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and of the  
United Nations  
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**UNITED NATIONS POPULATION FUND  
PROPOSED PROJECTS AND PROGRAMMES**

Recommendation by the Executive Director  
Assistance to the Government of Tunisia

Proposed UNFPA assistance: \$7 million, \$4.5 million from regular resources and \$2.5 million from multi-bilateral and/or regular resources

Programme period: 5 years (1997-2001)

Cycle of assistance: Sixth

Category per decision 96/15: B

Proposed assistance by core programme areas (in millions of \$):

	Regular resources	Other	Total
Reproductive health	3.1	1.7	4.8
Population & development strategies	.9	.5	1.4
Advocacy	.5	.3	.8
<i>Total</i>	4.5	2.5	7.0

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## TUNISIA

**Demographic Facts**

Population (000) in 1995 .....	8,896	Annual population growth rate (%) . . . .	1.72
Population in year 2000 (000) .....	9,694	Urban .....	2.6
Sex Ratio (/100 females) .....	102.2	Rural .....	0.4
Per cent urban .....	57.3	Crude birth rate (/1000) .....	23.0
Age distribution (%)		Crude death rate (/1000) .....	5.8
Ages 0-14 .....	35.0	Net migration rate (/1000) .....	0.0
Youth (15-24) .....	20.2	Total fertility rate (woman) .....	2.75
Ages 60+ .....	7.0	Life expectancy at birth (years)	
Percentage of women aged 15-49 .....	52.4	Males .....	68.4
Median age (years) .....	22.3	Females .....	70.7
Population density (/sq.km.) .....	54	Both sexes .....	69.6
		GNP per capita (U.S. dollars, 1994) ..	1,720

*Sources:* Data are from the Population Division, Department of Economic and Social Information and Policy Analysis of the United Nations, *World Population Prospects: the 1994 Revision*. GNP per capita is from UNDP. Two dashes (--) indicate that data are not available.

**INDICATORS RELATED TO ICPD GOALS\***

		(Thresholds)*
Births attended by health professional (%) <sup>1</sup> .....	69.0	≥60
Contraceptive prevalence rate (15-44) (%) <sup>2</sup> .....	50.0	≥55
Access to basic health services (%) <sup>3</sup> .....	90.0	≥60
Infant mortality rate (/1000) <sup>4</sup> .....	43.0	≤50
Maternal mortality rate (/100,000) <sup>5</sup> .....	70.0	≤100
Gross female enrolment rate at primary level (/100) <sup>6</sup> .....	92.4	≥75
Adult female literacy rate (%) <sup>7</sup> .....	50.2	≥50

\* AS CONTAINED IN DOCUMENT DP/FPA/1996/15 AND APPROVED BY EXECUTIVE BOARD DECISION 96/15.

<sup>1</sup> WHO, *Coverage of Maternal Care*, 3rd ed., 1993. Data cover the period 1983-1993.

<sup>2</sup> United Nations Population Division, *World Contraceptive Use 1994*, ST/ESA/SER.A/143. Data cover the period 1986-1993.

<sup>3</sup> UNICEF, *The State of the World's Children, 1995*. Data cover the period 1985-1993.

<sup>4</sup> United Nations Population Division, *World Population Prospects Database 1950-2050, 1994 Revision*. Data are for 1992.

<sup>5</sup> UNICEF, *The State of the World's Children 1995*, which is based on data compiled by WHO. Data cover the period 1980-1992.

<sup>6</sup> United Nations Statistical Division, *Women's Indicators and Statistics Database, Version 3 (CD-ROM), 1994*, which is based on data compiled by UNESCO.

<sup>7</sup> UNESCO, *Education for All - Status and Trends, 1994*.

1. The United Nations Population Fund (UNFPA) proposes to support a population programme over the period 1997-2001 to assist the Government of Tunisia achieve its population and development objectives. UNFPA proposes to fund the programme in the amount of \$7 million dollars, of which \$4.5 million would be programmed from UNFPA's regular resources to the extent such resources are available. UNFPA would seek to provide the balance of \$2.5 million from multi-bilateral and/or regular resources to the extent possible, consistent with Executive Board decision 96/15 on the allocation of UNFPA resources. The proposed programme would be the sixth in support of the population programme of the Government of Tunisia, and would be harmonized with the Government's Development Plan and with the programmes of UNDP and UNICEF.
2. The proposed UNFPA programme was developed in accordance with the overall development orientations of the country and the findings and recommendations of the joint Government/UNFPA programme review and strategy development (PRSD) mission undertaken in 1995. It has been designed to complement the programmes and activities of other donors in the country.
3. The main purpose of the programme is to assist the Government in its transition towards developing a comprehensive and integrated reproductive health system, building on the achievements of the existing family planning system and previous country programmes. At the regional level, the programme would work to increase access in the underserved and rural areas of the central-western and southern regions of the country. At the national level, the programme would focus on expanding reproductive health services for adolescents and youth, and on improving the quality and efficiency of reproductive health information and services now being provided.
4. All activities under the proposed programme, as in all UNFPA-assisted activities, would be undertaken in accordance with the principles and objectives of the Programme of Action of the International Conference on Population and Development (ICPD), which was endorsed by the General Assembly through its resolution 49/128.

### Background

5. During the past thirty years, population policy has evolved in a coherent and consistent manner in Tunisia. The country's population programme has shifted emphasis from a demographic and family planning approach to promotion of a comprehensive population programme focusing on the needs and well-being of the individual. Despite the fact that the country has in place a structural adjustment programme that constrains government finances, 60 percent of the national budget is devoted to social sectors, with 17 and 7 percent being dedicated to the education and health sectors, respectively.
6. Through its continuous strong political commitment and programme efforts, the Government of Tunisia has achieved significant progress towards attaining the goals of the ICPD Programme of Action. This is demonstrated by such national social and demographic indicators as access to

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reproductive health services and universal primary education and reduction in mortality rates. With respect to the seven indicators established by the UNFPA Executive Board for measuring progress towards achieving ICPD goals, Tunisia has met the threshold levels in six of seven indicators,<sup>1</sup> and has, therefore, been included in category "B" under UNFPA's new scheme for resource allocation. (The one indicator below the threshold level is the contraceptive prevalence rate.)

7. Despite impressive progress made by the country in reaching ICPD goals, significant disparities continue to exist between regions and within regions of the country, as well as between rural and urban areas. Regarding access to reproductive health services, the proportion of deliveries attended by trained personnel, which reached 80.3 per cent in 1994 at the national level, is only 50 per cent, or even below, in several parts of the country's central-western and southern regions. The contraceptive prevalence rate, which has reached 59.7 percent nationally (49.6 for modern methods), ranges from 34 to 46 percent in these same zones. The infant mortality rate nationally was 30.5 per 1,000 live births in 1994 but reached almost 50 per 1,000 in rural areas. Maternal mortality was 69 per 100,000 live births, with regional differences ranging from 40 per 100,000 in the greater Tunis area to 106 per 100,000 in the central-western region.

8. The promotion of the rights and status of women is a major element of government policy, and Tunisia is considered a pioneer in the Muslim and Arab world with respect to the promotion of women's rights. However, gender gaps still exist in Tunisia. The adult female literacy rate, which, according to the 1989 figures, reached only 52 per cent at the national level and 34 per cent in the rural areas, is much lower than the rate for adult males, which stands at 74 percent and 63 percent, respectively. Female unemployment reached 21 per cent in 1989 compared to 11 per cent in 1984, while the unemployment rate for men remained stable at 14 per cent over the same period.

#### Previous UNFPA assistance

9. UNFPA has been cooperating with Tunisia in the field of population and development since 1974 and has provided more than \$26.5 million in assistance to date. Due to continued strong political commitment, UNFPA's fifth comprehensive programme recorded successes in institution building, particularly with respect to coordination mechanisms related to the formulation and implementation of population policies and by strengthening the ties between the central and regional levels. The programme also supported the decentralized implementation of the family planning programme at the provincial and district levels and contributed to the improvement of the quality of care of MCH/FP services. The programme helped in providing training for service providers and counsellors that

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<sup>1</sup> Please refer to data sheet on page 2 for an outline of Tunisia's status with respect to the seven UNFPA indicators. All statistics used within the text come from the National Statistical Institute, Ministry of Economic Development, Republic of Tunisia.

stressed the importance of properly targeted IEC activities, in particular those related to reproductive health and gender equity. Previous UNFPA activities worked to improve the condition and status of women through mainstreaming gender issues and by supporting specific projects focusing on women. As a result of the country's successful population activities, Tunisia has come to play a prominent role in the promotion of South-South collaboration in population matters.

10. UNFPA's innovative approach and strategy of integrating family planning into primary health care structures, which the Fund implemented at the regional level, has been adopted by both the Government and by the World Bank, which has provided a loan to implement the strategy nationwide. In the field of women's empowerment, an innovative strategy was designed to enable a local non-governmental organization (NGO) set up a credit system for poor rural women aiming at improving their socio-economic and reproductive health situation. The Government and the World Bank are in the process of adopting a similar system for the poor rural population in the north-western region.

11. Despite the progress recorded and momentum gained during the fifth country programme, a number of constraints persist that hinder the full attainment of the Government's population and development objectives. At the national level, the focus has been on women-oriented family planning programmes that neglect men and adolescents and that need to include the broad range of reproductive health services. These programmes have suffered from the slow process of administrative decentralization and the limited participation of the non-governmental and private sectors. Regionally, there are 850 "zones d'ombre", which are the most underdeveloped administrative regions of the country, mainly located in rural areas, where access to and the quality of reproductive health services are far below the national average. In common with the population programmes in many other countries, there has been a lack of trained personnel, of effective management information systems and of needed operational research, including on the effectiveness of IEC campaigns. The proposed UNFPA programme was designed to assist the Government in addressing these issues in a sustainable manner.

#### Other external assistance

12. UNFPA is currently the largest donor in the population sector and works in complementarity with other donors in the population and health fields in Tunisia. The World Bank, through a loan in the amount of \$26 million over the period 1991-1997, supports the integration of family planning activities within primary health care and the strengthening of such services in rural areas. No future loans are presently being discussed. WHO assistance, in the amount of \$2.1 million for the years 1996-1997, focuses on providing basic MCH services, including the strengthening of the vaccination programme, and in supporting the health education programme of the Ministry of Health, including its HIV/AIDS programme. UNICEF's next cycle of support from 1997-2001 in the amount of \$7.5 million will contribute to the Government's efforts to strengthen the health decentralization process.

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13. The European Union provided support to the National Office for the Family and Population (ONFP) in the amount of \$1.2 million for the period 1993-1996 for training and research activities as well as providing equipment and contraceptives through, *inter alia*, UNFPA. The cooperation of the European Union with the ONFP is expected to continue. The Government of Japan is providing support to ONFP in the amount of \$1.3 million for the period 1993-1997 for the establishment of an audio-visual production center and related training. Other donors active in the population field, particularly in the area of women's promotion and empowerment, are Canada (\$1.5 million for the years 1992-1995) and Sweden (\$2.5 million for the years 1995-1997). A number of other donors -- Belgium, Germany and the Netherlands -- have provided grants to NGOs.

14. UNFPA's comparative advantage vis-à-vis other donors in the population field has been affirmed by the Government in its request that the Fund take a lead role within the donor community and assist the Government's Ministry of Foreign Affairs in efficiently and effectively coordinating donor assistance in the population field. This request is based on the fact that UNFPA is the major donor in the population field and that, compared to bilateral activities, its programme is flexible and adapted to national policies and programmes as well as to the needs of NGOs. UNFPA's focused but multi-sectoral assistance to the population programme, as well as the Fund's in-depth knowledge of national population policies and programmes, acquired through years of field experience, is highly appreciated, and utilized, not only by the national authorities, but by the donor community and other United Nations agencies as well.

#### Proposed programme

15. The programme was designed in accordance with the findings and conclusions of the 1995 PRSD mission that recommended: concentrating activities in the most underprivileged regions and on target populations (adolescents, youth, women and men); further decentralizing the population programme; promoting the gradual financial autonomy of the reproductive health programme; promoting innovative and participatory approaches; mainstreaming gender issues into all programme activities; and promoting the use of national expertise, the private sector and national NGOs.

16. Reproductive health. The programme proposes, foremost, to assist the Government in its transition from an MCH/FP approach towards developing a comprehensive and integrated reproductive health system, including IEC, building on the achievements of the existing family planning system and the previous country programme. The reproductive health programme would account for approximately 70 per cent of programme resources and would focus on achieving results at the regional and national levels. At the regional level, the existence of the "zones d'ombre" is a major challenge to the Tunisian population programme. The proposed programme would, therefore, assist the Government in increasing access to reproductive health services in these areas, particularly in underserved and rural regions of the centre-west and south, which make up 11 out of the 23 provinces in the country. The Fund would provide support for integrating reproductive health

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services into existing basic health structures and maternities of these regions in coordination with the Government's poverty alleviation programme and with the assistance of local NGOs.

17. Although some reproductive health issues, such as family planning, gender relations and family life education, have been successfully integrated into high school programmes and curricula, no support mechanisms for sexual education and counseling of adolescents and youth exist in Tunisia. This is especially important in light of the fact that age at first marriage presently stands at 27 for women and 30 for men. Therefore, the programme would also support the expansion of reproductive health information and services at the national level for adolescents and youth by helping to develop IEC materials, in collaboration with youth organizations and structures, including helping them to set up adequate counseling and services for young adults. Limited support would be given to population education, particularly with respect to integrating reproductive health and gender issues into those formal and non-formal sectors not addressed under previous programmes.

18. The programme would also focus on improving the quality and efficiency of reproductive health information and services by supporting training in those areas not previously addressed by the MCH/FP programme, such as reproductive tract infections, including STDs and HIV/AIDS, infertility, and routine screening for malignancies of the reproductive system. It would also work to improve reproductive health management information systems and operational research.

19. UNFPA would provide technical assistance for a prospective study on Tunisia's contraceptive requirements for the next decade. The Fund would also support activities aiming to adjust the market price of contraceptives and to promote their increased commercialization in order to increase the country's self-reliance in this area. In the meantime, in light of the structural adjustment programme and the need to satisfy unmet needs in underserved areas and to strengthen the national HIV/AIDS campaign, the total national budget needed to cover contraceptive requirements for the next government planning cycle is expected to rise from \$4.6 million to \$7.1 million for the years 1997-2001. Forty per cent of this would be financed by the Government, compared to 22 per cent in the previous cycle. The European Union is expected to provide funds for 20 per cent of the programme. UNFPA would continue to provide some assistance in procuring a wide range of contraceptives.

20. Population and development strategies. UNFPA would also provide limited support to assisting the Government in further strengthening the integration of population and development strategies at the regional level. This would be achieved through: (a) strengthening cooperation with the University of Tunis and the National Statistical Institute in setting priorities for demographic analysis; (b) developing new technologies for improving and decentralizing data collection, analysis, publication and dissemination of information; strengthening regional technical capabilities through the initial setting up of training of demographers and population at the university level, in particular the University of Tunis and the new Tunis School of Statistics; (e) strengthening gender analysis and the mainstreaming of gender in the development planning of the Government and NGOs.

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21. Advocacy. UNFPA would support specific activities related to promoting the sustainability of the reproductive health programme by promoting the involvement of the private sector and NGOs as well as the sensitization of community groups and religious leaders on population issues. UNFPA would also use every opportunity to promote donor interest in the population sector, and to promote South-South cooperation, for which Tunisia will be increasingly important.

Programme implementation, monitoring and coordination

22. The Tunisian Government would be in charge of overall programme implementation through the Ministry of Economic Development, which would be responsible, at the national level, for programme coordination and monitoring, as well as for the direct execution of some programme activities. The active participation of national NGOs would be sought for the implementation of the programme. Technical assistance, if needed, would be provided, in the first place, by national expertise and, secondly, by the Amman-based UNFPA Country Support Team (CST). The implementing agencies would be responsible for the internal monitoring of their respective programme activities by using the standard UNFPA monitoring and evaluation instruments. To assess overall programme progress, a mid-term review of the programme would be conducted in 1999, to be organized jointly with UNICEF, the World Bank, UNDP and the European Union.

23. Under the proposed programme, and in accordance with General Assembly resolutions 47/199 and 50/120, UNFPA would strengthen its efforts to optimize programme efficiency through the coordination of activities with other United Nations agencies within the context of the Resident Coordinator system. The regular organization of meetings of the Joint Consultative Group on Policy, in which FAO, UNIDO and UNESCO are also invited to participate, has also helped to ensure complementarity and coordination between programmes. As in the past, frequent meetings would be organized with the other external donors in the field of population.

Recommendation

24. The Executive Director recommends that the Executive Board approve the programme for Tunisia as outlined above, in the amount of \$7 million over the period 1997-2001, \$4.5 million of which would be programmed from UNFPA's regular resources, to the extent such resources are available, and the balance of \$2.5 million would be sought from multi-bilateral and/or regular resources to the extent possible, consistent with Executive Board decision 96/15 on the allocation of UNFPA resources.

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