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DRAFT REPORT OF THE STANDING COMMITTEE FOR PROGRAMME MATTERS
ON ITS IN-SESSIONAL MEETING HELD DURING THE FORTIETH SESSION
OF THE GOVERNING COUNCIL, 1-18 JUNE 1993

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Addendum

CHAPTER IV. UNITED NATIONS POPULATION FUND

UNITED NATIONS POPULATION FUND

1. The UNFPA Deputy Executive Director (Programme) provided a brief overview of the 15 country programmes being submitted to the Council this year for its consideration and approval. He noted that UNFPA programmes continued to pay greater attention to the implementation of General Assembly resolutions 44/211 and 47/199, which, among other things, called upon the agencies and organizations of the United Nations system to promote national execution, decentralization and the programme approach. The Fund recognized that qualified human resources were a prerequisite for national execution. Thus, the strengthening of national technical and managerial capacities constituted one of the most critical functions of UNFPA country programmes. To make national execution more effective, and to assist Governments in developing, implementing, monitoring and evaluating national population programmes, UNFPA field offices drew first and foremost upon national experts. This was supplemented, when needed, by the Fund's country support teams and other sources of technical assistance.

2. Two delegations commented on the UNFPA country programmes in general. One reiterated a request it made last year that UNFPA introductions to each country programme include information on the following three items: (a) the status of donor coordination in-country; (b) the country's contraceptive needs and how the proposed UNFPA country programme would address those needs; and (c) the critical factors facilitating or constraining the success of the programme. The

delegation asked UNFPA to identify the major donors in each country in the population field; to note whether in-country coordination had been effective; and to describe the Fund's role in donor coordination in the country.

3. The other delegation commented on the general structure and content of the country programmes as a whole. She said that her delegation would have liked the programmes to be more analytical and problem oriented in their approach, concentrate more on constraints to programme implementation, discuss the strategies devised to facilitate the success of the programme in each country, and show how the programme related to UNFPA's mandate and policy.

Sub-Saharan Africa

4. The Director of the Africa Division (AD) made a general introductory statement concerning the 11 country programmes being submitted for the region. He noted that the programmes had been developed in line with the needs identified by the Governments concerned and in accordance with the priority areas identified in the strategy for UNFPA assistance in sub-Saharan Africa, as set forth in document DP/1987/37 and approved by the Council in decision 87/30.

5. Two delegations made general comments about the 11 sub-Saharan African country programmes being presented to the Council. One commended UNFPA for having fulfilled its coordination function with other actors in the region, in particular with the World Bank and the African Development Bank. He congratulated the Fund for the way in which it had convinced these organizations to take population into account in their programmes. He was concerned, however, that the targets of some of the programmes were not realistic. He felt that UNFPA had a responsibility to help Governments set realistic and attainable targets. He encouraged UNFPA to make greater use of national and regional expertise, notably that available in the Economic Commission for Africa and the Centre for Applied Research on Population and Development (CERPOD). He said his delegation was satisfied to see that many of UNFPA's country programmes went well beyond simply providing family planning services and addressed the population question in Africa in all its dimensions.

6. The other delegation asked if the country programmes being submitted by UNFPA had been affected by the recent decline in UNFPA resources in the region. He asked what UNFPA planned to do to ensure that the programmes in Africa would not experience further setbacks. He recounted the numerous difficulties most countries in the region faced in terms of resources and infrastructure and appealed to donors to increase their assistance to the countries of the region.

7. The Director, AD, responded that the decline in resources was a critical factor for all programmes in the region. However, UNFPA had attempted to address this problem by seeking additional funds from extrabudgetary resources, for example through multi-bilateral arrangements for specific activities. He agreed that the targets of some of the programmes were somewhat ambitious, but pointed out that such targets were usually based on those set by the Governments themselves. The fact that African Governments had set demographic targets was in itself a major accomplishment, since most Governments in the region had been extremely reluctant to do so until very recently.

8. The Director then introduced each of the 11 country programmes separately.

Central African Republic

9. UNFPA proposed a comprehensive four-year population programme in the amount of \$4.6 million, of which \$3.6 million would be programmed from regular resources. UNFPA would seek to provide the remaining \$1 million from a combination of sources, including multi-bilateral sources.

10. The main objectives of the proposed programme were: (a) to reduce infant and maternal morbidity and mortality, primarily through the increased use of effective family planning methods; (b) to arrest the spread and reduce the incidence of infertility; (c) to sensitize the population, particularly adolescents, about the importance of responsible parenthood and effective child-spacing; and (d) to improve the status and condition of women and heighten their participation in the socio-economic development of the country through, among other things, the effective implementation of maternal and child health and family planning (MCH/FP) activities.

11. Several delegations commented on the proposed programme. One asked why the programme focused on only the western and southern portions of the country and not on the whole country. He also asked if other agencies would cover the rest of the country and how UNFPA planned to coordinate its activities with them. Another delegation, noting that UNFPA had had problems with an executing agency in its previous cycle of assistance, asked if that agency would be involved in the new programme. He welcomed the programme's emphasis on collaboration with other organizations active in the country and, in this regard, asked what UNICEF was doing in the area of MCH/FP and what input UNFPA would have in its activities. He concluded by asking if UNFPA intended to subsidize the salaries of national staff as a way of motivating them.

12. The Director, AD, responded that UNFPA did not have the resources to cover the entire country with its programme. The Fund therefore had to concentrate on improving service delivery in selected areas of the country. In future, such services could gradually be extended to the rest of the country. He stated that UNFPA would not use the executing agency in question in the proposed programme, but would instead explore other means of executing UNFPA-supported activities, including national execution. The Director noted that UNFPA would make use of the service delivery network of UNICEF's expanded programme of immunization (EPI) to deliver family planning services. The EPI network extended to the grass-roots level and thus was ideal for reaching those in rural areas. Concerning the question on subsidizing the salaries of national staff, the UNFPA Deputy Executive Director (Programme) pointed out that, as a matter of policy, UNFPA did not provide salary supplements to government staff. He further noted that the Fund was working closely with its partner organizations in the Joint Consultative Group on Policy (JCGP) to devise a standard salary scale for all government staff working with the five partner organizations.

13. The Standing Committee recommended that the Governing Council approve the third UNFPA country programme for the Central African Republic (DP/FPA/CP/126).

Côte d'Ivoire

14. UNFPA proposed a four-year population programme in the amount of \$5.6 million, of which \$4.9 million would be programmed from UNFPA regular resources. UNFPA would seek to provide the remaining \$700,000 from a combination of sources, including multi-bilateral resources.

15. The objectives of the programme were to: (a) help the Ministry of Health and Social Protection to formulate a national MCH/FP programme and to assist it in providing family planning services; (b) enhance the technical capabilities of the Ministry of Economy, Finance and Planning for integrating population factors into the development programme and assist it in determining the basic components of a population policy; and (c) to continue activities aimed at improving the standard of living of Ivorian women.

16. One delegate noted that the UNFPA programme appeared to be specifically designed to build upon components supported by other donors, most notably in the efforts to help the Government formulate a national MCH/FP programme. He noted, however, that the programme did not specifically mention contraceptive commodities, even though it intended to provide assistance to renovate, equip and supply 20 rural maternities and clinics. He therefore asked UNFPA to clarify whether contraceptives would be among the items supplied to these clinics.

17. The Director, AD, confirmed that contraceptives would in fact be provided to the clinics.

18. The Standing Committee recommended that the Governing Council approve the third UNFPA country programme for Côte d'Ivoire (DP/FPA/CP/131).

Equatorial Guinea

19. UNFPA proposed a comprehensive five-year programme in the amount of \$3.35 million, of which \$2.65 million would be programmed from UNFPA regular resources. UNFPA would seek to provide the remaining \$700,000 from a combination of sources, including multi-bilateral resources.

20. The objectives of the proposed programme were: (a) to integrate, on a pilot basis, Safe Motherhood, including child-spacing, into MCH centres in Bata and Malabo, and to increase the contraceptive prevalence rate (CPR) to 5 per cent in these zones; (b) to encourage the Government to adopt a more liberal law on family planning; (c) to develop and implement a national information, education and communications (IEC) programme on population and related issues; and (d) to improve the well-being of women in their reproductive and productive roles.

21. Several delegations commented on the proposed programme. One expressed concern that the objectives were ambiguous and generic, difficult to quantify and overly ambitious. It therefore recommended that the programme be reformulated to include more realistic, specific and quantifiable objectives. The delegation further noted that the country's health system did not have a central structure capable of unifying and coordinating the actions of different

agencies and giving them a strategic frame of reference. Another delegation asked a more general question concerning the frequency and nature of UNFPA reporting requirements. The delegation also asked what role the Fund's country support teams (CSTs) would play in this reporting.

22. The Deputy Executive Director (Programme) explained that each year UNFPA field offices conducted a tripartite project review (TPR) of each project. Participants included representatives from UNFPA, the Government and the executing agency. The resulting report on each project was then studied by UNFPA staff, both in the field and at UNFPA headquarters, and the project adjusted as needed. The country support teams would of course participate in selected TPRs, providing needed technical support to UNFPA Country Directors and ensuring effective feedback to their teams. Concerning the recommendation to reformulate the programme, the Director, AD, explained that such action would delay the formulation of projects for a full year. UNFPA had taken an inventory of needs and had devised a work plan accordingly. Reformulating the programme would delay the implementation of that work plan and, correspondingly, the delivery of vital family planning services and information, among other things.

23. The Standing Committee recommended that the Governing Council approve the second UNFPA country programme for Equatorial Guinea (DP/FPA/CP/129) subject to the findings and recommendations of an interim report highlighting the progress of the programme, which is to be submitted to the Governing Council at its forty-first session (1994).

Madagascar

24. UNFPA proposed a comprehensive five-year population programme in the amount of \$7 million, of which \$5 million would be programmed from UNFPA regular resources. UNFPA would seek to provide the remaining \$2 million from a combination of sources, including multi-bilateral resources.

25. The specific goals of the programme were: (a) to reduce the maternal and child mortality rate by 25 per cent by expanding accessibility to integrated MCH/FP services; (b) to increase family planning coverage and the contraceptive prevalence rate from 3 per cent in 1992 to 14 per cent in 1997; (c) to improve the status and the role of women in the development process by assisting in the design of a national strategy and programme for the advancement of women; and (d) to enhance knowledge of demographic indicators for planning and evaluation purposes.

26. Several delegations commented on the proposed programme. One commended UNFPA for its work in creating awareness among parliamentarians of the need to adopt a population policy. The delegation expressed concern, however, that the programme did not adequately take into account the country's subregional differences or address the unique situation of Malagasy women. It further noted that the main problem in the area of contraceptive supply was that of distribution. The delegation also noted that coordination was a major problem in Madagascar. Another delegation suggested using NGOs as an alternative to government programmes, particularly since the Government had had difficulty in programming population funds in the past.

27. The Director, AD, agreed that coordination had not been very effective despite the considerable efforts of UNFPA and others to improve it. The Fund was hopeful, however, that the establishment of the interministerial technical committee for coordination, as called for in the proposed programme, would enhance coordination of the programme's activities. He also agreed about the subregional diversity of Madagascar and about the unique situation of Malagasy women. That was why UNFPA engaged a highly regarded Malagasy women researcher to devise the strategy for the women, population and development sector. He further agreed that the distribution of contraceptives was a serious problem. UNFPA therefore planned to make use of the distribution facilities of other organizations, especially in the provinces. The Fund welcomed the suggestion to make greater use of NGOs as implementing agencies, but preferred an integrated approach using both governmental and non-governmental organizations.

28. The Standing Committee recommended that the Governing Council approve the third UNFPA country programme for Madagascar (DP/FPA/CP/121).

Mali

29. UNFPA proposed a comprehensive four-year population programme in the amount of \$5.2 million, of which \$3.2 million would be programmed from UNFPA regular resources. UNFPA would seek to provide the remaining \$2 million from a combination of sources, including multi-bilateral resources.

30. The immediate objectives of the proposed programme were: (a) to help reduce the population growth rate by promoting family planning; (b) to reduce maternal and infant mortality; (c) to assist the Government in elaborating and implementing a strategy to enhance the integration of women into the development process; and (d) to make accurate data on mortality and migration available for national development planning.

31. One delegation felt that the recent installation of a democratic government in Mali would enhance the advocacy role of UNFPA. The delegation wondered why this had not been mentioned in the document. The delegation also asked for more information on how UNFPA intended to use CERPOD in the proposed programme and what UNFPA's experiences had been regarding the State Secretariat for Women's Promotion. The delegation noted that the objectives in the area of MCH/FP did not seem entirely realistic.

32. The Director, AD, agreed that the installation of a democratic government would enhance the Fund's advocacy role. The omission of this point had been an oversight. UNFPA would continue to make use of CERPOD in selected MCH/FP and census activities. The Fund's experience with the State Secretariat for Women's Promotion had been quite positive. The Secretariat had conducted an interesting study on the situation of women in Mali as well as a study on female circumcision, which was later the subject of a seminar organized by the Secretariat. In general, however, UNFPA was striving to make use of all women's organizations in distributing contraceptives at the grass-roots level. The Director, AD, pointed out that the objectives in MCH/FP were ambitious, but attainable if pursued with great effort.

33. The Standing Committee recommended that the Governing Council approve the third UNFPA country programme for Mali (DP/FPA/CP/130).

Rwanda

34. UNFPA proposed a comprehensive five-year population programme in the amount of \$7 million, of which \$4.5 million would be programmed from UNFPA regular resources. UNFPA would seek to provide the remaining \$2.5 million from a combination of sources, including multi-bilateral resources.

35. The specific objectives of the programme were to assist the Government in reducing its population growth rate from 3.4 per cent to 2.8 per cent by increasing the contraceptive prevalence rate from 12 per cent to 28 per cent and by reducing the contraceptive drop-out rate by 50 per cent and the total fertility rate from 7.9 to 6.2 children per woman.

36. Several delegations commented on the proposed programme. Two delegations expressed concern about the current political situation in the country and asked why the programme had not taken this adequately into account. One of them inquired in this regard if UNFPA had considered putting a much larger amount into programme reserve, as UNDP had recently done in its programme for Rwanda. One delegation identified three areas that seemed to have been neglected in the programme: a women's strategy, which she felt should have been given priority; the prevalence of HIV/AIDS and the importance of condoms as a preventive measure; and the special needs of adolescents. Another delegation asked why UNFPA had not encouraged the Government to adopt much more realistic and attainable objectives in the national population policy it adopted in 1990. This same delegation observed that the country programme did not seem to address the unique problems of Rwanda and thus inquired more generally if there was not too much of standardization of UNFPA programmes.

37. The Director, AD, noted that UNFPA had in fact encouraged the Government to revise the objectives of its national policy downward, which it did. The Fund would continue its dialogue with the Government in this regard, although it was satisfied with government efforts at target setting. He further noted that UNFPA had structured the programme in such a way as to minimize the effects of the current political situation, focusing its activities in three provinces that were more or less at peace. UNFPA agreed that the programme should give more attention to HIV/AIDS and to adolescents, and assured the Committee that the Fund would take measures to strengthen UNFPA assistance in these areas. Concerning the observation that the programme did not seem to address the unique problems of Rwanda, the Director, AD, reminded the Committee that the programme was based on the findings and recommendations of a UNFPA Programme Review and Strategy Development (PRSD) mission that visited the country in April 1992. It also took into account the inputs from the Fund's major collaborating partners, including the World Bank, USAID, UNDP, the German Agency for Technical Cooperation (GTZ) and various NGOs.

38. The Standing Committee recommended that the Governing Council approve the third UNFPA country programme for Rwanda (DP/FPA/CP/127) subject to findings and recommendations of an interim report highlighting the progress of the programme,

which is to be submitted to the Governing Council at its forty-first session (1994).

Sao Tome and Principe

39. UNFPA proposed a comprehensive four-year population programme in the amount of \$1.8 million, of which \$1.3 million would be programmed from UNFPA regular resources. UNFPA would seek to provide the remaining \$500,000 from a combination of sources, including multi-bilateral resources.

40. The immediate goals of the proposed programme were, inter alia: (a) to increase the modern contraceptive prevalence rate from 7.6 per cent to 20 per cent; (b) to expand the provision of integrated 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 IEC and MCH/FP activities; and (f) to introduce population education and family life education into the formal school system.

41. One delegation, noting that the UNFPA Country Director was not resident in the country, asked how UNFPA planned to coordinate its programme, in particular with its partner organizations in the JCGP and with WHO. The delegation also asked what percentage of the population was covered by family planning services.

42. The Director, AD, explained that the UNFPA Country Director resident in Angola made periodic visits to Sao Tome and Principe as part of his official responsibilities. During such visits, he routinely consulted with pertinent government and agency representatives to discuss the coordination of their respective activities. He then briefed the UNDP Resident Representative who also served as the UNFPA Representative in the field. The Director did not have the exact figure for the coverage of family planning services, but promised to provide the figure immediately after the session.

43. The Standing Committee recommended that the Governing Council approve the second UNFPA country programme for Sao Tome and Principe (DP/FPA/CP/125).
