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

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

Proposed UNFPA assistance: \$4.6 million, of which \$2.8 million would be programmed from UNFPA regular resources. UNFPA would seek to provide the balance of \$1.8 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: Three years

Estimated starting date: January 1992

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

Government coordinating
agency: Ministry of Planning

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BENIN

Demographic facts

Population Total (000)		Population density (/sq. km.)	41
Total	4,630	Average annual change (000)	
Males	2,288	Population increase	158
Females	2,343	Births	247
Sex ratio (/100 females)	97.7	Deaths	89
Urban	1,747	Net migration	0
Rural	2,883	Annual population total (% growth)	3.15
Per cent urban	37.7	Urban	4.81
Population in year 2000 (000)	6,369	Rural	2.07
Functional age groups (%)		Crude birth rate (/1000)	49.1
Young child: 0-4	19.2	Crude death rate (/1000)	17.7
Child: 5-14	27.3	Net migration rate (/1000)	0.0
Youth: 15-24	18.8	Total fertility rate (/woman)	7.10
Elderly: 60+	4.6	Gross reproduction rate (/woman)	3.50
65+	2.8	Net reproduction rate (/woman)	2.48
Women: 15-49	22.2	Infant mortality rate (/1000)	85
Median age (years)	16.7	Life expectancy at birth (years)	
Dependency ratios: total	97.6	Males	46.4
(/100) Aged 0-14	92.0	Females	49.7
Aged 65+	5.6	Both sexes	48.0
Agricultural population density		GNP per capita	
(/hectare of arable land)	1.99	(U.S. dollars, 1989)	380

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 \$4.6 million, of which \$2.8 million would be programmed from UNFPA's regular resources, over a three-year period, starting January 1992, to assist the Government of Benin in achieving its population and development objectives. UNFPA would seek to provide the balance of \$1.8 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. This would be UNFPA's third country programme for Benin.
2. The proposed programme is based on the findings and recommendations of the multisectoral Programme Review and Strategy Development (PRSD) exercise of September/October 1991, the experience gained during the implementation of the two previous programmes, the Government's priorities and strategies as reflected in the structural adjustment programme, and extensive discussions with various ministries, United Nations agencies, multilateral and bilateral donors and non-governmental organizations (NGOs). The proposed programme is intended to complement and supplement national population activities.
3. The overall objectives of the proposed programme are to assist the Government in the following: (a) reducing infant and child mortality levels by improving the quality and availability of maternal and child health and family planning (MCH/FP) services in urban and rural areas; (b) improving knowledge of the interrelationships between population and development and integrating population variables into development planning; and (c) improving the status of women in the socio-economic development process.
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. Demographic trends. According to the United Nations, the total population of Benin, which was 3.3 million inhabitants at the first national census in 1979, was an estimated 4.6 million in 1990. At the current rate of increase (3.15 per cent a year), the total population would reach 6.4 million in the year 2000, and more than 10 million in 2015. By 2000, the dependency ratio will exceed 100, the population of school-age (ages 6-11) will be 17.4 per cent of the total, and the urban population will reach 45.0 per cent, with the capital, Cotonou, increasing threefold. The population is unevenly distributed, with 60 per cent of the total living in the coastal region. The urban population is estimated at 37.7 per cent; the three main towns have grown since 1979 at the rate of at least 8.0 per cent a year. Internal and international migrations, particularly to Togo and Nigeria, are important. Infant mortality (85 per 1,000 live births) is high, as is maternal mortality, estimated at 800 per 100,000 live births.
6. Social and economic factors. Public access to health centres is still limited to about 50 per cent of the total population, who rely mostly on traditional practitioners. The distribution of health personnel is uneven: there is 1 doctor per 14,300 inhabitants for the country as a whole compared with 1 doctor for 39,000

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inhabitants in the North. MCH services are provided by the National Hospital Centre in Cotonou, 4 provincial hospital centres, 83 district health centres, 244 communal health centres and 292 village health posts. Family planning services are integrated in the national and 4 provincial hospitals and to some extent in about 250 health centres. Family planning services are also delivered by the private sector and by the two urban clinics of the Benin National Committee for the Promotion of Family Planning, the local affiliate of the International Planned Parenthood Federation (IPPF). The National Committee has been officially recognized since 1971, although the 1920 law against contraception has not yet been abolished. Information and sensitization activities on population issues have not been well developed although an Information, Education and Communication (IEC) Division has been set up within the Ministry of Public Health. With technical assistance from the United Nations Development Programme (UNDP), the IEC Division is developing a comprehensive health education programme for promoting new attitudes among individuals and families. Among married women, knowledge of modern contraceptive methods is limited (46 per cent), and contraceptive prevalence is estimated to be very low. Accordingly, fertility remains high (7.1 children per woman).

7. With negative growth since the 1980s, the gross national product per capita has fallen as low as \$380 (1989). The rate of adult illiteracy remains high (85 per cent). Only 50 per cent of children of school-age (of whom 32 per cent are girls) attend primary school. The downward trend of the budget has led recently to lower school enrolment rates at primary, secondary and university levels. Although women constitute the majority of the labour force in both rural and informal sectors, and play an important social and economic role, they remain disadvantaged. Equality between men and women, though recognized in the Constitution, has yet to be translated into daily life. No institutional framework for women's integration into development has been established at the national level.

8. Successive national development plans have been concerned with the unbalanced distribution and growth of the population. Yet, few systematic efforts had been made to take population factors into account until the Population Planning Unit was established in the Ministry of Planning in 1989. To address environmental problems, primarily those of desertification and declining productivity of the land, a Plan of Action which takes into account relationships among development, environment and population is being elaborated by the newly created (1991) Ministry of Environment, Urbanization and Housing with the support of UNDP and the World Bank.

9. Since 1988, the Government has undertaken a structural adjustment programme. Pressure for democratization led to instability in 1989 and 1990 and to the organization of a national conference including representatives of various social groups (Conférence Nationale des Forces Vives de la Nation) in February 1990, after which a new Constitution was adopted. Democratic elections for the legislature and presidency were held in January 1991. The PRSD Mission, which visited Benin in September/October 1991, observed that the new Government is already committed to implementing a population programme and that the ongoing process of democratization, leading to the strengthening of effective community participation, decentralization of the administrative machinery and greater private initiative, would facilitate this.

III. REVIEW OF UNFPA AND OTHER ASSISTANCE TO DATE

10. UNFPA initiated support to Benin in 1972 with preparatory assistance for a population and housing census. During 1981-1982, additional funds in the amount of \$1.4 million were allocated to support MCH/FP activities. The first comprehensive population programme was approved in 1983, in the amount of \$2.4 million for four years. In June 1987, the Governing Council approved the second country programme in the amount

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of \$4.0 million -- totally committed from UNFPA regular resources -- over the five-year period 1988-1992. However, by the end of 1991, the total funds allocated had been expended. The cost of the second census, for which \$475,000 was earmarked, had been greatly underestimated; in addition, multi-bilateral funds could not be mobilized. Total expenditures during the period 1988-1991 are estimated at \$4,054,061.

11. Despite achievements, particularly those in training, research and data collection, limited progress has been made during the second country programme, especially vis-à-vis contraceptive prevalence. The overall socio-political context, which resulted in a disruption of the public sector from July 1989 to March 1991, is part of the reason. In addition, the UNFPA programme was inadequately designed, with limited sectoral strategies and too many projects in relation to the resources committed. Other constraints on implementation of population activities have included the limited capacity of national institutions; insufficient knowledge and awareness of population issues; and lack of coordination among the governmental, international and private institutions undertaking population activities. The absence of an IEC programme in MCH/FP has been an important contributor to the low level of contraceptive prevalence.

Maternal and child health and family planning

12. UNFPA support to MCH/FP, which began in 1981 to encourage birth-spacing, was extended in 1988 to assist the Government in strengthening MCH/FP services and in formulating a national family planning policy. Family planning services were provided irregularly in 250 health centres at provincial and district levels; 8 MCH centres were rehabilitated and 6 maternities were equipped with gynaecological/obstetrical items, and 11 with insertion kits for intra-uterine devices (IUDs). Training was provided in MCH/FP for provincial and district health staff -- 13 physicians and nurse/midwives, 60 trainers (10 per province) and 360 district health agents, in total. Operational research was also carried out. In addition, the Ministry of Public Health elaborated a policy framework for health, including the promotion of family planning.

13. Despite positive achievements, activities in the MCH/FP sector have had little impact on contraceptive prevalence. In addition to the reasons mentioned in paragraph 11, project implementation was adversely affected by the worsening situation in the health sector as a whole, the lack of management that resulted in irregular supply of contraceptives, overcentralization of services, insufficient commitment of the staff, sporadic technical backstopping, and limited relationships with other national bodies involved in family planning activities, especially NGOs.

Information, education and communication

14. In 1983, UNFPA approved a pilot project aimed at devising an appropriate strategy to integrate population education into the school system, formulate relevant curricula, produce didactic materials and train trainers and teachers. The experimental phase was completed in mid-1988 and a new phase was started mid-1990. Activities completed so far include training abroad in family life education for 5 of the 6 members of the core team, training of 60 trainers, sensitization of 180 heads of schools, curricular revision and production of didactic materials. However, population education has not yet been introduced into teacher training schools, technical colleges and private schools. During the review of the project, the change in the core team during implementation and the less than full integration of the implementing structure into the Ministry of Education were identified as major constraints.

15. UNFPA's support to activities to foster population communication in rural areas, which started in March 1989, was intended to sensitize new literates gathered in lecture clubs, to train journalists in population

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concepts and to create pilot centres for the production of pamphlets and other materials. Implementation was hampered by the weakness of the institutional framework, the absence of a clear strategy, and overambitious objectives. Major achievements include the training of 29 technicians in the introduction of population education into post-literacy curricula and 18 journalists on information techniques related to population issues. Rural broadcasting and radio-tapes have been produced and a training manual published. Participating communities showed strong interest in the activities.

Data collection and analysis

16. UNFPA assisted the Government in preparing for its second population and housing census. Political events and the shortage of bilateral funding led to postponement of the enumeration, originally scheduled for January 1989. Cartographic work was completed in January 1991 and the pilot census at the end of 1991. Training in data processing and in demographic analysis have now been completed.

17. UNFPA also provided assistance for the pilot phase of a civil registration project, initiated in 1989. Improvement of the civil registration system in three out of the six provinces was expected during the pilot phase. Major activities included the formulation of laws and the design of registries. The halting of the project for all of 1990 due to the socio-political situation limited achievements.

Population policy formulation

18. UNFPA supported the establishment of a Population Planning Unit in the Ministry of Planning, with the aim of formulating a population policy and promoting the integration of population concerns into development planning.

19. An inventory of population-related publications and of demographic data studies has been completed, and a documentation centre established. Research related to the formulation of a population policy and the integration of population variables into development plans was initiated in collaboration with the Population Training and Research Centre (Centre de Formation et de Recherche en Population) at the National University of Benin. The national capacity was strengthened through study tours and long-term training abroad. However, sensitization seminars have not been held, and coordination among institutions has not been achieved. Project implementation was constrained by public-sector strikes and by understaffing, inexperience and staff turnover at the Unit.

Population dynamics

20. UNFPA supported the Government in establishing a Population Training and Research Centre at the National University of Benin, in order to meet the requirements for population and development specialists. This has been successfully implemented: two groups of 16 technicians have been trained; 4 population specialists who will constitute a core research team are now receiving graduate-level training abroad; an investigation, "Women and decision-making within the household", is being carried out; and an important study, "Population in Benin: Present and Future", has been published. In the long term, however, institutionalization of the project could be hampered by the limited financial resources of the University.

Women, population and development

21. In 1988, UNFPA approved assistance aimed at training women's groups and cooperatives in the management of income-generating activities and in population and family welfare. This activity never really got under way because of the dissolution of the national implementing agency, the Benin Revolutionary Women's Organization, in March 1990. Implemented activities consisted mainly of workshops for 36 trainers to develop a project strategy and field trips to identify ongoing activities of women's associations.

Other external assistance

22. International assistance in population focused on the health sector, especially MCH. Support to data collection, population policy, IEC and women, population and development is limited chiefly to assistance from United Nations agencies and organizations. In the health sector, French Cooperation, which supported equipment and training and gave important technical assistance on managing the health sector and setting up the health data system, is especially concerned with the anti-malaria and AIDS programmes and with the fight against endemic diseases. The Swiss and German cooperation agencies supported primary health care (PHC) activities in 11 and 10 districts, respectively.

23. The World Bank initiated the implementation of the Development of Health Services Programme jointly with Swiss Cooperation, to improve, *inter alia*, the early detection and management of high-risk pregnancies and the intensification of efforts to improve prenatal and postnatal care. The United Nations Children's Fund (UNICEF) is undertaking the Expanded Programme of Immunization and the promotion of primary health care through implementation of the Bamako Initiative. The World Health Organization (WHO) is supporting a programme for AIDS prevention, the training of medical staff, implementation of primary health care in six districts and reform of the IEC Unit of the Ministry of Public Health. UNDP supported approximately 15 pilot community-based clinics located in underserved urban areas and the production of training materials for the health staff. The European Community is involved in the construction of three hospitals and the rehabilitation of other health centres. In the family planning sector, the United States Agency for International Development (USAID) has supported two urban clinics run by the Benin National Committee for the Promotion of Family Planning.

IV. PROPOSED PROGRAMME 1992-1994

24. The proposed programme for 1992-1994 is based on the Government's development priorities and the recommendations of the PRSD mission and the experience gained during the implementation of the two previous programmes. The overall objectives of the programme are outlined in paragraph 3. Specific objectives of this programme are as follows: (a) to increase contraceptive prevalence significantly during the programme period; (b) to improve knowledge about demographic and population issues by carrying out the population census and undertaking population and development studies; (c) to integrate population data into the development process and to define a national framework for population activities; (d) to create awareness about population and development issues among politicians and various leaders; (e) to convince the public, especially women, of the advantages of family planning and to inform them of the availability of services; (f) to educate youth in schools in responsible parenthood; and (g) to increase the general well-being of women by upgrading the quality of family planning services.

25. The programme strategy, which would address many shortcomings noted by the PRSD mission, would be aimed at: (a) decentralizing programme implementation; (b) reinforcing relevant institutional capacity to

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plan and manage the population programme adequately; (c) promoting community and NGO participation in programme design and implementation; (d) ensuring the dissemination of information among all institutions concerned; (e) integrating UNFPA projects into broad ongoing programmes implemented with assistance from other donors to increase efficiency; and (f) promoting the coordination of population activities.

Maternal and child health and family planning

26. The objectives in the MCH/FP sector are to assist the Government in formulating and implementing a national family planning policy and strategy, and to increase the contraceptive prevalence rate. Owing to the scarcity of data on contraceptive prevalence, a baseline survey would be undertaken to establish a benchmark. UNFPA assistance would also be used to consolidate the 250 district centres, primarily through training and provision of services, and strengthen the main maternity centre of Cotonou and the six provincial centres to become reference centres, by providing necessary equipment, material and contraceptives and by improving knowledge in family planning. To increase coverage of suburban areas where the unmet demand for family planning is higher, UNFPA would provide assistance to the 15 community-based clinics supported by UNDP in order to integrate family planning activities into the services currently delivered. The programme would also seek to increase the demand for MCH/FP services through the promotion of Safe Motherhood initiatives, in collaboration with other donors.

27. The main target group for training activities would be provincial and district health staff, primarily nurses and midwives. Workshops, seminars and refresher courses would be practice-oriented and would be conducted in-country. Information on AIDS and sexually transmitted diseases would be incorporated into the training programme.

28. UNFPA would assist the Ministry of Public Health in developing a clear family planning policy with quantitative objectives and well-defined strategies. UNFPA would also provide consultancy support to the Government for a revision of the 1920 law on family planning. Coordination would be strengthened through the organization of annual seminars under the supervision of the Ministry of Public Health, involving the heads of the provincial family planning reference centres, and regular meetings at the provincial and national levels for all organizations, including NGOs, involved in family planning activities. In the context of efforts to strengthen coordination among all donors supporting the Government's primary health care strategy, UNFPA would seek to attract other funds for the promotion of family planning activities. As the promotion of family planning is part of the primary health care strategy defined at the Alma-Ata Conference (1978), it is expected that additional resources would be channelled to the programme.

29. A review of applied research would be undertaken to improve the coverage and quality of MCH/FP services. The system for collecting MCH/FP data would be revised in preparation for launching the National Health Management and Statistical System. Knowledge-attitude-practice (KAP) surveys would be undertaken regularly to assess the increase in the contraceptive prevalence rate.

30. UNFPA would provide a total amount of \$1,550,000 for this sector, of which \$750,000 would be sought from other sources, including multi-bilateral sources.

Information, education and communication

31. The proposed programme would strongly emphasize the IEC sector in order to: (a) create awareness of the implications of population growth for sustainable development among decision makers, leaders and the

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public; (b) convince the public, especially women, of the advantages of family planning and inform them of the availability of services; and (c) educate in-school youth in responsible parenthood. The basic strategy will be to link UNFPA support to existing programmes, chiefly those in the Health Education Division of the Ministry of Public Health and those conducted by NGOs.

32. To increase the demand for MCH/FP services, midwives and nurses would receive training in IEC through regional seminars focusing on interpersonal communication techniques. Volunteers of the Benin National Committee for the Promotion of Family Planning already help sensitize potential family planning users in the MCH/FP centres. These volunteers as well as those in other NGOs involved in the field of family planning would receive IEC materials and training, which would include interpersonal communication techniques. Social workers of the Ministry of Labour and Social Affairs who participate in the immunization programme would also be integrated into the programme of sensitization. In collaboration with the UNDP-funded project Production of Didactic Material for Health Personnel, the IEC Division would produce IEC materials on family planning. To ensure that family planning concerns are taken into consideration, UNFPA, with other donors, would assist the IEC Division in convening regular coordinating meetings to assess the effect of IEC programmes.

33. UNFPA would support intensive and lengthy campaigns through the mass media to sensitize the public on family planning services. To create awareness of population issues, meetings would be organized for politicians and high-ranking officials, and seminars/workshops would be held for decision makers, leaders and NGOs. UNFPA would also provide support for the training of journalists to enable them to ensure wide dissemination of easily understandable population and health information through the mass-media network. The IEC programme would also pay attention to the intensive use of radio in rural areas because of radio's wide coverage and the low cost of producing local programmes.

34. If reform of the literacy programme is approved, UNFPA would support the integration of population concerns into literacy programmes. UNFPA's limited assistance would complement projects funded by other donors.

35. UNFPA's assistance in the field of population education would also complement important programmes supported by other donors in the education sector. Activities would focus on training in population and family life education for teachers in teacher training schools, which have recently been reopened. The programme would be fully integrated into the Ministry of Education's department in charge of the revision of curricula for primary and secondary schools. The experience of the pilot project would provide the basis for curricular revision. UNFPA's support would take into account the school reform currently under consideration.

36. UNFPA would provide a total amount of \$875,000 for this sector, of which \$250,000 would be sought from other sources, including multi-bilateral sources.

Data collection and analysis

37. To increase knowledge of population characteristics, UNFPA would assist the Government in undertaking the 1992 Population and Housing Census. The enumeration is planned for February 1992. Data processing, tabulation and analysis would be completed in 1993, with the assistance of regional advisers and researchers from the Institut de Formation et de Recherche Demographiques (IFORD), followed by

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publication of the findings in 1994. Attention would be paid to data analysis and dissemination and to a better utilization of the results for policy design.

38. UNFPA would provide a total of \$1,350,000 for this sector, of which \$800,000 would be provided by multi-bilateral sources. The Government of the Netherlands has already committed \$645,000 under multi-bilateral arrangements, and UNDP has committed \$450,000 for 1991-1992 to complete the census. During the period covered by this country programme, these contributions will amount to \$800,000.

Population policy formulation

39. The objectives in the population policy formulation sector are to strengthen the Ministry of Planning in the area of population and development planning for the integration of population data into the development process and to create awareness of the implications of population growth for sustainable development.

40. The Ministry of Planning's Population Planning Unit would be integrated into the National Commission of Human Resources, which would become the Population and Human Resources Division. This body would have responsibility for the overall coordination and monitoring of population activities. The Technical Committee on Population, Health and Social Affairs would be enlarged to include all ministries concerned with population issues.

41. Special attention would be paid to training. Selected technicians from the Ministry of Planning and from other technical ministries would first benefit from courses on demography and population and development, and would then carry out sectoral studies on the integration of population variables into sectoral planning.

42. UNFPA would continue to support studies necessary for the formulation of a national population policy. In the framework of the "Population and Environment Study" undertaken as part of the Plan of Action for the Environment, the Population and Human Resources Division would assist the Government in elaborating the chapter on the consequences of population growth for the environment and would support the organization of a proposed national seminar on the topic. In addition, several awareness-creation seminars would be organized for decision makers, parliamentarians, technicians, and political and religious leaders on the importance of population issues for socio-economic development.

43. UNFPA would provide a total amount of \$300,000 for this sector.

Population dynamics

44. The objective in the population dynamics sector is to contribute to the national requirements for population research through support to the Population Training and Research Centre at the National University of Benin. Under the guidance of the Population and Human Resources Division, a research programme would be set up, the results of which would be used in population and development programming. In addition, the training of civil servants would be strengthened through collaboration with the Population and Human Resources Division. UNFPA would provide a total amount of \$200,000 to this sector.

Women, population and development

45. The primary objective of UNFPA in the women, population and development sector is to ensure that women's concerns are taken into consideration in all aspects of the proposed programme. In addition, UNFPA would provide support to women's associations for improving the health of women and children, through the promotion of MCH/FP information. Women's associations would be strengthened through educational and motivational programmes for family welfare and family planning. As an entry point for introducing family life education, UNFPA would use a programme, funded by UNDP and executed by the International Labour Organisation, aimed at strengthening credit access for well-organized women's groups and NGOs engaged in economic activities in rural and urban areas. UNFPA would provide a total amount of \$225,000 for this sector.

Programme reserve

46. An amount of \$100,000 has been set aside as a reserve to cover any unforeseen activities that may be developed within the context of the proposed programme.

Programme coordination

47. In agreement with the Ministry of Foreign Affairs, the Ministry of Planning is responsible for coordinating and monitoring all external assistance, and also for coordinating the population programme. The Ministry's Population and Human Resources Division, which would replace the National Commission of Human Resources, would play a key role in coordination of the population programme. In the MCH/FP sector, the Coordinating Committee and the IEC Division of the Ministry of Public Health would receive UNFPA and other support to implement and coordinate activities. UNFPA would strive to strengthen the coordination among donors involved in the primary health care programme in order to improve their support to family planning activities as well.

48. The members of the Joint Consultative Group on Policy (JCGP) have agreed to harmonize their respective programming cycles. UNDP, UNICEF and UNFPA would undertake a joint programme formulation exercise at the beginning of 1995. In the intermediate period (1992-1994), special emphasis would be placed on effective collaboration with JCGP members as well as with WHO during project formulation, backstopping and evaluation missions. UNFPA would also ensure that outputs from population-related programmes are widely disseminated to other donors and executing agencies.

Programme management, monitoring and evaluation

49. Each quarter, a meeting of all national counterparts would be organized to establish the Project Management Plan for each project and to improve coordination. Standard UNFPA procedures for monitoring and evaluation would be followed to ensure the effective implementation of the programme. The field office would conduct workshops to improve the capacities of national counterparts for monitoring and evaluating population activities.

50. Under the guidance of the UNFPA Representative, the proposed programme would be monitored by the Country Director based in Lomé, Togo, and by other staff. To improve UNFPA national staff capacities, adequate training would be needed in population issues and in management and accounting. Whatever the mode of execution, UNFPA would make full use of available and appropriate national and

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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

51. As indicated in paragraph 1, UNFPA would provide assistance in the amount of \$4.6 million over the three-year period 1992-1994, of which \$2.8 million would be programmed from UNFPA's regular resources. UNFPA would seek to provide the balance of \$1.8 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	800,000	750,000	1,550,000
Information, education and communication	625,000	250,000	875,000
Data collection and analysis	550,000	800,000	1,350,000
Population policy formulation	300,000	--	300,000
Population dynamics	200,000	--	200,000
Women, population and development	225,000	--	225,000
Programme reserve	<u>100,000</u>	<u>--</u>	<u>100,000</u>
TOTAL	2,800,000	1,800,000	4,600,000

V. RECOMMENDATION

52. The Executive Director recommends that the Governing Council:

(a) Approve the programme for Benin in the amount of \$4.6 million for the three-year period 1992-1994;

(b) Authorize the Executive Director to programme, subject to the availability of funds, an amount of \$2.8 million from UNFPA's regular resources, over the period 1992-1994;

(c) Further authorize the Executive Director to seek to provide the balance of \$1.8 million 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 Benin and with the executing agencies.
