakthrough: according to data provided by the Ministry of Health, the crude birth rate is down to 33 per 1,000 population, the total fertility rate had dropped to 4.1 by 1991, and the contraceptive prevalence rate is up from about 36 per cent in 1988 to 47.6 per cent in 1991. This upward trend in contraceptive prevalence was recently verified by the PAPCHILD Survey reflecting results of IEC activities.

7. The most pressing resource concern is water. The Nile supplies almost all water used in Egypt. Rainfall occurs on average two days a year, and the country derives increasingly significant quantities of water from limited groundwater reserves. Population growth magnifies the water problem, including salinization and waterlogging of agricultural land and water pollution. The recent return of millions of Egyptians who worked in the Gulf States has not only affected the economy but further aggravated population pressures.

8. The national population policy is embodied in the 1987-1992 Population Plan, which addresses problems not only of population growth but also of unbalanced population distribution, poor land use and environmental degradation. The NPC, headed by the Prime Minister, is responsible for policy implementation. Although conservative religious viewpoints are still widespread and influential, especially in the countryside, the policy has the full support of political and religious leaders at the highest level.

III. REVIEW OF UNFPA AND OTHER ASSISTANCE TO DATE

9. The first UNFPA country programme of 1971-1975, totalling \$5.8 million, primarily supported delivery of family planning services through health centres. The second country programme of 1977-1981 totalled \$10 million, of which \$6 million was used to support the 1976 Population and Housing Census and the Population and Development Project (PDP). The PDP aimed at raising the socio-economic status of the population as a means of lowering fertility; parallel activities were directed at strengthening family planning services through the Population and Family Planning Board (PFPB). UNFPA also assisted in the local production of oral contraceptives and in biomedical and operational research.

10. The third (1981-1985) and fourth (1986-1991) country programmes were based on the findings and recommendations of the needs assessment missions of September 1980 and October 1985, respectively. The third country programme was reduced from \$15 million to \$8 million, due to financial constraints. Expenditure was \$5.8 million, including \$827,885 in multi-bilateral resources from the Government of the Netherlands. The principal strategy of this programme was the expansion of MCH/FP services aimed at improving services through the PDP; training managerial and field staff; providing raw materials for oral contraceptives; supporting biomedical, socio-economic and operational research; and improving family planning service statistics. To support this strategy, population information, education and communication (IEC) programmes were undertaken to create awareness, and basic data collection and analysis in the Government's data-collecting agency -- the Central Agency for Public Mobilization and Statistics (CAPMAS) -- were strengthened. Small demographic units were established in eight governorates to facilitate the timely tabulation, dissemination and use of data for policy analysis and evaluation. Implementation of this country programme was slow due to programme constraints, cultural and religious sensitivities and the absence of a family planning service delivery system. Positive developments included the production of annotated bibliographies outlining research papers on population, the design of an improved family planning service statistics system and improved family planning service delivery by the Ministry of Health. Service providers and demographic unit staff were trained in family planning and demography, choice of contraceptives were expanded, and new methods such as injectables were tested, approved and introduced.

11. The fourth country programme (1986-1990, extended to 1991) was oriented primarily to family planning services. Of its total budget of \$13.3 million, \$8.3 million was committed by UNFPA and the balance was to be provided either from UNFPA resources or multi-bilateral resources. Estimated expenditure was approximately \$8.3 million. No multi-bilateral funds were allocated. The programme was highly successful in introducing population education in the organized sector as well as in generating awareness of the population situation. It contributed significantly to the establishment of the basic infrastructure required for the collection of population data and the development of new approaches and techniques. However, the programme experienced delays, in part due to the high turnover of project staff. Moreover, weak linkages between projects and insufficient coordination with other donors' programmes sometimes led to duplication of efforts. The main features of this country programme are outlined below for each of the pertinent sectors.

Maternal and child health and family planning

12. The fourth country programme provided for \$6.3 million to support the Ministry of Health in institutionalizing MCH/FP services, to upgrade the quality of family planning services and to ensure better contraceptive distribution. It also included feasibility studies on local production of contraceptives to permit a wider mix of contraceptive methods, including intra-uterine devices (IUDs). As the United States Agency for International Development (USAID) invested heavily in MCH/FP activities, UNFPA in fact allocated only \$2.5 million to this sector. UNFPA assistance concentrated on improving family planning statistics and diversifying the mix of contraceptive methods by making available contraceptives for which there was demand but no supply -- spermicides and injectables.

Information, education and communication

13. A total of \$1.16 million was allocated for IEC interventions. Population education in the formal school system was introduced to 15,000 preparatory school teachers and to a core of the Ministry of Education's (MOE) population education specialists, and 6,000 teachers under the non-formal education literacy programme received in-service training. Materials were distributed to more than 21,000 schools. UNFPA assistance was successful in raising awareness of population issues and problems and influencing changes in attitudes and behaviour as reflected by the Egyptian Demographic and Health Survey (EDHS) findings. Support directed at the organized sectors was highly successful in creating awareness of and a demand for family planning practices, although coordination with MOE and use of literacy manuals were weak.

Data collection and analysis

14. UNFPA support for data collection and analysis amounted to \$2.5 million. Data collection improved greatly and staff capabilities were enhanced; however, dissemination and use of data showed little change. Technical assistance for the 1986 census resulted in publication of tabulations, the first post-enumeration survey ever conducted and demographic analysis and training at the governorate level. Shortcomings of the 1986 census exercise were in mapping and tabulation. Vital statistics coverage improved, although further assistance is needed, possibly through a comprehensive diagnostic survey of vital statistics and the civil registration system. A geographic data information system initiated by CAPMAS in 1987 needs to be developed as a part of the database. Periodic demographic surveys, especially in family planning service statistics, should be expanded to include questions on the extent of, and reasons for, discontinuation of contraceptive use, and on failure of methods.

Population policy formulation

15. Assistance for population policy formulation, on the order of \$1.85 million, was directed at both NPC, the coordinating agency, and CAPMAS, the major source of population data and statistical information. Positive developments were evident in population policy, planning, analysis, research and management of the national population programme. However, most of the programme activities focused on fertility reduction and therefore contributed little to the elaboration of an integrated policy linked to intersectoral interventions in such areas as poverty alleviation, structural adjustment programmes, population and environment, and women.

Women, population and development

16. UNFPA assistance for women, population and development, in the amount of \$1 million, focused on strengthening the Ministry of Social Affairs' office dealing with women's affairs and assisting rural women in enhancing their status and increasing their role in decision-making. Income-generating activities had some positive effects in stabilizing family size, increasing contraceptive prevalence, keeping girls in school and involving women in community activities.

Other external assistance

17. The population sector has received inputs from various donors. USAID, by far the largest contributor, is providing approximately \$110 million over the period 1987-1993. The average annual allocation rose from about \$15 million in 1984 to \$20 million recently. However, the annual budget will dip to a level of \$12 million with the approval of a future programme of \$62 million. Currently, USAID provides support for contraceptives, NGOs (chiefly for social marketing and the Egyptian Family Planning Association), IEC, demographic data development and family planning services in rural areas, through the Ministry of Health.

18. In 1987, the World Bank approved an International Development Assistance credit in the form of a soft loan of \$25 million towards the population programme in the Ministry of Health; the Overseas Development Administration, of the United Kingdom of Great Britain and Northern Ireland, contributed \$4 million as a grant to this programme. In 1987, the Government of Germany provided about DM 6 million worth of raw materials for oral contraceptive production and support to rural family health services. Japan contributed about \$400,000 to strengthen MCH/FP services through mobile units over a three-year period (1988-1990). Assistance from the Government of the Netherlands, both bilateral and multilateral (through the Food and Agricultural Organization of the United Nations (FAO) and the International Labour Organisation (ILO)), concentrated on income generation for women. A number of NGOs provided additional assistance, the most substantial being support from the International Planned Parenthood Federation (IPPF) for the Egyptian Family Planning Association, in the amount of \$750,000 annually.

IV. PROPOSED PROGRAMME 1992-1996

19. The proposed programme for the fifth cycle of UNFPA assistance to Egypt would be part of Egypt's national population policy. The policy's objectives are: (a) the reduction of population growth rates; (b) improvement of population characteristics; and (c) better spatial distribution of the population. Specific goals include reducing the annual rate of population growth; increasing contraceptive prevalence; increasing the habitable land area; limiting the size of Greater Cairo's population; decreasing infant, child and maternal mortality; reducing illiteracy among women; increasing women's participation in the labour force; and increasing the incidence of delayed marriage.

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20. To assist the Egyptian Government in achieving its objectives, UNFPA's main programme goals and strategies would include: (a) increasing and sustaining contraceptive prevalence; (b) bridging the gap between rural and urban fertility levels, focusing on outreach service delivery in Upper Egypt; (c) developing a coherent IEC plan and reaching underserved and underprivileged target audiences through community groups and NGOs; (d) strengthening technical capabilities at the national and governorate levels for better programme interventions, with emphasis on regional decentralization; (e) improving the information and service statistics system for better programming and management and for generation of feedback from beneficiaries to service providers; (f) creating awareness of the linkages between population, environment and natural resources; (g) promoting a more comprehensive view of women, population and development; and (h) promoting better programme coordination within national institutions and among donor countries.

21. Egypt's national population policy is clear and explicit. Implementation of that policy has, however, been hampered by: (a) functional and structural fragmentation of the MCH/FP service delivery system; (b) lack of effective coordination at the national and local levels of government; (c) an inadequate information and service statistics system to serve programmatic and managerial needs; and (d) lack of effective feedback from MCH/FP beneficiaries to service providers.

22. In accordance with the PRSD recommendations, the proposed assistance would be a coherent and coordinated programme of support. Emphasis would be placed on finding effective ways of enhancing collaboration and coordination in the delivery of technical assistance and cooperation in Egypt. The programme would also contribute towards increasing the availability and choice of contraceptives, strengthening intersectoral efforts to alleviate poverty and the effects of structural adjustment on population variables, building self-reliance and management capacities, improving the use of data in sectoral planning, improving programming and evaluation, linking population to environmental considerations, and fostering a more comprehensive view of women's role in the development process. UNFPA would give special attention to rural areas in Upper Egypt and working with local community groups, including youth groups, in other rural areas.

23. Training would be provided to improve technical and managerial capabilities at the national level and, especially, at the governorate levels. Emphasis would be placed on decentralization of efforts to: (a) establish priorities and plan, manage and monitor population programme activities; and (b) establish more responsive and effective systems of coordination, making population concerns more central to the development planning process and human resources development.

Maternal and child health and family planning

24. Egypt's family planning programme, under the auspices of the Ministry of Health and the Ministry of Social Affairs, has three primary aims: reducing the population growth rate from 2.7 per cent to 2.1 per cent by the year 2000; increasing the national contraceptive prevalence rate to approximately 55 per cent by the turn of the century; and decreasing the crude birth rate at the rate of 1 per 1,000 every year. Such targets, which were established for the 1987-1992 Population Plan, have in many instances been met or exceeded. At this juncture, the Government is reviewing current methodologies and setting new targets for the 1992-1997 period, based on, *inter alia*, more reliable and updated data. If, however, Egypt is to achieve its population and family planning goals and meet the needs of a rapidly growing demand for contraceptives that is heavily dependent on imported goods, adequate and reliable sources of contraceptive commodities must be ensured. UNFPA would support the local manufacture of IUDs based on favorable assessments of the country's

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technical and professional capabilities. UNFPA would also promote the diversification of contraceptive methods through the local production and/or procurement of commodities, such as injectables, oral and other contraceptives, that are perceived to be required after feasibility studies have been undertaken.

25. As USAID will continue to provide large-scale assistance in the delivery of MCH/FP services, UNFPA assistance would focus on providing quality care and outreach in governorates of Upper Egypt, complementing clinic-based approaches. It would seek to improve maternal and adolescent reproductive health and involve men in family planning activities by providing and encouraging the use of condoms.

26. With UNFPA assistance and in collaboration with other United Nations agencies and bilateral donors, the Ministry of Health would introduce family planning and counselling skills into the training of nurses. There is a severe shortage of nurses in Egypt as well as in other Arab States. The programme would support formal training of nurses, as a means of not only increasing the number of nurses trained in MCH/FP but also in promoting better care and enhancing MCH/FP acceptance.

27. UNFPA assistance would also help strengthen the programme and management information systems used by NPC and the Ministry of Health for generating feedback that can be used for programme improvement. In addition, the programme would support research on the policy implications of such topics as contraceptive use, in order to get a better understanding of contraceptive effectiveness and discontinuation.

28. UNFPA would provide a total of \$12 million for this sector, of which \$7.5 million would be sought from other sources, including multi-bilateral sources. UNFPA anticipates substantial donor interest in the local production of contraceptives, which is a critical step towards achieving contraceptive self-reliance.

Information, education and communication

29. Assistance to the information, education and communication sector would contribute to the momentum of the Egyptian population programme. As USAID is providing substantial assistance to this sector, UNFPA would devote special attention to overcoming obstacles to family planning identified in Upper Egypt and to cultivating opportunities to reach youth, the organized sector and community groups.

30. To sustain the recent gains of the population programme, continual advocacy must be encouraged. Numerous studies have been conducted in Egypt in the past 10 years to gather information for decision-making. More work is needed, however, on analysing, synthesizing and disseminating the major findings to improve policy interventions and expand public understanding. UNFPA would provide support to enhance the capacity of NPC for advocacy, and that of its partner agencies such as CAPMAS, so that they can respond adequately to current information needs. Synthesizing and packaging information in a timely manner is essential for mobilizing the support of governors and religious leaders, government agencies and NGOs; for stimulating interest in the national programme; and for fostering better coordination.

31. Furthermore, in an effort to reach segments of the public with coherent messages on family planning, UNFPA would assist NPC, in cooperation with the Ministry of Information's State Information Service (SIS), in developing a long-term indicative IEC plan which would provide strategic guidance to all implementing agencies. Both private- and public-sector agencies would be guided and encouraged to develop their own activities consistent with the strategic framework in such a plan.

32. The UNFPA programme would also promote more effective use of the mass media. Currently, 95 per cent of households have access to television, with 90 per cent of households owning a television set; 75 per cent of married women of reproductive age surveyed in 1988 watched television regularly. Assistance would be provided to design practical research methodologies for ascertaining how the mass media influences not only attitudes and knowledge but also behavioural change. Moreover, unique, far-reaching and cost-effective opportunities exist in Egypt to further implementation of the population programme through continued and expanded activities in the mass media, particularly television. Activities would be geared to refining specific messages on reproductive health -- including delayed age at marriage, Safe Motherhood and responsible parenthood, for certain subgroups.

33. Experience in other countries seems to show that increases in contraceptive prevalence can be accelerated with improvements in the educational status of women. Despite the recent upsurge in family planning acceptors, most gains in contraceptive prevalence have occurred in urban areas in Lower Egypt, where physicians and services are concentrated. In Upper Egypt, where women are still associated with more traditional roles, UNFPA would promote the enhancement of women's status by emphasizing literacy programmes, which include family welfare and family health components. In the same region, consistent with the policy of decentralization, UNFPA would seek to complement the mass media programme by helping to identify alternative ways of reaching the rural population. In addition, UNFPA would provide assistance for socio-cultural research to determine constraints to women's use of MCH/FP services.

34. Working with the Supreme Council for Youth and Sport as well as other "youth-to-youth" groups, the programme managers would endeavour to find innovative and creative ways of reaching more young people between the ages of 15 and 24, constituting 18.5 per cent of the population, with information and education about reproductive health. UNFPA would also continue to support initiatives of the Egyptian Workers' Education Association and workers' education in factories, including promoting broader contraceptive responsibility and examining women's reproductive health needs.

35. UNFPA would provide a total amount of \$1.95 million for this sector, of which \$1 million would be sought from other sources, including multi-bilateral sources.

Data collection and analysis

36. Support to the data collection and analysis sector would be provided to improve NPC's target setting. An improved system for producing vital statistics would provide timely, area-specific fertility and mortality data, thereby permitting continual monitoring of both fertility and the effects of MCH/FP programmes at district, governorate and national levels. UNFPA would support the acceleration of reforms under way in the vital registration system by providing assistance for a diagnostic survey and programmatic advice. Consideration would be given to shifting micro-computer-based data processing and analysis to the governorate level to enhance the use and dissemination of data at this level.

37. In addition, UNFPA would focus on strengthening the capacity of Egypt's primary data-producing agency, CAPMAS, to provide subnational estimates and projections, meeting the research and planning needs of both the public sector and private-sector communities in using population data effectively for programme planning and monitoring. This would be complemented by efforts among local staff in sectoral ministries to upgrade their skills in demographic analysis and to form technical working groups at the governorate level, under the office of the Governor.

38. UNFPA would provide a total amount of \$2 million for this sector, of which \$500,000 would be sought from other sources, including multi-bilateral sources.

Population policy formulation

39. Egypt has had a formal population policy since 1965. Under the proposed programme, UNFPA would focus on strengthening coordination at the national and local levels of government and enhancing programme planning and management.

40. Coordination of the population programme is vested in the NPC, which has brought population to the forefront of national policy concerns, set up counterpart organizations at the governorate level, commissioned studies and generated debate on key population issues. In view of its crucial role in coordinating population activities, and as strongly recommended by the PRSD mission, UNFPA would assist NPC in strengthening, at both the national and the governorate levels, its technical capabilities in planning, managing, monitoring and evaluating the national programme.

41. Assistance would also be provided for linking population and socio-economic variables in comprehensive planning. Notwithstanding noteworthy efforts to establish intersectoral linkages between socio-economic and population variables, such planning needs to be made relevant to subnational levels. Special attention would be given to linking population and development planning to certain cross-sectoral issues, such as poverty alleviation, and population and the environment, with emphasis on gender considerations.

42. UNFPA would provide a total amount of \$2.5 million for this section, of which \$500,000 would be sought from other sources, including multi-bilateral sources.

Women, population and development

43. Following PRSD recommendations, the proposed programme would give special attention to integrating women's concerns and gender issues into areas of MCH/FP, IEC and policy development and to broadening approaches to raising the status of women. Emphasis would be placed on women's reproductive health by providing women with a wider choice of contraceptives as well as by developing IEC messages directed at young women on birth spacing and delayed age at marriage. Programme strategies would address the role of women as agents for population and water resource management. They would also aim at increasing the number of women health professionals and offering education and employment opportunities to young women for positions traditionally occupied by men. The focus would include integrating concepts of population, family planning and women's status in literacy programmes for young women who have dropped out of school. UNFPA support would further encourage the generation and analysis of gender-specific data as well as the retrieval of data on maternal mortality for policy and programme considerations.

Special programmes

44. Population and environment. Approximately 98 per cent of the Egyptian population lives on a mere 4 per cent of its land mass. Moreover, despite its importance to Egyptian life, water is wasted everywhere. It is estimated that almost a third of Cairo's potable water is lost through faulty plumbing. In the countryside, unlined irrigation canals and field run-offs waste another third of the water. The level of environmental awareness in Egypt is, however, low, and understanding about environment and population linkages is also limited.

45. Given Egypt's dependence on the Nile and the increasing population density in the Nile valley, UNFPA would assist the Government in the development of an integrated and coherent strategy linking population, the environment and the use of natural resources. In this connection, efforts would be made to draw upon the population and environment model being developed by the International Institute for Applied Systems Analysis in Austria, in collaboration with the University of Mauritius.

46. In addition, UNFPA would provide assistance for a national publicity campaign on population, environment and development, conveyed through television, radio and other media. The participation of NGOs would be enlisted in these public information campaigns. Assistance would also be provided for developing more comprehensive educational materials and enhancing the awareness of youth concerning the relationship between population and the environment, especially water. Non-formal and continuing education approaches would be used in programmes to reach school drop-outs.

47. UNFPA would provide a total amount of \$800,000 for the promotion of understanding about the linkages between population and the environment, of which \$500,000 would be sought from other sources, including multi-bilateral sources.

Programme reserve

48. An amount of \$750,000 has been set aside as a reserve to cover unforeseen activities that may be developed within the context of the proposed programme.

Programme coordination

49. A main feature of programme coordination would be discussions and collaborations within the context of the Joint Consultative Group on Policy partnership. In initial discussions with representatives of other donors, it was suggested that UNFPA take the initiative in organizing donor coordination to assist the Government in achieving national population goals and objectives. The proposed programme has thus been designed to be a coordinated programme of support, forming a nucleus for future donor activities. Given the high level of interest among various donors in providing assistance to Egypt, a number of bilateral donors and other United Nations organizations have indicated that they would consider providing multi-bilateral funding or co-financing of projects included in this programme. In project implementation, UNFPA foresees collaboration with other United Nations organizations and agencies as well as with NGOs.

Programme management, monitoring and evaluation

50. Monitoring, evaluation and management components would be built into the fifth country programme at the national programme level and into each UNFPA-assisted project. The programme would be monitored and evaluated in accordance with standard UNFPA guidelines. A mid-term country programme review would be scheduled for 1994. Whatever the mode of execution, UNFPA would make full use of available and appropriate national and regional technical backstopping capacities, complemented by the country programme technical support teams that would become operational in 1992 as part of the UNFPA successor support cost arrangements approved by the Governing Council in decision 91/37.

Financial summary

51. As indicated in paragraph 1, UNFPA would provide assistance in the amount of \$20 million over the five-year period 1992-1996, of which \$10 million would be programmed from UNFPA's regular resources. UNFPA would seek to provide the balance of \$10 million from a combination of UNFPA regular resources and other resources, including multi-bilateral resources, when and to the extent such additional resources become available. The following table shows how the programme areas would accommodate these two levels of funding:

	<u>UNFPA regular resources</u> \$	<u>Other resources</u> \$	<u>Total</u> \$
Maternal and child health and family planning	4,500,000	7,500,000	12,000,000
Information, education and communication	950,000	1,000,000	1,950,000
Data collection and analysis	1,500,000	500,000	2,000,000
Population policy formulation	2,000,000	500,000	2,500,000
Special programmes	300,000	500,000	800,000
Programme reserve	<u>750,000</u>	<u>--</u>	<u>750,000</u>
TOTAL	10,000,000	10,000,000	20,000,000

VI. RECOMMENDATION

52. The Executive Director recommends that the Governing Council:

(a) Approve the programme for Egypt in the amount of \$20 million for the five-year period 1992-1996;

(b) Authorize the Executive Director to programme, subject to the availability of funds, an amount of \$10 million from UNFPA's regular resources, over the period 1992-1996;

(c) Further authorize the Executive Director to seek to provide the balance of \$10 million of the approved programme from a combination of UNFPA regular resources and other resources, including multi-bilateral resources, when and to the extent such additional resources from any of the above sources become available;

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