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BY THE COMPTROLLER GENERAL

# Report To The Congress

OF THE UNITED STATES

## Population Growth Problem In Developing Countries: Coordinated Assistance Essential

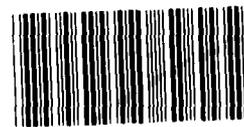
Rapid population growth in developing countries impedes efforts to improve the quality of life. Many governmental, international, and private and voluntary organizations provide population assistance to an ever-increasing number of countries. Cumulative assistance could now total about \$2 billion; the United States alone provided about \$1.2 billion in the 1965-78 period.

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Because of the complexity of the problem and the many organizations involved, systematic coordination of assistance is essential to ensure that programs are as efficient and effective as possible.

GAO recommends that the Agency for International Development work with the other major contributors and the developing countries to improve coordination, to reach agreement on leadership, strategy, and program responsibility, and to make sure that all participants are adequately informed of each other's activities.

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DECEMBER 29, 1978





COMPTROLLER GENERAL OF THE UNITED STATES  
WASHINGTON, D.C. 20548

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To the President of the Senate and the  
Speaker of the House of Representatives

This report addresses the need for the Department of State and the Agency for International Development to take or encourage actions to improve the coordination of population assistance to developing countries.

Copies of this report are being sent to the Secretary of State and the Administrator, Agency for International Development.

*James A. Steals*  
Comptroller General  
of the United States



D I G E S T

Population growth impedes efforts to improve the quality of life in developing countries. A large number of countries and international organizations provide assistance to help slow population growth in these countries; the United States has provided about \$1.2 billion of the \$2 billion in assistance to date.

The magnitude of the population problem, the increasing number of developing countries establishing population programs and seeking external assistance, and the many organizations involved in providing and carrying out such assistance combine to make effective coordination essential. Such coordination is needed to ensure that funds are applied to the highest priorities, that country programs are as efficient as possible, and that opportunities to reduce costs are identified and taken.

GAO believes that for each recipient developing country, that country's government and the major donors should agree on a long-range plan or strategy, effective coordinating leadership, and an appropriate division of program responsibilities. Such a division of responsibilities among the major donors, and specialization on the part of others providing assistance, will result in improved programs and also provide a mechanism for substantial cost savings by consolidating requirements for procurement of supplies and services.

The population problem should be assessed in relation to the broad issue of development. There is a growing recognition that the availability of family planning services

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in an unchanged socioeconomic environment may not lead to their acceptance and to lowered birth rates. Integrating population and development planning and programs provides opportunities to influence family-size decisions and increases the need for coordination.

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GAO found that there is no clear division of responsibility and no formal understanding regarding population assistance among the three major donor organizations--the Agency for International Development (the primary conduit for U.S. funds), the United Nations Fund for Population Activities, and the World Bank. Although officials recognize the need for effective coordination, collaboration among the three has occurred largely on an ad hoc country-specific basis. Although high-level and working-level officials of these organizations and of nongovernment organizations involved in population assistance have met to discuss particular programs and although GAO did not find examples of unproductive duplication, much more needs to be done.

GAO found that in-country coordination consisted for the most part, and in some countries solely, of informal discussions among field representatives. Most of the field representatives and nongovernment organization officials seemed to feel these exchanges fulfilled their needs. In one of the six countries GAO visited, however, little information was being shared by those involved in providing or receiving population assistance, and the donors and participants did not know enough about each other's programs.

In another country visited by GAO, a number of problems are hampering the delivery of family planning services. At issue is the level of government commitment to the program, its proposed population plan, and organizational and staffing problems.

Large amounts of assistance funds are involved. If the program is to be effective, these problems must be resolved. Officials of the major donors--the Agency, World Bank, and United Nations Fund for Population Activities--have met several times to discuss these problems and their assistance plans but have not yet reached agreement on a common approach. GAO believes that in this situation the donors should focus collectively on the problems and act as a unified group to reach agreement with the government on corrective actions.

GAO recognizes that the recipient government is the ultimate key to a well-coordinated program but believes it is the responsibility of the three major donors to make sure that their population activities are coordinated. In countries where other nations have large programs, these donors should also be involved in the coordination process.

In countries where the major donors do not directly support programs or cannot assume an active coordination role, they should encourage nongovernment organizations to work with the developing country to ensure program coordination. If the recipient government does not have a sound, comprehensive population plan, the donors should work with each other, other assisting organizations, and the government to develop such a plan and agree on a division of program responsibility.

The major donors, together with the recipient government, must also accept responsibility for making sure that nongovernment organizations involved in population activities are adequately informed about each other's programs and that their activities are part of or consistent with developing country population programs.

GAO discussed a draft of this report with officials of the Agency, Department of State,

World Bank, and United Nations Fund for Population Activities. They agreed that coordination of assistance is needed, however, all the organizations believed there were obstacles to achieving it.

GAO wants the Agency to implement or seek implementation of appropriate, systematic coordination practices that incorporate

- sound features of long-range planning;
- participation in the identification and continuing recognition of effective in-country coordinating leadership;
- close collaboration by the Agency, United Nations Fund for Population Activities, and World Bank in undertaking their country-specific assessments of population situations and reaching agreement on needs;
- adherence to an appropriate division of program responsibility in each country where population assistance is being provided by more than one major donor; and
- encouragement of specialization among the nongovernment organizations active in population activities.

To help develop guidelines and identify opportunities to improve coordination, the Administrator should require that the U.S. missions in countries receiving U.S. population assistance funds describe the local coordination situation and make suggestions for improvements. He, and appropriate Agency officials, should work more closely with the United Nations Fund for Population Activities and the World Bank and also with the largest private voluntary family planning organization,

the International Planned Parenthood Federation, to overcome obstacles to--and to establish systematic practices for--coordination in all countries where population assistance activities are being carried out.

The Agency's regional bureaus should instruct in-country missions to work with recipient governments to effectively establish such practices wherever U.S. population assistance is being provided bilaterally. In-country mission directors should work closely with U.S. Chiefs of Missions and other Embassy officials to reduce or eliminate the concerns of recipient governments that may impede the effective implementation of systematic coordination practices.

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Population activities should be well coordinated in countries where there is no bilateral U.S. program but where U.S.-supported intermediaries are active. The Agency, together with the Department of State, should develop arrangements with donor intermediaries and recipient country organizations for this purpose. Typically, such a country has not developed a national population policy and program, and major donors should look for opportunities to assist it in this regard.

GAO believes the United States is not now obtaining maximum effectiveness from its population assistance expenditures because of less-than-optimum coordination among donors and recipient countries. The Agency's efforts to bring about improvements in this regard--especially with respect to the major donors--are critical to the most cost-effective attainment of population objectives. The cognizant congressional committees should therefore require the Agency to describe the progress of these coordination improvement efforts when authorizing and appropriating program funds.



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ABBREVIATIONS

AID	Agency for International Development	- A6697
AVS	Association for Voluntary Sterilization	- D6522
FPIA	Family Planning International Assistance	- D6523
GAO	General Accounting Office	
IPPF	International Planned Parenthood Federation	- CNG 1782
UN	United Nations	
UNDP	United Nations Development Program	- D600525
UNESCO	United Nations Educational, Scientific, and Cultural Organization	- CNG 855
UNFPA	United Nations Fund for Population Activities	- D6524
UNICEF	United Nations Children's Fund	- D6526
WHO	World Health Organization	- CNG 854

*Ford Found. CNG 1062*  
*Salvador Fund D6527*  
*Population Services International*  
*D6528*

*DOA A6C32*



## CHAPTER 1

### INTRODUCTION

Rapid population growth in many developing countries contributes greatly to the suffering and poverty of countless millions and limits the prospects for a better life for their children. 1/ Even though there are encouraging indications that the population growth rate is slackening, there is still an urgent need for a broader and more concerted effort by developing nations and organizations providing population assistance to deal with the problem.

Organizations and individuals engaged in population-related activities have alerted the international donor community and most developing countries to the problems of rapid population growth and the need for family planning. The amount of assistance provided for population activities has risen dramatically--from about \$2 million in 1960 to well over \$315 million in 1976. By the end of the decade, the annual total could average \$400 million.

The number of developing countries that have adopted policies supportive of family planning increased from only 19 in 1965 to 81 in 1975, the latest year for which such data is available. In 1975, 54 of the 81 countries were engaged, to some extent, in national family planning programs. Almost all have received external assistance.

Many organizations have sprung up to participate in population activities or added such activities to their other areas of concern. Until the United States and Sweden began providing population assistance on a large scale in the late 1960s, most assistance was provided by four private voluntary organizations (Ford Foundation, Rockefeller Foundation, Population Council, and International Planned Parenthood Federation). A recent guide to sources of international population assistance lists over 170 organizations.

The United States has been and will in the foreseeable future probably continue to be the largest single donor of population assistance. In the 1965-78

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1/Our report "Challenge Of World Population Explosion: To Slow Growth Rates While Improving Quality Of Life" (ID-76-68; Nov. 9, 1976) includes a discussion of the population growth problem and the impact of population growth on development efforts.

period, U.S. population assistance totaled about \$1.2 billion. These funds were provided bilaterally to developing country governments to support population activities, to universities and private voluntary organizations, and to the United Nations Fund for Population Activities (UNFPA). The chart on the following page shows the complex flow of U.S. funds. In addition to the \$1.2 billion provided specifically for population assistance, the United States has contributed to organizations, such as the World Bank and other U.N. agencies, that carry out population activities, among other activities.

Although the United States has provided more funds for population assistance than all the other donor governments combined, about 80 other countries have provided some population assistance. Only about eight have provided substantial aid. They tend to focus on a limited number of countries. Sweden, the next largest bilateral donor after the United States, began providing family planning assistance in 1958--a total of \$134.2 million through 1976. Norway's population assistance has nearly tripled since 1974, almost reaching Sweden's annual total of \$28 million in 1976. Other nations which provided over \$5 million in 1975 or 1976 are Canada, Denmark, Germany, Japan, the Netherlands, and the United Kingdom.

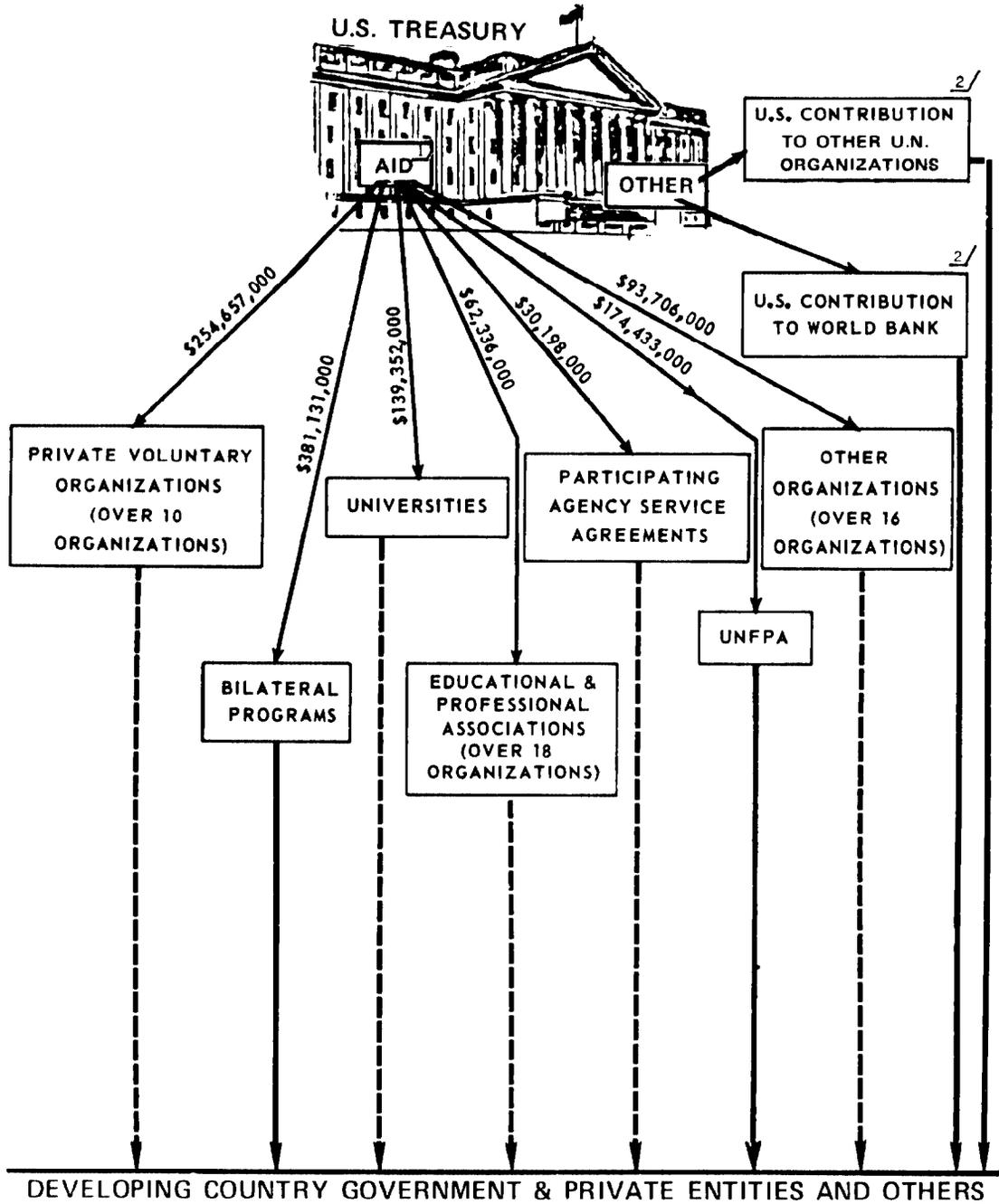
International organizations are increasingly involved with population assistance. The World Bank <sup>1/</sup> and the World Health Organization (WHO) carry out population activities with general development funds contributed by national governments. These funds are not earmarked for any particular program but some are used for population assistance activities. Nongovernmental organizations are also active. Many of these rely on donor governments, primarily the United States, for support, but others, such as the Ford and Rockefeller Foundations, use private funds.

A United Nations (U.N.) publication provided financial data on population assistance from 1971 to 1976. (Data for 1976 was incomplete.) It noted that assistance totaled \$1.4 billion. It also revealed the extent to which funds flow through intermediary organizations, stating that if double counting were not excluded, the total would be \$2.2 billion.

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<sup>1/</sup>The term World Bank as used in this report includes both the International Bank for Reconstruction and Development and the International Development Association.

**U.S. ASSISTANCE FOR POPULATION PROGRAMS  
FUNDING ALLOCATIONS FY1965-1978**



<sup>1/</sup> AID DATA PROVIDED BY AID (SEE APP. II). AID BILATERAL PROGRAMS AND INTERNATIONAL ORGANIZATION PROGRAM FUNDS FLOW DIRECTLY TO DEVELOPING COUNTRY GOVERNMENTS. OTHER AID FUNDS, INDICATED BY BROKEN LINES, ARE EXPENDED FOR THE BENEFIT OF DEVELOPING COUNTRIES.

<sup>2/</sup> DATA ON U.S. FUNDS FLOWING INTO POPULATION PROGRAMS NOT READILY AVAILABLE.

It is difficult to determine total population assistance provided to date because of the unavailability or unreliability of data for the years prior to 1971. It can be estimated, nevertheless, that the total from all sources between 1952 and 1976 was about \$1.6 billion and now could be about \$2 billion. The United States provided over half of this aid. In addition, some developing countries themselves provide significant support to their population programs.

While the number of governments and organizations involved in population assistance has increased dramatically, it is clear the United States, as the largest donor, has a major stake in the efficiency, economy, and effectiveness of these activities. The proliferation of entities and the large amounts involved make it essential that programs be well coordinated to (1) avoid confusion, duplication, and waste; (2) take advantage of opportunities to reduce costs through consolidating requirements for procurement of materials, supplies, and services; (3) assure that available funds are applied to the highest priorities; and (4) assure that country programs are as effective as possible.

It is increasingly being recognized that efforts to slow population growth should be integral parts of development planning. As the interrelationships between aspects of development and family size become clearer, the need for donors to coordinate also increases.

We view the many organizations involved in population assistance activities in two categories--(1) major donors and national governments and (2) nongovernment organizations and other international organizations. The major donors are the U.S. Agency for International Development (AID), UNFPA, and the World Bank. These three provide most of the population assistance, work directly with developing country governments, and maintain a broad population expertise. The nongovernment organizations, on the other hand, often receive funds from the major donors to carry out specific activities or types of activities. They specialize, to varying degrees. Private voluntary organizations, such as the International Planned Parenthood Federation (IPPF) and the Association for Voluntary Sterilization (AVS) and U.N. agencies that carry out projects with UNFPA funds like the World Health Organization, are in this second category.

#### SCOPE OF REVIEW

This report reviews the coordination processes used in providing population assistance to developing countries.

AID has been and is the predominant donor of such assistance, working directly with recipient governments and indirectly through a large number of intermediary organizations.

In this report we built on experience gained in prior reviews 1/ but relied primarily on visits to six developing countries and responses (oral and written) to a questionnaire sent to the headquarters and field offices of organizations active in these countries. The countries visited were Nigeria, Tanzania, Thailand, Bangladesh, Jamaica, and Costa Rica. We met with U.S. ambassadors, AID mission directors and staffs, officials of the various United Nations agencies and the World Bank, officials of donor and local organizations, and host government officials. In addition we visited the headquarters of AID, UNFPA, and the World Bank and those of a number of private voluntary organizations in New York and Washington, D.C.

We also reviewed the policies, regulations, and other documents of the major donors--AID, UNFPA, and the World Bank--concerning coordination.

Our conclusions and recommendations are provided in the next chapter. Chapters 3 through 8 and the appendixes contain detailed supporting information.

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1/"Challenge Of World Population Explosion: To Slow Growth Rates While Improving Quality Of Life," ID-76-68, November 9, 1976.  
"Impact Of Population Assistance To An African Country," ID-77-3, June 23, 1977.  
"Impact Of Population Assistance To An Asian Country," ID-77-10, July 12, 1977.  
"Reducing Population Growth Through Social And Economic Change In Developing Countries--A New Direction For U.S. Assistance," ID-78-6, April 5, 1978.

## CHAPTER 2

### CONCLUSIONS AND RECOMMENDATIONS

#### CONCLUSIONS

Considering the magnitude of the population growth problem and the myriad of organizations involved in providing population assistance to developing countries, where the need for assistance far exceeds available resources, coordination is important, indeed essential, as a means to ensure that (1) available funds are applied to the highest priorities, (2) country programs are as effective as possible, (3) overlap and duplication are avoided, and (4) opportunities to reduce costs through consolidated procurement are identified.

An important and recent change in the approach to population growth problems stems from the growing recognition that the availability of family planning services in an unchanged socioeconomic environment may not lead to their acceptance or to lowered birth rates. Donors and developing countries alike see a need to integrate population and development planning and programs so as to influence family-size decisions. The U.S. Agency for International Development and the other major population assistance donors--the United Nations Fund for Population Activities and the World Bank--are charged with or associated with organizations having substantive development assistance responsibilities and must focus increased attention on integrating their population and development activities and improving their coordination practices.

The three major entities involved in providing population assistance to developing countries, AID, UNFPA, and the World Bank, have recognized the need for effective coordination. Comments concerning the subject of coordination were made available to us by officials of these and other organizations engaged in population assistance activities in response to our prior reports on assistance programs and our questionnaire seeking information on coordination practices and activities. These comments reflect agreement that population assistance programs and activities require effective coordination. Many of the nongovernment organizations suggest, however, that informal coordination is adequate and appropriate. (See chs. 3 and 4.)

AID, UNFPA, and the World Bank have focused and continue to focus considerable attention on the development of systems and methods to improve and increase population assistance

activities. If successful, they will improve coordination or create conditions conducive to its effectiveness. These systems and methods include

- World Bank co-financing methods;
- UNFPA procedures for carrying out its responsibilities for coordinating the population activities of U.N. specialized agencies, including the Inter-Agency Consultative Committee;
- UNFPA "multi-bi" arrangements;
- World Bank sector review program;
- UNFPA population needs assessment program; and
- AID multiyear strategies program. (See ch. 5.)

During 1977 and 1978, high-level officials of the three major donor agencies and others held several meetings to improve coordination among their respective organizations.

We found, however, that the actual coordination practices in developing countries of most of the organizations engaged in population activities consisted for the most part, and in some countries solely, of informal dialogs among their field representatives. By this means, they strive to become aware of each other's plans and programs. Most of the field representatives responding to our questionnaire seemed to feel that such informal exchanges fulfilled their needs. Moreover, we could find no significant areas of unproductive overlap, redundancy, or duplication where this type of coordination was being practiced. (See chs. 6 and 7.)

In one country--Nigeria--however, we found that little information was being shared or exchanged by those involved in providing or receiving population assistance. The participants did not carry out an effective informal exchange. The various donors, in short, "do their own thing." Given the size of the country and the relatively small amount of population activity, it is perhaps not surprising that we could not identify areas of overlap or duplication. (See ch. 6.)

Exchanges of information--sharing information on project and program results, problems, and needs--we refer to as passive coordination. We believe all organizations involved in population activities should have sufficiently detailed knowledge of each other's activities. We believe

it is the responsibility of the major donors, which fund most of these organizations, and the recipient governments to ensure that such exchanges take place. Such exchanges should not depend solely on social encounters or particularly active individuals. The extent and nature of the exchanges, however, should be determined on a country-specific basis. But passive coordination is not enough. It needs to be combined with other activities to ensure that the country's population problem and needs are defined and that assistance is used in the most effective manner. Coordination is an active and vital force for program success. An effective coordination system should, on a country-specific basis, also include a long-range plan or strategy, support of effective coordinating leadership, and an appropriate division of labor among participants. (See chs. 6 and 8.)

The activities of all participants should be focused on the attainment of agreed-upon objectives and on the means for attaining them. To varying degrees, a developing country may have such a plan. To the extent that it does not, the major donors, together with the recipient government, should develop such a plan and agree on a division of program responsibility.

We define active coordination as the process whereby the major donors among themselves and with the recipient government agree upon a national population plan and a division of program responsibility and are assured of effective leadership. (See chs. 6 and 8.)

We believe the major donors, while engaging in active coordination, should also arrange for nongovernment and other international organizations to participate in passive coordination. Such organizations do not, as a rule, need to be included in active coordination, however, their activities need to be part of or consistent with the developing country's national program.

At a December 1977 meeting of donors in London, six elements of donor concern were listed, which can be viewed as elements of a comprehensive national population plan. Active coordination should be based on and involve consideration of all these elements.

1. Examination of the demographic situation, population policies, goals and strategies of the country concerned.
2. Assessment of the program proposed to carry out the policies and strategies to meet the goals.

3. Determination of the resource requirements, in physical and financial terms.
4. Identification of the sources of funds, both internal and external.
5. Prioritizing program components to most effectively utilize available resources.
6. Observation and monitoring of program performance.

To obtain agreement among donors and external participants as to priorities and what needs to be done has apparently been extremely difficult. Donors have varying interests and varying organizational charters. Nevertheless, we believe that arrangements for systematic coordination among the principal donor agencies could provide the environment needed for minimizing such conflicts. (See ch. 8.)

One entity within the community of donors, participants, and the recipient government should play the role of "coordinator." Ideally, this function should be the responsibility of an agency of the recipient government. If not, one of the donors should help the government fulfill that role, or, in certain cases, assume the role itself; the choice should be made by the recipient government. Under some circumstances, one assisting organization, most likely one of the international organizations, should be informally selected as a primary, continuing link between other donors and the government.

In one of the developing countries we visited, Bangladesh, we found that poor coordination between the government's health and population activities has been a constraint to the delivery of family planning services. The Government of Bangladesh is planning a \$900 million population program for the period from 1978 to 1985 and is asking for donor assistance. The major donors are attempting to coordinate their efforts in considering such aid. They need to reach agreement on ways of improving the country's program and to hold a common position in discussions with the Government on these matters. (See pp. 48 to 50 and 52 to 54.)

Uncertainties on the part of the donors regarding each other's plans point up the absence of close coordination and the need for top-level officials in each organization to take steps to improve coordination and cooperation among their staffs.

## AGENCY COMMENTS

The Department of State and AID reviewed a draft of this report. (See app. I.) Both were in agreement with its general thrust and recommendations.

We also held informal discussions with officials of the World Bank and UNFPA. UNFPA felt the draft report was helpful and accurately described its principle that coordination is the primary responsibility of the host government but that all donors should continuously strive to improve coordination. The World Bank also found the draft report very useful and was in agreement with its basic thrust that the major donors need to improve coordination. Revisions based on informal comments of officials at all four organizations have been made, as appropriate.

## RECOMMENDATIONS

To ensure that available resources are applied in the most effective manner, to identify opportunities for cost savings through consolidated procurement, and to reduce the potential for overlap and duplication, we recommend that the AID Administrator:

1. Establish agencywide policy and guidance with respect to the development and, where appropriate, implementation of systematic active coordination practices that incorporate
  - sound features of long-range planning (see p. 8);
  - participation in the identification and continuing recognition by the assistance community of effective in-country coordinating leadership;
  - close collaboration by AID with UNFPA and the World Bank in undertaking country-specific assessments of population situations and reaching agreement on what needs to be done, particularly in certain key countries;
  - adherence to an appropriate division of program responsibility in each country where population assistance is being provided by more than one major donor; and
  - encouragement of specialization and exchange of information among the non-government organizations active in population activities.

2. To help develop policy and guidelines and identify opportunities for improvement, require that this report be sent to AID missions in all countries receiving U.S. population assistance funds and that each mission provide AID with a description of the existing coordination situation and suggestions for improvement.
3. Help AID officials work more closely with top officials of the developing countries and of the World Bank, UNFPA, and IPPF, as appropriate, in establishing systematic active and passive coordination practices in all countries in which these organizations are providing population assistance. Assignment by the World Bank and UNFPA of field representatives to all countries where they support major population programs should be discussed.
4. Require AID regional bureaus to instruct in-country missions to work with recipient governments and other donors and participants to effectively establish such practices wherever population assistance is being provided bilaterally by AID.
5. Require in-country AID mission directors to work closely with U.S. Chiefs of Mission and other Embassy officials in efforts to reduce or eliminate the concerns of recipient governments that may impede the effective implementation of systematic coordination.
6. Require that AID officials, working with appropriate Department of State officials, give priority attention to collaboration with representatives of other major donors in carrying out discussions with the governments of developing countries having serious population problems and receiving substantial support from the United States and other donors but not taking the actions required to eliminate population program constraints.
7. Require that in countries where there is no bilateral U.S. assistance but where U.S.-supported intermediaries are active, AID work together with the Department of State to develop arrangements with other donors and intermediaries and local organizations to ensure that coordination takes place and that the recipient government is receiving any assistance needed to develop a national population policy and program.

MATTER FOR THE CONSIDERATION OF THE CONGRESS

We believe the United States is not now obtaining maximum effectiveness from its population assistance expenditures because of less-than-optimum coordination among donors and recipient countries. AID efforts to bring about improvements in this regard--especially with respect to the major donors--are critical to the most cost-effective attainment of population objectives. The cognizant congressional committees should therefore require AID to describe the progress of these coordination improvement efforts when authorizing and appropriating program funds.

### CHAPTER 3

#### IMPORTANCE AND USEFULNESS OF COORDINATION--

##### VIEWS OF MAJOR DONORS PROVIDING POPULATION ASSISTANCE

We believe that, in coordinating population assistance activities, interaction among donors, program participants, and the recipient government should be sufficient to

- provide assurance that there is no unproductive redundancy, overlap, or duplication;
- ensure that resources are applied where needed most and where they will make optimum contributions toward attainment of agreed-upon goals and objectives;
- ensure that opportunities for cost savings through consolidation of requirements for procurement of material, supplies, and services are identified; and
- provide each donor, particularly the United States, with information on whether its contributions, direct or indirect, are being used in a manner consistent with contractual, grant, or loan requirements.

Interaction among donors, program participants, and the recipient government is somewhat analogous to a symphony orchestra performance. Just as a knowledgeable and experienced orchestra leader and a well-written score are essential for a quality performance by an orchestra, well-conceived national plans for the use of all participants are needed, under ideal conditions, for the most effective population programs in developing countries.

##### OBSERVATIONS ON COORDINATION IN PRIOR GAO REPORTS

In a 1975 report on the effectiveness of U.S. programs and activities in a Latin American country (ID-75-16, January 30, 1975), we discussed the efforts of AID and various other donors to integrate and coordinate their assistance programs and the concern of officials over the need to improve coordination. The report pointed out that the most effective use of assistance requires a complete and frank exchange of information between the donors and the recipient government and its agencies. Lack of such

exchange will result in (1) duplication of efforts, (2) priority areas not being properly addressed, (3) a prolonged need for external assistance, and (4) increased recipient government debt service reflecting little progress.

In a review of the "Impact of Population Assistance to an African Country," (ID-77-3, June 23, 1977), we reported that there was no systematic, effective coordinating mechanism for achieving maximum benefits from resources and ensuring that the results of projects were fully disseminated. We expressed our belief that effective systematic coordination mechanisms are needed to achieve the greatest impact from population assistance when multiple donors and organizations are involved. We recommended that AID encourage establishment of such mechanisms in African countries where none exist.

In a review of the "Impact of Population Assistance to an Asian Country," (ID-77-10, July 12, 1977), we found that annual and quarterly meetings were held to coordinate the assistance activities of the donors and participating organizations. Although the meetings were an adequate forum for interchange of information, the review showed that commitment by the recipient government and its willingness and capability to carry out the program were questionable and contributed to the program's failure to achieve desired results.

We believe that effective coordination methods can also help significantly in meeting an important need of donors involved in providing population assistance through intermediaries. Periodic operational reviews could provide donors with important information on how well resources are being applied and on whether they are being used for the purposes intended or required by the donors' regulations, laws, etc. Such information, particularly where donor resources are in the form of general support grants to intermediaries, may not otherwise be available to the donors.

#### CHANGES INCREASE NEED FOR COORDINATION

The circumstances and environment in which population assistance activities are carried out in developing countries have so changed in recent years that we are concerned that appropriate coordination practices be followed to ensure the most effective, efficient, and economic use of the resources allocated.

World concern with population problems continues to spread. The number of developing countries that have adopted policies supportive of family planning has increased from 19 in 1965 to 81 in 1975 (the most recent year for which data is

available), according to the table on page 17 published by the Population Council. That publication also shows that 54 of those 81 countries are engaged in national family planning programs of sufficient scope to reach a number of new acceptors equivalent to 1 percent of the women aged 15 to 49 in 1975.

It is apparent that demand for financial and technical assistance has increased substantially (see ch. 1) and that this has created a need for a large number of public and private population assistance organizations in an increasing number of developing countries. According to UNFPA, the three editions of its "Inventory of Population Projects in Developing Countries Around the World" illustrate the expanding interest in population assistance by developing countries and territories and the expanding interest in population assistance by donors as well.

While the number of developing countries with policies supporting family planning has risen from 19 in 1965 to 81 in 1975, only 54 of these provide "real programmatic support," as shown in the charts on page 17. Thus, in 27 countries, including Nigeria and Tanzania, family planning still takes place outside the framework of a national program. Political, religious, or cultural sensitivities apparently have precluded establishment of national population programs, but population-related activities take place in many of these countries. The assisting organizations are more typically intermediaries, however. The World Bank has population programs in none of these countries and AID has bilateral programs in only eight, but AID-supported intermediaries are active in many of these countries and so are UNFPA executing agencies.

In such situations, it is important for the donors to focus on coordination at the headquarters level and, together with the recipient country government, agree upon one organization that would act to ensure a good exchange of information among organizations providing population assistance. In addition to ensuring that passive coordination takes place, the major donors should look for opportunities to help the recipient government develop a national population policy and program. Until there is a national program, active coordination as discussed in this report cannot take place.

The number of countries receiving assistance has sharply increased. The UNFPA inventory listed 107 in the first edition (1973-74) and 117 in the third edition (1975-76). In 1966 about 15 developing countries were

receiving aid. There has also been a dramatic increase in the number of donors. For example, in the six countries that we visited during our review, the publications show:

Number of population  
assistance organizations

	<u>1966</u>	<u>1970</u>	<u>1975/76</u>
Bangladesh: (note a)			
Multilateral	-	-	4
Bilateral	-	-	7
Nongovernmental	-	-	16
	<u>          </u>	<u>          </u>	<u>27</u>
Thailand:			
Multilateral	-	-	2
Bilateral	-	1	3
Nongovernmental	-	2	23
	<u>          </u>	<u>3</u>	<u>28</u>
Nigeria:			
Multilateral	-	1	1
Bilateral	-	-	2
Nongovernmental	1	3	13
	<u>1</u>	<u>4</u>	<u>16</u>
Tanzania:			
Multilateral	-	-	1
Bilateral	-	-	4
Nongovernmental	-	1	5
	<u>          </u>	<u>1</u>	<u>10</u>
Costa Rica:			
Multilateral	-	1	3
Bilateral	1	2	2
Nongovernmental	-	2	9
	<u>1</u>	<u>5</u>	<u>14</u>
Jamaica:			
Multilateral	-	1	2
Bilateral	1	1	2
Nongovernmental	-	-	11
	<u>1</u>	<u>2</u>	<u>15</u>

a/In 1966 one bilateral donor and one nongovernment organization were providing assistance to Pakistan. In 1970 three bilateral donors and one nongovernment organization were providing aid. Bangladesh became independent in 1971.

**Evolution of family planning policy adoption in the developing world, 1952-75 1/**

Year	Countries adopting supportive policies <sup>a</sup>		Population of supportive countries (in millions)		Cumulative percent of developing world population in supportive countries
	Number	Cumulative number	Population	Cumulative population	
1952-55	1	1	621	621	22
1956-59	4	5	857	1,478	51
1960-63	6	11	218	1,696	59
1964-65	8	19	131	1,827	63
1966-67	15	34	188	2,015	70
1968-69	11	45	186	2,201	76
1970-71	12	57	208	2,409	83
1972-73	13	70	141	2,550	88
1974-75	11	81	162	2,712	94

<sup>a</sup>These countries by year of policy adoption are as follows: 1952 India; 1956 China, Hong Kong; 1958 Tonga; 1959 Taiwan; 1960 Bangladesh, Pakistan; 1961 South Korea; 1962 Fiji, North Vietnam; early 1960s Cuba; 1964 Tunisia; 1965 Egypt, Mauritius, Morocco, Singapore, Sri Lanka, Turkey, Venezuela; 1966 Chile, Honduras, Jamaica, Kenya, Malaysia, Nepal, Reunion, South Africa; 1967 Barbados, Colombia, Iran, Nicaragua, Puerto Rico, Thailand, Trinidad and Tobago; 1968 Bolivia, Costa Rica, Dominican Republic, Ecuador, El Salvador, Indonesia, Papua-New Guinea, Zimbabwe (Rhodesia); 1969 Ghana, Guatemala, Panama; 1970 Afghanistan, Botswana, Gilbert and Ellice Islands, Nigeria, Philippines, Sudan, Tanzania; 1971 Algeria, Haiti, South Vietnam, Swaziland, Western Samoa; 1972 Benin (Dahomey), Gambia, Iraq, Jordan, Laos (policy reversed in 1976), Mali, Mexico, Paraguay, Uganda; 1973 Khmer Republic, Liberia, People's Democratic Republic of Yemen, Zaire; 1974 Bahrain, Brazil, Ethiopia, Grenada, Lesotho, Solomon Islands, Syria, Zambia; 1975 Cameroon, Seychelles, Togo. SOURCES: Nortman, 1969-76; Watson and Lapham, 1975; IPPF, 1975.

**Number and population of developing countries with policy support and with "real programmatic support" for family planning, by region, 1975 1/**

Region	Countries with policy support			Countries with "real programmatic support"		
	Number	Population (in millions)	Percent of regional population	Number	Population (in millions)	Percent of regional population
South Asia	5	797	99+	5	797	99+
East Asia	4	892	98	4	892	98
Southeast Asia/Oceania	15	299	90	12	266	80
Latin America/Caribbean	22	277	93	20	161	54
West Asia/North Africa	12	197	89	4	96	43
Sub-Saharan Africa						
Anglophone countries	17	206	95	8	36	16
Francophone countries	6	43	38	1	1	0.4
Developing world total	81	2,712	94	54	2,249	78

NOTE: "Real programmatic support" is defined as a national family planning program of sufficient scope to reach a number of new acceptors (male or female) equivalent to 1% of the number of women aged 15-49 in 1975. Countries not meeting this criterion are Afghanistan, Algeria, Bahrain, Benin (Dahomey), Bolivia, Brazil, Cameroon, Ethiopia, Iraq, Jordan, Khmer Republic, Mali, Nigeria, Papua-New Guinea, People's Democratic Republic of Yemen, Seychelles, South Africa, South Vietnam, Sudan, Swaziland, Syria, Tanzania, Togo, Turkey, Uganda, Zaire, and Zambia. In addition, the Malagasy Republic and Sierra Leone, included in Table 4 but not in Tables 1 and 2, do not meet this criterion.

Another change in recent years is the growing awareness and recognition of the need to interrelate population and development assistance. The premises that underlie the need are that (1) population growth has a major direct impact on development objectives and on the related costs and (2) social and economic change in developing countries could have an impact on desired family size and fertility. (See our report to the Congress "Reducing Population Growth Through Social and Economic Change In Developing Countries--A New Direction For U.S. Assistance," ID-78-6, Apr. 5, 1978.)

The major population assistance donors--AID, UNFPA, and the World Bank--are charged with, or associated with organizations charged with, development assistance responsibilities. It seems obvious that these organizations, in fulfilling the recognized need to more effectively interrelate development and population programs and projects, must focus increased attention on developing effective coordination practices. They must do this to ensure (1) that population activities are planned and carried out within the context of overall country development plans and strategies and (2) that population and development assistance programs and activities are interrelated and oriented toward improving human conditions in developing countries.

#### MAJOR DONOR RECOGNITION OF THE IMPORTANCE OF COORDINATION

A large number of organizations are providing population assistance to or carrying out population activities in one or more of the six countries visited. In the following sections of this chapter, we briefly describe the policies, regulations, and other documents on coordination of AID, UNFPA, and the World Bank--the major donors. Comments on coordination, furnished in response to our questionnaire <sup>1/</sup> and in discussions with officials of these agencies, are also presented here. Comments of nongovernmental organizations are discussed in chapter 4. Comments of field representatives of the agencies and organizations in the countries visited during the review are presented in chapter 7.

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<sup>1/</sup>We did not ask governmental aid organizations other than AID or U.N. agencies other than UNFPA to respond to our questionnaire.

Several systems or arrangements have been developed by UNFPA and the World Bank that permit donors to cooperatively participate in projects and other forums related to providing population assistance to developing countries. These are described in chapter 5.

#### Agency for International Development (AID)

AID is the largest contributor of population assistance. Funds are provided directly to developing country governments and indirectly through intermediaries active in these countries. (See ch. 8.)

With respect to interaction with other organizations, AID told us, in response to our questionnaire, that information on the population activities of others comes from the AID missions overseas, and

"\* \* \* from other contractors and grantee organizations, from government agencies and private organizations in the countries where we work, from other donor agencies, from staff visits to countries, and from special assessment/evaluation teams sponsored by its [AID's] Office of Population."

At the country level, AID expects its population officers to serve as the focal point of coordination with other donors and host country institutions, both public and private. In some countries, it noted, a host government agency may serve as the mechanism for coordination among the interested parties. AID said that

"In the past, coordination at the country level has tended to be on an informal basis. This is a reflection, in part, of the relatively small number of people involved in population and family planning program leadership and the limited number of donor representatives in many countries. Similarly at the headquarters level, coordination has tended to be informal with persons in A.I.D.'s Office of Population responsible for backstopping specific countries or specific projects meeting with colleagues at the World Bank, UNFPA and other donor headquarters. The purposes of these contacts have generally been to share information, exchange documents, and discuss ways in which the donor organizations can collaborate more closely to assure more effective utilization of funds and improve program content."

In the last year, AID's Bureau for Development Support, which oversees population activities, has tried to regularize coordination. Meetings of donors to deal with specific country programs have been more structured and these sessions have sometimes included representatives of the particular host government and private in-country organizations. There also have been efforts to coordinate missions to a country to discuss population and family planning program direction and policy, such as the combined AID-World Bank-UNFPA missions to Bangladesh in October 1977. In countries such as Kenya, AID has participated in a consortium to coordinate program planning and implementation.

AID informed us that in the last year, it "has searched increasingly for effective opportunities for coordination." It

" \* \* \* has taken clearer cognizance of the drawbacks of inadequate coordination, including encouragement of some host countries to deal with several donor organizations one at a time in the hope of increasing the quantity of assistance, and the missed opportunities for donor agencies to learn from one another have sometimes fostered duplication."

At the Bellagio IV Conference, leaders of the principal donor countries and agencies, together with chiefs of population programs in many recipient countries, met to exchange information and ideas on population issues. AID said, "It became clear that high level coordination among the major donors of population assistance was lacking."

AID told us that early in 1977 it took the initiative with the President of the World Bank, the Director of UNFPA, and the President of the Ford Foundation to stimulate policy-level dialog aimed at improved operational cooperation--particularly among the major donors. AID feels strongly that it

" \* \* \* should be working more closely with other donor organizations to find ways to enhance and amplify our efforts in particular countries. For this reason a joint team approach was inaugurated in Bangladesh in October of 1977."

Since then, AID officials have been engaged in a series of meetings with counterparts in the World Bank to exchange ideas on population programs in other specific countries, including Pakistan, the Philippines, Egypt, Thailand, and

Mexico. AID found these meetings of substantial value and plans to continue them as it explores possibilities for joint funding and negotiation with host governments.

## UNFPA

UNFPA is the largest multilateral funding organization for population assistance. It was created in the late 1960s to improve understanding of population problems and provide the means for coping with them. Financed by contributions from governments, it expended about \$268 million in the 1969-76 period. These funds were used for 106 developing countries and provided for over 1,600 population projects, according to UNFPA documents. Using economic and demographic indicators, it has now designated 40 countries as priorities for population assistance and eventually hopes to allocate two-thirds (a tentative goal) of its assistance to these countries.

The United Nations Development Program (UNDP) Governing Council is the UNFPA governing body, subject to terms set by the Economic and Social Council, and has assigned UNFPA "to play a leading role in the United Nations system in promoting population programmes and to co-ordinate projects supported by the Fund." UNFPA relies primarily on United Nations agencies, such as WHO and UNDP, to execute its projects.

A May 1976 report to the Governing Council by the UNFPA Executive Director on "Priorities in Future Allocation of UNFPA Resources" includes comments on the UNFPA "leading role" responsibility:

"Significant progress has been made by the Fund in this regard but there is considerable room for expansion of co-ordination efforts. The Fund has recently been encouraged by several other funding organizations and Governments with bilateral aid programmes to play a more vigorous role in co-ordinating international population assistance; the increasing difficulty felt within the international assistance community in general of meeting the demand with available resources makes such co-ordination more important than ever.

"In the future, the Fund should redouble its efforts to

- (i) develop joint or co-ordinated funding arrangements with other aid organizations,
- (ii) search for strategies to solve population problems effectively in various settings, and
- (iii) identify approaches to integrate population components into social and economic development programmes."

The importance and need for more effective coordination is implicit in statements in a paper presented in 1977 at the Bellagio IV Conference by the Deputy Executive Director of UNFPA. The author points out that there is a rapidly growing demand for population assistance by recipient country governments. At the same time, the donor community, having become more conscious of resource constraints and the need for better coordination to maximize the effectiveness of its input, is involved in setting priorities to regulate the direction, areas, and modes of assistance. The author believes that the donors also need to promote development of a global strategy to assist developing countries in dealing with their major population problems rather than merely effecting a transfer of funds between donors and recipients.

We met with the Executive Director and top officials of UNFPA. They told us there had been coordinating problems among the many organizations involved--UNDP, World Bank, AID, International Planned Parenthood Federation (IPPF), etc.--in the early stages of population programs. There were problems of jurisdiction, but gradually the organizations realized their differing roles. As an example, the World Bank does a lot of infrastructure work. The officials told us that UNFPA obtains information about all the programs in a country where it is active. The officials coordinate UNFPA-supported activities with the plans and programs of the recipient government and bilateral donors to avoid duplication, overlap, or conflict in purpose. However, UNFPA believes that coordination is the right and responsibility of the recipient government and that careful coordination is beneficial to the government.

UNFPA told us effective coordination can be accomplished only in the recipient country and is dependent upon the recipient government's willingness to cooperate. The constraints and impediments to effective coordination, inherent in every development assistance effort, are due to differing attitudes or policies of donors or conflicts of these policies with sovereign rights of the recipient government. Officials told us

"These constraints and impediments are likely to be exacerbated in population related activities, which affect personal rights, people's sexual lives and emotional attitudes and which often have vital political considerations."

To coordinate assistance within the U.N. family, the UNFPA established an Inter-Agency Consultative Committee. It met twice in 1977 to discuss coordination of operational activities among UNFPA, the United Nations and its regional commissions, and other organizations in the U.N. system. At this forum, UNFPA also informs executing agencies about decisions of the Governing Council and other U.N. bodies which pertain to UNFPA.

In each country with a U.N. program, there is a UNDP resident representative whose function includes meeting with other organizations and visitors to facilitate coordination and exchange data. UNFPA has its own field personnel --called coordinators--assigned to countries or regions with large UNFPA programs. At the end of 1977, there were 24 field coordinator posts assigned to the offices of resident representatives.

UNFPA encourages policy coordination, as well as coordination of ongoing projects. It has established a new framework called "multi-bi" so that bilateral donors can contribute to specific UNFPA projects. The arrangement was designed to increase overall aid flow, but it also has implications for coordination. UNFPA has also begun a population needs assessment program to review the overall population situation in developing countries as a basis for allocating resources. (See ch. 5.)

According to UNFPA officials, coordination at the headquarters level is adequate but needs improvement at the country level. Restraining factors include government sovereignty, self-interest in agency programs, and problems in matching policy and operational goals with basic needs.

The officials cited their two-volume periodic publication of summary information on population activities as an aid to coordination. Volume I describes sources of population assistance; Volume II lists population activities worldwide of all entities by country. (This inventory is the single best source of data on programs by country that we are aware of.)

## World Bank

The World Bank is a development assistance agency. It entered the population field in 1968, convinced that rapid population growth was a severe impediment to raising living standards in many developing countries. Population projects financed by the Bank are prepared and implemented within the context of a country's development strategy. By July 31, 1978, the Bank had committed \$197.4 million to 15 population projects whose total costs were \$404.1 million.

In addition to providing direct assistance, Bank officials told us it integrates population with other development activities. Population is considered an important variable in the Bank's Country Economic Reports and lending strategies for individual countries, and the Bank encourages governments to consider population in their development planning.

According to officials, the Bank project-lending techniques enable it to develop a "sector relationship" with the member government concerned, whereby the Bank can better assist the borrower in developing a sound organization for planning and carrying out as broad a population program as the country's political and administrative realities permit. This sectoral relationship continues during project implementation through periodic Bank reviews of program--not just project--progress and allows the Bank to make a technical contribution to the program. A detailed set of population activities (the project), together with detailed cost estimates and an agreement on the administrative arrangements for project implementation, is worked out in advance of the commitment to lend. The process begins with a "sector review" to provide the government with an objective assessment of its population program and normally identifies possible areas of external assistance that might extend and strengthen the program.

Bank projects include activities intended to strengthen institutional capabilities as well as other aspects of the program. Because governments often prefer to finance software components by means of grants which other agencies--but not the Bank--can provide, Bank loans commonly provide more financing for hardware than for software. Bank officials told us this has sometimes created a misleading impression that the Bank is interested mainly in hardware components. They said the Bank recommends that governments take advantage of grant funds, when they are available, perhaps combining them with Bank funds in a cooperatively financed project. About half the Bank's 15 projects have involved cooperative financing.

When the World Bank entered the population field, there were already several agencies active in the field--AID, UNFPA, other bilateral and multilateral agencies and private voluntary organizations. Officials told us that the Bank's central role in the field of development finance, its strong emphasis on measures to improve population program performance, and its comprehensive sector approach contributed to uneasy relations with other agencies in the field but that over the past decade these relations have improved considerably.

In August 1976, an external advisory panel on population, which had been set up "to provide counsel on how the the World Bank could best assist member countries to lower their levels of fertility," included a recommendation in its report that

"The Bank should explore the development of more satisfactory relationships with other donors, and particularly with the UNFPA as the other major intergovernmental source of external assistance in population.

"The Bank's relationships with other donors in this field, and especially with the larger ones, has been uneven but is improving. All other major donors were in the field before the Bank, and it is not surprising that some reacted negatively when the Bank became closely involved with some national population programs, \* \* \* the role to be played by each donor should essentially be a decision for the government--not the Bank. Perhaps undesirable reactions can be avoided in the future by exercising special care and tact or working out more formal relationships with some of the major donors.

"The UNFPA is the special case. It is perhaps understandable that certain difficulties arose when both efforts were new and struggling to define their programmatic identities, but that is now past and a more congenial and constructive future is in prospect. There are opportunities for joint missions (thus sparing the countries too); for collaborative or even, as in other fields, assigned program definition; for division of interest within projects; for cooperation at the field level. The relations appear to be better now than they have been, but there is still room for development and we have reason to think that the Fund would welcome the effort. And it might help

to inject more flexibility and diversity into Bank projects.

"The Bank should seek to stimulate an openness of communication and a coordinated involvement with all agencies when appropriate in the planning and implementation of projects, to foster a genuine partnership in dealing with the bilateral and other agencies on the local scene, and to sponsor with UNFPA an ongoing international dialogue aimed at better coordination of total population assistance."

A November 1977 World Bank document on its lending operations in the population sector cautions that

"Unless the aid of major donors can be coordinated --i.e., donors can agree with government on an overall program strategy and avoid duplication of funding--there is grave danger that governments will be confused and demoralized by differences among donors and will be burdened by too many missions and excessive reporting requirements."

A World Bank discussion paper points out the importance of securing as much agreement as possible among donors, and within the government, on program strategy. The paper emphasizes the contribution that a deliberate effort at coordination can make toward minimizing doubts and disagreements. It says that sound and imaginative factual analysis, careful analysis of needs, and sound planning of future programs can play a major role in achieving the high degree of consensus that should, ideally, characterize relationships among donors and between donors and the government. It notes the chances that a host government's program will be pulled in different directions by conflicting donor viewpoints is much greater without such careful "mapping" of the sector and without deliberate attempts by donors to coordinate their strategies and their financial assistance.

A World Bank official commented that coordinated aid efforts can make it easier for the few senior managers in the recipient countries to meet the aggregate requirements of donors and also minimize the chance that various donors will give inconsistent or conflicting advice along with their financial contribution. In supporting co-financing arrangements, he said in the long run they

" \* \* \* will also reduce competition among strategies and program objectives in a field which has an extremely large number of donors, intermediaries

and technical assistance groups whose numbers and ideas alone have given the field a level of confusion and a sense of competition not seen in other sectors."

In responding to our questionnaire, the World Bank reiterated its support of coordination practices and said that it

" \* \* \* seeks to facilitate cooperation and open communications among donor organizations by maintaining close contacts at all levels with representatives of other public and private agencies. This provides the basis and an atmosphere for good coordination on specific issues and programs."

It said that, while the World Bank is almost never the first major donor to extend population assistance to a given country (AID, UNFPA, and the private voluntary organizations often are there long before), when it does arrive, it will often provide 40 to 50 percent of total external population funding. Officials believe this gives it a major role. They also say the World Bank's ready access to planning agencies and ministries of finance is useful in efforts to strengthen government commitment to population objectives.

The World Bank wants to maintain a broad population capability, as indicated in its statement that:

"We do not like to put narrow boundaries on Bank-assisted projects because by doing so we might exclude activities important to the achievement of the sectoral or program objectives which are the Bank's main interest. So while we like to keep our projects relatively broad and comprehensive, we welcome the presence of other donors in financing components that are part of Bank-assisted projects."

At a donor meeting held late in 1977 issues relating to coordination were discussed. (See ch. 5.) The World Bank told us many questions remain regarding the type and amount of information to be exchanged and the framework and frequency for exchange. It also said that problems can result from multiple donor missions to a given country and differing advice, noting that such problems in Kenya and Bangladesh caused the host governments to request that the donors get together.

World Bank comments regarding the basis of donor funding decisions are clearly related to the issue of division of program responsibilities among donors. World Bank officials told us that:

"Before identifying better kinds of cooperation that may be possible among donors and how these might be achieved, it is essential to know which factors are critical to donor funding decisions for population activities. Differences and similarities may be found in policy guidelines, procedures and constraints. Other considerations might include:

- a. Criteria by which priorities among recipient countries are set (e.g., demographic or other technical, historical, ideological, political);
- b. Strategy and characteristics of the population program concerned (e.g., integrated health vs. vertical; certain contraceptives only vs. cafeteria approach; governmental policy and support for program);
- c. Activities which receive higher priority (e.g., population education, health facilities, training, communications);
- d. Channels for assistance (e.g., universities, governmental programs, NGOs, multilateral groups--UNFPA, WHO, etc.); and
- e. Kinds of information required and degree of specificity."

## CHAPTER 4

### NONGOVERNMENT ORGANIZATIONS

#### PROVIDING POPULATION ASSISTANCE

#### AND THEIR VIEWS ON COORDINATION

In addition to the major donors whose views on coordination are presented in chapter 2, a large number of nongovernment organizations and specialized U.N. agencies provide population assistance to or carry out population activities in one or more of the six countries visited. In this chapter we briefly describe the nongovernment organizations and their views on coordination. This information was obtained in response to our questionnaire and in discussions with organization officials at their respective headquarters. 1/

All the private voluntary organizations discussed below believe good coordination is necessary and desirable and seem to agree on the need for improvements. We have provided their views in some detail because it is difficult to summarize their positions as to the type improvements needed and the degree of systemization that is desirable. One organization, Pathfinder Fund, strongly believes it is time for a new and concerted effort to achieve true coordination. In countries with expanding programs it sees a need for meetings at which all population programming could be discussed. Other organizations seem to be content with informal coordination--staff meetings, telephone calls, and various other ways of exchanging information, etc. Several seem reluctant to endorse what they view as formal coordination, believing it might inhibit innovation, reduce diversity of approach, or might not be welcome by the recipient government. A Ford Foundation official said an experienced government may wish to limit formal coordination, whereas a less experienced government may want a systematic, coordinated donor approach. He concluded one could not generalize about most country donor situations.

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1/We sent the questionnaire to 24 private voluntary organizations. Of these, 11 provided substantive responses, 4 sent descriptive material or declined to respond, and 9 did not respond. We sent the questionnaire to the headquarters of AID, the World Bank, and UNFPA but not to the other U.N. specialized agencies. We also interviewed officials of the key organizations.

The reasons some of these organizations call for improvements in coordination yet caution against "formal" coordination or "overcoordination" may be related to their status as nongovernment agencies. (See ch. 8.)

As described in chapter 1 and discussed in detail in chapter 8, they tend to specialize in certain aspects of population activity and to receive funds from the major donors for this work. It seems logical, therefore, that their primary concerns should be directed at improving interaction and information sharing among the organizations active in similar population work--passive coordination.

#### ASIA FOUNDATION

The Asia Foundation embarked on an expanded long-term program of population and family planning assistance in 1972, focusing on information, education, and communication activities. Officials informed us that coordination does exist for their programs in Bangladesh and Thailand. They said the Foundation

"\* \* \* would, however, welcome a more regular, periodic, and systematic--though informal--discussion and review with other foreign agencies engaged in population work. In this way, each agency could be assured of full comprehension of the nature and future direction of the work of others in population. In addition, through such regular consultation, agencies could be encouraged by their home offices where possible to explore methods by which each might join, informally, to bring their separate resources to bear in support of population work in a given area or of a given type, undergirding one another's work through mutually reinforcing activities."

#### INTERNATIONAL PROGRAM, ASSOCIATION FOR VOLUNTARY STERILIZATION (AVS)

AVS, a voluntary nonprofit agency, began its international program in 1972 to stimulate and support voluntary sterilization throughout the developing world. It has supported female and male voluntary sterilization programs in Bangladesh, Jamaica, Nigeria, and Thailand for several years and "has clearly increased its level of coordination with other international funding agencies, national government agencies responsible for in-country coordination and approval, AID missions, etc."

During our interview, the AVS official told us his organization had been an AID grantee for 5 years and, during this period, coordination among AVS, UNFPA, governments, and others had been effective--after a difficult beginning. One reason for the success AVS has experienced as a participant in coordination, he said, probably relates to the specificity of its interest (sterilization). He said trip reports to various locations and forums are exchanged by AVS, FPIA, IPPF, and others. The close association of AVS with other organizations has somewhat curtailed the need for travel.

#### FAMILY PLANNING INTERNATIONAL ASSISTANCE (FPIA)

FPIA, the international division of the Planned Parenthood Federation of America, was established in 1971 to support the initiation and/or expansion of family planning activities in developing countries. In responding to our questionnaire, FPIA officials told us that

" \* \* \* in areas of the world where less than 10-20 percent of couples of reproductive age are obtaining service, what is needed is more resources (and probably less coordination--it can stifle initiative). In other areas, where rapid strides are being made, coordination is essential to avoid duplication of effort."

FPIA officials said AID is its primary source of funds and they attend functional and country meetings held by AID. Other attendees might include UNFPA, Columbia University, and the Population Council. FPIA said officials at the regional and local levels interact with officials of other population assistance entities. With respect to Africa, FPIA said:

"Coordination is necessary and critical in order to avoid the duplication of assistance and to, therefore, foster an efficient and economical use of available resources. In Africa, a plethora of agencies operate back and forth in an attempt to generate interest in and support for family planning programs. Where money is involved, often times local and national agencies will negotiate with two to three international organizations over the same project. In a few cases where effective coordination was nonexistent, projects were doubly funded. A lack of coordination can also

precipitate confusion as well as suspicions among \* \* \* government and private officials, who find themselves innundated by international agency representatives, most of whom are supported through grants (large or small) by the Agency for International Development. With effective coordination, these and other problems could be easily avoided."

In the opinion of the FPIA project director, there is a great deal of coordination in Costa Rica, Thailand, and Bangladesh--governmental or quasi-governmental agencies are involved as well as the AID mission. In Tanzania, Jamaica, and Nigeria, coordination is probably not so intensive but, on the other hand, family planning programs are not as extensive. He said that "coordination occurs in the natural course of events and cannot be dictated," and that he believes in "the type of coordination (whether formal or informal) that avoids duplication." Further:

"I believe in a multifaceted approach to population-related activities because I am not confident enough to believe that FPIA has the answer or, in fact, that any organization has the answer. Therefore, I have no problems with IPPF setting up model clinics to influence government leaders, or with Johns Hopkins working with medical schools, or with PAHO working through a health infrastructure. All of these organizations are doing what they know best, and all of their efforts are required if we are to be successful. FPIA has its own approach, one that we are comfortable with and that has worked well for us. When too many organizations adopt the same approach and/or when too many work with the same grantees, that is the point at which coordination becomes absolutely necessary."

#### THE FORD FOUNDATION

The Ford Foundation began its program in population and family planning in 1952. Through September 1975, it had expended \$89.3 million for population and family planning and, since 1959, \$115.9 million for reproductive biology and contraceptive biology projects. Unlike some of the other private organizations described in this chapter, it does not receive funds from AID.

The Foundation responded to our questionnaire on the matter of the nature and extent of coordination that is or should be practiced. It said that because the Foundation

is a relatively small financial contributor to population work, it frequently seeks collaboration with other donors in support of particular projects.

The responding Foundation official went on to say, however, that:

"In general, we take a jaundiced view of formal coordination mechanisms in which there is an attempt by the donor community to 'divide up the territory.' I personally have been witness to the failure of such attempts, often characterized by unseemly competition among agencies to fund the most attractive of a given series of projects. It is my observation that the more experienced and sophisticated host governments would prefer a minimum of formal coordination among donors in order to maximize dependence on particular donors for given activities. Less experienced host country officials, on the other hand, are often bewildered by the variety of program priorities and constraints of the several donors and are eager for a systematic, coordinated donor approach. My conclusion, therefore, is that there are no hard generalizations to be made with respect to all host country-donor situations."

#### INTERNATIONAL PLANNED PARENTHOOD FEDERATION (IPPF)

IPPF, established in 1952, has been a leader in private worldwide efforts in family planning. It is an international federation of autonomous national family planning associations. There are now over 90 associations--about 85 percent are in the developing world. The main aims of IPPF are to introduce and support family planning services throughout the world and to increase people's and governments' understanding of the population problems of their own communities and the world as a whole. It views family planning as a couple's human right to control the number and timing of their children. IPPF is financed by voluntary contributions from private citizens and foundations and by assistance from governments and the UNFPA. In 1975, 93 national family planning associations received grants from IPPF to carry out a wide range of family planning, population, and related activities.

In response to our questionnaire, IPPF told us:

"IPPF is most anxious to ensure that Associations endeavour to coordinate their activities with governmental programmes where they exist and/or with other voluntary organizations active in family planning. As a matter of fact, the degree of coordination is stated and commented upon whenever an Association programme is evaluated or reviewed. In identifying the relevance of the role of an Association, an assessment is made of the environment in which it is functioning and such an assessment always takes into consideration the degree of involvement of the Government and other organizations. Our objective is therefore through this means to identify wherever possible areas of overlap and in due course to eliminate them."

INTERNATIONAL PLANNED PARENTHOOD  
FEDERATION/WESTERN HEMISPHERE

This IPPF regional office supports and monitors activities of over 30 family planning associations in Latin America and the Caribbean. In responding to our questionnaire, officials wrote that, in principle, they have maintained the coordination of population-related activities in Costa Rica and Jamaica at an "informal or non-systematized level." They said "frequent informal interagency staff meetings and report sharing seem to be the most conducive actions to keep pertinent organization members abreast of ongoing and projected projects or activities in this field."

Officials said if the need for systemization of coordination of population assistance were indicated, they would suggest:

- exchange of agencies' listings of projects, etc;
- in-country meetings of all agencies involved; and
- interagency meetings of the international donor agencies.

PATHFINDER FUND

Pathfinder is a public, nonprofit foundation which promotes and supports population and family planning activities in developing countries. Since it was formally established in 1957, it has provided population assistance and been

active in over 80 countries, including Bangladesh, Jamaica, Nigeria, and Thailand. A Pathfinder official wrote us:

"We have over the years done what we could to promote improved, more comprehensive communication and coordination between population agencies and programs in individual countries. Given the present size of the donor community and the proliferation of program assistance, we feel a new and concerted effort to achieve true coordination is very much in order, to avoid costly duplication and achieve the maximum impact of limited resources."

The Pathfinder official continued:

"The Pathfinder Fund believes strongly that improved and expanded communication between population agencies working in any given country can result in better coordination of their efforts. Under optimum circumstances this would avoid unnecessary and often damaging duplication of effort, enable each agency to benefit from findings and results of other agencies' projects, and insure the trust and confidence of the ministries and other government entities with which all agencies must work in a particular country. When coordination is lacking, agencies may find their hosts annoyed and confused as to just what each of them is in a position to do, and thus mistrustful of their objectives. It can also result, intentionally or otherwise, in two or more agencies being asked to fund or otherwise assist with identical activities."

He said that at the very least, in those countries where there are several international agencies, forming informal associations of agency representatives to serve as a forum for exchanging ideas and information on program plans should be encouraged. While having no decisionmaking authority, such associations help donors keep up to date on each other's activities and project an image of an honest, businesslike attempt to provide effective assistance. The Pathfinder official thought the most likely agency to initiate the formation of any such informal associations would be UNDP or UNFPA because they are the most widely known, international organizations.

The Pathfinder respondent stressed that it is also essential to maintain regular communication between the

headquarters of population agencies in the United States and elsewhere. His foundation attempts to do this

"through correspondence, telephone communication, and occasional exchanges of visits with headquarters offices of those agencies whose interests most nearly parallel our own.  
\* \* \* This sort of communication should be encouraged in every possible way."

Pathfinder believes that in countries where international agency activity is developing or expanding significantly, a meeting should be held at which all population programming in that country could be discussed. Such meetings, he said,

"have in the past been hosted in the United States by AID, Pathfinder and others, and provide useful opportunities for all to know of each others capabilities and intentions in the planning phase of a particular country effort."

#### POPULATION COUNCIL

The Population Council, established in 1952, is a private U.S. organization with extensive activities in three areas--international programs, policy studies, and biomedical research. Only a portion of its funds are received from AID. Officials in the headquarters office of the international programs division told us the Council is involved in many coordination efforts, on both a formal and informal basis. They thought informal coordination was often best. They work very closely with certain donors and also entered into joint relationships. There is, for example, a joint project with Ford Foundation and UNFPA in Thailand. Their reasons for coordination are numerous--often one donor cannot fund a whole project or get enough money quickly, groups can learn from each other, and even if money is available, key staff are often scarce.

Officials told us a major reason for the lack of coordination is the lack of an agreed definition of a "population problem." The definition varies depending on the country involved. For example, if UNFPA had as its goal reducing fertility, a large portion of the U.N. countries would not contribute. Each has a different mandate and mission. AID, for example, they said, places emphasis on distributing contraceptives. Because of these differing mandates, Council officials thought it unlikely that the organizations could agree on what each other should do. When you get closer to

the project level, there is a greater chance of agreement but not much on the upper administrative levels.

A portion of the Council's written response to our questionnaire follows.

"The Population Council does not have a formal organizational position on the nature and extent of coordination that is desirable in the population field. In principle we support the view that coordination among donor and technical assistance agencies is highly desirable in order to maximize the effective use of limited personnel, financial, and other resources on both the donor and recipient ends. We are quite aware of numerous cases where a small number of qualified professionals in developing countries have received numerous offers of assistance from different donor agencies, each with its own program goals. Such cases often put undue pressure on the small number of qualified professionals in the population field in developing countries and may, in the long run, be counterproductive.

"At the same time, we recognize that population problems are complex and that different viewpoints and programs to address those problems can be mutually reinforcing. 'Population' is not a single problem that can be 'solved' by a single remedy. Although most of the organizations active in the population field have at least some overlapping interests and perspectives, they also differ in numerous important ways. A perusal of the Population Council's program guidelines, for example; will illustrate that we feel we have certain comparative advantages over other agencies in dealing with some aspects of population problems, but that we feel other agencies are better able to take some projects than we are (for example, large-scale service delivery for contraceptive supply projects). As a nongovernmental organization, the Population Council is also sometimes able to be more flexible than governmental or inter-governmental organizations in addressing certain aspects of population issues. In such cases our role might be described as complementary to those of governmental or inter-governmental organizations.

"Just as USAID is ultimately responsible to the U.S. Congress, UNFPA to the Governing Board of the United Nations Development Program, the Population Council, IDRC, and the Ford and Rockefeller Foundations are each responsible to their respective Boards of Trustees. While we support general desirability of improved coordination among donor and technical assistance agencies in the provision of population assistance, we do not believe that a formal coordination mechanism either within countries or at the international level is necessarily the most desirable state of affairs. There should be more communication among these agencies and with officials of the countries in which they work, but we strongly believe there is value in diversity in approach to dealing with population issues and that it is in the interest of the host countries themselves to be able to select from among a variety of types of assistance offered."

#### POPULATION SERVICES INTERNATIONAL (PSI)

The primary objective of PSI, a nonprofit voluntary agency established in 1970, is described as finding new ways of bringing birth control information and services to people not receiving them, with the ultimate goal of improving human well-being by reducing unwanted pregnancies and population growth. It has assisted programs in several countries including Bangladesh, and its response to our questionnaire was keyed to activities in that country.

PSI said that its management personnel in Bangladesh closely coordinate their work with host government and other donor organization officials. Information concerning programs is shared on an informal basis, and there tends to be a very high degree of communication, particularly at the social level among foreign representatives. There are also coordinating councils. The PSI official commented that his

" \* \* \* impression from a considerable amount of first hand experience is that the information shared among organizations in the population field in Bangladesh is perhaps greater than in any other type of internationally sponsored development program."

He then added:

"I feel very strongly that an excessive concern with 'coordination' can act to the detriment of innovative, pioneering programs which, in many cases, can be more effective if they are not forced to conform to a particular role in a larger scale program. Indeed, our organization has initiated valuable demonstration projects in several countries which were not coordinated in any way either with government programs (particularly in countries where no government programs existed) or other private projects. The worst that can happen in these circumstances is that the family planning client is offered a choice--which can only further the ultimate goal of any large scale program. The best and more frequent occurrence, in our view, is that diverse efforts by different parties will produce new answers and new ideas in pursuit of the resolution of one of the most highly complex problems we face in international development. In sum, I reiterate my view that, not only is the present state of coordination of population-related efforts in Bangladesh more than adequate, but that too much coordination can and has actually stifled program initiatives, particularly when experimental demonstration projects are forced to conform to some previous and often inapplicable categorization. Those program managers charged with the coordination of projects carried out by various groups would do well to support seemingly uncoordinated efforts which produce innovations that can later be integrated into the national program."

#### WORLD EDUCATION

This private nonprofit organization focuses on out-of-school, nonformal education for adults. It began its program of linking population and family planning concepts and information with adult literacy programs in 1969. It has activities in two of the six countries visited in this review--Bangladesh and Thailand. An official informed us that:

"World Education favors the integration of population-related activities, when appropriate and feasible, into nonformal education programs which have other facets as well; e.g., health, nutrition, agriculture, literacy. The coordination of such

population-related activities leads to better utilization of resources and more effective programs. Any efforts in this regard are viewed as positive steps by World Education, both in terms of coordination' within Thailand [and Bangladesh] as well as on the international level.

"Principal constraints to coordination include physical distances, and the general tendency of organizations to pursue their own programs without outside help as a matter of professional pride. In addition, there are problems of coordination among organizations that have different bases of power and authority and different sources of personal and financial support."

#### WORLD NEIGHBORS

This is a private, nonsectarian organization which seeks to promote self-reliance in rural areas of developing countries. It finds local groups with which to develop projects or to support. It supports family planning activities as part of its total development program. An official told us that, of the six countries we visited, it is active only in Nigeria. There, it works with the Methodist Church, helping run three clinics. He said coordination of efforts in assistance in health, agriculture, etc., as well as population, is important for maximum effectiveness. He also said this is an area that could be improved in many countries. Further, he noted that there should be good coordination between all health and family planning entities working in an area, particularly at the local level. Current problems with all entities in Nigeria are shortages of (1) qualified personnel and (2) supplies for remote areas.

CHAPTER 5  
SYSTEMS, ARRANGEMENTS, AND OTHER  
COORDINATION EFFORTS OF THE WORLD  
BANK, UNFPA, AND AID

The World Bank and UNFPA have developed systems and arrangements permitting groups of donors and participants to cooperate in major population assistance projects. Also, AID is engaged in developing multiyear population strategies for population activities in recipient countries, a process which requires consultation with the governments of those countries and with other entities providing assistance in those countries. Moreover, top officials of AID, the World Bank, and UNFPA have made specific efforts to meet for the purpose of improving coordination of their respective projects and programs.

WORLD BANK CO-FINANCING ARRANGEMENTS

The World Bank has brought to the population sector its techniques of cooperative financing which have been developed through experience with these arrangements in other sectors. In those population projects where it has participated with other agencies in preparation and finance, the Bank has played the central or coordinating role in the donor group. Bank officials told us that this is partly a result of its central role in the whole field of development finance and the fact that recipient governments normally look to it to assume that role. They also said the Bank process of sector analysis and project appraisal is in general welcomed, both by recipient governments and by other donors, because of its established credibility for prudent commitment of funds. The Bank, like most other agencies, takes the position that the primary responsibility for coordinating external aid lies with the government of the country for which it is intended, but officials told us, the Bank will assist in that effort when requested to do so by a government.

The Bank cites three types of relationships involved in its collaborative financing of population projects-- joint, parallel, and separate financing--and the term "co-financing" is used by the Bank to describe these arrangements.

In joint financing, there is a common list of goods and services to be financed, and financing of all or

certain items is shared by the donors in agreed proportions. One donor takes primary responsibility for administering and coordinating the project on behalf of the others; this donor prepares the project, supervises its execution, and disburses the funds. This reduces the burden on the host government, but narrows the role of other donors to one of broad review and approval. The Bank noted that agencies, particularly if they have their own population staff, may find the joint financing relationship limiting. For example, the World Bank was the executing agent for a joint project with UNFPA in Indonesia, and UNFPA found that the relationship did not permit it to fulfill its own objectives. It decided not to accept such a role in future co-financed projects. Co-financed projects with other donors have worked successfully. For example, the Bank cites a project in India financed jointly with the Swedish assistance agency, that proved mutually satisfactory.

A looser form of co-financing is parallel financing, of which there are several variations. Each donor finances a separate component of the project or a separate category of goods and services, which it administers according to its own rules for bilateral assistance. In many cases, the donors agree to consult and take joint action if necessary. The World Bank said this type of co-financing lets donors fund projects that correspond to their specific interests and criteria, use their own procurement regulations, and maintain a direct relationship with the recipient government while still gaining benefits from association with other donors. On the other hand, the recipient government must cope with different procurement and disbursement regulations and receive visits from each donor. It does, however, allow the host government greater freedom of action and bargaining power when dealing with donors separately.

The World Bank described the loosest form of parallel co-financing as simply exchanging information. Each donor plans separately with the recipient government. The Bank said this arrangement worked "reasonably well" in the first Kenya population project, probably because Kenya prepared a master plan, with the Bank's advice, that was used to develop the various donor activities. When the donors began providing conflicting advice, however, Kenya asked the Bank and UNDP to organize a joint mission of donor representatives to resolve these issues.

The World Bank said the type of co-financing used depends on the wishes of the donors, the recipient government,

and the situation in the country. Joint financing is more likely to work in a country where donors are considering population assistance for the first time than if several donors have had such projects for some time. Also, donors often have different objectives; different methods for achieving them; and different rules regarding procurement, accounting, evaluation, etc. Some must tie their aid to domestic procurement, for example.

The late 1977 World Bank review of 6 of its 10 co-financed projects points up the following lessons learned.

- As a result of the Indonesia experience in which the Bank was executing agent, the Bank learned that greater local participation and better communication with other donors was needed, and UNFPA decided not to take such a subordinate role in future arrangements.
- In Malaysia, therefore, the Bank and UNFPA undertook parallel financing. However, this separation, plus the lack of a firm Malaysian commitment, weakened the program's impact.
- An India project was jointly financed by the Bank and Sweden and was judged a success.
- In Kenya, each of six partners maintained complete control over the component it was financing, and there was no formal linkage among donors. There was a master plan, however, and the Bank was heavily involved in the overall program and in evaluation and aid coordination. Problems for the Bank in coordinating so many donors and providing for followup were noted.
- The Bangladesh project also brought together a number of donors, but linked them more formally. Of the six bilateral donors, 1/ one has a joint financing arrangement with the Bank, one a joint financing partnership with Bangladesh, and four have provided funds against specific items. Three of the latter groups have asked the Bank to disburse funds for and supervise their

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1/Australia, Canada, Norway, Sweden, West Germany, and United Kingdom.

projects. The Bank said the Bangladesh project revealed the need to work with other donors not involved in the co-financing scheme--particularly AID and UNFPA--as well as the advantages and disadvantages of a joint evaluation mission.

UNFPA-"MULTI-BI" FUNDING AND  
NEEDS ASSESSMENT PROGRAM

UNFPA has created an arrangement whereby other donors may join it in funding projects. The arrangement, multi-bi, is seen primarily as one that can help bridge the gap between resources and needs by combining multilateral and bilateral funds to support worthy population projects. In January 1976, UNFPA presented the principles and procedures for multi-bi funding to the Governing Council, which subsequently gave its approval. As of January 1978, four bilateral donors had pledged or committed \$6.85 million for projects in at least nine countries.

As stated by UNFPA, the objectives of multi-bi funding include

- augmenting the resources of UNFPA,
- helping developing countries formulate projects and programs,
- providing a channel for additional coordinated aid,
- relieving recipient governments of much of the burden of negotiating and administering separate aid offers,
- improving integration of population and other assistance, and
- helping achieve maximum effectiveness of collective aid inputs for population-related matters.

While the fundamental purpose of multi-bi is to increase the overall aid flow, the advantages of having a number of donor agencies working together to help developing countries are evident.

During 1976, UNFPA held exploratory talks with 13 donor governments, 4 developing countries, and 7 international organizations concerning the multi-bi concept. The donor governments <sup>1/</sup> UNFPA reported, all supported the concept and had all supported the World Population Plan of Action,

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<sup>1/</sup>Australia, Belgium, Canada, Denmark, Germany, Finland, Japan, Netherlands, New Zealand, Norway, Sweden, United Kingdom, and United States.

which called for increased population assistance. Their commitments of funds for multi-bi projects, however, were limited by the need for direct links with the assisted countries provided by bilateral aid. On the other hand, UNFPA commented that the allocation of bilateral funds is governed largely by priorities set by recipient governments, coupled with the availability of viable projects. UNFPA said it can help developing countries establish such projects. By increasing absorptive capacity, UNFPA can thus increase the magnitude of population assistance. The benefits of multi-bi funding in terms of improved coordination were also noted.

The international organizations contacted 1/ were operating their own multilateral or co-financing operations, and some planned to extend these activities. None consulted by UNFPA planned to curtail these activities.

The developing countries contacted 2/ had yet to be fully informed about UNFPA multi-bi.

UNFPA has a series of restricting principles governing its multi-bi projects. As summarized, they include:

- Multi-bi will be used only at the request of the recipient government and with the agreement of the donor government(s) and U.N. organizations concerned.
- Multi-bi may be used only for population programs and projects as defined by the UNFPA mandate or for population components of other development activities.
- Bilateral support of UNFPA multilateral funds or other U.N. organizations assistance should not be reduced because of participation in multi-bi projects.
- UNFPA will be responsible for organizing and administering multi-bi in accordance with its own mandate and under the direction of the Governing Council.

There were two multi-bi projects in 1976--\$2 million in bilateral assistance from Sweden for a sex education project in Mexico and \$300,000 in bilateral assistance from the United Kingdom for a project in the Solomon Islands.

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1/ILO, FAO, UNESCO, WHO, World Bank, UNICEF, and UNDP.

2/Bangladesh, India, Pakistan, and Turkey.

Since then West Germany has provided \$733,000 to a project in Jamaica and the United Kingdom has pledged a total of \$1.4 million to projects in five more countries. The largest bilateral participant, however, has been Norway, which agreed to provide \$2.4 million in 1977 and 1978 to be used in support of the population needs assessment program and programs in priority countries. A number of other countries, including Australia, Denmark, and New Zealand, have expressed interest in participating in multi-bi projects.

UNFPA has established a population needs assessment program to determine the types of basic, or minimum, population activities required to meet the needs of developing countries. Establishing minimum population programs will constitute a primary objective of UNFPA, and assistance to projects within such programs will be given priority. The main emphasis is to be on activities directly related to and required for two main types of assistance--formulation of population policies (promotion of awareness of population factors, basic demographic research and trends assessment) and implementation of policies (programs to space birth, reduce fertility, reduce sterility, etc.). Building self-reliance and strengthening local managerial and program capabilities are stressed.

During the last half of 1977, UNFPA with host country approval and cooperation from other U.N. organizations, began needs assessment programs in 11 countries: Afghanistan, Bangladesh, Honduras, Laos, Liberia, Mali, Paraguay, Democratic Yemen, Philippines, Senegal, and Vietnam. During 1978, 18 more countries will receive needs assessment missions. These include Ghana, India, Pakistan, Tanzania, Thailand, and Upper Volta.

#### AID MULTIYEAR STRATEGIES

In response to recommendations of the Office of Management and Budget and the National Security Council Ad Hoc Group on Population Policy, a more formalized system was developed by AID and the State Department for putting all U.S. population assistance, both centrally funded and bilateral programs, in the context of an overall strategy for population activities in recipient countries.

This formal system was begun in 1977; strategies were essentially completed by August 1978 for Pakistan, El Salvador, Morocco, and Bangladesh; and the strategy for Egypt was being completed.

The processes for developing each multiyear strategy call for relating U.S. programs to the national policies and programs of the recipient country and directing them toward specific goals established by the recipient country and the AID mission in that country. Relevant data is collected by the AID mission for consideration by the Ambassador and the country team, which identifies the issues and prepares the first draft of the strategy. After review by interested AID and State Department offices in Washington, a small task force travels to the country to examine the situation and to assist the country team in completing a revision, which is then resubmitted to Washington for review and approval by a joint State/AID group.

In developing each strategy, the record of U.S. assistance is examined in the context of the recipient country's program performance. Other development actions and assistance programs which can have an impact on fertility must also be considered. A very important requirement is that the strategy represent, where possible, a consensus by the donors and the recipient government of the contribution which external assistance can make to the country's programs. This must be based on consultations with the World Bank, UNFPA, and other participants--both public and private.

The strategy paper presents an evaluation of the objectives and performance of the present recipient country and external assistance efforts. Reasonable goals and objectives are postulated and the relevance of current programs is assessed. Long-term issues, strength of government commitment and capacity, and the relationship and relevance of AID activities to the national programs are examined. The resultant statement addresses new directions for the recipient government programs and for United States and other donor participation in that program.

#### DONOR EXECUTIVE-LEVEL COORDINATION EFFORTS

The need for the exchange of information and ideas at the highest levels of donor agencies is apparent. During 1977 several meetings of high-level officials of the principal population donor agencies were held to improve coordination. Included were:

- Informal discussions between the President of the World Bank, the Executive Vice President of Ford Foundation, the State Department Coordinator for Population Affairs, and the AID Assistant Administrator for Development Support, at the Bellagio IV Conference in Denmark in June 1977 and in Washington during the summer of 1977.

- An informal meeting in Washington between the President of the World Bank, the Executive Director of UNFPA, and the AID Assistant Administrator for Development Support in September 1977 to discuss the population program in Bangladesh.
- A meeting of population donor agencies held in London in December 1977 to discuss the objectives, modalities, and constraints of those agencies in their work in the population sector. This meeting was attended by high-level officials of the World Bank (the host organization), AID, the Department of State, UNFPA, and others. The principal AID representative at the meeting told us that he considered the meeting to be a useful step to broaden the spirit of collaboration among the donors, including Australia, Canada, Denmark, Germany, Japan, Norway, Sweden, the United Kingdom, IPPF, the Population Council, and with an official from Bangladesh.
- A meeting in August 1978 of AID, UNFPA, World Bank, and Department of State officials to discuss the population program in Bangladesh.

#### JOINT EFFORTS OF MAJOR DONORS IN BANGLADESH

As discussed above, during 1977 AID developed and began to implement a more formal system for putting U.S. population assistance in the context of an overall strategy for population activities in recipient countries. The strategy exercise for Bangladesh was scheduled for the fall of 1977, the time of the in-country reviews by the World Bank and UNFPA. AID wanted to consider its population strategy for the next 7 years; the World Bank wanted to review progress on its first project and identify possible components for a second one; 1/ and UNFPA wanted to consider additional funding areas because its first grant was expected to be largely expended by 1978. Large sums are involved. The World Bank is considering a \$125 million co-financed project and UNFPA \$50 million in multi-bi support. AID is planning to provide \$12.6 million in fiscal year 1979 alone.

When the donors learned of each other's plans, they arranged to send missions to Bangladesh at about the same

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1/The six nations participating in the World Bank-led, co-financed project were represented on the World Bank review mission.

time to increase coordination and to afford a more comprehensive approach to the country's population program. Also, the Bangladesh Government requested that the donors conduct their reviews jointly. Earlier, at meetings of high-level AID, World Bank, UNFPA, and Ford Foundation officials, concern was expressed about the need for greater coordination of assistance.

The coordination efforts that have been made to date by AID and the other major donors relative to Bangladesh are a good start; however, we believe there has been a loss of momentum and there is a need to elevate the negotiations. Although important problems that need to be resolved have been identified and there is basic agreement concerning that need, these major donors have not yet reached agreement on a common or unified approach for carrying out negotiations with the Government of Bangladesh on required actions. Moreover, there is apparently much confusion concerning the significance and implications of aide-memoires prepared by UNFPA and the World Bank summarizing their future assistance plans. Also, while the coordination efforts have been beneficial to all participants, there have been administrative difficulties and team members have not been in complete agreement concerning program philosophies and methods.

Since the in-country visits, AID, World Bank, and UNFPA officials have met on more than one occasion to discuss program plans for the country. A March 21, 1978, meeting was held for the purpose of reaching an understanding of respective organizational views on family planning assistance to help guide negotiations with the Government of Bangladesh.

Despite the meetings, the donors evidently did not fully understand each other's plans. In April and May the World Bank and UNFPA sent separate missions to Bangladesh to discuss with the Government their respective recommendations and plans for future aid. Both prepared aide-memoires summarizing their plans. However, officials at the headquarters of the three donors were not fully aware of the others' plans. Subsequently, there was a great deal of confusion over the significance of these aide-memoires and the extent to which they reduced the possibility of an effective approach to the Government for reaching agreement on actions needed to improve the population program.

In July the Assistant Administrator of the AID Development Support Bureau visited Bangladesh. In August he participated in a meeting with the State Department Coordinator for Population Affairs, the Director of the World Bank Population Projects Department, and the Assistant Executive Director,

UNFPA, to discuss Bangladesh. AID and the World Bank reportedly agreed on strategy and program content, but UNFPA took exception to certain elements. Although officials of all three donors had conflicting views on the significance of the aide-memoires, that matter was not discussed.

We believe it is essential for the donors to focus collectively on the several matters that are impeding the program in Bangladesh; at this critical time they must actively, and as a unified group, negotiate with the Government of Bangladesh to reach agreement on actions required by the Government and obtain assurances that these actions will be taken in a timely and effective manner. For such negotiations to be successful, they may have to be carried out at the ministerial level and with appropriate representation by the major donors.

## CHAPTER 6

### SALIENT FEATURES OF COORDINATION SYSTEMS

#### OBSERVED IN COUNTRIES VISITED BY GAO

In most of the countries visited, we found a high level of interaction and dialog among donor and participant representatives. This communication occurred mostly on an informal basis although some formal meetings or conferences were initiated at headquarters level.

While we feel it is important and useful to have an exchange of information among donors and participants, that exchange alone cannot be construed as an effective coordination process. The exchange of information needs to be combined with other essential features if a system of coordination is to be an active and vital force for program success. Such a system, in our view, should also include a long-range plan or strategy, effective coordinating leadership, and an appropriate division of program responsibility among participants. These factors, and the extent to which we found them in countries we visited, are discussed in the sections that follow.

#### LONG-RANGE PLAN OR STRATEGY

We believe it is essential that the activities of all participants be focused on the attainment of agreed-upon objectives and on the means for realizing those objectives. Thus, a design or plan for solving the assisted country's population problem must be developed and agreed upon if the donor and participant resources are to be applied in the most beneficial and effective manner.

The subject of coordinating population activities was addressed in a December 1977 meeting of population donors in London, hosted by the World Bank. (See ch. 5.) One official presented a sequence of six categories of donor interest and concern, stating that if these were in fact common concerns of all donors, they could well be a basis on which coordination could be built.

1. Examination of the demographic situation and the population policies, goals, and strategies of the country concerned.
2. Assessment of the program proposed to carry out the policies and strategies to meet the goals.

3. Determination of the resource requirements in physical and financial terms.
4. Identification of the sources of funds, both internal and external.
5. Prioritizing program components to most effectively utilize available resources.
6. Observation and monitoring of program performance.

A World Bank official in Thailand agrees that these are characteristics of a well-coordinated population program. We consider them criteria for a comprehensive national population plan and believe they are useful in examining the situation in the countries we visited.

### Asian countries

#### Bangladesh

The Bangladesh Government first established a demographic goal in its first 5-year plan (1973-78). It projected a population of 189 million persons by the year 2000. The goal implied a lowering of the population growth rate from 3.0 to 2.8 percent by 1978 and the achievement of replacement-level fertility (a net reproduction rate of one) in 25 to 30 years. Between 1973 and 1977, expenditures for population activities totaled almost \$63 million. The United States contributed \$20 million, other donors \$15 million, and the Bangladesh Government \$27 million.

In 1976, however, the Government decided that the economic development projected on the basis of known available resources could not maintain this projected population at a minimum acceptable standard of living. Its draft plan, consisting of 2-year and 5-year segments (1978-79 and 1980-85), call for replacement-level fertility to be reached in 1985, an unrealistic target according to donor officials. The cost of activities listed in the plan is estimated to total about \$900 million.

The present population control and family planning program approach, the first budget of which was approved in January 1976, involves:

- Provision and training of managers and service workers.

- Service delivery and training facilities.
- Supply management and logistics.
- Commodities.
- Information, education, and communication.
- Research and evaluation.

The program is intended to be part of an integrated development scheme involving several ministries and contains not only family planning services components but also components addressing other factors which influence fertility, such as improving the status of women and increasing rural development efforts (road-building, electrification, etc.).

Some of the major actions contemplated in the government's draft plan for the next 7 years (1978-80 and 1980-85) follow: (1) hiring 13,500 middle-aged and older women as part-time aids to the Family Welfare Visitors, (2) establishing some 4,000 Family Welfare Centers, (3) creating training centers throughout the country, (4) expanding the role of voluntary sterilization, and (5) increasing the number of urban clinics.

The draft plan has been characterized as a "shopping list" put together in a short period by a few people in the Ministry of Health's Population Control and Family Planning Division without reference to how it is to be implemented and without attempting to fully integrate it with other development schemes. One main criticism raised has been that it would be catastrophic if other Government activities responsible, for example, for education, food production, etc., were to base their projected needs on the assumption that the unrealistic plan goals will be attained. Donors appear to feel, however, that while the plan has its problems, it is one they can relate to and one that, with modifications, can serve as a focal point for going forward with their assistance efforts.

We analyzed the Bangladesh program in terms of the criteria for a comprehensive population plan. It appears that all items of the criteria except one are being addressed by the Bangladesh system.

That item, prioritizing program areas, did not appear to have been addressed by the system when we did our field work in country. The October 1977 evaluation missions addressed this problem in the preliminary recommendations.

The Bangladesh Government's draft population plan, for instance, sets forth numerous objectives and strategies but does not present a systematic way in which they are to be achieved.

### Thailand

World Bank documents state that between 1960 and 1970, Thailand's annual growth rate was approximately 3.0 percent--the third highest in Asia and one of the highest in the world.

During fiscal years 1968 through 1970, AID provided training and technical and commodity assistance to support a pilot program offering family planning services through about 330 selected municipal and rural health clinics. In March 1970 Thailand announced voluntary family planning as a national policy and authorized the Ministry of Public Health to make family planning services available through all of its 4,500 rural clinics. The Ministry of Interior, which administers health clinics in Thailand's urban areas, was also authorized to provide services at all of its clinics. The Government created the National Family Planning Program (NFPP) within the Ministry of Public Health to coordinate the program and included family planning as a "development effort" in its third economic and social development 5-year plan (1972-76).

Thailand's third 5-year plan established a goal of reducing the country's annual growth rate to 2.5 percent by 1976. A December 1977 evaluation stated that the target had been achieved. Further, according to an appraisal issued in January 1978 by the World Bank at the end of the third 5-year plan, over 30 percent of the women in the reproductive age group of 15 to 49 in Thailand were practicing some form of contraception--one of the highest rates in the developing world.

The fourth 5-year plan (1977-81) proposes a major national development objective of reducing the population growth rate, improving manpower quality and increasing the level of employment. The Government plans to reduce the annual rate of population growth to 2.1 percent by 1981, by

- extending and improving family planning services;
- expanding and improving information, education, and communication activities;

- training public health personnel; and
- expanding evaluation and research activities.

The Government of Thailand appears to have addressed all elements of the criteria for a comprehensive population plan (see p. 51), although the AID-supported 1977 evaluation report shows that improvements in coordination are needed. Following are some specific references to coordination deficiencies.

- Because of insufficient coordination among the numerous donor agencies, some efforts have overlapped and duplicated each other.
- A research coordinating subcommittee of the National Family Planning Committee (NFPC) was dissolved. Without its guidance, duplication and a lack of coordination of academic, private, and Government research have resulted, and the limited research funds have been ineffectively utilized.
- The "front loading" of funds by AID has seriously overloaded the capacity of the national training program--and there is evidence of a lack of coordination between donor agencies and NFPC priorities.
- Some private organizations are not reporting their achievements to local Government officials. The report recommended that, with respect to all non-Ministry of Public Health family planning programs, the national family planning program should attempt to achieve closer cooperation in program planning and implementation through coordination of all organizations delivering services in Thailand.

AID mission officials told us that while the 1977 evaluation report was perhaps too critical of coordination, it was good on the whole. Major findings and recommendations were discussed in a July 1977 meeting and Thai officials present were pleased with the work. Coordination was not discussed as a major issue at the meeting. The final report, which was published in December 1977, was to be formally considered by Thailand in April 1978. AID mission officials have stated that some recommendations have already been acted upon by the Thai Government.

The 1977 evaluation report also points out that there has not been and does not now exist an operational plan

to carry out the overall population objectives of the third and fourth national economic and social development plans. As a result, guidelines are inadequate to judge what mix of activities is necessary to meet desired objectives. In the past, according to the report, this has led to an overextension of the Government's training department, neglect of needed areas of operations research, and a haphazard method of allocating targets and resources among provinces.

The 1977 evaluation report's comments on problems associated with AID's "front loading" of funds to fiscal years 1976 and 1977, we believe, illustrate how inadequately coordinated changes in plans can reduce efficiency.

In 1975 the AID mission consulted with Thailand to develop a 6-year AID population project which would operate from 1976 to 1981, complementing and ending concurrently with the 5-year Thai economic and social development plan for 1977-81. AID projected expenditures of about \$8.4 million for its project.

An AID mission official told us that after developing the project, AID decided to phase out its grant assistance to Thailand by fiscal 1978 and transferred \$2.3 million in funds programmed for fiscal years 1979-81 to fiscal years 1976 and 1978. Of this total amount, \$995,000 was apparently transferred to fiscal 1976 and was designated primarily for a voluntary sterilization program not included in the original project; about \$150,000 was apparently transferred to fiscal year 1978 and was designated for training activities.

AID's fiscal year 1979 budget submission stated that fund transfers made it difficult to ensure full Thai participation and cooperation in using the funds. However, both AID mission and Thai officials told us that their officials worked together so that the money could be effectively used. A Thai official told us that the fund transfers caused his Government to undertake planning activities it would otherwise not have had to perform but that the family planning program in Thailand was flexible enough to absorb the funds without major disruption.

A Thai official told us that his country's training program suffered initially from the influx of funds despite this advance planning because staffing of additional training positions financed was more difficult than envisioned. The positions created were only temporary, in most cases, and there was little motivation for new trainers because their positions might be terminated when AID funding ended.

The Government is not now experiencing problems in obtaining sufficient staff for AID-funded training programs, according to another Thai official. An AID mission official said the only real negative impact, other than the reduction in the quality of training which he said was only an impression and not readily measurable, was that the project was set up in a hurry and the goals were too high, which had a demoralizing effect.

U.N. and AID officials called the U.N. pilot voluntary sterilization project highly successful in that more acceptors than anticipated were found. An AID mission official told us the transferred funds enabled the project to expand its services to rural areas not previously served. The number of reported acceptors has exceeded, and is expected to continue to exceed, expectations in Thailand's national population plan.

Although the foregoing leads us to believe that the fund transfers caused no major disruption of population activities in Thailand, it is also evident that it created conditions which resulted in a loss in efficiency. The American Public Health Association evaluation attributed the overloading of the national training program's capacity to these transfers. The education and training consultant on the evaluation team told us that improved donor communications could have mitigated the effects of this overfunding.

## African countries

### Nigeria

Many African governments do not have explicit policies, plans, and strategies on population growth. Both Nigeria and Tanzania are in this category. Family planning services, when presented as an integral part of maternal and child health care, however, are acceptable to the governments.

Nigeria is one of the most populous countries in Africa, perhaps in the world. A census taken in 1963 showed some 55 million people. A second census was taken in 1972, and the provisional figure was almost 80 million. This census was disputed, however, and withdrawn; subsequently a figure of 72 million was printed. Based on a recent voter-registration drive showing 48 million people over age 18, a Nigerian demographer estimated there are now at least 87 million people and probably close to 104 million. The Government, however, reportedly has no plans to take another census. The sensitivity of the topic apparently does not relate to the total number of Nigerians but to

the distribution; tribal groups are concerned that their numbers not be understated.

Nigeria established a National Population Council in 1975 to advise the Government on national population policy. In announcing the Council, the Federal Commissioner for Economic Development and Reconstruction noted that Nigeria should stimulate the transition from a high to low birth rate instead of leaving it solely to the forces of social and economic development. The current 5-year plan, however, does not include an explicit position on the need to slow population growth.

Although it does not have a plan to slow population growth and meets none of the criteria for a well-coordinated program, Nigeria is planning to provide family planning services as part of its new health program. There was not a detailed plan available that could serve as a basis for donors to plan their own assistance projects at the time of our field work. Family planning services have been funded by various donors and implemented by private organizations, university hospitals, and state ministries of health.

#### Tanzania

Tanzania does not have a policy or plan to slow population growth. The Government, however, is committed to a program of development based on rural villages and, in the health sector, extensive use of paramedical workers. It is reportedly giving top priority to preventive health care in its total health program, and maternal and child health is given highest priority among all preventive services. Family planning is viewed as a vital component of comprehensive maternal and child care. The Ministry of Health has a strategy and plan for this program, and a number of donors--AID, UNICEF, Norway, etc.--are assisting in various aspects.

#### Latin American countries

##### Costa Rica

Concern in Costa Rica over rapidly expanding population developed in the early 1960s when its annual growth rate was almost 4 percent. In 1966 the Costa Rican Demographic Association, to become the national IPPF affiliate, was established to develop an awareness of population problems and encourage public support for family planning programs. Family planning services are now widely available.

In 1967 an Office of Population was established in the Ministry of Health; the next year family planning services were initiated at some clinics and later at rural health posts; and in 1970 the Government's Social Security Institute began providing such services at its clinics and hospitals. The population growth rate declined to 2.3 percent in 1977. Socioeconomic improvements that influence family-size decisions as well as the increasing availability of family planning services are thought responsible.

The Government of Costa Rica, however, has not developed a long-term plan of action or strategy for activities related to population growth and family planning services. Political and religious sensitivities have reportedly impeded a strong and open governmental commitment to family planning. While progress has been made in lowering fertility, data indicates there has been little change since 1973. As the overall program broadens--both in terms of its financial requirements and the number of participants--in the context of growing receptivity and understanding of its objectives, assumption of expanded responsibility by the Government is needed. An AID evaluation noted that a formalized population policy on the part of the Government is needed and that the program "can encounter serious and unexpected obstacles if not protected by a formalized legal commitment to it. Without such protection, small but highly willful groups are able to attack it at vulnerable points."

### Jamaica

Shortly after achieving independence in 1962, the Jamaican Government recognized that the country's social and economic development would be hindered by a rapidly rising population and subsequently initiated family planning services. In a 1974 paper, the Government stated family planning was of the highest priority and set a goal of reducing the birth rate from 42 per 1,000 in 1960 to 25 per 1,000 in 1977-78. (The target date was later revised to 1980.) Family planning was to be integrated into the Ministry of Health's maternal and child health education services. The strategy includes (1) a public system of family planning services, (2) family life and sex education in public school curricula, and (3) commercial distribution of contraceptives.

Although the Government is clearly publicly committed to slowing population growth and does have a plan for achieving this goal, its plan does not establish specific

priorities, nor does it define the roles the various international and private organizations are to play.

### LEADERSHIP

It seems obvious that there must be one entity within the community of donors, participants, and the recipient government that plays the role of "coordinator." Ideally, we believe this function should be the responsibility of an agency of the recipient government. If not, one of the donor or assisting agencies must help the government carry out that role, in some cases even assuming the role itself; the choice should be made by the recipient government. Under most circumstances, one major donor should function as a primary continuing link between the donors and the government in each country. Selection should be informal and country-specific, depending on local conditions and considerations of effectiveness. A UNDP resident representative might propose the UNFPA coordinator for this role, for example.

Under co-financing arrangements the World Bank, as coordinator, acts as the continuing link between participating donors and the government, is responsible for appraisal of performance and for project preparation, handles day-to-day questions concerning implementation, and acts as convener and secretariat for the donor group as a whole. The functions of such a coordinator require considerable technical input and staff time. Also important is the quality and strength of the selectee's relationship with the recipient government and its reputation as a nonpolitical entity. One advantage of co-financing arrangements, according to the World Bank, is that, through a lead organization, the considerable burden imposed on officials in developing countries by the constant stream of experts from donor agencies seeking new projects to fund, supervising projects underway, or evaluating completed projects is minimized. Also, the need to understand and comply with the different procurement, disbursement, and reporting requirements of the agencies is minimized.

UNFPA can play this role in its multi-bi projects. The multilateral agencies are more likely to be acceptable to bilateral donors than one of their own number.

The major donors are not now participating in each other's projects under co-financing-type arrangements. They should, however, seek opportunities through coordination to minimize burdens on the developing country governments.

The organizational structure and leadership in each of the countries we visited as it relates to coordination is described below.

## Asian countries

### Bangladesh

Population activities are carried out by several ministries coordinated by a Central Population Coordination Committee, chaired by the Advisor of the Ministry of Health and Population Control, and composed of the secretaries of all ministries engaged in population activities. However, the Population Control and Family Planning Division of the Ministry of Health and Population Control has primary responsibility for population and family planning programs.

According to AID mission and Bangladesh Government officials, resources needed for the national population program are determined by the various ministries involved in consultation with each other and with donors. In some cases, donor and Bangladesh officials together devise input and funding proposals. In other cases, the ministries develop proposals for which sponsors must be found. All proposals are reviewed by a section of the Ministry of Planning to ensure that they conform with the national program. The External Resources Division of the Ministry of Planning identifies prospective donors and their preferences on the types of projects they fund and is also responsible for obtaining funding for proposed projects for which the proposing ministry has not found a sponsor.

All sponsors of population activities are engaged through formal requests for assistance and resulting formal agreements with Bangladesh, executed through the External Resources Division. In addition, all private, voluntary agencies which wish to have population activities as a major program component must also register their organizations with the Population Control and Family Planning Division. Thus, no organization can properly be involved in population activities in Bangladesh without Government awareness.

Bangladesh monitors activities of donors through required donor progress reports. In January 1978, it strengthened the monitoring procedures by forming a Family Planning Council to meet regularly and deal more effectively with voluntary agencies. The council, chaired by the Secretary of the Population Control and Family Planning Division and composed of representatives of the

Government and private, voluntary organizations, was scheduled to have its first meeting--a 4-day workshop--in February 1978. At that workshop, each of the voluntary agencies was to present papers on its population activities in Bangladesh.

According to an AID mission official, Bangladesh consults with donors on plans, policies, and program operations as necessary in the course of its population activities. For example, it drafted its second 5-year plan for population control in advance of the evaluations by the AID, United Nations, and World Bank fact-finding teams and presented it for their consideration. In developing the draft, it had contacted several donors to obtain views and suggestions.

The Bangladesh population program, which is a responsibility of the Government's Ministry of Health and Population Control, has for some time been suffering from a number of organization and staffing problems. Many family planning clinics are not fully staffed; there is a shortage of doctors in the field, family welfare workers are poorly trained, and supervision is poor. These problems continue without resolution because of differences among high-level officials and personnel of the Ministry Health Division and its Population Control and Family Planning Division. Also, the Government level of commitment, although stronger than in many developing countries, is being questioned.

#### Thailand

The Government of Thailand administers and controls its national population program through the National Family Planning Program Directorate, Ministry of Public Health. The directorate has prime responsibility for developing specific plans for program operation, working with officials of other ministries and donor organizations, and reviewing and approving proposed population activities to ensure that they are in harmony with the national program and are not duplicative.

In addition, the Government's structure includes the National Economic and Social Development Board, which sets population policy, and two cabinet-level organizations with coordination responsibilities--the National Family Planning Committee and the Department of Technical and Economic Cooperation. The Department is responsible for identifying prospective donors and their preferences on the types of projects they fund by grants and is responsible for obtaining grants for proposed projects for which the proposing ministries have not contacted possible donors.

The Department also reviews and must approve all proposed population activities to be financed by grants to ensure that they are in harmony with the national population plan and are not duplicative.

These organizations and their subunits consist of, or are overseen by, various interlocking executive groups composed of Government, donor, and other officials. AID mission officials told us that their participation in the groups helps them learn about ongoing and proposed population activities. They told us that Thai officials consult with donor officials in planning and administering the national population program. For example, they worked together in 1975 to develop a 6-year AID population project that would coincide with Thailand's fourth 5-year plan, both of which conclude in 1981.

The 1977 evaluation report shows that major parts of Thailand's structure for coordination--the National Family Planning Committee and its functional coordinating arm, the National Family Planning Committee Coordination Center--were not effective. According to the report, Committee membership changes every time there is a change in the Government and the members have met infrequently. The Coordination Center has not been fully utilized and had only two meetings in 1976.

The report also points out that negotiations for assistance from non-Government organizations occur directly between donors and a variety of recipient agencies. This, according to the report, works a hardship on the Department of Technical and Economic Cooperation, which is responsible for monitoring such assistance, and leads to duplication. Regular reporting to the Department of Technical and Economic Cooperation by agencies receiving assistance from external non-Government organizations would contribute to better coordination, according to the evaluation report.

We discussed the 1977 evaluation report with the American members of the Thai-American Evaluation Team. They said

--Comments on coordination needs were included in the evaluation report as urged by Thai members of the team concerned with research and commercial sector activities and because of concern by officials of Thailand's Department of Technical and Economic Cooperation that the Department was not being permitted to operate as an effective part of the coordinating structure.

--Although the Government's coordination structure was not working well and systematic coordination among donors was nonexistent, highly effective Thai leadership was producing a well-coordinated program.

--Thai leadership is concerned that better communications among donors might lead to reduced contributions.

## African countries

### Nigeria

In Nigeria, a National Population Council was established in 1975 to advise the Government on national population policy and to secure and coordinate all internal and external (governmental and private) assistance for family planning and other population programs. The Chairman is from the Ministry of Health and the Secretary is from the Ministry of Economic Development and Reconstruction. 1/ Representatives of the Federal and State ministries of health and citizens who have special knowledge of or interest in population are members.

The Government, however, has not announced a policy to slow population growth, and the Council has not yet assumed a strong leadership role in the population field. None of the members work full time on the Council. At the time of our field work in Nigeria in early 1978, the Council had met only three times. Although it hopes to coordinate all assistance to population programs, Council officials were unable to tell us how much assistance was flowing into the country or who was receiving it.

The National Population Bureau in the Cabinet office is responsible for registration, census taking, and related research. It was established in 1976 after the 1973 census and the attendant difficulties noted above. Its present function is to gather statistical data and research. Officials believe the Bureau should coordinate all population activities, but a decree they drafted stating this had not yet been accepted by the Government. They currently have only informal contact with others doing demographic work. The relationship of this Bureau and the National Population Council is not clear.

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1/The Ministry of Economic Development and Reconstruction is supposed to monitor all foreign governmental assistance to Nigeria.

There is also a National University Commission which must approve all externally funded university projects. A commission official told us, however, that it does not maintain records of the projects it approves and does not attempt to coordinate the university projects.

### Tanzania

In Tanzania, the Ministry of Health has responsibility and leadership for projects in the health and family planning area. There is no entity charged with responsibility for the broad population area, reflecting the country's lack of an official policy of slowing population growth.

### Latin American countries

#### Costa Rica

While governmental agencies provide family planning services, the Government has not enunciated a population policy nor assumed an active and visible coordinating role. Leadership and coordination are left to others.

In 1968 the National Population Committee composed of several governmental and private Costa Rican organizations, was formed as a forum for exchanging information. It is an informal coordinating mechanism without legal status, headquarters, or staff. Information is exchanged at periodic meetings, but such international donors as AID are not invited. Its power to approve or disapprove activities is informal and any coordination is done on a voluntary basis. Nevertheless, it is the principal coordinating mechanism.

The IPPF affiliate, the Costa Rican Demographic Association, is a major force in the country's population activities. It functions as the National Population Committee's secretariat and its executive director is the Committee's Chairman. The Association administers UNFPA grants to the national family planning program; acts as purchasing agent for contraceptives used in Government programs; distributes contraceptives supplied by IPPF and AID; and collects, analyzes, and distributes monthly family planning statistics. It is also involved in the production of some training material.

There are strong indications that the population program has matured to a point where it would be better served by a more assertive governmental involvement in directing and coordinating the program's varied activities.

## Jamaica

The Government launched a limited family planning program soon after independence and established a national program as a unit within the Ministry of Health in 1966. A National Family Planning Board was formed in 1968 to provide overall guidance to the population program. Its members are appointed by and are responsible to the Minister of Health. The Board operates as a quasi-governmental agency with responsibility for administering the program, promulgating family planning policy, and coordinating the activities of governmental and private organizations active in the field. The family planning policy statement, issued in 1974 and discussed in the prior section, however, placed responsibility for the program within the Ministry of Health.

The Board continued in existence, but its operational authority and degree of independence have not been precisely defined and its mandate is vague--to "concentrate" on aspects of the program including public information, research, international matters and assistance, and coordination of activities. We were told that the Board has not been active since 1974 because it is not assigned clear objectives and responsibilities. It has not coordinated population activities. The relationship of the Board and the Ministry of Health and their respective roles need to be clarified.

### DIVISION OF PROGRAM RESPONSIBILITY

Although there are no formal agreements as to division of program responsibility among the donors and other participants in the field of population, there is a general impression that each is particularly suited to providing a special type of assistance and that a pattern of specialization exists. For example, the World Bank is called on for loans or credits to finance buildings, equipment, vehicles, etc. AID is often viewed as a source of supply for contraceptives on a grant basis, as are UNFPA and Sweden. Census activities have been traditionally assisted by the United Nations.

This general impression, however, is not entirely correct. The three major donors maintain a broad level of expertise in the population area and support a variety of activities. Nongovernment organizations and other international organizations tend to specialize. The appropriate division of program responsibility and extent of specialization, which we believe are key aspects of the coordination issue, are discussed in chapter 8.

## CHAPTER 7

### INTERACTION AMONG PARTICIPANTS

#### IN POPULATION ACTIVITIES

#### IN COUNTRIES VISITED

This chapter discusses the type and amount of interaction among donors and participants involved in population activities in the six countries we visited. It provides their views on the adequacy of this interaction.

#### ASIAN COUNTRIES

##### Bangladesh

According to many donor officials, interaction among organizations providing population assistance is mostly informal, taking place through telephone conversations, occasional seminars and meetings among two or more organizations, and social occasions. Donor officials in Bangladesh believed this was sufficient for them to become aware of each other's activities and that the amount of coordination was "about right," requiring no major changes.

Some donor officials stated that it was the responsibility of the Bangladesh Government to coordinate population programs. One organization had acted as a coordination agency for voluntary agencies prior to establishment of the Government Family Planning Council. Some said that in the past, there had been problems in coordinating voluntary agencies, but Government registration and monitoring requirements, and the Family Planning Council, appear to have addressed the issue.

Most donor officials commented favorably on the openness and candor of other donor officials, and some said coordination in Bangladesh was the best they had experienced in their careers. They cited several examples of coordination, including:

- In October 1977, AID, the United Nations, and the World Bank arranged for their headquarters teams to visit Bangladesh simultaneously. In previous years, each organization's headquarters team had visited its local office and the offices of the other two organizations to review the programs and to discuss population activities. The joint mission, operational

during the entire month of October, was divided into population factfinding groups on service delivery, administration, and training; research and evaluation; education and information; and construction projects. After the factfinding was completed, a preliminary paper on the population situation in Bangladesh and recommendations for solutions to problems noted was prepared jointly and presented to the Government. The final paper was being prepared at the organizational headquarters of each member at the time of our review.

- Officials of AID, UNFPA, and Bangladesh serve on the Project Council (analogous to a board of directors) of a contraceptive marketing project. The project, sponsored by AID, is operated by Population Services International. Council members freely exchange population-related information, and the cooperative nature of the Council is emphasized in that the United Nations does not provide funds for the project.
- Population Services International recently considered a project to market family planning services. An informal discussion, however, revealed that another organization was considering a similar project, and Population Services International now plans to consult with that organization to determine the most appropriate ways of avoiding duplication and waste.
- AID has directly funded programs, some of which are in Bangladesh. It is AID policy to discuss the feasibility of such programs with AID missions to the countries proposed for inclusion in these projects before initiating them in the countries to determine whether they complement rather than duplicate ongoing programs.
- Each month the World Bank receives a report from program sponsors on assistance for Bangladesh, both formal and informal, and circulates it among donors to help ensure that two or more organizations are not being requested to provide duplicate services.
- The Bangladesh Family Planning Association, the IPPF affiliate, now provides population assistance to areas not served by other donors. In 1975 it organized a meeting of population organizations in

Bangladesh to learn what they were doing and how it could best complement these activities.

--Similarly, one of the first acts of the Ford Foundation Population Program Officer, who arrived in Bangladesh in the latter part of 1977, was to visit various population organizations to meet officials and learn of their programs.

--The World Bank has organized a \$40 million project for Bangladesh population activities through a consortium with the governments of Australia, Canada, Germany, Norway, Sweden, and the United Kingdom.

### Thailand

According to field representatives, coordination among donors in Thailand is mostly informal. As in Bangladesh, coordination was taking place through telephone conversations, occasional seminars, meetings of two or more organizations, and social occasions. Respondents to our questionnaire indicated that coordination in Thailand was adequate to prevent the duplication of population programs.

An AID mission official told us there was no established means for coordination with organizations not funded by AID. Such organizations include those which do not have in-country offices or representatives and the private voluntary agencies. However, the AID mission gathers information on these organizations through data supplied by Thai population officials and believes the proposed "International Donors Coordinating Committee for Population Activities in Thailand" will assist in its coordination with these entities.

Many respondents indicated they would prefer additional informal multidonor meetings. The officials furnished several examples of coordination, including:

--Several meetings have been held between the staffs of UNFPA and the AID mission to discuss present and future programs. Officials of AID, other donors, and Thailand participate in the U.N. tripartite reviews of its programs in Thailand.

--The AID mission routinely shares data on its population program with U.N. organizations in Thailand.

--The World Bank worked closely with AID and other donors to assure its recently developed population project did not overlap or conflict with other population activities in Thailand.

AID requires that its mission in Thailand be aware of efforts of other programs before initiating its own. There is a single, multifaceted bilateral population project which was developed in August 1975 to help Thailand attain its planned 2.1-percent annual population growth rate. We reviewed the population project paper and found that the mission was aware of the efforts of other organizations in the project's development. For example, the population project paper discussed the goals of Thailand's fourth 5-year plan (1977-81), as well as the resources available from and objectives of other population donors.

Our questionnaire called for information that would show whether coordination practices in Thailand resulted in awareness by donors of other donors' population activities; whether there was any substantial unproductive overlap of program activities; and whether population activities addressed determinants of fertility in addition to family planning services, as stated in the Thai fourth 5-year population plan.

The responses that we received and our interviews with officials of 12 organizations and the Thai Government revealed that:

- Although some respondents did not indicate a comprehensive knowledge of all organizations involved in population activities in Thailand, most were generally aware of the major organizations involved in their particular area of activity.
- There appeared to be no substantial unproductive overlap of activities. Apparent overlap identified from the analysis was resolved to our satisfaction through discussions with AID mission and other donor officials.
- All major areas of the Thailand national population program, dealing with both family planning and many of the factors affecting fertility, were addressed by donor activities.

As discussed earlier, we also noted a 1977 AID-supported evaluation of the national family planning program which was critical of coordination processes in Thailand.

## AFRICAN COUNTRIES

### Nigeria

Population activities of the many organizations involved in Nigeria are not being effectively coordinated. As noted earlier in this report, the Government has not taken a clear position on population growth nor established a national population plan. Nevertheless, it permits a wide range of population activities to take place and is planning to provide child spacing services as part of its basic health program.

We discussed the extent of coordination with Nigerian officials (Government, private, and university), participants, and donor representatives. Agreement was almost unanimous that a great deal more systematic coordination is needed to maximize program benefits. Most officials, however, emphasized that good coordination is dependent on the Nigerian Government, and many were reluctant to take an initiative in this area. All seemed receptive to the idea of participating in information exchange meetings.

The activities funded by one donor--UNFPA--are coordinated with each other in a systematic manner through the annual country review. At the November 1977 meeting, for example, there were representatives from UNFPA and from WHO and UNESCO (executing agencies.) Also attending were officials from the University of Lagos, Nigerian Ministries of Health and Economic Development, National Population Council, and National Population Bureau. The chairman of a department at the University of Lagos said this meeting was very useful to him, but he thought there might be non-U.N. projects he should know about also.

Other situations indicated informal coordination was not working. We showed a professor at the University of Lagos, who has managed activities supported by several external donors, a research paper written by another professor at the same university, also externally supported. He was not familiar with it and said he should have been because it was in his area of work. Coordination is so poor, he added, that he cannot be certain he will hear about work related to his area.

In addition, we discovered that as part of two projects donors had supplied vehicles but had not budgeted for vehicle

operating costs. As a result, there were not enough spare parts and fuel available to keep the vehicles operating. Another donor we met with, who had not funded either project, indicated his agency had funds for vehicle-operating costs but not for procurement of vehicles. A system for exchanging information might have precluded or helped solve these problems.

The United States has funded a bilateral population project (training maternal and child health aids) but presently supports population activities in Nigeria only indirectly. Although there is no AID mission in Nigeria, a U.S. Embassy official monitors population activities, assisted by a Nigerian who has extensive experience in Nigerian family planning activities. In the Embassy, no specific data was available, however, on those organizations receiving AID funds, the amount, or the projects supported. The United States, by not getting involved in program management, is not contributing to the coordination efforts which should be aimed at strengthening programs and optimizing resource allocation.

#### Tanzania

Coordinating mechanisms within the Government of Tanzania and the donor community are decentralized and operate largely on an informal basis, but there are opportunities for the donor community to improve information exchange and strengthen the local agencies' coordination plans.

The Government does not have a national population plan but is seeking to expand availability of child spacing activities through the health system. Ninety percent of the health development budget is financed by donors. The Ministry of Health is responsible for developing the projects and seeking funding. It then submits proposals to the Ministry of Finance and Planning, which coordinates all external aid. Some officials believe the lack of sufficient managerial personnel is keeping this system from working as well as it should.

An informal method of exchanging information has evolved through meeting of those who wish to contact others. Government officials sometimes attend. Some donor representatives find this arrangement adequate--including those of UNFPA, UNICEF, Norway, Sweden, and Finland. Nevertheless, we noted one instance relating to vehicle operating costs similar to that in Nigeria, which indicates the informal system cannot be relied upon totally.

Some officials we contacted thought that regularly scheduled meetings of all those involved in population assistance and related activities would be beneficial and expressed a desire to attend such meetings. However, they believed that obvious pressures or attempts by the donor community to organize such meetings would be seen by the Tanzanian Government as undesirable and would be strongly resisted. Those we interviewed, including Government officials, felt the Government should initiate such activities.

Unlike Nigeria, Tanzania has a bilateral population program, and there is an AID population officer. He does not, however, have specific data on the amount or use of AID funds being channeled into the country through nongovernment organizations.

## LATIN AMERICAN COUNTRIES

### Jamaica

The National Family Planning Board is responsible for coordinating all family planning activities being carried out by various Government ministries, the University of West Indies, voluntary organizations, and international assistance programs. When integrated within the Ministry of Health in 1974, however, its role was only vaguely defined, as discussed in the leadership section in chapter 6.

We observed no formal, systemized effort to coordinate population activities of national, voluntary, and international assistance programs. Representatives of the Government, AID, U.N., and the Jamaican Family Planning Association told us they coordinate their programs primarily on an informal basis--through personal contacts, ad hoc exchange of correspondence, sharing project papers, informal meetings, etc. Each assistance entity deals directly with either the Ministry of Health or the National Family Planning Board, in isolation from the other organizations.

To date, it seems the informal communications system has at least kept the principal parties informed of each other's activities. This could, perhaps, be expected in view of the small number of projects in a country as small as Jamaica, as well as the close proximity of their offices in Kingston and the interrelationships of their programs.

We did not encounter resistance on the part of the organizations we contacted to a more formalized system to (1) facilitate the exchange of information, (2) provide a

forum for the discussion of common problems, and (3) ensure that programs are complementary and supportive of each other.

While the AID population officer in Jamaica recognized the need for a more formalized coordination mechanism, he believed it was the responsibility of the Jamaican Government, not that of any donor. He thought that if one donor took the initiative to improve the coordination among other donors, it would be viewed with suspicion by the Government as an attempt to "scheme" behind its back. The UNFPA coordinator and the UNDP resident representative both believed that improved coordination of population assistance was desirable but was up to the Government to implement. Before the elections in 1976, the UNDP representative had convened periodic meetings between donor and Government officials covering all sectors of development assistance. He said these meetings were suspended after the election when new members of the Government began to view them as a "plot" against the country.

The director of the Jamaican Family Planning Association thought that the country's entire population program could be more effective if it were better coordinated and planned. He suggested that all entities meet periodically and collaborate on what should be done and who should do it. The Jamaican Family Planning Association indicated it was willing to take the lead in this effort but lacked the resources to do so.

#### Costa Rica

The National Population Committee meets to exchange information on population activities, but international donors do not attend. As described in chapter 6, it lacks both a staff and any legal status. Information is also exchanged through other informal mechanisms, such as personal contacts and ad hoc exchanges of correspondence and documents.

The AID mission population officer is the only permanent in-country representative administering a population project of an international donor. He also approves projects centrally funded by AID and implemented by intermediaries. The UNFPA no longer assigns a coordinator to Costa Rica, although the UNDP resident representative has overall responsibility for all U.N. activities there.

The AID population officer told us that before true coordination of effort could be achieved, agreement must be reached on what is to be done, who should do it, and how progress should be measured. He believes a strong political statement about the need for population activities and family

planning should be made by the Government. Public opinion surveys, he told us, indicate that family planning is acceptable to more than 80 percent of the people. Officials of private Costa Rican entities also believe that the time has now come for establishing an official coordinating mechanism and more formal governmental activity.

The present informal coordinating mechanisms have kept interested parties reasonably well informed of each other's activities, reducing the opportunities for program duplication. This is perhaps not surprising considering the country's size. Yet, there are difficulties. The Ministry of Health and the Social Security Institute, for example, both provide family planning services. Although female sterilization was found to be the second most used method of contraception, recent controversy about its legality has resulted in its virtual proscription in the public sector. Finally, AID had planned to help train women's health care specialists to be assigned to rural and semirural area health posts. None have been trained to date, a situation AID attributes to professional jealousy on the part of nurses. A well-coordinated national population plan might have precluded such situations.

## CHAPTER 8

### DIVISION OF PROGRAM RESPONSIBILITY AND

#### SPECIALIZATION BY ORGANIZATIONS

#### INVOLVED IN PROVIDING POPULATION ASSISTANCE

In chapter 6 we expressed our belief that one of the essential features that should be included in systematic efforts to coordinate population assistance in any developing country is an appropriate division of program responsibility among the participants. This chapter presents our major findings on the extent of such division by the major donors and of appropriate specialization by the other entities engaged in population assistance activities.

In Bangladesh, we found elements of a division of program responsibility on the part of the major donors. The World Bank was financing the construction and equipment for 45 health facilities and the procurement of vehicles and other equipment. AID was the principal source of supply for the contraceptives used in the Government program, and UNFPA funds helped the Government 1974 census operations.

Looking at the activities of all assisting organizations, we found that more than one was involved in each of the several population activity areas. We found that:

- AID, UNFPA, World Bank, a large number of AID-supported private voluntary organizations, and other private voluntary organizations were engaged in training and institutional development.
- AID, UNFPA, the Ford Foundation, and others were supporting demographic studies. AID assisted the Government in its national fertility survey.
- IPPF, as well as AID, was engaged in supplying contraceptives.
- Denmark, UNFPA, AID, the World Bank, IPPF, AID-supported private and voluntary organizations, and other private and voluntary organizations were assisting projects delivering family planning services.

--UNFPA, IPPF, the World Bank, AID-sponsored private and voluntary organizations and other private and voluntary organizations were active in providing information, education, and communication services.

--UNFPA and a private voluntary organization, as well as the World Bank, financed physical facilities and equipment procurement.

In Thailand, too, the World Bank was financing physical facilities procurement; AID was a major source of supply for contraceptives; and UNFPA was supporting demographic activities. Here too, however, myriad assistance organizations were active in most activity areas. The following schedule shows donor and participant activities for the six countries we visited. All UNFPA-funded activities, regardless of executing agency, are listed as UNFPA activities.

Although many entities were involved in the same activity areas, our inquiries revealed no evidence of unproductive overlap or duplication.

**POPULATION ACTIVITIES BY CATEGORY AND PARTICIPANT  
IN SIX COUNTRIES (1975-1977 PERIOD) <sup>1/</sup>**

MAJOR DONORS AND GOVERNMENTS	Demography	Family Planning & Related Health Services & Related Biomedical Research	Information, Education, & Communications	Training & Institutional Development	Construction, Maintenance, Provisions of Physical Facilities & Vehicles	Major (not Pilot) Projects Impacting on Determinants of Fertility Other Than Family Planning	Social science Research and Population Policy Development
United States (AID)	Th, B	Th, C, J, N, T, B	C, J	Th, C, J, N, T, B	T		C
UNFPA <sup>2/</sup>	Th, C, J, N, B	Th, J, N, B	Th, C, J, T, B	Th, C, N, T, B	B, Th		N, Th
World Bank <sup>3/</sup>		J, B	J, B	J, B	J, B		B, J
Australia <sup>3/</sup>							
Canada <sup>3/</sup>			J				
Denmark		B					
Finland		N, T		N, T	T		
Japan		Th			Th	B	
Netherlands						B	
Norway <sup>3/</sup>		T			T		
Sweden <sup>3/</sup>							
United Kingdom <sup>3/</sup>	T, B	C, J, Th			C		
<b>NON-GOVERNMENT AND OTHER INTERNATIONAL ORGANIZATIONS</b>							
UNICEF		C, B, Th,	C	C			C
WHO/PAHO			B				
FAO/WFP							
American Home Economics Association			J, N, Th	J, Th, N			
American Public Health Association		J		C, B, J			
Asia Foundation			Th, B				
Association for Voluntary Sterilization		Th, C, J, N, B	B	C, Th, N, B, J			
Canada/International Development Research Center	T	N, Th					Th
Church World Service		Th, C	B		B		
Columbia University		Th					
Development Associates				J			
Family Planning Association of Canada			J				

**LEGEND**  
 BANGLADESH B  
 COSTA RICA C  
 JAMAICA J  
 NIGERIA N  
 TANZANIA T  
 THAILAND Th

POPULATION ACTIVITIES BY CATEGORY AND PARTICIPANT  
IN SIX COUNTRIES (1975-1977 PERIOD)  
(CONTINUED)

BANGLADESH	B							
COSTA RICA	C							
JAMAICA	J							
NIGERIA	N	Demography	Family Planning & Related Health Services & Related Biomedical Research	Information, Education, & Communications (IEC)	Training & Institutional Development	Construction, Maintenance, Provisions of Physical Facilities & Vehicles	Major (not Pilot) Projects Impacting on Determinants of Fertility Other Than Family Planning	Social science Research and Population Policy Development
TANZANIA	T							
THAILAND	Th							
Family Planning International Assistance			Th, N, J, B	C	Th			
Ford Foundation	B				Th, N, B			Th
Interdisciplinary Communications Program, Smithsonian Institution								C, N, T, Th
International Association of Schools and Social Work					J, B, Th			
International Fertility Research Program			C, N, B, Th					
IPPF (local affiliate)	C		Th, C, J, N, T, B	Th, C, J, N, T, B	Th, C, T, B, N			
Japan. Org. for Int. Coop. in F.P.					Th	Th		
Johns Hopkins University			J, B		N			B
Oxfam			T		B, T	J, Th		
Pathfinder Fund			J, B, N, Th	N	J, B, Th, N			
Planned Parenthood of New York City					J, N			
Population Council	N, T		J, N, Th		Th, N, T			N, Th
Population Services International			B					
Rockefeller Foundation	N		Th	Th	Th			
World Education				C, B	Th, B			
World Fertility Survey/ International Statistical Institute	C, J, Th, B							
World Neighbors				N				
World University Service								
Unitarian Service Committee of Canada			B					

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- 1/ PROJECT DESCRIPTIONS USED TO DEVELOP THIS TABLE WERE PRIMARILY THOSE IN THE LATEST UNFPA "INVENTORY OF POPULATION PROJECTS IN DEVELOPING COUNTRIES AROUND THE WORLD: 1975/76," RESPONSES TO THE GAO QUESTIONNAIRE, AND OTHER DATA. OUR STAFF ATTEMPTED TO PLACE EACH IN ONE OR MORE OF THE ABOVE CATEGORIES IN ORDER TO DEMONSTRATE THE EXTENT AND NATURE OF THE ORGANIZATIONS' INVOLVEMENT. GENERALLY, ONLY PROJECTS UNDERTAKEN IN OR FOR THE DIRECT AND SPECIFIC BENEFIT OF THESE SIX COUNTRIES WERE INCLUDED.
- 2/ UNFPA SUPPORTED PROJECTS ARE, FOR THE MOST PART, IMPLEMENTED BY OTHER UN ORGANIZATIONS (UNICEF, WHO, ETC.) AS EXECUTING AGENCIES.
- 3/ IN BANGLADESH, AUSTRALIA, CANADA, NORWAY, SWEDEN, THE UNITED KINGDOM, AND WEST GERMANY ARE PARTICIPATING IN A WORLD-BANK-LED CO-FINANCED PROJECT. IMPLEMENTATION OF A WORLD BANK PROJECT IN THAILAND INCLUDING FAMILY PLANNING, IEC, TRAINING, CONSTRUCTION AND SOCIAL SCIENCE RESEARCH ACTIVITIES WAS TO BEGIN IN 1978.

## NEED TO DIFFERENTIATE ORGANIZATIONS INVOLVED IN POPULATION ASSISTANCE

It is clear that a large number of organizations are involved in population assistance activities. It is important to recognize, however, that the extent and nature of their involvement differs widely. The differences, we believe, must be considered when discussing their participation in carrying out program responsibilities and specialization. Some are primarily funding organizations; others are primarily implementing organizations; some are both. They may provide funds and technical assistance to developing country governments for specific programs, or they may support private and voluntary organizations or universities carrying out activities in developing countries. They may specialize in relatively narrow areas, or they may be concerned with a broad range of population issues.

It is also important to distinguish among the types of organizations involved in order to discuss the desired extent and nature of their participation in coordination. We placed them in two main categories, (1) major donors and governments and (2) nongovernment and international organizations. Organizations in the first category usually participate in carrying out major program responsibilities. They should engage in active or policy coordination as well as passive coordination (sharing project problems, results, and information). Organizations in the second category more or less specialize or are engaged in specific activities; in most instances they should participate only in passive coordination.

### ACTIVE AND PASSIVE COORDINATION

All population activities in a country should be coordinated, that is to say, they should be related to a sound national population plan and constitute, together, an effective means of implementing the plan. To varying degrees, developing countries may be willing and, if willing, able to develop such a plan and effectively coordinate all the related activities with donor involvement. To the extent the donors are not confident that this is the case, they must at least accept responsibility to work with each other and the recipient government to so coordinate population assistance. In certain countries, other national governments providing aid may become involved in active coordination.

Such active coordination is neither a role nor responsibility of all the organizations involved in population assistance activities. The major donors (UNFPA, World Bank, and AID) should take such actions. They should also agree among themselves and with each recipient government upon a division of program responsibility. In addition to ensuring the appropriate distribution of available assistance among the important functional areas and the avoidance of duplication and redundancy, benefits of such a division include increased efficiency and the economical use of resources through economies of scale and reduction in administrative overhead. There may be instances when two donors could work in the same functional area, AID officials noted. For example, they said the World Bank and AID might both be aiding delivery of family planning services--the World Bank helping build clinics and AID helping improve commercial distribution of contraceptives. We recognize the need for flexibility, particularly in experimental areas, but believe the major donors should strive to divide program responsibility to the maximum practical extent.

Many of the participants in population activities are acting under contract or grant to undertake specific activities in a country. The funding organization, AID for example, presumably recognized the need for such activity in the country and gave concurrence for the private voluntary organization to carry out its project. There would not be a need for this organization to engage in active coordination. UNFPA as a major donor should engage in active coordination before providing funds to its executing agencies to implement projects.

There is also a recognized need for all agencies active in the field to be familiar with each other's population activities in a country, particularly activities related to their own work. They can benefit from discussions of the results of and difficulties encountered in each other's projects. As discussed in chapter 7, we found that such sharing takes place, but it is generally informal and ad hoc. Such informal coordination may in some cases prove adequate, but there is no assurance that it will in fact take place. The major donors, together with the developing country government, must ensure that a system facilitating the exchange of information is functioning. This should be done also in countries lacking a national population plan and receiving aid primarily through U.S.-supported intermediaries and/or UNFPA executing agencies. The major donors involved, together with the developing country, should act to ensure that such passive coordination takes place.

## Major donors and governments

The major donors--AID, UNFPA, and the World Bank--share a number of characteristics that are not found in most non-government and international organizations. Each is a governmental or international body, each provides substantial population assistance, and each works directly with the recipient developing country government. In addition, each maintains a broad population expertise and strives to assess the population situation and needs in a country before providing assistance. (AID has its multiyear strategy procedure, UNFPA its population needs assessment review, and the World Bank has its sector review.) (See ch. 5.)

In addition to direct support of the population activities of developing country governments, AID and UNFPA also provide support through other organizations. AID provides contracts and grants to private and voluntary organizations and universities. UNFPA relies on other U.N. agencies to execute most of its projects. These practices give rise to the large number of organizations active in population assistance activities.

Analysis of AID and UNFPA funding reveals the extent of their support to other organizations. In fiscal year 1976, AID allocated 27 percent of its \$103 million total for population assistance to private voluntary organizations, 15 percent to universities, and 16 percent to UNFPA. In 1976, UNFPA contributed \$81 million, of which it channeled all but \$6.8 million through seven executing agencies in the U.N. system.

Many of the organizations active in population activities receive large portions of their budgets from AID. To the extent that they are dependent on AID for funds, AID directs or influences their activities. For example:

<u>Organization</u>	<u>FY 1977 budget</u>	<u>AID</u>	
		<u>cash support (note a)</u>	<u>percent of total</u>
	(millions)		
IPPF	\$51.2	\$12.00	24
Population Council	12.1	.95	8
AVS	6.2	5.50	89
Johns Hopkins University (PIEGO)	7.4	7.40	100
Pathfinder	5.7	4.20	74

a/In addition, AID provides commodities to IPPF, AVS, and Pathfinder.

Another feature distinguishing the two types of organizations is the scope of their interest and capability. While the major donors tend to be more active in certain areas, they maintain broad population expertise. AID and UNFPA, in particular, fund a wide range of activities, which they have categorized through 1976, as follows.

	<u>AID</u>		<u>UNFPA</u>	
	<u>Amount</u> (millions)	<u>Percent of</u> <u>total</u>	<u>Amount</u> (millions)	<u>Percent of</u> <u>total</u>
Demography	\$ 75.0	9	Basic popula-	
Population			tion data	\$ 41.3
policies	42.5	5	Population	
Family plan-			policy	5.0
ning	408.8	47	Population	
Information,			dynamics	30.8
education, and			Family planning	104.5
communication	96.5	11	Communication and	
Manpower and			education	35.0
institutions	134.1	15	Multisector acti-	
Fertility con-			vities	18.6
trol (research)	76.8	9	Program develop-	
Operational			ment	<u>22.7</u>
expenses	<u>34.0</u>	4		
Total	<u>\$867.7</u>		Total	<u>\$257.8</u>

It can be seen that both organizations, as might be expected, have provided the largest portion of their funds to family planning projects, including supply of contraceptives. UNFPA has spent a significantly higher portion of its funds for demographic work, whereas AID has spent a higher portion for fertility control research. The general impression that UNFPA concentrates primarily on demographic work and AID on family planning services is not supported by these figures.

The third major donor, the World Bank, operates somewhat differently. Unlike AID and UNFPA, it provides population support only to governments that have officially recognized the need to slow population growth. As a bank, it finances projects only through loans and credits and has traditionally concentrated on sector and institution building. In fact, it has reported that about two-thirds of its population project financing has gone into "hardware"--buildings used to provide family planning services, training centers, vehicles, etc. Whereas AID and UNFPA fund a broad range of projects, the World Bank generally leaves it to these organizations to finance contraceptives and national censuses.

Despite the broad scope of interest and capability of the two major population donors with substantive development responsibilities (AID and World Bank), the table in this chapter shows that their population-related activities in the countries we visited have not encompassed efforts to improve social and economic conditions so as to influence desired family size and fertility. (As discussed in ch. 1, there has been a growing awareness and recognition, in recent years, of the need to interrelate population and development assistance efforts.) The table earlier in this chapter shows that in Bangladesh, for example, all areas of the Bangladesh national population program have been addressed by numerous programs, except the "determinants of fertility other than family planning" area. We identified only one major project classed as "population" involved with this area--a "zero population growth" project funded primarily by the Government of Bangladesh and, to a small extent, by the Governments of Japan and the Netherlands. This project, involving several ministries, is aimed at influencing fertility in five geographic locations of Bangladesh through a combination of activities to strengthen the areas' agricultural, educational, and rural development (roads, electrification, etc.) over several years.

Other attention, however, is being given to the matter or is planned. For instance, programs to improve the status and health of women and children may have an impact on fertility decisions. Some organizations may be involved in activities which are not classed as population-related, which nonetheless may affect population growth. AD has programs in agriculture and rural development, for instance, which may have the same impact on fertility as the above-cited project, although they are not classed as population projects. Moreover, the Bangladesh Government has indicated an awareness of the need to study and, as necessary, strengthen, add, or more vigorously enforce legislation influencing fertility, such as minimum ages for marriage and abortion laws.

The lack of an agreed division of program responsibility among the major organizations led, in the past, to some problems. We noted indications that the potential for problems still exists because of the necessarily broad interests of the three major donors. The World Bank, for example, has not participated in UNFPA-led, multi-bi projects, and an official told us it has internal requirements that preclude providing funds to UNFPA directly or approving loans or credits on the basis of another agency's analysis and documentation. UNFPA does not wish to participate in another World Bank-led co-financed project. AD has not participated in either multi-bi projects or jointly co-financed World Bank projects. In a report on project co-financing and aid coordination, the World Bank said that one organization must take the leading role but that it is not easy to discover the rationale for a division of labor, primarily because in no other sector do two multilateral agencies have such similar mandates and funds to support them. The Bank said

" \* \* \* the need to solve this problem in the population sector is urgent, since real or implied competition between the Bank and UNFPA for the central role will tend to confuse both the recipient countries and the other donors and expose both the UN system and the Bank to criticism."

The World Bank then noted the possibility for parallel financing arrangements, in which responsibilities could be divided on a regional or component type of assistance basis. It said that, potentially, UNFPA and the World Bank could work together in assessing country programs and needs.

We also include all national governments providing population assistance in this category. A UNFPA guide to international sources of population assistance indicates

12 nations in addition to the United States provide population assistance. During 1975, the last year for which complete data is available, Canada, Germany, Japan, the Netherlands, Norway, and the United Kingdom provided between \$5 million and \$15 million; Australia, Belgium, Denmark, Finland, and New Zealand provided less than \$5 million; and Sweden provided about \$25 million. With the major exception of Sweden, these countries provided most if not all of their assistance by contributions to UNFPA and IPPF. Those that provide bilateral assistance tend to limit it to a small number of countries. In addition, these countries are utilizing the co-financing and multi-bi arrangements of the World Bank and UNFPA. (See ch. 5.) For example, Australia, West Germany, Norway, Sweden, Canada, and the United Kingdom are all supporting a project in Bangladesh that is coordinated by the World Bank.

Nongovernment and other international organizations

Unlike the major donors, the organizations in this category tend to specialize. As shown in the chart presented earlier in this chapter, this does not mean they engage in only one type of activity. They do not, however, maintain a broad population expertise but, rather, focus on one or more aspects of population assistance.

The international organizations used as executing agencies by UNFPA are specialists in certain fields. In 1976, UNFPA expended \$6.8 million directly and provided funds to the following agencies:

<u>Agency</u>	<u>Amount</u> (millions)
United Nations	\$20.2
International Labor Organization (ILO)	3.2
Food and Agriculture Organization (FAO)	1.8
United Nations Educational, Scientific, and Cultural Organization (UNESCO)	3.8
World Health Organization (WHO)	13.8
United Nations Children's Fund (UNICEF)	6.4
United Nations Development Program (UNDP)	25.0

In the countries we visited, U.N. specialized agencies were administering UNFPA-funded projects. For example, WHO was administering a family health project in Nigeria and UNESCO was supporting a communications project at a university. A growing number of UNFPA projects are executed directly by the recipient governments. In such cases, UNDP is the financial conduit for the funds.

The United States tends to fund certain private voluntary organizations to do certain types of work. Some organizations are concerned primarily with provision of family planning services, informational programs, and related training. They generally are not involved in demographic studies, population policy development, or related fields. The Pathfinder Fund, FPIA, and AVS would fall in this category. AVS itself specialized in sterilization.

Other organizations, which are not dependent on AID funding, tend to have a greater range of interest. The Ford Foundation, for example, is both a grant-making and an operational agency. It supports a wide range of activities, including research and development of new contraceptives, training of demographers, and assistance to family planning delivery programs.

One organization that falls in the nongovernment category merits special mention. The International Planned Parenthood Federation is a major donor in many respects. It has been a leader in private worldwide efforts in family planning, encouraging formation of national family planning associations to pioneer family planning services and to create a favorable climate in which governments will take on this responsibility. The associations are also involved in training and in information and education programs. In 1977, there were over 90 national family planning associations. According to IPPF, its expenditures rose from \$1.2 million in 1967 to \$38.3 million in 1977, and totaled about \$218 million for the 1967-77 period.

#### VIEWS OF U.S. OFFICIALS

We discussed the subject of specialization with officials at the headquarters of AID and the Department of State. They made a number of points which are summarized below.

--Although there are a number of entities operating in the same general activity area, a de facto or informally generated specialization among AID, UNFPA, and the World Bank has developed. This is based upon

the underlying philosophy and traditions, not to mention the specific mandates, of the organizations involved. AID's population program, for example, has traditionally focused upon supplying family planning services. Utilizing its advantage of bulk purchasing, AID specialized in providing contraceptives where needed, with other organizations providing items AID cannot, such as the birth control drug depo provera or menstrual regulation kits. In Thailand and Indonesia, for example, the major donors agreed that AID would be the supplying agent in their respective country programs.

- In the area of demographic data collection and processing, UNFPA has assumed a leading or specialist role. Through informal headquarters agreements, support for this activity has increasingly been left to UNFPA. In the field of construction involving heavy capital outlays, the World Bank has become the predominant figure. This is in consonance with its banking philosophy of funding tangible programs holding promise of a payback. Both UNFPA and AID support information, education, and communication activities, depending on the particular circumstances in the subject country.
- Within each of AID's six population activity categories, one or more of the private and voluntary organizations specialize in performing required tasks. Sterilization programs, for example, are conducted worldwide, primarily by three AID-funded entities--Johns Hopkins University, AVS, and Pathfinder Fund. Family planning services, a broader category, encompasses a wider range of organizations including IPPF, FPIA, and Pathfinder Fund.
- Many of these private voluntary organizations (AVS, Pathfinder Fund, etc.) are not donors in themselves but carry out the programs sponsored by donors. IPPF is a unique organization, both a donor and an actor, covering a broad range of work.
- The key to specialization is that it be country-specific rather than worldwide. The informal specialization already achieved in some countries has been beneficial and productive. Donor governments other than the United States also tend to specialize. They often put money in international organizations. In a few instances they have small bilateral programs which are usually for specific research, pilot projects, or other specific services or commodities.

- It would be wrong, however, to pursue the specialization issue to the point where one donor would be responsible for a particular activity for each and every country. The major institutions need to maintain their broad, overall program capabilities for those countries where only one donor is present and that donor performs most project tasks. In principal, the major donors have accepted the specialization concept, but they are reluctant to specialize more. This would entail a loss of influence and leverage in particular nations and abandonment of the independence to conduct their own worldwide programs. Differing organizational objectives, strategies, and budgeting and funding cycles can also exacerbate the effort to specialize.
- Greater specialization among organizations would be possible if developing nations had better detailed long-range plans, permitting a more defined division of labor, but few developing countries have such sophisticated planning. Another problem hindering specialization, especially among the major entities, is the suspicion raised in the eyes of the national government by negotiated agreements to divide the work among outside groups.
- To improve overall in-country coordination, one organization among the major entities should be appointed the key coordinator for that specific country and act as the major focal point in dealing with its government. Some 10 developing countries have large assistance programs; major donors should have a permanent representative in each of these countries. The World Bank generally relies on visiting headquarters staff to administer its programs. The lack of onsite personnel hinders good project coordination. The "front loading" of the AID Thai project and its impact on UNFPA's training schedule was an instance where onsite representatives were able to resolve program differences.
- In addition to all the above comments of the AID and State Department officials, the AID official said he could not recall any instance where more specialization would have resulted in savings or improved program performance. In instances where entities are sharing the costs of conducting a particular program, no measurable savings or economy of scale would accrue if it were funded by a single organization, assuming the organization had the necessary resources to do so.

--This official believes that, after several years of population assistance, the various entities know what they can do best, and the need is great enough for all to participate. Once full coverage is achieved, entities will begin to move out of a country. Furthermore, he said, it is sometimes desirable to have many entities involved so as to minimize the focus on activities, particularly in countries where the subject of family planning is sensitive. Organizations on a combined basis can also provide variety desired by some countries that would not otherwise be available. For example, UNFPA can provide varieties of family planning services that AID cannot. The AID official said that entities often act at different speeds, which could slow down those capable of moving faster if assistance were linked together.



## DEPARTMENT OF STATE

Washington, D.C. 20520

OCT - 6 1978

Mr. J.K. Fasick  
Director  
International Division  
U.S. General Accounting Office  
Washington, D.C. 20548

Dear Mr. Fasick:

I am replying to your letter of August 7, 1978, which forwarded copies of the draft Report: "Donor Responses to Population Explosion in Developing Countries Must Be Coordinated."

The enclosed comments on this report were prepared by the Coordinator of Population Affairs.

We appreciate having had the opportunity to review and comment on the draft report. If I may be of further assistance, I trust you will let me know.

Sincerely,

A handwritten signature in cursive script that reads "Roger B. Feldman".

Roger B. Feldman  
Deputy Assistant Secretary  
for Budget and Finance

Enclosure: As stated



## DEPARTMENT OF STATE

Washington, D.C. 20520

October 4, 1978

GAO Draft Report: "Donor Responses to Population  
Explosion in Developing Countries  
Must be Coordinated"

In my capacity as the Department's Coordinator of Population Affairs, I have been most interested to review the draft GAO report on donor coordination of population assistance.

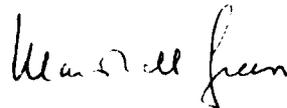
As the conclusions of this report effectively point out, the growing volume and complexity of population assistance efforts of major donors increases the need for effective coordination, at both the headquarters and the country level. It is important that efforts be made to improve coordination practices at both levels, bearing in mind the useful role that resident representatives of the donor agencies can play at the country level.

In my discussions with GAO staff on the draft report, I urged that the recommendations should give emphasis to 1) obtaining from U.S. Missions current information about the existing coordination practices at the country level, including the ability to consider population programs in a broader context of social/economic development, and suggestions for improvement at either field or headquarters level; 2) continued efforts by AID and State to work closely with top officials of other major donor agencies to achieve a broad, long-term common assessment of what needs to be done in certain key countries, to keep in close touch with officials of host governments in promoting and supporting effective population policies and programs, and to promote and support the most effective local consultative mechanism between the host government and donors. Finally, I suggested that the IBRD and UNFPA should be encouraged to assign field representatives to all countries where they are providing significant population assistance.

It is noted that these suggestions have been reflected in the overall recommendations of the draft report.

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With respect to the last two recommendations of the draft report, concerning Bangladesh, I believe it is not appropriate in the context of a general survey of coordination matters to single out one particular country. While there have indeed been problems with respect to coordination of population assistance to Bangladesh, a considerable effort has been made in this area during the past year, efforts which are described in the report itself. As a result, exception is taken to the inclusion of these recommendations regarding Bangladesh in this report.



Marshall Green  
Coordinator of Population Affairs

1/GAO Note: We concur and have deleted the country-specific recommendations.

DEPARTMENT OF STATE  
AGENCY FOR INTERNATIONAL DEVELOPMENT  
WASHINGTON, D.C. 20523

Auditor General

Mr. J. K. Fasick, Director  
International Division  
U. S. General Accounting Office  
441 G Street, N. W.  
Washington, D. C. 20548

Dear Mr. Fasick:

Attached for your information and use by your office are Agency for International Development comments on the GAO draft report, "Donor Responses to Population Explosion in Developing Countries Must Be Coordinated." These comments were optional based on your transmittal letter of August 7, 1978, but agreement was reached by the AID Development Support Bureau and your staff that written comments would be made. AID agrees with the basic thrust of the GAO's draft report.

Sincerely yours,

  
Herbert L. Beckington

Enclosures

Comments on the Draft GAO Report  
Entitled: Donor Responses to Population Explosion in Developing  
Countries Must Be Coordinated

A.I.D. agrees with the basic thrust of the report and with the recommendations made by GAO with regard to donor coordination. The Agency has been involved in and will continue to vigorously promote and support coordination, formal and informal, both in A.I.D./Washington and in the field Missions.

We would like to note that donor coordination must be approached on a country-by-country basis and will be dependent on the individual country commitment as well as the efforts of the donors. For example, in Africa much of the assistance for population is provided through private, voluntary organizations without the direct involvement of an A.I.D. Mission.

With regard to the Multi-Year Population Strategy papers, new efforts are being made to relate this process to the Country Development Strategy Statements which are required from all A.I.D. Missions in FY 1979. The population strategy will then be placed in the context of the country's total development program.

There is presently a donor consortium for each A.I.D.-assisted country in Asia and population issues are frequently discussed in the formal sessions and in informal exchanges.

In addition, as a result of the transfer of management responsibilities for bilateral population activities from the Development Support Bureau, the Regional Bureaus are initiating donor meetings. For example, in the Asia Bureau meetings have been initiated on specific country issues between the World Bank, WHO, etc., and the technical, program, and desk officers of the Asia Bureau. As the GAO Report mentions population concerns are now being addressed in a context that goes beyond the vital provision of family planning services to include as well a broader spectrum of development concerns. Therefore, a more diverse range of international donors and intermediary organizations are and need to be involved in donor coordination.

Our A.I.D. field Missions do coordinate with other donor representatives on both a formal and informal basis. The nature of the relationship must of necessity fit local conditions. If A.I.D. is the major population donor, our Mission may serve as coordinator of the sessions; in other cases, the UNFPA representative may be the coordinator. These groups frequently encompass both international donors, private foundations, bilateral

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donors, and local supporting groups concerned with population issues (e.g., USAID, UNFPA, UNDP, WHO, UNICEF, IPPF affiliate, Pathfinder, Population Council, FPIA, Asia Foundation). As A.I.D. has been stimulating more donor coordination, it also has been careful to avoid over-formalization in those countries where informal and unofficial sessions might be more conducive to frank discussions and agreements on strategies. We are striving for a balance between a need for effective coordination and the need to avoid host country perceptions that donors are threatening host country sovereignty.

AID Population Program Assistance - By Major Organizations  
Funding Allocations FY 1965-1979  
(In \$ Thousands)

	Total FY 65-76/TQ	%	FY 77	%	FY 78	%	FY 79	%
<u>Private Voluntary Organizations</u>								
IPPF	79,622	9	13,197	9	11,966	7	14,995	7
Pathfinder	31,851	4	5,097	4	3,773	2	4,900	2
Population Council	31,628	3	1,588	1	1,144	1	1,319	1
AVS	5,976	1	5,450	4	5,500	4	7,200	4
FPIA	23,709	3	15,938	11	8,000	5	13,225	6
Other PVOs a/	10,071	1	140	1	-	-	9,250	5
Subtotal	<u>182,857</u>	<u>21</u>	<u>41,410</u>	<u>30</u>	<u>30,383</u>	<u>19</u>	<u>50,889</u>	<u>25</u>
<u>Universities</u>	106,067	12	16,954	12	16,331	10	18,002	9
<u>Educational and Professional Associations b/</u>	45,133	5	3,042	2	14,161	9	18,273	9
<u>Participating Agency Service Agreements</u>	24,153	3	2,805	2	3,240	2	4,080	2
<u>Other Organizations c/</u>	59,850	7	15,366	11	18,480	11	24,222	12
<u>Bilateral Programs</u>	298,646	34	31,280	22	51,205	32	59,979	29
<u>UNFPA</u>	117,040	14	29,393	21	28,000	17	30,000	14
<u>AID Operational Expenses</u>	34,048	4	-	-	-	-	-	-
TOTAL	<u>867,804</u>	<u>100</u>	<u>140,250</u>	<u>100</u>	<u>161,800</u>	<u>100</u>	<u>205,445</u>	<u>100</u>

1/ Table provided by AID.

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- a/ Includes: World Education, Inc.; World Assembly of Youth; Asia Foundation; Planned Parenthood Associations of Washington, D.C. and Chicago; and other organizations.
- b/ Includes: International Statistical Institute (Hague); East/West Center; National Academy of Sciences; Smithsonian Institution; American Association for the Advancement of Science; New York Academy of Sciences; American Public Health Association; International Confederation of Midwives; American Home Economics Association; Margaret Sanger Research Bureau of New York City; International Association of Schools of Social Work; Research Triangle Institute; Family Health Inc.; Worcester Foundation; Southwest Foundation; Sulk Institute; Family Health Foundation; Pan American Federation of Associations of Medical Schools; and other organizations.
- c/ Includes: Westinghouse Electric Corporation; National Data Use and Access Laboratories; Genreal Electric Company; Rand Corporation; Battelle Memorial Institute, International Fertility Research Programme; Futures Group; Management Sciences for Health, Inc.; American Institutes for Research; Airlie Foundation; National Institute for Community Development; Population Services International; Development Associates, Inc.; Latin American Center for Studies of Population and Family; Pan American Health Organization; Latin American Demographic Center; LDC governments; and other organizations.

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Assistance for population activities by major donors, 1971-1976<sup>1</sup> (thousand US\$)

	1971	1972	1973	1974	1975	1976*
<b>GOVERNMENTS</b>						
Australia	—	357	579	639	1 567	—
Belgium	147	18	75	837	476	934
Canada	2 817	2 835	4 669	5 783	7 718	10 200
Denmark	1 917	1 953	3 990	4 383	4 439	5 032
Finland	263	293	338	476	2 097	—
Germany, Federal Republic of	1 657	2 435	4 392	5 770	13 400	—
Japan	2 090	2 196	2 812	5 293	7 971	12 920
Netherlands	1 539	3 041	5 744	6 140	7 159	8 730
New Zealand	—	77	40	580	880	—
Norway	3 870	5 539	8 600	10 800	18 500	27 400
Sweden	9 194	12 668	11 990	25 385	25 028	27 953
Switzerland	168	191	189	190	200	—
United Kingdom	2 520	6 706	4 225	5 024	7 725	8 400
United States	98 819	124 412	119 002	111 210	109 081	119 141
Others	1 283	1 592	1 747	2 325	3 580	11 356
Sub-Total	126 284	164 313	168 392	184 835	208 949	(252 000)
<b>INTER-GOVERNMENTAL ORGANIZATIONS</b>						
United Nations	6 995	5 952	8 459	20 786	24 234	—
UNICEF	2 362	2 371	3 711	5 753	6 514	—
UNFPA	8 937	19 840	34 684	57 000	71 765	75 600
ILO	165	989	2 259	2 827	4 901	—
FAO	607	574	1 370	1 539	2 238	—
UNESCO	38	28	2 554	4 130	5 337	—
WHO	2 823	6 374	15 991	18 932	22 979	—
World Bank <sup>2</sup>	1 600	5 700	11 200	18 600	24 200	23 000
Others	5 200	6 577	1 789	6 225	6 300	6 300
Sub-Total	28 747	48 405	82 017	139 219	168 468	(173 000)
<b>NON-GOVERNMENTAL ORGANIZATIONS</b>						
Ford Foundation	15 221	14 647	12 353	13 774	10 700	10 800
IPPF	19 294	24 935	33 798	42 910	42 584	45 191
Population Council	14 084	17 360	16 128	15 582	12 076	12 100
Rockefeller Foundation	2 864	6 608	6 370	9 007	8 516	8 500
Others	3 877	4 400	7 400	6 400	6 400	6 400
Sub-Total	55 340	67 950	76 049	87 673	80 276	(83 000)
<b>TOTAL</b>	<b>210 371</b>	<b>280 668</b>	<b>326 458</b>	<b>411 727</b>	<b>457 693</b>	<b>(508 000)</b>
<b>TOTAL excluding double counting<sup>3</sup></b>						
a) in current US\$	154 231	190 154	211 574	261 913	290 103	(314 000)
b) in constant US\$ (1970 = 100)	148 299	176 069	185 591	206 231	208 707	(214 000)

## NOTES

1 Actual expenditures except that some of the 1976 figures are estimates. All figures refer to calendar year.

2 Annual estimates for the World Bank based upon its commitments according to loan or credit agreements and the planned duration of project execution.

3 Arrived at by deducting the following from the total:  
 (i) Governments' contributions to UNEPA;  
 (ii) USAID contributions to IPPF, Pathfinder Fund and the Population Council;  
 (iii) UNEPA contributions to organizations in the United Nations system;  
 (iv) Contributions from one foundation to another.

\* Provisional. — Not available. ( ) Estimated.

## NOTES

See Table I. In addition, United Nations document E/5673 "Report of the Administrative Committee on Co-ordination on Expenditure of the United Nations system in relation to programmes" and U.S. Consumer Price Index, United Nations, *Statistical Yearbook and Monthly Bulletin of Statistics*.

Source: "The Widening Gap" by Halvor Gilje, *Populi*, Journal of the United Nations Fund for Population Activities, Vol. 4, No. 3, 1977.

SOCIOECONOMIC INDICATORS FOR SELECTED COUNTRIES  
(note a)

Country	Population data					Socioeconomic data			
	Total population (millions)	Birth rate (per 1,000)	Death rate (per 1,000)	Growth rate (percent)	Life expectancy at birth (years)	Population under age 15 (percent)	Per capita GNP (\$ U.S.)	Population urban (percent)	Infant mortality rate (per 1,000)
<u>ASIA:</u>									
Bangladesh	83.3	47	20	2.7	47	43	\$110	9	132
Thailand	44.4	35	11	2.4	58	45	350	13	89
<u>Africa:</u>									
Nigeria	66.6	49	23	2.7	41	45	310	18	180
Tanzania	16.0	47	22	2.5	44	47	170	7	162
<u>Latin America:</u>									
Costa Rica	2.1	29	5	2.4	68	44	910	41	38
Jamaica	2.1	30	7	2.3	68	46	1,290	37	26

a/Data from the 1977 World Population Data Sheet of the Population Reference Bureau.



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