

669-0148

LIBERIA

Marketplace Family Planning Services

PID

FY 77

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found)

AGENCY FOR INTERNATIONAL DEVELOPMENT

1. TRANSACTION CODE

PID

PROJECT IDENTIFICATION DOCUMENT FACESHEET

A

A = ADD
C = CHANGE
D = DELETE

2. DOCUMENT CODE
1

TO BE COMPLETED BY ORIGINATING OFFICE

3. COUNTRY/ENTITY _____ 4. DOCUMENT REVISION NUMBER

5. PROJECT NUMBER (7 DIGITS) 6. BUREAU/OFFICE
 A. SYMBOL B. CODE 7. PROJECT TITLE (MAXIMUM 40 CHARACTERS)
 Family Planning Services

8. PROPOSED FISCAL YEAR
 A. 2 = PRP 3 = PP B. DATE MM YY

10. ESTIMATED COSTS (\$000 OR EQUIVALENT, \$1 =)
 FUNDING SOURCE b85c8f
 A. AID APPROPRIATED _____
 OTHER 1. _____
 U.S. 2. _____
 C. HOST COUNTRY _____
 D. OTHER DONOR (B) _____
 TOTAL _____

9. ESTIMATED FY OF AUTHORIZATION/OBLIGATION
 A. INITIAL FY B. FINAL FY

11. PROPOSED BUDGET AID APPROPRIATED FUNDS (\$000)

A. APPROPRIATION	B. PRIMARY PURPOSE CODE	PRIMARY TECH. CODE		E. FIRST FY		LIFE OF PROJECT	
		C. GRANT	D. LOAN	F. GRANT	G. LOAN	H. GRANT	I. LOAN
(1)							
(2)							
(3)							
(4)							
		TOTAL					

12. SECONDARY TECHNICAL CODES (maximum six codes of three positions each)

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13. SPECIAL CONCERNS CODES (MAXIMUM SIX CODES OF FOUR POSITIONS EACH)

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14. SECONDARY PURPOSE CODE

15. PROJECT GOAL (MAXIMUM 240 CHARACTERS)
 To reduce unproductive population growth in specific localities in Liberia.

16. PROJECT PURPOSE (MAXIMUM 450 CHARACTERS)
 To establish family planning service stalls in marketplaces of 33 towns.

17. PLANNING RESOURCE REQUIREMENTS (staff/funds)

18. ORIGINATING OFFICE CLEARANCE

Signature: Stanley J. Sier
 Title: Director, Family Planning
 Date Signed: MM DD YY

19. DATE DOCUMENT RECEIVED BY AID/W, OR FOR AID/W DOCUMENTS, DATE OF DISTRIBUTION
 MM DD YY

MARKETPLACE FAMILY PLANNING SERVICES
669-0148

I. Problem and Proposed Response

A. Problem

1. Impact of Population Growth on Socio-Economic Development

According to the GOL Ministry of Planning and Economic Affairs, by any standard fertility in Liberia is at one of the highest levels in the world today (Pop. Growth Survey - Patterns of Natality Series N-1, p. 7, 1970). The average annual growth rate is at least 3% or higher. The indications of this growth on socio-economic development are serious for a country struggling to educate its children and preserve the health and lives of its people.

Using current fertility estimates and the recent census figures, there are approximately one-half million school aged children in Liberia now. There will be at least 615 thousand in 1985 and nearly one million children to be educated by the end of this century of 2.30 times the 1970 level. In another ten years Liberia will have to find jobs for 1,175,000 people of its working-age population 16-64 years. To cut current fertility to replacement levels (2.1 children per family) will require about 100,000 family planning acceptors with present contraceptive effectiveness.

The 1975 Ministry of Education budget was \$29 million. By 1985 between \$100 and \$200 million will be required if the goal of universal primary education is to be achieved. Capital investment required to provide jobs for present and anticipated populations of unemployed citizens is about \$3.0 billion dollars.

2. Migration

Migration adds approximately 7,000 people to the 80,000 births annually for which the country must provide basic public services. Because these mobile populations are young and usually consist of whole families, the demand for social services which these people need comprises the whole range of public education, health and personal security requirements.

3. Environmental Impact of Population Growth

Air and water pollution has not yet reached serious proportions but is occurring and the physical environment of Monrovia has deteriorated appreciably in the past decade due to increasing numbers of motor vehicles and discharge of domestic and industrial effluent into the natural water-courses near the city. Up country and in the rural areas where mining and lumber operations are conducted, unrestricted stripping and water pollution have destroyed much of the remaining small animal cover and nearly all aquatic life in nearby streams and rivers.

The problem of Liberia's high rate of population growth relates to the objectives set forth in the Development Assistance Plan (DAP) for Liberia. These objectives are:

- a. To improve rural incomes and productivity.
- b. To assist Ministry of Health efforts to do more in the way of family planning/maternal and child health programs.

3. AID Response

There are 33 towns in Liberia with populations over 2,000 people excluding the capital Monrovia and 22 towns in Montserrado, the capital county. It is this concentration of potential family planning acceptors who will be the target population of the project. Families in these more urban settings are usually more responsive to new ideas, are more mobile socio-economically and are likely candidates for family planning practice.

Although there is a United Nations Family Planning Association (UNFPA) supported project for one of the counties (Grand Cape Mount), the International Planned Parenthood Federation (IPPF) sponsored Family Planning Association of Liberia is active and the Lofa County Rural Health project has a family planning component, the number of acceptors produced by these efforts have not affected population growth rate significantly.

The project will attempt to accelerate acceptor rates by providing accessible family planning services to prime target population groups in Liberia.

1. Goal and Purpose

- a. Goal - To reduce excessive population growth in specified localities in Liberia.
- b. Purpose - To establish family planning service stalls in marketplaces of 33 towns.

ii. Description

a. Outputs - 140 trained family planning motivators

1. Advisors
2. 40 transportable family planning service stalls

b. Technical and Physical Resources

<u>AID</u>	<u>79</u>	<u>FY</u> <u>80</u>	<u>81</u>	<u>Disburse-</u> <u>ment</u> <u>Period</u>
1. Contract technical services (months)				
a. FP communications specialist	12	12	12	
b. FP health worker	12	12	12	
2. In-Country Training Programs				6 each year
3. Commodities				
a. Contraceptives				
b. Vehicles				
c. Communications supplies				
d. Booth construction				
e. Training supplies				
4. Evaluation				

GOL

The GOL will provide trainees, marketplace sites, supporting and operating costs for technicians. The GOL will also supply medical backup (family planning type) services where required.

Two full time technicians (a family planning communications specialist) will, according to a work schedule, travel to county health headquarters and establish training programs for trainers and supervisors of the 66 family planning motivators who will man the marketplace booths or stalls in the 33 rural towns of the country and the 74 itinerant family planning motivators who will be working in adjoining villages to spread the family planning message.

Specially designed portable stalls or booths will be located in market-places. They will be designed to attract attention and audiences will be given family planning education. The second attendant will provide individual counseling, advice, distribute family planning materials and with the help of a trained health person, dispense contraceptives. During the week, between market days, the family planning motivators working in the villages will sensitize men and women to look for the FP booth. The selection of local staff will be made by the residents and officials of the locality in which they will be working.

iii. Major Assumptions

At this stage in project development, the major assumption is that the use of stalls in marketplaces is one of the most effective means of providing family planning services. This assumption will be tested during the next phase of project development.

iv. Host Country and Other Donor Activities

As stated previously, there is a UNFPA supported project in Grand Cape Mount County, the Family Planning Association of Liberia has clinics in Monrovia, as well as nine family planning branch associations outside of Monrovia, and the Lofa County Rural Health project has a family planning component.

v. Alternatives

Alternatives are not politically or culturally acceptable at this time. Liberia's development depends on a large number of activities in different sectors, and a program designed to reduce the rate of population growth is one of the required actions.

vi. Beneficiaries

Direct beneficiaries are the men and women who avail themselves of family planning services. Lowered fertility through child spacing and pregnancy avoidance should have a positive impact on the health of the mothers and infants in the project areas.

vii. Spread Effects

If the project is successful a similar approach will be used to provide family planning services to the more remote (non-urban) areas in Liberia.

2. Financial Requirements and Plans

Estimated project costs	1,450
(Grant funded) (\$000)	
AID	(\$1,050)
GOL	(450)

	<u>FY 79</u>	<u>80</u>	<u>81</u>	<u>Total</u>
Technicians	244	243	243	730
Consultants	41	41	40	122
Participants	100	21	21	142
Commodities	16	4	4	24
Evaluation			8	8
Other Costs	<u>6</u>	<u>8</u>	<u>6</u>	<u>24</u>
	209	317	324	1050

Title X funds will be used to provide contraceptives

3. Development of the Project

Two assessments will be needed to complete the next phase of project development. These are:

- a. Social analysis - to determine the most effective way to stimulate interest and participation in family planning services.
- b. GOL Ministry of Health personnel inventory to determine the exact extent to which Ministry of Health personnel can serve as family planning motivators/advisors, as well as using local residents for family planning.

Both of these assessments can be accomplished by a combination of AID/II (PHA/POP) mission personnel and contract services.

Submission of PRP October 1977

Submission of PP April 1977

7