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UNFPA

UNITED NATIONS POPULATION FUND
PROPOSED PROGRAMMES AND PROJECTS

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

Proposed UNFPA assistance: $36 million, of which $25 million would be programmed from UNFPA regular resources. UNFPA would seek to provide the balance of $11 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 proposed Government's contribution: 30 billion dongs (approx. $30 million)

Duration: Four years

Estimated starting date: January 1992

Executing Agencies:
Government of Viet Nam
United Nations and United Nations Agencies and Organizations
International and national non-governmental organizations

Government coordinating agency:
National Committee for Population and Family Planning (NCPFP)
VIET NAM

Demographic facts

Population Total (000)

- Total: 66,693
- Males: 32,656
- Females: 34,037
- Sex ratio (/100 females): 95.9
- Urban: 14,600
- Rural: 52,092
- Per cent urban: 21.9

Population in year 2000 (000): 82,427

Functional age groups (%)

- Young child: 0-4: 14.0
- Child: 5-14: 25.4
- Youth: 15-24: 21.0
- Elderly: 60+: 6.7
- Women: 15-49: 24.8

Dependency ratios: total: 77.9

- (/100) Aged 0-14: 70.0
- Aged 65+: 7.9

Agricultural population density (/hectare of arable land): 6.97

Population density (/sq. km.): 1,983

Average annual change (000)

- Population increase: 1,567
- Births: 2,164
- Deaths: 586
- Net migration: 18

Annual population total (% growth)

- Urban: 4.1
- Rural: 1.4

Crude birth rate (/1000): 30

Crude death rate (/1000): 8

Net migration rate (/1000): 0

Total fertility rate (/woman): 3.3

Gross reproduction rate (/woman): 1.1

Net reproduction rate (/woman): 0.6

Infant mortality rate (/1000): 6

Life expectancy at birth (years)

- Males: 62
- Females: 69
- Both sexes: 65.6

GNP per capita (U.S. dollars, 1989): 1,820


* not available.
I. SUMMARY

1. The United Nations Population Fund (UNFPA) proposes to support a comprehensive population programme in the amount of $36 million, of which $25 million would be programmed from UNFPA’s regular resources, over a four-year period, starting January 1992, to assist the Government of Viet Nam, a priority country, in achieving its population and development objectives. UNFPA would seek to provide the balance of $11 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 fourth cycle of UNFPA assistance to Viet Nam. It is based on: (a) government policies and strategies, particularly those concerning maternal and child health and family planning (MCH/FP); (b) the findings and recommendations of the Programme Review and Strategy Development (PRSD) mission undertaken in late 1990; (c) the experience of the UNFPA’s third country programme; and (d) discussions with senior officials of the National Committee for Population and Family Planning (NCPF) and other government agencies and with the United Nations and other agencies concerned with population-related activities in Viet Nam. The programme would be an integral part of the national population programme and would complement and supplement its activities. It is designed to be in itself a coherent, coordinated programme of support, forming a nucleus for future donor activities.

3. The objective of the UNFPA programme is to assist the Government to reduce the population growth rate by reducing the fertility rate. To achieve this, the programme also aims to increase access to and availability of an increased choice of contraceptives and to raise awareness of population issues. The proposed programme also has as objectives helping the Government to establish an integrated statistical system for population and to strengthen institutional capacity for demographic training and research.

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. Viet Nam’s population of 64.4 million enumerated in the 1989 census was estimated to be growing at an annual rate of natural increase of 2.2 per cent. At this rate, it will reach more than 80 million by the year 2000. The dependency ratio is 86 per cent. Mortality is low, and fertility has been declining, from a total fertility rate of over 6 in the early 1970s to less than 4 at the present time. Of the total population, 80 per cent live in rural areas.

6. The low levels of mortality and the declines in fertility (achieved despite a continuing low gross national product) are thought to be influenced by the unusually high level of literacy for women as well as for men. In addition, primary school attendance is almost universal, there is a health care network throughout all provinces (reaching almost all the communes), and major efforts to improve women’s status and promote family planning have taken place. Decision-making about family size might be adversely influenced by preference for sons and the need for agricultural labour. According to the 1988 Demographic and Health...
Survey, 38 per cent of married women aged 15-44 years were using modern methods of contraception and, of these, 89 per cent were using intra-uterine devices (IUDs).

7. UNFPA has been the only donor to the population and family planning sector per se during the third UNFPA country programme, with some multi-bilateral support from Australia. Additional resources from other donors are urgently needed, as the Government is fully committed to the population sector.

8. The Government has long been concerned about the high rate of population growth, as evidenced by its increasing financial commitment to the population sector. Since the Sixth Party Congress in 1986, several decrees and laws concerning population have been issued. The Seventh Party Congress (June 1991) included several statements on population in its Strategy for Socio-Economic Development to the year 2000 and mentioned the supporting role of UNFPA. It gave the specific target of the reduction of the population growth rate by 0.4-0.6 per 1,000 a year. The National Committee for Population and Family Planning (NCPFP), whose role was strengthened by a decree in June 1991, is the sole coordinating institution concerned with population policy formulation and with programme development, implementation and management. The NCPFP is also the main government coordinating agency for UNFPA, although the State Planning Committee is the general aid coordinating agency for the United Nations system.

III. REVIEW OF UNFPA AND OTHER ASSISTANCE TO DATE

9. UNFPA assistance to Viet Nam dates from June 1977. The first country programme was established for the period 1978-1983, with a total budget of approximately $15 million. The second country programme covered the period 1984-1987, with funding totalling $14 million. It comprised activities mainly in the sectors of MCH/FP (84 per cent of the total funds), IEC, and data collection. The third country programme for the period 1988-1991 was approved in June 1988 in the amount of $25 million. Of this amount, $22 million was to be committed from UNFPA’s regular resources and $3 million from other sources, including multi-bilateral sources. Due to UNFPA financial constraints, the Government was advised in 1991 that only $22 million was available. The Government has been responsible for the execution of 9 per cent of the total funds and UNFPA for 20 per cent. The remaining 71 per cent has been under the responsibility of various executing agencies, whose distance from Viet Nam has been a constraint to programme implementation.

10. The principal strategy of the programme was that UNFPA assistance for MCH/FP activities, supported by IEC activities, was to be concentrated in eight densely-populated rural provinces (in 1991, one of these eight provinces was sub-divided into two, giving a total of nine provinces supported in this cycle). This proved to be an appropriate strategy, resulting in increased commitment to and awareness of the population programme, improved coordination between health and non-health workers and improved service delivery at all levels. The strategy was to focus on women and youth. Other important target groups such as men, couples or the community as a whole have not received as much attention, but the proposed programme plans to devote increased resources to these groups. The third country programme was also designed to: strengthen the capacity of all levels of government to coordinate, monitor and implement the national population policy; increase the involvement of local authorities in the implementation of population-related activities; and support concerned government institutions.
Maternal and child health and family planning

11. The MCH/FP sector received 58 per cent of the country programme funds. The sectoral strategy was to concentrate activities at the grass-roots level (through closely interrelated projects) in the selected provinces, with some projects being at the national level.

12. UNFPA has provided modern contraceptives by importing IUDs and contraceptive pills and by supporting the local manufacture of condoms. Such assistance had been planned to cover national needs fully but, mainly due to financial constraints, a continuous supply of contraceptives, particularly for the period of transition between programme cycles, could not be assured. One of the main lessons learnt in this sector is that the primary reliance on the IUD for family planning is insufficient for the achievement of widespread voluntary acceptance of family planning and that lack of a variety of methods contributes to the high recourse to menstrual regulation.

13. The quality of MCH/FP services within the selected provinces has been strengthened by provision of basic medical equipment and essential drugs to health premises. It has also been aided by retraining trainers in secondary medical schools and of all health personnel at commune and district levels using the new training curricula. However, due to financial constraints, only 80 per cent of health facilities in these provinces have been equipped. A new MCH/FP record/report system has been piloted and will be evaluated for consideration for expansion. Joint UNFPA/UNICEF support was provided to nine communes under a pilot project, integrating MCH/FP, environmental sanitation, parasite control and family health.

14. In support of the MCH/FP projects, support to programme management and policy making with training in management for central and provincial levels have been provided and operational research has been supported.

15. The strategy of assistance to the MCH/FP sector has proved effective and would be continued in the future, with appropriate allocations to ensure the achievement of the objectives, especially those concerning the supply of contraceptives. Interaction and cooperation between individual projects have not always been optimal. In the new country programme, there would be fewer and larger projects, thus contributing to a more cohesive support to this sector.

Information, education and communication

16. Of the total programme budget, 12 per cent was allocated to IEC activities, based on a strategy designed to continue the approach pursued by the previous programmes as well as to add some innovative approaches.

17. Population education curricula have been successfully introduced into formal and non-formal education in 17 provinces (out of a total of 49 provinces at the end of 1991), and teacher training courses have been systematically organized. Simple population education concepts are being introduced into kindergartens. Family life and sex education have been tested in selected provinces, receiving promising support. Collaboration with UNICEF in a parent education programme at creches and kindergartens has produced encouraging results.

18. Assistance to the training of family planning motivators for the Women's Union and the Youth Union has been found to be appropriate and successful. The Youth Union has become involved in population
communication for the first time in this cycle and has been active and efficient. The community approach, piloted in two villages of different socio-economic backgrounds, has proved promising.

19. With the growing capacity of the provinces to produce motivation materials adapted to their local situations, the centralized provision of communication support by the Audio-Visual Centre has become inappropriate for a national programme. Likewise, the centralized collection and dissemination of population information by the Population Documentation and Information Centre needs structural improvement in order to be appropriate.

20. A UNFPA evaluation mission in September 1991 highlighted the need for greater coordination among IEC-related projects (particularly at the national level) as well as for measures to link IEC activities more closely to MCH/FP service delivery. Hence, a comprehensive national strategy for population IEC activities remains an urgent priority.

Data collection and analysis

21. UNFPA-funded activities in the field of data collection have made a positive contribution to the strengthening of the technical capability and capacity of the Government. The strategy for this sector was to focus assistance on the 1989 national census of population and housing. The Government is justly proud of its conduct of the 1989 census, without doubt the greatest achievement of the third country programme of UNFPA's assistance. The census was conducted to a high standard, and the results of the 5 per cent sample and tabulations of the full census were published in record time. All indications are that the data are of high quality, and disaggregated data of high standard are now available. Considerable support has also been given to the 1988 Demographic and Health Survey, which produced valuable results, primarily on contraceptive practice.

Population policy formulation and dynamics

22. A UNFPA-supported project, beginning in 1987, provided initial inputs for strengthening the NCPFP. In 1990, follow-up activities were approved to provide the NCPFP with essential equipment and to help in improving managerial and technical skills. A strategy of developing specified research topics, with related institution-strengthening (mainly through training), has been followed. Much of the research has been found to be of good quality, but the results are not always used appropriately, partly due to the shortage of trained personnel.

Women, population and development

23. Within the third programme, women's concerns have been taken into account, directly or indirectly, in almost all programme components. All health-related activities are directed at women (mostly MCH/FP) or couples (contraceptive manufacture or distribution). Some of them are aimed at training health personnel, most of whom are women. There are two activities with the Women's Union itself, one being for income-generating activities. There is increasing awareness of overall gender issues and the need to involve men in family planning practice. The most important survey concerning women has been the Demographic and Health Survey, but other smaller surveys have also been undertaken as project baseline surveys, with emphasis on women's issues such as child care practices or income management patterns in rural families. One other area where gender issues and equality between the sexes have been appropriately considered is in the development of family life and sex education in the school system.

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24. One of the main lessons learnt in this sector is that, although the programme is directed towards improving the quality of life and the role and status of women, the focus has been on family planning as the responsibility of women. IEC and motivation work have only recently started to be addressed to males.

IV. PROPOSED PROGRAMME 1992-1995

25. The proposed programme for the fourth cycle of UNFPA assistance to Viet Nam would be an integral part of the national population programme, whose policies remain to reduce the rate of population growth and to effect a more balanced distribution of the population. The ultimate objectives of the programme would be to improve the quality of life of the people and to improve the role, status and well-being of women. The programme aims to reduce the population growth rate by reducing the fertility rate. To achieve this, the programme also aims to increase access to and availability of an increased choice of contraceptives, so as to enable couples to decide voluntarily on the number and spacing of their children, and to raise awareness of population issues.

26. Specific targets of the programme, as given by the NCPFP in November 1990, are: (a) to reduce the total fertility rate from 3.7 in 1990 to 2.8 by the year 2000, or, expressing this differently, to reduce the crude birth rate by 0.6 per thousand a year from 30.3 per thousand in 1990 to 27.3 per thousand in 1995; and (b) to increase the contraceptive prevalence rate from 42.5 per cent in 1990 to 50.5 per cent in 1995.

27. To achieve these objectives as fully as possible, the proposed programme would complement and supplement the activities of the national population programme. It would be developed within the framework of the overall and sector-specific strategies outlined by the PRSD report and agreed to by the NCPFP. The proposed programme would build on the third country programme, consolidating and continuing appropriate components. Many aspects would be developed at the national level, while the focus of some would remain in selected provinces. In order to consolidate previous activities, there would still be some assistance to those provinces supported in the third country programme. Extension of support to six more provinces in densely-populated as well as in sparsely-populated areas (e.g., in the highlands) is proposed. The current strategies of focusing most of the assistance on the rural population in such areas, at the grass-roots (district and commune) level and on women and youth would be continued. In addition, more attention would be paid to motivating men, and to mobilising communities as a whole. More than half of the funds would again be allocated to the MCH/FP sector, thus continuing to reflect the focus of the national population programme and especially the need to increase the contraceptive prevalence rate. However, the programme would be balanced and include other areas of population activities, particularly in IEC and data collection. The Government would execute a larger proportion of the activities than previously. Viet Nam would continue to be a beneficiary of regional activities supported by UNFPA and, as much as possible, these activities would be integrated into the country program.

Maternal and child health and family planning

28. The strategy in the area of MCH/FP would be primarily to consolidate the areas of support developed in the third cycle and to introduce some new aspects. Support to MCH/FP activities would be given through fewer, larger projects, and the interaction between MCH/FP and IEC activities would be enhanced. All activities envisaged within this sector would be implemented by the Ministry of Health.

29. Since it is considered to be the fundamental basis of the population programme, the support that was initiated in the third cycle for the supply and distribution network of contraceptives, essential family planning
drugs and medical equipment would continue to be strengthened. Such support would focus on improving warehouses, means of transportation, and the planning and management of the logistics system at the central and, especially, at the provincial levels. IUDs, oral contraceptive pills, injectables and implants would be imported to cover national needs. Essential drugs would be provided to the selected provinces. Basic medical equipment would be supplied to health centres not reached under the third programme as well as to the six newly-assisted provinces.

30. Support would also be provided to the development of channels other than the clinical network for the social marketing and non-clinical distribution of condoms and, possibly, of pills. These would use the "private sector" -- street vendors, mass organizations, private practitioners, etc. Such distribution of condoms may also increase awareness about prevention against AIDS. Use of national NGOs and of the mass organizations would be appropriate. Initially, potential complementary approaches to MCH/FP service delivery would be piloted in selected areas.

31. UNFPA would support the local manufacture of condoms, with a focus on all aspects of quality control of the product. Other donors (e.g., the Australian Government, which has contributed on a multi-bilateral basis) may be willing to continue support for the import of essential raw materials for the factory.

32. UNFPA would continue to support training programmes for MCH/FP health personnel for the delivery of MCH/FP services, seeking to coordinate activities with UNICEF's Safe Motherhood initiative. In addition, continued support may be provided for the promotion of sustainable and community-based integrated MCH/FP and environmental sanitation services with intensive human resource development using a TCDC approach, as well as health education on women's reproductive health. Training of MCH/FP health personnel (including some in the private sector) at the grass-roots level would be consolidated in the selected provinces and developed in the six new provinces, based on the approach adopted in the third country programme. Curricula would be improved and would include training on counselling techniques and information on AIDS. Training in counselling techniques and motivation would also be given to non-health workers through a sub-contract to the Women's Union. Such training would strengthen the links between health and non-health workers, and hence strengthen MCH/FP service delivery. Emphasis would be given to training in all aspects of management to health personnel at both the provincial and district levels. The new MCH/FP unit in the Ministry of Health would also be strengthened by the provision of management training and of related support facilities.

33. Support would be provided to several operational studies. A functional task analysis/activity study, to be conducted in inter-communal family planning centres and in commune health centres, would be useful for planning and management purposes. Also proposed is a management study and training programme as the basis for the development, on a pilot basis, of a suitable management information system (MIS) for the MCH/FP programme. It is also planned to strengthen the capacity of grass-roots level health staff to address service delivery-related problems by pilot-testing the team approach to district-level problem-solving. If required, UNFPA would fund the local field costs of the interregional study of the NORPLANT sub-dermal implant. Sub-contracts to other institutions would be given as appropriate.

34. Family planning service statistics would be strengthened, and support would be given for the implementation of the Home-Based Women's Record card (HBWR) system. Service statistics, particularly family planning statistics, collected mostly at the commune health centre, would be improved and maintained. Assistance for the improvement of regular statistics may include training, design of forms and data processing. After in-depth evaluation of the Home-Based Women's Record (HBWR) card and the information system,
conducted by the Ministry of Health and the World Health Organization's Regional Office for the Western Pacific in the third country programme, and the endorsement of the further use of the HBWR card by the Ministry of Health, the proposed programme would support the use of the cards throughout the selected provinces and would be the focus of related training programmes. Such use would require considerable support for printing HBWR forms; these funds would revert to the programme reserve if use of the HBWR card were discontinued.

35. UNFPA would provide a total amount of $22 million for activities in the field of MCH/FP, of which $9 million would be sought from other sources, including multi-bilateral sources.

Information, education and communication

36. The objective of the assistance to the IEC sector would be to create more awareness of population issues among all strata of the society. Assistance would be provided either directly or through sub-contracts within health activities and would emphasize horizontal links between activities. Relevant joint activities could be organized under different projects that are addressed to particular target audiences, e.g., women, youth, parents, peasants, trade union workers and journalists. A comprehensive national population and family planning IEC strategy (to be endorsed as a legal document by the Council of Ministers) would be developed and funded within a UNFPA-supported activity in policy formulation with the NCPFP. Operational studies, particularly on socio-cultural aspects, would be carried out as an input to the design of the IEC programmes.

37. In the area of population education, further support would be given to the Ministry of Education to expand the formal and non-formal population education programme, piloted in 17 provinces, to cover the whole country as well as to integrate family life and sex education into the programme. Information on AIDS and on population and the environment has already been incorporated into curricula, and this would be continued. Along with training of teachers, the focus of this assistance would be on material production and would include an in-depth evaluation of the programme.

38. In the area of parent education, the strategy adopted in the third country programme of using creche and kindergarten teachers as education agents to convey family planning messages to parents should be continued. However, taking account of the changing social environment in Viet Nam, this strategy should be adjusted to include grandparents, who take care of young children and influence family planning decision-making. With this adjustment (based on comprehensive research and evaluation) and with a focus on the production and widespread distribution of materials, support would be given to the Ministry of Education for the expansion of parent education to more provinces. This activity would again be co-funded with UNICEF.

39. Support to the family planning motivation work of the Women's Union would be increased and would include information on AIDS. Assistance would focus on the training of motivators and on materials production and would include follow-up of acceptors as well as monitoring and evaluation aspects. Innovative means to reach target audiences, including approaches to males using the wife-husband channel, would be developed. The Women's Union would also, in coordination with health services, undertake client counselling about family planning. The Women's Union would also be involved in the MCH/FP training activity outlined in paragraph 32, which will be implemented by the Ministry of Health.

40. Support to the family planning motivation work of the Youth Union would be increased and would include information on AIDS. Assistance would focus on the training of motivators and on materials
production and would include monitoring and evaluation aspects. Innovative means to reach target audiences, particularly males, would be developed.

41. The Peasant’s Union, representing some 80 per cent of the population, is already involved in the national population programme with its own strategy of motivating middle-aged men in the countryside. As this age-sex group was not addressed in the third country programme, support would be provided to strengthen this motivation work through training of motivators and materials production.

42. Support would also be provided to the Federation of Trade Unions and the Fatherland Front through NCPFP. The Federation of Trade Unions, which unites state employees in all sectors, and the Fatherland Front, the organization of patriots from all religions and of retired state employees, have also been active in the national population programme. Support would be given to the family planning motivation activities of these organizations with the objective of bringing them into the mainstream of the national IEC programme. To ensure this, and to strengthen coordination among all mass organizations, the project would be implemented by NCPFP.

43. Support to the mass media would strengthen the nationwide network of local radios and mobile communication teams to enable them to serve population IEC operations. The emphasis of this assistance would be on low-cost, appropriate equipment, with greater attention given to equipping the district-level mobile communication teams. This project would be implemented by the Ministry of Culture, Information, Sports and Tourism.

44. Support to the population communication (POPCOM) training programme for workers in all media (radio, television, print and publicity) is proposed with the objective of developing a cadre of professional population communicators and a good set of supporting training materials. The Ministry of Culture, Information, Sports and Tourism, the national Radio Voice of Viet Nam, Viet Nam Television, and the Viet Nam Journalists’ Association would participate in this programme. It would be implemented by a joint management board, headed by a Vice-Minister.

45. Community mobilization activities, tested in two communes, would receive further support if in-depth evaluation is favourable. In this innovative IEC approach, members of one community consider collectively issues of population and development and of family planning as an integral aspect of daily life. It is proposed that UNFPA support those follow-up activities necessary for expanding to other communes if the results are found to be positive. The activity would be implemented by NCPFP.

46. In the area of population documentation, limited further support to the Population, Documentation and Information Centre would be considered if some structural changes were undertaken.

47. UNFPA proposes to provide assistance for population IEC activities in the amount of $8 million, of which $1 million would be sought from other sources, including multi-bilateral sources.

Data collection and analysis

48. The objective in this area is to establish an integrated statistical system in the field of population, capitalizing on the success of the 1989 census.
49. Support would be provided to an inter-censal demographic survey, representative of the national, regional and possibly urban-rural levels, and focusing on maternal histories of respondents, some health issues, contraceptive knowledge and behaviour, and the economic situation of each household. This survey would be conducted in 1994. It is expected to serve as a baseline for a multi-round survey, with a two-stage design that would give information at the provincial and possibly lower levels. Prior to the survey in 1994, minimal support would also be given to the annual 10 per cent sample survey but discontinued thereafter. This project would be implemented by the General Statistics Office (GSO), with sub-contracts to other institutions as appropriate.

50. UNFPA would provide support to the establishment of a computerized database of the 1989 census, which would be established at the GSO to enable access to and full dissemination and effective utilization of the results by national and international users. The database would be fully operational by the end of 1994.

51. Support would be given for training for census users and population personnel. Personnel at the central and, particularly, at the provincial and selected district levels would be trained in the use of the results of the 1989 census in planning and in sectoral target-setting. Provision would be made for other activities or publications required to ensure full dissemination and appropriate use of the census. In addition, it is proposed that training mechanisms at regional levels, utilizing regional training facilities, be established in order to intensify the in-service training programme for officials and cadres engaged in population work at various levels. This training would begin in 1993 and would build on that initiated through NCPFP during the third country programme. Some basic equipment may also be provided to selected regions or provinces. The activity would be implemented by NCPFP with extensive use of national experts, especially from GSO, the Centre for Population Studies at the Ministry of Labour and the Institute of Sociology, for specific aspects of training.

52. Support would be given to a pilot study to identify ways of developing and maintaining a system of indicators for monitoring social change, including indicators on the status of women. This activity would be undertaken in collaboration with UNICEF, and would be implemented by the GSO with some sub-contracts possibly arranged with the Ministries of Health, Education and Labour, and the Institute of Sociology.

53. Support developed in the third cycle would be continued for the strengthening of the civil registration and vital statistics systems, if this is considered to be appropriate after evaluation. Any activity developed would be implemented by the Ministry of Justice, with a sub-contract with GSO.

54. Development of a management information system for the population programme (different both from that being proposed for the MCH/FP programme and also from a population information system) is being piloted under the third country programme. This would be further developed during the next cycle, if evaluation of the pilot proves favourable. Development of the MIS would again be implemented by NCPFP, but within the framework of activities in support of programme development.

55. UNFPA proposes to provide $3 million to the area of population data collection and analysis, of which $500,000 would be sought from other sources, including multi-bilateral sources.

Population policy formulation

56. In the area of population policy formulation, the strategy adopted would be focused mainly on strengthening the coordinating agency for population, the NCPFP.
57. In the area of programme development, support would be provided to strengthen the NCPFP in order to enable it to fulfil such functions as development of appropriate policies, overall and sectoral strategies (particularly the national IEC strategy to be developed in 1992), plans and programmes; management and coordination; monitoring and evaluation; and target-setting. The NCPFP, as the implementing agency, would work closely with the State Planning Committee, the Ministry of Health, and with other relevant institutions.

58. Support would be provided to the Institute of Informatics for technical support (training and computer maintenance) to all UNFPA-supported activities.

59. UNFPA proposes to provide $750,000 to the area of population policy formulation, of which $250,000 would be sought from other sources, including multi-bilateral sources.

Population dynamics

60. In the area of population dynamics, the strategy adopted would be focused on strengthening the institutional capacity in both demographic training and research.

61. In the area of institutional development in population studies, a Population Studies Centre would be established in order to strengthen the demographic training capacity at the national level and to develop a cadre of population specialists. The National Economics University of Hanoi has a mandate from the Council of Ministers to begin a degree course in demography. This institution would be strengthened through fellowships, in-country training and the provision of books and some equipment.

62. Selected research activities (migration, socio-cultural aspects of population, linkages between population and the environment and women's employment) may also be supported if appropriate and if the evaluation of those studies developed in the current cycle is positive. This activity would be implemented by the Centre for Population Studies (at the Ministry of Labour), but some research topics may be undertaken by other institutes (Institute for Economic Studies, Institute of Sociology, Institute of Rural and Urban Planning), under sub-contracts, thus continuing to strengthen these institutes.

63. UNFPA proposes to provide $1 million to the population dynamics area, of which $250,000 would be sought from other sources, including multi-bilateral sources.

Women, population and development

64. Gender issues would be considered in all UNFPA assistance to different sectors of the programme.

65. In the area of income-generating activities, UNFPA and FAO have tried to test the link between these and MCH/FP through a pilot project formulated late in the current cycle that focuses on a special assistance to rural women. If evaluation of this pilot project is favourable, further activities would be developed in 1993 and would be implemented by the Women's Union.

66. UNFPA proposes to provide $250,000 in the area of women, population and development.

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Programme reserve

67. It is recommended that $1 million be kept in reserve for unforeseen activities and for new activities that could be developed within the framework of the proposed country programme strategy.

Programme coordination

68. Coordination is critical for UNFPA assistance at programme, sector and project levels. The PRSD mission recommended that the NCPFP should play an active role in coordinating international assistance to the Government’s population programme by acting as the focal point for all external assistance. UNFPA would remain closely associated with that development. At the sector level, a mechanism to ensure close coordination with UNFPA participation would be required. The UNFPA field office would also play an active role in the coordination of assistance from all external donors (including NGOs), and in joint programming with Joint Consultative Group on Policy (JCGP) partners, as well as in connection with UNFPA regional and interregional programmes.

Programme monitoring, evaluation and management

69. Monitoring, evaluation and management aspects would be built into the fourth country programme at the national programme level and also into each UNFPA-assisted project. Specific training would be given during project formulation on aspects of monitoring, evaluation and management, as well as on UNFPA policies and procedures. 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 will become operational in 1992 as part of the UNFPA successor support cost arrangements approved by the Governing Council in decision 91/37.

Financial summary

70. As indicated in paragraph 1, UNFPA would provide assistance in the amount of $36 million over the four-year period 1992-1995, of which $25 million would be programmed from UNFPA’s regular resources. UNFPA would seek to provide the balance of $11 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 breakdown by programme area is as follows:
<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>13,000,000</td>
<td>9,000,000</td>
</tr>
<tr>
<td>Information, education and communication</td>
<td>7,000,000</td>
<td>1,000,000</td>
</tr>
<tr>
<td>Data collection and analysis</td>
<td>2,500,000</td>
<td>500,000</td>
</tr>
<tr>
<td>Population policy formulation</td>
<td>500,000</td>
<td>250,000</td>
</tr>
<tr>
<td>Population dynamics</td>
<td>750,000</td>
<td>250,000</td>
</tr>
<tr>
<td>Women, population and development</td>
<td>250,000</td>
<td>--</td>
</tr>
<tr>
<td>Programme reserve</td>
<td>1,000,000</td>
<td>--</td>
</tr>
<tr>
<td>TOTAL</td>
<td>25,000,000</td>
<td>11,000,000</td>
</tr>
</tbody>
</table>

V. RECOMMENDATION

71. The Executive Director recommends that the Governing Council:

   (a) Approve the programme for Viet Nam in the amount of $36 million for the four-year period 1992-1995;

   (b) Authorize the Executive Director to programme, subject to the availability of funds, an amount of $25 million from UNFPA's regular resources, over the period 1992-1995;

   (c) Further authorize the Executive Director to seek to provide the balance of $11 million of the approved programme from a combination of UNFPA regular resources and other resources, including multilateral 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 Viet Nam and with the executing agencies.