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UNITED NATIONS POPULATION FUND
PROPOSED PROJECTS AND PROGRAMMES

Recommendation by the Executive Director
Assistance to the Government of Sao Tome and Principe
Support for a comprehensive population programme

Proposed UNFPA assistance: \$1.8 million, of which \$1.3 million would be programmed from UNFPA regular resources. UNFPA would seek to provide the balance of \$500,000 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: Four years

Estimated starting date: January 1993

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

Government coordinating agency: Ministry of Foreign Affairs

I. SUMMARY

1. The United Nations Population Fund (UNFPA) proposes to support a comprehensive population programme in the amount of \$1.8 million, of which \$1.3 million would be programmed from UNFPA's regular resources, over a four-year period, starting January 1993, to assist the Government of Sao Tome and Principe in achieving its population and development objectives. UNFPA would seek to provide the balance of \$500,000 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 is based on the findings and recommendations of the Programme Review and Strategy Development (PRSD) mission to Sao Tome and Principe in July-August 1992 and on the Government's strategies and priorities as reflected in its structural adjustment programme. The long-term overall objective of the proposed programme is to help the Government achieve its priority goals of improving the standard of living and quality of life of the population and reducing poverty. The immediate goals of the second programme are: (a) to increase the modern contraceptive prevalence rate from 7.6 per cent to 20 per cent; (b) to expand the provision of integrated maternal and child health and family planning (MCH/FP) services in rural areas and to targeted population groups; (c) to reduce the number of abortions; (d) to strengthen the national capacity for managing its MCH/FP programme; (e) to help improve women's health through information, education and communication (IEC) and MCH/FP activities; (f) to analyse population data crucial to the planning of MCH/FP activities; and (g) to strengthen the introduction of population education and family life education into the formal school system.

3. 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 (e)); that respect for human life is basic to all human societies (para 14 (e)); and 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

4. Demographic trends. The first published results of the 1991 census estimated the population of Sao Tome and Principe at 117,359 inhabitants, an increase of 20,748, or 21.5 per cent, since 1981.¹ With an area of 1,001 square kilometres, average population density increased from 93 to 117 inhabitants per square kilometre between 1981 and 1991. Ninety-five per cent of the population is concentrated on the island of Sao Tome where the average population density is 130 inhabitants per square kilometre. The island of Principe has 5,480 inhabitants and a population density of 38.5 inhabitants per square kilometre. Sixty per cent of the population is now concentrated within a 10-kilometre radius of the capital city.

5. The population of Sao Tome and Principe is particularly young: children under 15 account for 46.3 per cent of the total population. The proportion of the under-15 population is growing steadily, resulting in

¹The United Nations provides only limited data on Sao Tome and Principe in its statistical tables in World Population Prospects: 1992. Therefore, no demographic fact sheet is included in this presentation of the proposed programme.

an increased demand for social services. People aged over 60 account for approximately 7.1 per cent of the population. The dependency ratio has reached 115 per 100 adults aged 15-64. According to research by the Centre for Population Studies, between 1980 and 1990 the crude birth rate dropped from 42 per 1,000 to 34 per 1,000, the total fertility rate from nearly 7 to a little over 5 children per woman, and the crude death rate from 11 to 10 per 1,000.

6. Because the available population data has not been analysed, very little is known about the country's population and the different demographic phenomena. Data on the economic and sociocultural characteristics of the population in general and women in particular are incomplete, sometimes differing according to the source, and are even non-existent in some sectors. The lack of socio-economic and population data that can be used in planning is the result of weaknesses in the data collection system. The absence of socio-economic data is also attributable to the weakness of the institutional framework.

7. Although the country does not have an explicit population policy, the Government is aware of the importance of population for socio-economic development. It is concerned at the high rate of population growth and at the rate of spontaneous internal migration and hopes to integrate population factors into development plans and programmes.

8. Economic and social factors. Sao Tome and Principe inherited from the colonial era an economy based on the cultivation of a single crop, cocoa. It was heavily dependent on the state of the international market for cocoa and on the fluctuation of cocoa prices. The drop in cocoa production after 1980 and the decline in prices on the international market caused export earnings to drop, with catastrophic results for the country: a downturn in the balance of payments, an increased state budget deficit and a marked increase in external debt. The country's economic and financial situation has grown considerably worse since 1987. Wages have declined substantially in real terms. It is estimated that civil servants suffered a loss of 51 per cent of their purchasing power in the period 1986-1990 while that of agricultural workers declined 44 per cent.

9. Compared to other African countries, the coverage of the health services in Sao Tome and Principe is quite adequate. This explains the relatively high life expectancy at birth (65.4 years in 1981) and low infant mortality rate (74 per 1,000 live births in 1991) even though the infant mortality rate has deteriorated since 1981. The MCH sector of the health care system is the most developed, and this is reflected in a maternal mortality rate estimated at 79.3 per 100,000 live births. On the average, more than 70 per cent of children receive the four basic childhood immunizations, and 85 per cent of infants regularly receive post-natal follow-up exams at the MCH centers. It is important to note, however, that the health care system has deteriorated since the onset of the economic difficulties that the country has been experiencing with the structural adjustment programme.

10. Education is now mandatory and almost universal up to the age of 14 and the literacy rate was estimated at 76 per cent in 1982. However, the education sector needs to be strengthened and restructured so that it better meets the needs of the country.

III. REVIEW OF UNFPA AND OTHER ASSISTANCE TO DATE

11. Between 1977 and 1988, UNFPA provided Sao Tome and Principe with assistance totalling \$1.32 million. This major part of this assistance was used for conducting the first population and housing census in 1981, training community health workers, supplying contraceptives, and training demographers. In June 1989, the Governing Council approved the first comprehensive programme of UNFPA assistance in the

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amount of \$1.6 million for the period 1989-1992. In financial terms, the first UNFPA programme for Sao Tome and Principe had an excellent implementation rate. A total of \$1.7 million had been spent by the end of 1992.

12. Despite the many positive results, programme implementation encountered a number of problems and constraints: (a) the complicated political situation, resulting from the country's transition from a single-party system to a multi-party system and from a centrally planned economy to a market economy; (b) the limited institutional capacity for population programme formulation, follow-up, management and implementation; and (c) the lack of motivation of national staff involved in the execution of the UNFPA programme.

Maternal and child health and family planning

13. UNFPA assistance to the MCH/FP sector covered the supply of contraceptives and medical and audio-visual equipment, the training of national nurses and doctors within the country and abroad, and the training of community health workers. During the period covered by the programme, 221 community health workers were trained, some of whom are currently providing their services free of charge in their communities while others have abandoned this work because of lack of motivation. After the departure of Radda Barnen, a Swedish NGO, from Sao Tome in 1990, UNFPA became the main supplier of contraceptives. Nearly 20 per cent of UNFPA assistance in the area of MCH/FP has been devoted to the purchase of contraceptives. The Fund has also supported the Government in promoting awareness among the rural population about family planning and in training MCH/FP personnel.

14. The PRSD mission identified four major on-going problems in the area of MCH/FP: (a) inadequate integration of the national MCH/FP programme with other primary health care activities; (b) lack of information among the rural population about family planning methods and advantages; (c) absence of logistical support; and (d) absence of a management information system (MIS).

Information, education and communication

15. Formal education. UNFPA assistance in the formal education sector dates back to 1986 with the approval of a UNESCO-executed project to introduce sex education into the formal school system. The project enabled the Government to set up the structure to carry out the long-term goal of incorporating population and family life education into school curricula at all levels, beginning with secondary schools. Because of the positive results achieved by this project, UNFPA has continued to help the Government develop activities aimed at introducing population and family life education into school programmes.

16. UNFPA assistance helped to train six members of a national population team, five of whom are women, as well as some 150 teachers who were trained in the content and methodology of population and family life education. Six seminars and training courses were organized for teachers, covering such topics as population, health, and family life and focusing on ways of introducing population and family life education in schools. With the assistance of international consultants, the national team prepared and produced teaching aids on the content of population and family life education for students and teachers in the core subjects of the secondary curriculum as well as a reference book and a teachers' manual. UNFPA also provided support for an awareness-promotion campaign that was instrumental in creating a favourable climate needed to introduce population and family life education in schools. The main problems in this sector have been the lack of qualified teachers and the high turnover of staff.

17. Non-formal adult education. The very difficult living conditions of agricultural workers have prompted the Government to make these workers the priority target group for population education. Since 1990, UNFPA has provided assistance to family life and responsible parenthood education in four of the country's largest agricultural firms, which employ a high percentage of the country's labor force. The long-term objective of these activities is to improve the population's living conditions by promoting awareness of the importance of population factors and of their influence on national community development and family life, and to do so through education and improvements in living conditions. Twenty-eight social workers have received specialized training, and eight of them are currently involved in awareness-promotion activities in the field.

Data collection and analysis

18. UNFPA assistance was designed to strengthen the Government's technical and logistical capacities to conduct the second population census in 1991 and to improve the processing of data on births, deaths and marriages. UNFPA's contribution for the census was used to purchase vehicles and computers to carry out cartographic work, to recruit and train staff, and to organize missions by international consultants and experts. The census was conducted in August 1991.

Population policy formulation

19. Realizing the importance of population factors for development, the Government established the Center for Population Studies (CEDEMO) in 1989 as a tool for carrying out population and development research and studies. UNFPA provided assistance to CEDEMO to cover missions by international consultants, purchase equipment, train staff and publish population bulletins. The Center has carried out a number of population studies and has prepared reports and documents on population structure, fertility trends, population projections and population policy, among other topics. Although reports and documents produced are of uneven quality, they have laid a solid basis for further studies. The effectiveness of the Center's activities had been impaired by the fact that it was set up before the conduct of the second population census and thus mainly had to rely on data from the first census.

Women, population and development

20. Women's needs are taken into account in all activities funded by UNFPA. In 1990, the Fund approved a project to help strengthen the capacity of the Sao Tome Women's Association to promote and coordinate activities to enhance the role and status of women. Unfortunately, this activity was never carried out because the Association, a branch of the sole political party then in power, was dismantled after the new multi-party system was introduced.

Other external assistance

21. Almost all of the foreign assistance extended to Sao Tome and Principe has been for economic support. For example, in 1990, only 5.2 per cent of total assistance was for activities in the health sector. The Swedish NGO Radda Barnen supplied about \$250,000 a year for MCH activities from 1982 to 1989 but discontinued its programme in 1990. UNIFEM carried out two small income-generating projects for women in 1989 and 1990 but was not satisfied with the results.

22. The Governing Council approved the tenth UNDP programme of assistance to Sao Tome and Principe in the amount of \$4.2 million covering the period 1993-1996. The priorities of the UNDP programme are to enhance macro-economic management, establish a statistical database, prepare national accounts and devise a state budgeting methodology. Other members of the Joint Consultative Group on Policy (JCGP) have planned assistance totalling \$23.2 million, of which \$12.8 million will come from the World Food Programme (WFP) and \$4.5 million from UNICEF.

23. However, of this planned assistance, only UNICEF and WHO have activities that impinge on the population sector. UNICEF provides assistance for activities to improve maternal and child health, expand access to basic health services, and improve the quality of primary education. WHO is providing technical and financial assistance for the national programme to combat AIDS. Prior to 1991, only UNFPA provided condoms. In 1992, WHO for the first time purchased 250,000 condoms to help supply the needs of Sao Tome and Principe.

IV. PROPOSED PROGRAMME 1993-1996

24. The UNFPA programme of assistance for 1993-1996 is based on the recommendations of the PRSD mission, on the experience gained from the results of the first programme and on the lessons learned from the activities of other donors in the population area. The long-term and immediate objectives identified by the PRSD mission are stated in paragraph 3 above. These fit well with the immediate objectives recommended for the national population programme: (a) to reduce current infant and maternal mortality rates by 25 per cent by 1996 and by 50 per cent by the year 2000; (b) to help achieve the goals of the national population programme in promoting the country's awareness of population problems and targeting social mobilization activities; (c) to prepare a national population policy and help the Government in integrating population variables into development strategies and planning; (d) to increase knowledge of trends in the country's demographic trends and about the socio-economic situation of women; and (e) to improve the status of women.

25. The PSRD mission identified the following population problems: (a) a high rate of population growth compared with economic growth; (b) a massive rural exodus leading to an increasingly high concentration of population in the capital city and the surrounding area; (c) a large number of abortions because of low coverage by family planning services and the lack of IEC activities; (d) a low rate of contraceptive use; and (e) little knowledge of the population's characteristics and of population trends, despite the existence of raw data.

26. The PSRD mission proposed the following strategic guidelines to help bring population growth under control: (a) strengthen and extend the provision of integrated MCH/FP services, particularly in rural areas; (b) improve the status and condition of women; and (c) promote national awareness of the close links between population variables and the development process and between population and the environment.

Maternal and child health and family planning

27. Strengthening and improving the system for providing integrated MCH/FP services and the promotion of Safe Motherhood are the top priorities of the 1993-1996 programme. The programme in this sector involves helping the Government to: (a) expand the provision of integrated MCH/FP services on a regular basis in rural areas; (b) increase the rate of use of modern contraceptives from its current level of 7.6 per cent to 20 per cent by 1996; and (c) strengthen MCH/FP services nationwide.

28. To achieve these goals, the overall strategy would focus on (a) expanding the provision of integrated MCH/FP services by adding 25 health units and centres; (b) ensuring that a wide range of modern contraceptive methods are available in all centres offering MCH/FP services; (c) informing the population and target groups about these modern methods of contraception and of the advantages of family planning; (d) increasing the cooperation already initiated with UNICEF, WHO and various NGOs in the area of MCH/FP; (e) improving the training of community health workers and social workers and making better use of those already trained under the first UNFPA programme; and (f) conducting surveys among target populations as to their knowledge and use of family planning methods.

29. To expand the provision of MCH/FP services in rural areas, it will be necessary to provide the basic equipment in the 25 additional health units and centres. In addition, some of the units that already provide MCH/FP services will have to be rehabilitated and their staffs will have to be trained or re-trained.

30. UNFPA would help reinforce the training given to social workers, nursing staff and health workers in direct contact with the rural population in such areas as the delivery of MCH/FP services including the distribution of contraceptives at the community level and the improvement of the conditions of the country's women. A major goal would be to develop their interpersonal communication skills so that they can inform people on problems relating to family life education, responsible parenthood, AIDS and sexually transmitted diseases (STDs).

31. UNFPA would support the Government's efforts to improve the training of community health workers and to make better use of those already trained to enhance and reinforce awareness-promotion and information activities among rural populations and target groups about family planning. Bicycles or motorcycles would be provided to supervisors to enable them to oversee the work of the units in their service area, and retraining seminars would be organized for them.

32. In order to overcome the lack of institutional capacity for carrying out this expanded MCH/FP programme, UNFPA assistance would help organize seminars on the operational management of MCH/FP programmes; introduce family planning components into the curriculum of the nursing school; provide audio-visual equipment to the school to reinforce the teaching of this component; and help set up a management information system in this sector.

33. Given the importance of this sector, UNFPA would provide an amount of \$1.1 million for activities in the area of MCH/FP, of which \$250,000 would be sought from other donors, including multi-bilateral donors. Of the total, an amount of up to \$100,000 would be earmarked for women, population and development activities as detailed in paragraph 38 below.

Information, education and communication

34. The objective of the proposed programme in the area of population IEC is to introduce population and family life education into curricula at all levels of the formal school education system while continuing activities already undertaken at the basic secondary level.

35. The UNFPA programme would seek to improve the training of the national team responsible for integrating population and family life education into all levels of the school system and to train a sufficient number of teachers to make this possible. The programme would also aim to strengthen the capacity of the Ministry of Education to produce the teaching aids needed to make population and family life education

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available in all secondary schools and UNFPA would also help to create and put into operation a documentation and information centre on population and family life education within the Ministry of Education.

36. An amount of \$400,000 would be allocated by UNFPA in the area of population IEC, including an amount of \$150,000 to be sought from other sources, including multi-bilateral sources.

Data collection and analysis

37. UNFPA would support the efforts of the Center for Population Studies to produce demographic data crucial for the planning, follow-up and evaluation of the MCH/FP programme by analysing data from the 1991 census in conjunction with data obtained from the civil registration system on births, deaths and marriages. It would help the Government to find additional sources of funding for the demographic and health survey and would assist the country to send representatives to the International Conference on Population and Development in 1994. UNFPA would provide a total of \$300,000 for these data collection and analysis activities, of which \$100,000 would be sought from other donors, including multi-bilateral donors.

Women, population and development

38. Certain aspects of the demographic and sociocultural profile of Sao Tome and Principe are not advantageous to women. For example, fertility rates are high, contraceptive use is low, and abortion is fairly common. The school dropout rate among females is high, as is the number of female-headed households (34 per cent). Women's interests are not adequately addressed or protected under the legal system, and there is a general lack of reliable data on women. In order to help create an appropriate institutional framework to improve the condition and status of women, UNFPA would provide assistance to help strengthen the technical capacity of the Department on the Status of Women. It is hoped that such assistance would enable the Department to make use of the results of the 1991 census and to evaluate laws that have an impact on women's reproductive health so that it can advise the Government in its efforts to improve the role and status of women in Sao Tome and Principe. UNFPA assistance would also be used to help inform and educate women about their rights, particularly those affecting their reproductive health, and about the advantages of family planning. In so doing, UNFPA would work closely with other agencies and organizations involved in the women's sector, including UNDP, in order to integrate appropriate IEC components into the income-generating activities they support. All activities supported by UNFPA in the proposed programme would include a component designed to address the concerns of women. UNFPA assistance to this sector would be done through the MCH/FP sector and would not exceed \$100,000.

Programme coordination

39. The proposed programme was prepared in close cooperation with the Government, other agencies of the United Nations system and bilateral and multilateral donors, taking into account their past and future activities. UNFPA would continue to coordinate its activities with other JCGP members and other donors by means of regular meetings with those organizations. Such coordination will be facilitated by the harmonization of the UNFPA and UNDP programming cycles.

40. The Ministry of Foreign Affairs and the State Secretariat for Cooperation and Development are the main organs for the coordination of technical assistance to Sao Tome and Principe. UNFPA would continue to work closely with the National Population Commission in implementing the proposed programme. The

State Secretariat for Social Communication and Culture would coordinate the proposed population IEC activities in order to improve the effectiveness and outreach of these activities.

Programme monitoring, evaluation and management

41. The Government's capacity to follow up and evaluate population projects must be strengthened. UNFPA would therefore place greater emphasis on improving project formulation, follow-up and evaluation by nationals, with assistance from international consultants. The programme would be followed up and evaluated in accordance with standard UNFPA regulations. This would include tripartite project reviews and the submission of biannual and annual reports. Evaluation missions would be prepared for each component of the programme. A mid-term review of the programme would be organized in 1994 and a final review in 1996. Other United Nations agencies, principally JCGP members and executing agencies and organizations, and other donors, including NGOs, would be involved in this exercise. UNFPA would make full use of available and appropriate technical assistance, complemented by the UNFPA Country Support Team located in Harare, Zimbabwe.

Financial summary

42. As indicated in paragraph 1, UNFPA would provide assistance in the amount of \$1.8 million over the four-year period 1993-1996, of which \$1.3 million would be programmed from UNFPA's regular resources. UNFPA would seek to provide the balance of \$500,000 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:

	<u>UNFPA regular resources</u> \$	<u>Other resources</u> \$	<u>Total</u> \$
Maternal and child health and family planning	850,000	250,000	1,100,000
Information, education and communication	250,000	150,000	400,000
Data collection and analysis	<u>200,000</u>	<u>100,000</u>	<u>300,000</u>
TOTAL	1,300,000	500,000	1,800,000

VI. RECOMMENDATION

43. The Executive Director recommends that the Governing Council:

(a) Approve the programme for Sao Tome and Principe in the amount of \$1.8 million for the four-year period 1993-1996;

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(b) Authorize the Executive Director to programme, subject to the availability of funds, an amount of \$1.3 million from UNFPA's regular resources over the period 1993-1996;

(c) Further authorize the Executive Director to seek to provide the balance of \$500,000 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 Sao Tome and Principe and with the executing agencies.
