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AGENCY FOR INTERNATIONAL DEVELOPMENT
WASHINGTON, D.C. 20523

PROJECT PAPER
PAKISTAN - POPULATION WELFARE PLANNING
391-0469

March 1982

UNCLASSIFIED

PROJECT AUTHORIZATION

PAKISTAN

Population Welfare Planning
Project No. 391-0469

1. Pursuant to Section 531 of the Foreign Assistance Act of 1961, as amended, (the Act), I hereby authorize the Population Welfare Planning Project for the Islamic Republic of Pakistan (the Cooperating Country) involving planned obligations of not to exceed Twenty-Five Million, Six Hundred Thousand United States Dollars (\$25,600,000) in grant funds over a five (5) year period from the date of authorization, subject to the availability of funds in accordance with the A.I.D. OYB/allotment process, to help in financing foreign exchange and local currency costs for the project.

2. The project is designed to assist the Cooperating Country to carry out its Population Welfare Plan by financing: (a) management information, research and evaluation; (b) logistics system and contraceptive supplies; (c) bio-medical and socio-medical research at the National Research Institute for Fertility Control (NRIFC) and, (d) professional and personal motivation through short-term training and technical assistance.

3. The Project Agreement(s) which may be negotiated and executed by the officer(s) to whom such authority is delegated in accordance with A.I.D. regulations and Delegations of Authority shall be subject to the following essential terms, covenants, and major conditions, together with such other terms and conditions as A.I.D. may deem appropriate.

a. Source and Origin of Goods and Services

Goods and services financed by A.I.D. under this project shall have their source and origin in the Cooperating Country or in the United States, except as A.I.D. may otherwise agree in writing. Ocean shipping financed by A.I.D. under the project shall, except as A.I.D. may otherwise agree in writing, be financed only on flag vessels of the United States and the Cooperating Country.

b. Conditions Precedent to Warehouse Construction

Prior to the disbursement of funds by A.I.D. or to the issuance of documentation pursuant to which disbursement will be made:

(i) for architectural and engineering services to review the site for the construction of a warehouse under this project, the Cooperating Country, through its Population Welfare Division (PWD), shall identify a proposed site for the warehouse acceptable to A.I.D.; and

(ii) for architectural and engineering services with respect to such warehouse other than site investigations, the Cooperating Country shall establish its right, in form and substance satisfactory to A.I.D., to ownership or adequate and sufficient use and occupancy of the proposed land site for the warehouse.

c. Conditions Precedent to Construction of a Building for NRIFC

Prior to the disbursement of funds by A.I.D. or to the issuance of documentation pursuant to which disbursement will be made:

(i) for architectural and engineering services to review the site for construction of a building for NRIFC under this project, the Cooperating Country, through its PWD, shall identify a proposed site for construction of the building acceptable to A.I.D.; and

(ii) for architectural and engineering services with respect to such building other than site investigations, the Cooperating Country shall establish, in form and substance satisfactory to A.I.D., its right to ownership or adequate and sufficient use and occupancy of the proposed land site for the building.

d. Covenants as to Annual Plans

i. The Cooperating Country, through its PWD, shall, in consultation with A.I.D., prepare on or about July 30 of each year, and provide copies to A.I.D., an annual training plan detailing the number of participants, types, and duration of training programs with a tentative schedule.

ii. The Cooperating Country, through its PWD, shall, in consultation with A.I.D., prepare on or about July 30 of each year, and provide copies to A.I.D., an annual technical assistance plan detailing the types, duration, and scheduling for short-term technical assistance.

e. Covenant as to Training

The Cooperating Country shall make every reasonable effort to require that each participant trained outside Pakistan under this project works in population-related activities in Pakistan for not less than three times the length of the training program from the date of the participant's return to Pakistan, provided however, that in no event shall the participant be allowed to work for less than one year nor be required to work for more than five years from the date of the participant's return to Pakistan.

f. Covenant as to Contraceptive Procurement

A.I.D. and the Cooperating Country will conduct a joint review of contraceptive sales data and service statistics before A.I.D. orders or approves procurement of the second and subsequent shipments of contraceptive supplies.

4. Waivers

I hereby

a. approve a waiver from A.I.D. Geographic Code 000 (U.S. only) to A.I.D. Geographic Code 935 (Special Free World) for the procurement of two right-hand drive diesel pick-up trucks, and related spare parts, for this project;

b. find that special circumstances exist to waive, and do hereby waive, the requirements of Section 636(i) of the Act; and

c. certify that exclusion of procurement from Free World countries other than the Cooperating Country and countries included in Code 941 would seriously impede attainment of U.S. foreign policy objectives and the objectives of the foreign assistance program.

Signature M. Peter McPherson
Administrator

May 28, 1982
Date

Clearance:	Date	Initial
A/AA/ASIA, Eugene S. Staples	_____	14 MAY 1982
AA/PPG, John R. Bolton	_____	_____
GC, Kelly C. Kammerer	_____	_____

GC/Asia:JSilverstone:STisa:hp:5/11/82
Ext 28092 4/10

PROJECT DATA SHEET

1. TRANSACTION CODE

A
A = Add
C = Change
D = Delete

Amendment Number

DOCUMENT CODE

3

2. COUNTRY/ENTITY

Pakistan

3. PROJECT NUMBER

391-0469

4. BUREAU/OFFICE

ASIA

04

5. PROJECT TITLE (maximum 40 characters)

Population Welfare Planning

6. PROJECT ASSISTANCE COMPLETION DATE (PACD)

MM DD YY
09 30 87

7. ESTIMATED DATE OF OBLIGATION

(Under "B" below, enter 1, 2, 3, or 4)

A. Initial FY 82 B. Quarter 4 C. Final FY 86

8. COSTS (\$000 OR EQUIVALENT \$1 = P.s 10.43)

A. FUNDING SOURCE	FIRST FY 82			LIFE OF PROJECT		
	B. FX	C. L/C	D. Total	E. FX	F. L/C	G. Total
AID Appropriated Total	3,792	508	4,300	23,121	2,479	25,600
(Grant) ESF	(3,792)	(508)	(4,300)	(23,121)	(2,479)	(25,600)
(Loan)	()	()	()	()	()	()
Other U.S. 1. Mondale Rupees	-	2,013	2,013	-	2,013	2,013
2.						
Host Country	-	1,306	1,306	-	9,714	9,714
Other Donor(s)						
TOTALS	3,792	3,827	7,619	23,121	14,206	37,327

9. SCHEDULE OF AID FUNDING (\$000)

A. APPROPRIATION	B. PRIMARY PURPOSE CODE	C. PRIMARY TECH. CODE		D. OBLIGATIONS TO DATE		E. AMOUNT APPROVED THIS ACTION		F. LIFE OF PROJECT	
		1. Grant	2. Loan	1. Grant	2. Loan	1. Grant	2. Loan	1. Grant	2. Loan
(1) ESF	401	400		-	-	4,300	-	25,600	-
(2)									
(3)									
(4)									
TOTALS				-	-	4,300	-	25,600	-

10. SECONDARY TECHNICAL CODES (maximum 6 codes of 3 positions each)

460 968

11. SECONDARY PURPOSE CODE

489

12. SPECIAL CONCERNS CODES (maximum 7 codes of 4 positions each)

A. Code RPOP TNG
B. Amount 3,077 1,024

13. PROJECT PURPOSE (maximum 480 characters)

To strengthen the Government of Pakistan's population planning, evaluation, research, motivational, and logistic capabilities and performance.

14. SCHEDULED EVALUATIONS

Interim MM YY MM YY Final MM YY
1 0 8 3 0 4 8 5 0 9 8 8

15. SOURCE/ORIGIN OF GOODS AND SERVICES

000 941 Local Other (Specify) 935

16. AMENDMENTS/NATURE OF CHANGE PROPOSED (This is page 1 of 4 page PP Amendment)

17. APPROVED BY

Signature

Donor M. Lion

Title

Director, USAID/Pakistan

Date Signed

MM DD YY
03 17 82

18. DATE DOCUMENT RECEIVED IN AID/W, OR FOR AID/W DOCUMENTS, DATE OF DISTRIBUTION

MM DD YY
03 23 82

POPULATION WELFARE PLANNING PROJECT

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LIST OF ABBREVIATIONS AND DEFINITIONS

ADB	Asian Development Bank
AID	Agency for International Development
BHS	Basic Health Services
CDC	Center for Disease Control
CDSS	Country Development Strategy Statement
CMS	Continuous Motivation Scheme/System
CPS	Contraceptive Prevalence Survey
CYP	Couple Years of Protection
Dais	Traditional Birth Attendants/Indigenous Midwives
DG	Director-General
DPO	District Population Officer
DPWO	District Population Welfare Officer
EAD	Economic Affairs Division
ESF	Economic Support Funds
FMT	Field Motivator Team
FPAP	Family Planning Association of Pakistan
FWA	Family Welfare Assistant
FWC	Family Welfare Center
FWV	Family Welfare Visitor
FWW	Family Welfare Worker
FX	Foreign Exchange
FY	Fiscal Year
GOP	Government of Pakistan
Hakeem	Indigenous Health Practitioner
IBRD	International Bank for Reconstruction and Development

IE&C	Information, Education and Communication
IMF	International Monetary Fund
IQC	Indefinite Quantity Contract
ISCM	Information System for Contraceptive Movement
IUD	Intra-Uterine Device
JS	Joint Secretary
LC	Local Currency
LDC	Less Developed Country
MCH	Maternal and Child Health
MYPs	Multi-Year Population Strategy
NGO	Non-Governmental Organization
NITR	National Institute of Technical Research
NRIFC	National Research Institute of Fertility Control
P&D	Planning and Development
PD	Policy Directive
PDC	Population Development Center
PD&S	Project Development and Support
PFS	Pakistan Fertility Survey
PGS	Population Growth Survey
PID	Project Identification Document
PIDE	Pakistan Institute of Development Economics
PSC	Personal Services Contract
PWD	Population Welfare Division
SPO	Senior Population Officer
TBA	Traditional Birth Attendant
UNFPA	United Nations Fund for Population Activities
UNICEF	United Nations Children's Emergency Fund

I. SUMMARY AND RECOMMENDATIONS

A. Recommendations

1. Funding

USAID/Pakistan recommends that an ESF grant of \$25.6 million and the equivalent of approximately \$2.0 million (Rs 21 million) in Mondale rupees be authorized for the Population Welfare Planning Project, which has a Project Assistance Completion Date (PACD) of September 30, 1987.

2. Geographic Code

The project authorization should specify that except as A.I.D. may otherwise agree in writing:

a. Goods and services financed by A.I.D. under this Project shall have their source and origin in countries included in A.I.D. Geographic Code 000 or Pakistan.

b. Ocean shipping for all commodities financed by A.I.D. under this Project shall be only on flag vessels of the United States or Pakistan.

3. Waiver

It is recommended that a source/origin waiver from A.I.D. Geographic Code 000 to Code 935 be approved by the Assistant Administrator for Asia to permit the procurement of two right-hand drive pick-up trucks.

B. Summary Project Description

The GOP Population Welfare Plan^{1/} for the period 1980 to 1984 provides for the interaction of fertility reduction efforts with Pakistan's other development programs. The

^{1/} A summary of the Plan is included as Annex L. While the planning document indicates the period covered as 1980-1983, in fact the Population Welfare Division has extended the plan period to 1984.

Plan represents a major philosophical shift from the GOP's previous efforts in population and consists of three groups of activities. The first is the core program of three projects: Family Welfare Center Project; Reproductive Health Services Project; and Family Health Manpower Development Project. The core program is related primarily to the delivery of family planning services integrated, to some extent, with health and other activities. These projects will: establish 1,250 Family Welfare Centers to provide family planning and health services and other social welfare services; expand reproductive health care services to all medical colleges and other sites throughout the country; and, provide training and continuing education for over 5,000 population and other sectoral staff and community volunteers. A second group of twelve projects supplements the core projects through diversified family planning and social welfare services implemented by both governmental and non-governmental agencies. These projects will be initiated at both the national and provincial level and will involve the health, education, labor, social welfare and other sectors in promoting population activities. The third group, termed "Support Activities", includes evaluation, research, training, contraceptive supplies, and logistics. The Mission believes that the new Population Plan provides an opportunity for significant progress toward meeting Pakistan's population goals.

The proposed A.I.D. project, consisting of \$25.6 million in ESF grant funds and Rs 21 million in U.S.-owned Mondale rupees ^{2/}, will partially fund components of the GOP Plan which fall largely under the "Support Activities" category. Components to be financed by A.I.D. include: management information, research and evaluation; logistics system and contraceptive supplies; bio-medical and socio-medical research at the National Institute of Technical Research (NITR); and, professional and personal motivation through short-term training and technical assistance. Assistance in management information system development, research, and evaluation will enhance research capabilities within the country, permit the generation of reliable and timely program data, and promote wide dissemination of program and research findings, which will ultimately lead to overall program improvement as well as influence policy decisions affecting population. To provide adequate logistic and contraceptive support for the GOP Plan, funds will be used to construct a new central warehouse, develop procedural guidelines and manuals for the supply system,

^{2/} Rs 21 million equals \$2,013,900 at the exchange rate of \$1.00 = Rs 10.43 as of January 26, 1987.

train district level personnel, and provide contraceptives throughout the project. A.I.D. will also assist the NITR in bio-medical and socio-medical research through training, technical assistance, construction of a permanent facility to house the NITR, as well as provide funds for some contraceptive testing equipment. Short-term training and observation tours outside of Pakistan and short-term visits by U.S. experts will provide Pakistani professionals and prominent citizens exposure to worldwide developments in family planning, demography, and other key issues related to population planning and programing.

C. Summary Findings

This project is ready for implementation and is considered socially, financially, and economically sound, and administratively and technically feasible.

D. Statutory Checklists and Mission Director's Certifications

1. The project meets all applicable statutory criteria. Appropriate checklists are included in Annex B.

2. Two certifications signed by the USAID/Pakistan Mission Director are included in Annex C: (a) a FAA 611(e) certification, which certifies that the GOP has the capability to implement and maintain the project; and, (b) a FAA 612(b) certification to permit the disbursement of dollars in lieu of U.S.-owned rupees to finance local costs.

E. AFAC Concerns and Design Guidelines

The PID approval cable (Annex A) identified the following concerns: (1) ways to stimulate more effective coordination between the health and population divisions of the GOP; (2) adequacy of other donor support; (3) justification for construction of a central warehouse; (4) lead time required for contraceptive delivery; (5) support for contraceptive prevalence surveys; and, (6) satisfaction of PD-56 (Abortion-Related Activities) and PD-70 (Voluntary Sterilization) requirements.

The first five concerns are addressed in the following sections, respectively, of the Project Paper: (1) Part V.B., Administrative Analysis; (2) Part II.E., Other Donor Assistance; (3) and (4) Part III.D., Logistics System and Contraceptive Supplies; and, (5) Part III.C., Management Information, Research and Evaluation.

The GOP Population Welfare Plan does not include abortion or abortion-related activities as part of its program. Thus, A.I.D. policy directive (PD-56), which deals with abortion-

related activities, is not applicable. The GOP's voluntary sterilization practices and procedures, including use of the informed consent form, meet the criteria established by PD-70 for A.I.D. support to such activities. This project, however, does not include support for voluntary sterilization activities.

F. Project Issues

There are two issues in this project: (1) Will the project be significantly and adversely affected if other donor support is not maintained throughout the life of the project; and, (2) Will the project promote a split between the health and population departments, thus establishing two vertical delivery programs competing for GOP financial and human resources and clients, and creating duplication of some services over the long-run.

The magnitude of the GOP Population Plan makes other donor support critical. Significant donor support has been secured thus far, and more is likely to be forthcoming. However, should some of the currently committed funds fall short and additional funds be slowly committed, components of the GOP Population Plan can be phased in over time. The Plan's design, with its set of three groups of distinct activities, can accommodate a phased implementation schedule if that should become necessary.

Since the A.I.D. project is not specifically linked to other components, successful project implementation is not dependent on other donor support. Moreover, the support activities funded by the A.I.D. project are required even if other aspects of the program proceed at a lower than planned level or at a slower pace. The only exception to this is the rate at which contraceptives provided by A.I.D. will be utilized, which will depend on how well and at what pace other components of the Plan are implemented. To address this potential problem, the A.I.D. project provides for annual reviews of contraceptive requirements and corresponding adjustments in the amount and timing of shipments of contraceptives as necessary. It should be noted, however, that current donor support is substantial and appears likely to continue at high levels over the life of the A.I.D. project.

The relationship between health and population is examined in the Administrative Analysis section of this paper. In summary, past history and the current inability of the health department to deliver the wide range of population services outlined in the new Population Plan argue against merger of these two activities at this time.

To move in the direction of integration, however, several steps have been taken to coordinate health and population activities. The Population Welfare Division is carrying out extensive population training of health personnel, as well as coordinating the services and sites of population and health facilities to avoid duplication. These moves are indicative of a commitment to achieve better coordination between the health and population sectors. Ultimate integration of health and population activities is envisaged in the GOP Population Plan. In addition, the A.I.D.-financed Primary Health Care project will include activities which promote integration, and the Mission's continuing dialogue with the GOP on these two and other programs will reinforce the policy goal of ultimate integration.

G. Contributors to the Project Paper

The following individuals contributed to the development of this project:

A.I.D.

Mr. M. Hafiz Ahmad, Supervisor, Office of Financial Management (FM), USAID/Pakistan

Dr. Cornelia Davis, Chief, Office of Health, Population and Nutrition (HPN), USAID/Pakistan

Mr. Leslie A. Dean, Chief, Office of Program (PRO), USAID/Pakistan

Mr. Iftikhar A. Khan, Program Specialist, Office of Program (PRO), USAID/Pakistan

Mr. Shahabuddin Khan, Program Specialist, Office of Project Development and Monitoring (PDM), USAID/Pakistan

Dr. Donor M. Lion, Mission Director, USAID/Pakistan

Dr. Linda N. Lion, Chief, Office of Project Development and Monitoring (PDM), USAID/Pakistan

Mr. Edward Muniak, Population Officer, ASIA/TR/HPN, AID/Washington

Ms. Virginia Sewell, Population Officer, Office of Health, Population and Nutrition (HPN), USAID/Pakistan

Dr. Steven W. Sinding, Chief, Office of Population, Health and Nutrition, USAID/Philippines

Mr. Stephen Spielman, Regional Legal Advisor, USAID/Pakistan

Mr. Abdul Wasey, Program Specialist, Office of Health,
Population, and Nutrition (HPN),
USAID/Pakistan

Consultants

Mr. Jack F. Graves, Center for Disease Control

Mr. Gary L. Lewis, Westinghouse Health Systems

Dr. Merrill M. Shutt, Department of Community
Health, University of North
Dakota, School of Medicine

Government of Pakistan

Dr. Attiya Inayatullah, Minister of State and
Advisor to the President for
Population Welfare

Mr. Ejaz Ahmad Naik, Secretary (Planning and Population),
Economic Affairs Division,
Ministry of Finance and Economic
Affairs

Dr. Shamim Afzal, Director General (Technical),
Population Welfare Division

Dr. M. A. Aghai, Director (Planning), Population
Welfare Division

Mr. Mahbub Ahmad, Joint Secretary (Planning), Population
Welfare Division

Mr. Sheikh Shaukat Ali, Director General, Population,
Sind, Karachi.

Mr. Khan Ahmed Goraya, Director General (Program),
Population Welfare Division

Mr. Ibrahim Khan, Director General, Population,
Northwest Frontier Province

Brig. (Rtd.) A. Latif, Director General, Population,
Punjab, Lahore

Mr. S. K. Mahmud, Additional Secretary, Population
Welfare Division

Dr. Mahmud Roshan, Director (Foreign Assistance),
Population Welfare Division

Mr. Akhtar A. Zaidi, FPAP Representative for
Baluchistan in Quetta

II. BACKGROUND

A. USG - GOP Negotiations

1. Overview

The United States and the Government of Pakistan are embarked on a renewed and strengthened effort to increase their economic and development cooperation. This effort was marked by high level U.S.- GOP consultations in 1981 which culminated in the negotiation of a \$3.2 billion package of military and economic assistance which the U.S. will seek to provide to Pakistan between FY 1982 and FY 1987.

The economic assistance component was designed not only to maximize its development impact but also to produce as favorable balance of payments effects as possible. The balance of payments objective reflects two critical purposes of the agreed upon economic assistance: (a) to ameliorate the burden created by Pakistan's increased military expenditures; and, (b) to reduce the constraints on development which balance of payments strains generate. In this manner, the economic, development, and security interests of both nations are inter-related and supported.

The U.S. Economic Assistance Negotiating Team, headed by the A.I.D. Administrator, visited Pakistan in August 1981 to discuss the details of the economic portion of the military/economic package with the Government of Pakistan. These negotiations were successfully completed, and agreement was reached on the FY 1982 ESF program and on areas of concentration for the FY 1982 through FY 1987 period.

2. Strategy

The assistance package is one of the strategic elements of the renewed and expanded USG-GOP relationship. It is one of the instruments required to achieve the U.S. and GOP's mutual goals with respect to security and economic development. The assistance package is seen as an indispensable contribution to the shaping and implementation of a new U.S.- Pakistan relationship and to the critical role in the region which the U.S. Government seeks to assist Pakistan to play. The military-security-political position of Pakistan, including the burden of a massive refugee influx, accentuates the development problem to which the proposed U.S. economic assistance package responds.

The economic assistance program is designed to help Pakistan, one of the world's largest and poorest nations, fulfill the basic human needs of its people. At the same

time, it is designed to address the country's foreign exchange needs through quick disbursing activities while laying the foundations for more rapid economic growth. The program is shaped to assure the widest possible distribution of benefits. The program agreed to by the GOP and U.S. negotiating teams will:

a. reactivate a long-term development assistance relationship, which the U.S. views as important because of Pakistan's size, poverty, strategic location, and other multi-faceted U.S. interests;

b. provide balance of payments support to help address short and medium-term foreign exchange shortfalls, thereby reducing development constraints and strengthening the economy;

c. address key economic problems, which will help enable Pakistan to achieve self-sustaining growth and manage its debt burden;

d. complement and support IMF and IBRD assisted programs, and improve their overall impact; and,

e. expand resource availability for local cost financing.

Each of the objectives and purposes of the economic package cannot be achieved simultaneously. Nevertheless, it is the express intention of both governments to initiate as many of the proposed activities as possible within the first several months of FY 1982. In view of the recent status of the bilateral relationship and program, and given the magnitude and urgency of the proposed efforts, a carefully designed strategy and approach are required. In the first year, FY 1982, the balance of payments objective is given primary emphasis. In later years, as program levels are elevated, the balance of payments focus is retained while the longer-term development strategy is given more attention.

It was in this context that A.I.D. agreed to finance a five-year program to assist the GOP to implement its Population Welfare Plan.

B. Demographic Characteristics

In March 1981, the population of Pakistan was estimated to be 83.7 million. Approximately 72 percent of the population is rural, with about 55 percent engaged in agriculture. The population is distributed unevenly among the four provinces, with about 56 percent residing in the Punjab. The overall literacy rate is estimated to be 24 percent, with 36 percent and 12 percent literacy for

males and females, respectively. Approximately 30 percent of the children aged 5-19 years are in school, with a disproportionately higher representation of male versus female and urban versus rural enrollment.

The demographic changes which have occurred in Pakistan since the turn of the century characterize most low-income countries. The level of mortality has declined by more than half while fertility has remained relatively unchanged at very high levels. As a result, the rate of population increase, as of March 1981, of 2.97 percent per year, if maintained, would lead to a doubling of Pakistan's population in less than 25 years. Pakistan, with nearly 46 percent of its population under the age of fifteen, has a very young age distribution, which could contribute to a continuing high growth rate. With such a large number of young people moving into the reproductive age group over the next 20 years, an active family planning and population program becomes even more critical to bring about lowered fertility.

Table 1, which was compiled using data from the Pakistan Fertility Survey (1975) and preliminary results from the 1981 Housing and Population Census, shows that the population of Pakistan has increased five-fold thus far this century.

1. Fertility

A comparison of the India's Population Growth Estimation Project (1962-1965) and the Population Growth Survey (1968-1971) suggests that relatively little change in fertility has occurred since the early 1960's. Although some decrease in age-specific marital fertility was observed among the younger age cohorts, this was largely offset by the rise in fertility among older women. Estimates of the U.S. Bureau of the Census (1971) indicate a slight increase, from 7.2 to 7.3, in the number of children per female of reproductive age between 1961 and 1972. The 1975 Pakistan Fertility Survey also shows no decline in fertility. The 1981 census shows practically no decline in the birth rate. The GOP Planning Commission currently estimates the crude birth rate at 41/1000.

The high levels of marital fertility reflect the facts of nearly universal marriage and the relatively young age at marriage. According to data from 1965, the percentage of never-married females in Pakistan is only 0.9. Although reliable data on female age of marriage (legally 16) are difficult to obtain, estimates from the 1975 Pakistan Fertility Survey place the average between 16 and 17.

TABLE 1
POPULATION GROWTH IN PAKISTAN, 1901-1981

Census Year	Population (in thousands)	Intercensal Growth	
		Percent	Annual Rate ^{a/}
1901	16,576 ^{b/}	-	-
1911	19,382	16.9 (7.1) ^{c/}	1.6 (0.7) ^{c/}
1921	21,109	8.9	0.8
1931	23,542	11.5	1.1
1941	28,282	20.1	1.9
1951	33,740	19.4	1.8
1961	42,880	27.0	2.4
1972 ^{d/}	65,309	52.3	2.9 ^{e/}
1981 ^{f/}	83,782	28.3	3.0

Source: Pakistan Fertility Survey (1975) and preliminary results of the 1981 Housing and Population Census.

a/ Compounded to the nearest tenth of 1%.

b/ Excluding population of the Frontier Regions.

c/ Excluding 1,622,000 persons of the Frontier Regions in 1911.

d/ The 1961-1972 intercensal period was 11.7 years.

e/ Rate corrected for estimated underenumeration in the 1961 census.

f/ The 1972-1981 intercensal period was 8.5 years.

2. Mortality

With the exception of an influenza epidemic in the early 1900's and the civil disturbances at the time of Partition, the decline in mortality has been steady since 1900. The decline in overall mortality can be attributed to a general improvement in living conditions.

Improvements in transportation, communication, and agricultural production helped to stabilize food supplies, which, in conjunction with later preventive health programs, reduced the susceptibility of much of the population to disease and famine. During this period of mortality decline, the crude death rate declined gradually from about 40 per thousand to 30 per thousand by 1950. Between 1950 and 1960, this decline accelerated, dropping from 30 per thousand to 19 per thousand. The decline continued at a much slower pace during the 1960's, with recent comparative data suggesting a slow decline between 1962 and 1981.

For planning purposes, the Government of Pakistan estimates the crude death rate to be 12 per thousand. Given the experience of the last decade, it seems doubtful that mortality will decline substantially over the next 5-10 years.

3. Migration

One unique feature of Pakistan's demographic past is the migration between India and Pakistan which occurred at the time of Partition. Estimated in-migration was about 2 million, with a large portion of these refugees settling in urban areas. Although the social disruption and urban or semi-urban settlement of the refugees might have been expected to result in lowered fertility, research findings indicate that this was not the case. Although international migration during other periods of time has been fairly significant, it is not expected to be a major factor in considering population growth in Pakistan in the near future. Large-scale short-term migration of males to the Middle East does not appear to have had a major impact on rural-urban population distribution. The recent large influx of Afghan refugees is assumed by the GOP to be temporary. They are not included in the 1981 census.

C. Population Program Experience

The preceding discussion clearly indicates that fertility is the demographic variable that must be affected if a reduction in population growth rates is to be achieved. In recognition of this fact, the Government has established a demographic goal of reducing the crude birth rate from 41.0 per thousand to 37.5 per thousand by 1984. A brief discussion of past efforts by the GOP to lower fertility follows.

1. Previous Programs

Thus far, the major effort to reduce fertility in Pakistan has been through family planning programs. The first organized program was started in 1952 by the

Family Planning Association of Pakistan (FPAP), a private group which served to pave the way for involvement by other groups. Between 1955 and 1960, the Government provided support to these activities with an allocation of Rs 500,000 (\$105,042) ^{3/}. In the Second Five-Year Plan (1960-1965), the Government began providing family planning services, mostly IUDs, at maternal and child health clinics operated by the Ministry of Health and Social Welfare, and used field workers to extend the outreach capability of the program.

In the Third Five-Year Plan (1965-1970), an autonomous family planning organization was created to administer a vertical type program. The program concentrated on the use of dais (village midwives) for motivation and service, and the IUD was emphasized. The program was interrupted between 1969 and 1971 by the political changes which brought about the division of Pakistan into four provinces and the conflict which resulted in the loss of East Pakistan. The program lost considerable momentum due to the Government's preoccupation with these problems and the loss of foreign aid during this time.

In the Fourth Five-Year Plan (1970-1975), the program emphasis shifted from the use of midwives to full-time field motivation teams while largely abandoning the IUD in favor of condoms and orals. A new approach, initiated in 1972, the Continuous Motivation Scheme (CMS), emphasized the importance of continued use rather than initial acceptance through regular visits by field workers to the homes of acceptors to motivate potential clients and to supply contraceptives.

Following a review of the program in 1972, family planning was established as a vertical program within the Ministry of Health and Social Welfare with a two-year budget of Rs 204 million (\$18,545,454) ^{4/}. Shortly thereafter, the Government decided to initiate an intensive effort to minimize inadequate contraceptive supply as a barrier to acceptance, by pursuing a strategy of "contraceptive inundation", using both Government and private distribution channels. The inundation program began in March 1975 with A.I.D. providing the bulk of the orals and condoms required. The inundation program in Pakistan represented one of the first full-scale national level efforts to assess the extent to which the failure to use a modern method of contraception is due to the unavailability of contraceptives. A.I.D. and the Government of Pakistan jointly undertook an

^{3/} Exchange rate between 1955-1960 was \$1.00 = Rs 4.76

^{4/} Exchange rate in 1972 was \$ 1.00 = Ru 11.00

evaluation during FY 1977 to assess both the operational performance and demographic impact of the program.

This evaluation ^{5/} indicated substantial weaknesses in almost every aspect of the population program, ranging from the lack of a sustained political commitment to promote population activities to poor planning, administration, and service delivery capabilities. Several of the recommendations of the evaluation, specifically the placement of population within the Ministry of Finance and Economic Affairs, the appointment of an energetic leader for population, and increased policy support to population activities from national leadership were accepted and implemented.

2. Recent Developments

In May 1976, the leadership of the Population Planning Program in Pakistan was elevated to that of a full Secretary. The new Secretary took over at a time when program morale was particularly low. The two major program approaches pursued by the GOP, namely, the contraceptive inundation approach and the Continuous Motivation Scheme (CMS), failed to bring about greater acceptance and increased use of contraceptive methods. In addition, the administrative and logistics support necessary to provide adequate supplies of contraceptives at the village level was not effectively provided. The 1975 Pakistan Fertility Survey showed that less than eight percent of eligible couples was using any form of contraception. This necessitated a major reassessment of the existing strategy.

However, just as a newly developed strategy was being completed and implementation was initiated, the political disruptions that accompanied the national election of March 1977 and subsequent events led to the suspension of population program field activities. This decision set in motion a series of complicated internal reforms, reorganizations, and program realignments that had the cumulative effect of suspending field activities through 1979. Indeed, even up to the present, the program has not operated anywhere near its pre-1977 level.

At about the same time that the suspension of field operations occurred, foreign donor agencies began questioning the basic design and the actual implementation of the CMS/Inundation approach. The findings of the A.I.D.-GOP evaluation referred to above were confirmed by an early 1978 World Bank Assessment and a German Government study, both of which raised further doubts

^{5/} A Review of Pakistan's Expanded Population Planning Program, Family Health Care, Inc., December 23, 1976.

concerning the design and execution of the program. Donor support virtually dried up. After 1978, only the United Nations Fund for Population Activities (UNFPA) maintained an active though small program of financial assistance. A.I.D. population program support terminated at the end of 1977. The German and British Governments and several smaller donor agencies also ended their support at that time. The World Bank, which had hoped from 1975 onward to provide a population loan, is only now ready to do so. External support declined from a high of around \$13 million in 1974-1975 to less than \$1 million in 1978-1979. Thus, by the end of 1978, the family planning program in Pakistan was practically moribund.

After a brief effort in late 1978 and early 1979 to place family planning under the control of the Health Department, the Government decided that if the program was to develop a truly "integrated" approach, as many Pakistanis and foreigners advocated, it should be placed within the Planning Division. Consequently, in May 1980, the federal Population Division was transferred to the Ministry of Finance and Economic Affairs and was renamed the Population Welfare Division.

In August 1980, Dr. Attiya Inayatullah, the dynamic head of the Family Planning Association of Pakistan, became Presidential Advisor on Population and de facto leader of the revised, reinvigorated "integrated approach" to population planning. She set in motion a planning process that resulted in a comprehensive and detailed Population Welfare Plan, a summary of which is attached as Annex L. This Plan represents a major new departure for population planning in Pakistan -- a new beginning after the program disappointments of the 1960's and 1970's.

D. Major Lessons Learned and GOP Response

In formulating the current Population Welfare Plan, the GOP carefully considered factors which contributed to past program disappointments and failures, and has developed action strategies to correct them.

1. Lessons Learned

The following reflects a number of lessons learned over the years from the Pakistan Population Program:

a. Family planning cannot succeed as a single-purpose program in Pakistan but must be considered as an integral part of overall social and economic development. Accordingly, in addition to making family planning services available, the program must address the social, cultural, and economic barriers to fertility changes.

b. Reliable data on the extent and nature of the social and economic barriers to fertility changes either have not been available, or when available, not fully considered in policy, strategy or program management decisions.

c. Responsibility for population activities must be expanded from a single governmental unit to be shared by many ministries, other governmental organizations, and private and voluntary organizations.

d. Program efforts should pay adequate attention to creating demand for family planning services.

e. Active community level involvement and participation in the program are required for program success.

f. Contraceptives must be continuously and conveniently available to the consumer, and the consumer must be aware of their availability.

2. The GOP Response

The GOP Population Welfare Plan is based on the conviction that family planning must be viewed in the context of social and economic development. Thus, the Plan calls for: the integration of family planning services with broader maternal and child health care and delivery of rural health services; integration of population education with general primary and secondary education; integration of the idea of the small family with programs to improve the status and income-generating opportunities of women; and, a host of other programs that seek to incorporate both the small family idea and the delivery of contraceptive services in ongoing social and economic development programs.

The current GOP Population Welfare Plan, in contrast to plans in the past, represents an intensive, broad-based approach to fertility reduction. The plan has been developed in consultation with all pertinent sectors of Government and with the collaboration of key provincial staff and field workers. The reorganization required by the plan has been a difficult but necessary exercise. Such an exercise indicates that the GOP is determined to act on politically difficult decisions to correct the problems of the past. The Plan also indicates that the GOP is open to innovations to achieve its fertility goals. The assignment of program direction to one of the Government's most influential and powerful ministries will help assure better coordination with all sectors of Government. The conversion of Family Planning Clinics into Family Welfare Centers will help reduce the stigma

attached to visiting the centers. The expansion of maternal and child health services into areas not otherwise reached by Government services, along with the provision of a wide array of social action programs (which in themselves, over time, will favorably affect fertility), will provide an increased audience to retrained Family Welfare workers who will be better able to influence demand and to provide services. Refinements in the logistics system should guarantee continued availability of contraceptive supplies all the way down to the village level. An improved management information system will permit more effective monitoring. Aggressive outreach to the community, mediated through management-advisory committees at every administrative level and through community volunteers, should assure much greater community acceptance of and participation in the program. The significant recent reduction in force of categories of largely ineffective personnel, along with regularization of the remaining more effective personnel into the civil service system, should permit administrative streamlining in the program. The Plan's efforts to couple socio-economic development with the delivery of family planning services should help to create a better response from the public as well as achieve broader development goals.

E. Other Donor Assistance

1. Funding Levels

Between 1965 and 1978, donors provided approximately \$86 million to the Pakistan population program. Of this, A.I.D. provided approximately \$59 million in both dollars and Mondale rupees and the UNFPA \$8 million. Since 1978, UNFPA has been the only significant donor, providing a total of approximately \$3 million between 1978 and 1981.

The current GOP population program has attracted widespread donor interest. The total amount of funds required to support all activities under the GOP Population Welfare Plan for the period 1980-1984 is estimated at \$91 million ^{6/}. The GOP plans to provide approximately \$29 million out of its own resources and has been seeking funds for the rest of the Plan from the donor community. At the present time, the World Bank, the Asian Development Bank, the United Nations Fund for Population Activities, the World Health Organization, UNICEF, and the Government of Japan have committed a total of approximately \$19 million in grant and loan funds. (See Table 2.) The United Kingdom, Government of Canada, EEC and OPFC are currently negotiating with

^{6/} The GOP recently decided to postpone implementation of several of the supplemental programs under the Plan, thereby reducing the amount of funding required for the 1980-1984 program of activities to approximately \$67 million.

TABLE 2

OTHER DONOR ASSISTANCE

DONOR	PROGRAM AREAS								ASSISTANCE		
	Family Welfare Centers	Reproduct- ive Health Care	Train- ing	IEAC ^{a/}	Research	Vehicles	Equip- ment & Supp- lies	Construc- tion and Renova- tion	Level (5000)	Type	Time Period
World Bank	X		X	X			X		14,000	Loan	1982-1986
Asian Develop- ment Bank		X				X	X	X	490	Loan	1982
UNFPA		X	X			X	X		2,250	Grant	1981-1982
UNICEF				X					715	Grant	1982-1987
Government of Japan						X	X		1,340	Grant	1982
WHO					X				45	Grant	1982
United Kingdom						X	X		Undetermined		
Government of Canada									Undetermined		
OPIC									Undetermined		
ETC									Undetermined		

^{a/} Information, Education and Communication.

the GOP with no specific amounts pledged at this time. The proposed A.I.D. project of \$25.6 million and Rs 21 million brings the total resources available to the GOP to approximately \$75.6 million. It should be noted that A.I.D.'s contribution as well as that of two other donors extends beyond the current plan period. Presumably, future yearly commitments will be forthcoming from the donors cited as well as new commitments from other donors.

2. Nature of Assistance

The donors listed in Table 2 have tentatively agreed to fund specific components of the GOP Population Welfare Plan as follows:

a. World Bank

Support for 200 Family Welfare Centers (FWCs) in 7 districts; training of master trainers; information, education and communication activities; and, supplies.

b. Asian Development Bank

Support for reproductive health care through procurement of equipment and supplies for 31 hospitals in the Punjab, limited renovation at some of the hospitals, and procurement of vehicles; and, procurement of equipment, supplies and vehicles for reproductive health extension teams who will be stationed at four teaching hospitals in the Punjab.

c. UNFPA

Support for the Family Health Manpower Development Project to train population workers; support for the Reproductive Health Care Project, including training and expansion of centers throughout the country; training of hakeems (indigenous practitioners) to provide family planning motivation and dispensing of contraceptives; vehicle procurement; short-term fellowships; and, contraceptives.

d. UNICEF

Support for training of traditional birth attendants (TBAs).

e. Government of Japan

Procurement of diesel vans and equipment for training centers.

f. WHO

Support for specific contraceptive research projects at the National Institute of Technical Research through technical assistance, supplies and equipment.

g. United Kingdom

Procurement of contraceptive foam until 1983, and vehicle repair or replacement.

h. The Government of Canada, OPEC, and the European Economic Commission

These donors have not as yet agreed to finance specific components of the Plan nor have they pledged any funds.

3. Summary

The A.I.D. project both complements and supplements those population activities being financed by other donors. It does not interfere with nor duplicate other donor efforts, nor does it depend upon the successful implementation of other donor programs. The only exception to this is the rate at which A.I.D.-financed contraceptives will be utilized, which will depend on how well and at what pace other components of the Plan are implemented. To address this potential problem, the A.I.D. project provides for annual reviews of contraceptive requirements and corresponding adjustments in the amount and timing of shipments of contraceptives as necessary.

F. Relationship to A.I.D. Strategy and Other A.I.D. Projects

The United States commitment to global population issues is expressed in Section 104 of the Foreign Assistance Act of 1961, as amended, which accords high priority to host country activities which seek to reduce the rate of population increase. The Asia Bureau's 1978 Health, Population and Nutrition Strategy, while advocating a strategy of fertility reduction in the framework of a primary health care system, concluded that fertility reduction could not be separated from broader development issues. The 1977 USAID/Pakistan Multi-Year Population Strategy endorsed active family planning services delivery, but also concluded that high fertility is so much a part of the fabric of poverty, illiteracy, morbidity, and the low status of women in Pakistan, that it cannot be tackled in isolation from other problems.

Pakistan's population has continued to increase at a rate of approximately 3 percent a year. If this trend continues, the 1981 population of 83.7 million can be expected to double in about 23 years. Such a growth rate would impose an enormous burden on Pakistan's economy. The high rate of population growth adversely affects Pakistan's ability to achieve food self-sufficiency and provide adequate transportation, water, health care, educational facilities, housing,

and energy for its people. Recognizing the seriousness of the population problem existing in Pakistan and its linkage to other development constraints, the Mission has assigned the support of population activities in Pakistan as one of its highest development priorities.

Population's linkages to such sectors as agriculture, health, and energy are described in the 1980 USAID/Pakistan CDSS. The solution to excess rates of population growth involves a coherent, integrated, across-the-board, long-term development effort. Clearly, any gains made in agriculture, health, nutrition, water supply, energy, and other sectors will be minimized if the rapid population growth rate continues. And shortfalls in the other sectors could adversely influence demographic patterns. Accordingly, A.I.D.'s proposed six-year portfolio responds to these linkages through projects in agricultural research, on-farm water management, agricultural commodities and equipment, PL-480, malaria control, rural electrification, primary health care, development support training, energy planning, irrigation system rehabilitation, and agricultural production, distribution, and storage.

G. Project Rationale

This project will provide funds to implement several components of the GOP's Population Welfare Program which will contribute significantly to its overall success. Assistance is proposed in areas where the U.S. has a comparative advantage in experience and technology, and which are not overly dependent upon progress in other program components to be useful. Thus, it is anticipated that this assistance would make important contributions to fertility reduction even if efforts in other areas are not wholly successful. The proposed support does not duplicate or impede other donor cooperation. A.I.D.'s proposed assistance is considered to be the first chapter of what is hoped will be a long-term cooperative effort in Pakistan's population programs.

Prior to discussions with A.I.D., the GOP was well along in attracting donor support for many components of the Population Welfare Plan. The GOP also clearly sought to avoid overlap and duplication of donor support and indicated its preference for single-donor assistance for each of the Plan's program areas. In requesting assistance from the U.S., the GOP stressed those components which previously had been supported by A.I.D.

Initially, it appeared that A.I.D. could support one of the three "core" projects of the GOP Population Welfare Plan through which most direct family planning services are to be delivered. However, the Family Welfare Center Project will receive support from the World Bank, and

UNFPA is supporting the Family Health Manpower Development Project and is also prepared to finance all components of the Reproductive Health Services Project, including the training component.

A.I.D. assistance was initially requested in three areas: management information, demographic research and evaluation; logistics support and contraceptive supplies; and, support for bio-medical and socio-medical research. An additional area was also considered and ultimately made a part of A.I.D.'s proposed assistance, namely, short-term training and short-term technical advisory/teaching assistance (professional and personal motivation).

Management information, demographic and bio-medical research, evaluation, and logistics are vital components of any successful family planning program. Government policy and strategy to a large extent should evolve from feedback from these endeavors, and program operations similarly should incorporate the findings. Nearly all comprehensive reviews of the GOP program, including the 1976 A.I.D. "Review of Pakistan's Expanded Population Planning Program" and the 1977 USAID/Pakistan Multi-Year Population Strategy, have indicated deficiencies in the quality of management information, demographic and bio-medical research, and evaluation. It was also observed that the linkages between findings, policy, and strategy needed to be strengthened. The logistics system, likewise, has never functioned efficiently nor has it been able to provide a continuous supply of contraceptives. A.I.D. and the GOP are in full agreement that these areas are important and that improvements are required to increase the chances of overall GOP success in its Population Welfare Program.

III. DETAILED PROJECT DESCRIPTION

A. Sector Goal and Project Purpose

1. The sector goal is to reduce the rate of natural population increase as part of the goal of achieving national social and economic development.

The Population Welfare Plan in 1980 envisioned a population growth rate of 2.7 percent by 1984, down from the 1972-1981 intercensal growth rate of 2.97 percent. However, given delays in project start-up and the time-consuming process of implementing a full scale national program, the program cannot be expected to achieve any significant demographic impact before 1985. Nevertheless, the overall sector goal is desirable and achievable and, in the absence of other major demographic and social changes, can only be reached through interventions to reduce the fertility component of the rate of population growth. Measurement of progress toward goal achievement will involve the analysis of data from the following sources: (a) a series of contraceptive prevalence surveys; (b) birth and death registrations; (c) decennial census figures; (d) data from the information feedback system; and, (e) special surveys undertaken by the Population Welfare

Division. Important assumptions are that: (a) political, economic, and social stability will permit uninterrupted program operations (a severe constraint to previous program activities); (b) the GOP will continue to give sustained and adequate priority to population activities as evidenced by the provision of adequate budgetary support; and, (c) international donor assistance will continue at adequate levels until the GOP can wholly sustain the program.

2. While this project will contribute to achieving the objectives of the Population Welfare Plan, the project purpose is to strengthen the GOP's population planning, evaluation, research, motivational and logistic capabilities and performance.

By the end of the project, a management information, demographic research, and evaluation unit, the Population Development Center (PDC), will be operational and fully staffed with adequately trained personnel, and PDC resources and data will be utilized appropriately for program planning and management. Demographic research will be targeted to the needs expressed by policy-makers, and policy, strategy and management guidelines will draw upon and reflect the findings of research and evaluation. Adequate supplies of contraceptives and contraceptive-related materials and supplies will be available continuously at all approved stock-points and distribution points down to the village level. Inventory and utilization records will be properly maintained, and there will be a one-year supply of A.I.D. provided contraceptives (including orals, condoms and other contraceptives in-country, and a one-year supply in the pipeline at all times during the life of the project. Bio-medical and socio-medical research conducted by the National Institute of Technical Research will be of high quality and will be used by policy-makers and program managers to determine program direction. As a result of exposure to family planning programs and population-related activities in other developing countries and the U.S., and the sharing of ideas and teaching by U.S. experts from varying disciplines, there will be a keener awareness of demographic problems by program personnel and by prominent Pakistanis from the public and private sectors, and their participation in GOP population programs will increase.

Important assumptions at the purpose level are that: (a) the GOP will be willing to accept and utilize high quality research and evaluation findings for policy formulation and program planning; (b) the GOP will give logistics and contraceptive supplies sufficient priority to provide the facilities, personnel, and support necessary to meet service demands; and, (c) appropriate overseas training sites can be identified and U.S. consultants provided to meet project needs.

B. Project Inputs/Outputs

The project has four major components: (1) management information, demographic research, and evaluation; (2) logistics system and contraceptive supplies; (3) bio-medical and socio-medical research; and, (4) professional and personal motivation. A detailed description of each component with proposed inputs and expected outputs follows. A summary of the inputs and outputs is provided in the Log Frame in Annex E.

C. Management Information, Research, and Evaluation

1. Introduction

The large investments made in family planning in Pakistan over the last twenty years have not had a significant impact on the country's demographic situation. One reason for the lack of success which is universally recognized by the GOP and other donors is poor program administration and management. Accordingly, the new Plan emphasizes the need to strengthen this area, and this component responds to that need.

The Population Program has a history of attempts to monitor program impact and activities. These efforts include the 1975 Pakistan Fertility Survey (PFS), the Client Record System (CRS) started in 1975, and a Contraceptive Prevalence Survey (CPS) in 1975. These earlier efforts at developing an effective management information system illustrate the GOP's recognition of the fact that no program can be effectively managed without the information required for decision-making. This recognition is reflected in the new Plan which calls for the development of a Population Development Center (PDC) to administer and coordinate data collection, information feedback, analysis, policy recommendations, and evaluation for the Population Welfare Division. The Plan recognizes that the shift toward integrating population activities with a broad range of social and economic development activities requires a keen understanding of the inter-relationship among population and socio-economic variables. Because of A.I.D.'s long interest and extensive support for activities of this kind in past programs, A.I.D. has been asked to strengthen the existing Population Development Center.

2. The Population Development Center

The Government of Pakistan has long recognized the need to integrate population and development planning and to undertake substantive and methodological research to fill the gaps in population and socio-economic data. Accordingly, a Population Development Center (PDC) was established in 1981 as the research and data collection/

processing unit within PWD. PDC has fifty-five approved positions of which forty are currently filled. Under the Plan, PDC is projected to have a staff of one hundred within the next year. Its current annual budget is Rs 2.0 million (\$191,754), 7/ which covers only operating expenses such as staff salaries and building rental and maintenance. No funds are available to undertake research. Thus, to date, PDC has been unable to function fully and effectively.

PDC is managed by a joint-directorship and has two divisions: the Demographic and Allied Research Division and the Surveys, Statistics and Data Processing Division. The Demographic and Allied Research Division is composed of the Population and Development Section (P&D) and the Policy and Program Evaluation Section (PPE). P&D functions include research and analysis of demographic, developmental, social, economic, and behavioral issues as well as coordination and development of research initiatives through the professional research network and the use of conferences and workshops. PPE functions include conducting program evaluations and making policy recommendations based on research findings.

The Surveys, Statistics and Data Processing Division is comprised of four sections: the Service Statistics Section, the Survey and Data Collection Section, the Data Processing Section, and the Administrative Section. This division is responsible for collection, analysis and feedback of program service statistics, implementation of surveys, and provision of necessary administrative support for all of PDC such as recruiting, payroll, maintenance, finance, and report publication.

3. Project Support Areas

Under this component of the project, funds will be provided for: (a) survey activities; (b) seminars and workshops; (c) training programs; (d) publications; (e) technical assistance for institutional strengthening; (f) a service statistics system; (g) a feedback evaluation system; and, (h) data processing, all of which will be phased in over the life of the project.

a. Survey Activities

i. Contraceptive Prevalence Surveys (CPS)

Pakistan was one of the first countries to carry out a CPS in 1975. Unfortunately, political instability caused a cancellation of the survey with only

7/ At exchange rate of 51.00 Rs 10.43 as of January 26, 1982.

30% of the fieldwork completed. A CPS is designed not only to reveal the extent of contraceptive use, but also to help administrators evaluate family planning programs, check service statistics, assess attitudinal variations, and identify groups of women in need of family planning services.

A.I.D. will support three CPSs under the project. The initial survey will provide baseline data for the population program and will begin in May 1982. The second and third CPSs will begin in January 1984 and September 1985, respectively. Each CPS takes about 12-14 months. Since the time between the first and second, and the second and third surveys is minimal, the latter two surveys will focus more on attitudinal changes rather than contraceptive usage rates. The surveys will be stratified by urban/rural, province, and areas with/without FWCs. Sample size will be determined when the survey design is completed. Data will be generated at several levels, allowing decision-makers at both the national and sub-national levels to examine such issues as changes in levels of fertility over time, the impact of IE&C programs, changes in method preference, perceived and actual availability of contraceptive services and supplies, utilization of program services, the relative contribution of the private and public sectors to prevalence of use, and other relevant issues.

Experience gained from the CPSs in sample frame selection, interviewer training, edit procedures, and other aspects of survey design and implementation will be applied to other survey activities which PDC will implement under the project.

ii. Other Survey Activities

The GOP, through PDC, plans to conduct a number of other surveys, the nature of which will be determined as the Population Welfare Plan is implemented. Possible surveys include the following:

(a) Vital Rates (VR) Surveys measure two basic components of demographic changes: current levels of fertility and mortality. These surveys provide the data necessary to evaluate the overall demographic impact of the program and monitor changes in the demographic behavior of the general population. Depending on the scope, VR survey operations can be carried out separately or in connection with a CPS.

(b) Male or Husband Surveys can provide considerable insight to Pakistan's culture, where men control much of the decision-making process. Questions such as how couples decide to use or not use contraception, what is regarded as an appropriate number of children,

and what services and methods of contraception are acceptable, are little understood in Pakistan. The level of husband/wife communication, especially in the area of fertility and fertility control, has not been adequately investigated. All of these issues are important to understand the environment in which family planning services are delivered.

(c) Evaluation Surveys are a major responsibility of PDC. Examples of surveys in this category include: user follow-up surveys; staff evaluation; special service delivery techniques; staff training evaluation; staff evaluation of administrative procedures; MCH and family planning baseline data; and, program impact evaluations.

b. Seminars and Workshops

During the project, PDC proposes to conduct the following seminars/workshops:

<u>Type</u>	<u>Number</u>
Data Presentation Seminars	3
Self-Evaluation Workshops	10
Target Setting and Accomplishment Seminars	2
Demographic Data Utilization Workshops	10
Population Policy Seminars	2
Population and Development Seminars	2

These seminars and workshops are summarized below:

i. Data Presentation Seminars will be held for program administrators and managers at the national and provincial levels to examine research findings, interpret data, assess implications of findings for policy and program formulation, and develop appropriate actionable recommendations.

ii. Self-Evaluation Workshops will be held at both the national and provincial levels to train administrators in the techniques of both self-evaluation and training methodology. PDC intends to develop at all major program levels (FWCs, district, provincial, and national) evaluation procedures and training methodologies for program operation, using locally generated data such as service statistics.

iii. Target Setting Workshops will be held for small working groups of administrators responsible for setting and achieving program targets and will cover how targets are set, whether and what target measures are appropriate, whether targets are being met, and how to make necessary changes in targets.

iv. Data Utilization Workshops will be attended by national and provincial policy-makers to introduce decision-makers to the various quantitative measures and techniques used in population research such as crude birth and death rates, total fertility rates, unmet need, and contraceptive prevalence, using Pakistani data. The purpose of the workshop is not to train demographers, but to familiarize administrators with concepts and data sets which are available to them for use in decision-making.

v. Population Policy Seminars will involve GOP population program policy-makers in small high-powered meetings where research findings, service statistics, and actual observations are examined in order to discuss policies, project goals, donor relations, and other factors which have significant impact on the program. The structured and formal nature of the seminar will give the managers a chance to look more directly at cause and effect relationships and long-term program plans resulting in a formal population policy statement. Experience in other countries has shown that when decision-makers recognize the utility of research findings, they begin initiating and supporting research, further expanding the base of knowledge needed for a better and more effective population program.

vi. Population and Development Seminars
Researchers and analysts interested in the interrelationships between population and development will present background papers through a series of seminars. Subsequent to seminar discussions on each paper, the authors will revise their papers as appropriate for publication by PDC. Possible topics for the seminars are: Demographic Characteristics of the Population and Consequences for Social and Economic Development; Social, Psychological, and Cultural Factors in the Determinants of Fertility in Pakistan; and, Changing Roles of Women and Social Development in Pakistan.

c. Training Programs

The limited number of trained population researchers, especially in specialized technical areas, coupled with the increasing demand for these skills among government agencies warrants training of PDC staff to strengthen their ability to carry out research on an "as needed" basis. This project will support a training program to help address the program's need for technically

trained manpower. The training program will have three distinct components:

i. In-Country Training will be funded to allow PDC to send junior staff members to universities, in-service training programs, and workshops. Costs and length of training will vary depending on the training site and the subject. Between five and fifteen staff members will receive training per year.

ii. An Internship Program will be established with the social science and economics departments of various local universities. Capable advanced students will be recommended by faculty members to PDC for placement in the Internship Program. These students will work for PDC or some other organization such as PIDE, NITR, or provincial governments, to learn the fundamentals of data collection, data processing, analysis, research administration, and other related skills. The interns will receive a small stipend and university academic credits.

Internship funds may also be used to assist students who use population and development data for their theses. Because of administrative problems, this activity will be limited to two or three students per year, whose research topics are approved by their faculty advisor and the Director of PDC. They will be given a grant of up to Rs 2,500 each to cover costs associated with the research and theses production.

iii. Overseas Training will be supported as long as it is consistent with the needs of PDC for technical skills. Participants will be junior members of the professional staff who would benefit from the training, but whose absence would not hinder operations in PDC. Selected trainees will be sent to training sessions and workshops for periods of three to twelve months. Appropriate training institutions include the International Statistical Program Center, U.S. Bureau of the Census; the East-West Center; the Community Based Family Planning Program (Bangkok); the Asian Institute of Technology (Bangkok); the University of Chicago; and, the University of Connecticut.

d. Publications

Under the Population Welfare Plan, PDC is responsible for assisting in the dissemination and utilization of population and development research findings. Quality publications lend credibility to the research, facilitate better and more extensive utilization of the findings, enhance research and publication standards, and provide recognition to the individuals who carry out the work.

Some capability for printing and binding already exists within the Population Welfare Division in the Directorate of Publications and Communication, Lahore. Under the project, funds will be provided to develop the production skills and increase the capability and capacity of PDC through staff support and the provision of reference and methodological materials, typewriters and mimeo machines.

e. Technical Assistance for Institutional Strengthening

PDC has many capable staff in a number of research and analytical areas. However, the need for technical assistance for PDC in the form of short-term advisors, a visiting scholar program, one long-term U.S. advisor, and three long-term Pakistani advisors has been identified.

Short-term technical assistance will be provided to PDC in such areas as data processing, evaluation, data utilization, contraceptive prevalence surveys, logistics and service statistics, and vital rates surveys. In addition, the establishment of a "visiting scholar" program will expose PDC to leading population/family planning/development scholars, who will assist PDC in training, data analysis, publication of Pakistani data, and provide technical assistance in other specific areas. Such an exchange will provide Pakistani researchers exposure to international expertise as well as fresh insights into the demographic situation in Pakistan. Examples of the Visiting Scholar Program are: Cost/Benefit Analysis of the Family Planning Program in Pakistan - Warren Robinson, Pennsylvania State University; the TABRAP/CONVERSE Computer Model for Estimating the Demographic Impact of Family Planning - Dorothy Nortman, Population Council; and, Unmet Need for Family Planning in Pakistan - Charles Westoff, Princeton University.

Much of the work initiated by PDC in the first three years of the project will be carried out for the first time and will require considerable design work and analysis, possibly with considerable changes and redesign required in the preliminary stages. Consequently, one long-term expatriate advisor will be provided for two years to assist PDC in research design, field testing, data collection, analysis and utilization which are key to PDC's functioning. In addition, the long-term advisor will help PDC identify, program, and coordinate all the short-term assistance planned for under the project. At the end of 2 years, it is expected that PDC will be sufficiently operational to require only short-term technical assistance.

The project will also provide budget support for three years each for three senior Pakistani researchers to serve

as the executive director and the two division chiefs of PDC. These three positions are to be filled by Pakistanis currently working for international organizations abroad. The GOP has had informal contacts with several Pakistani researchers who have expressed a desire to return to Pakistan. While the salaries to be offered these individuals are not competitive or comparable to what they now receive, other considerations are expected to be significant enough to attract well-known Pakistani researchers to take positions at PDC. At the end of three years, PDC will decide whether to offer these three officers permanent positions.

f. Service Statistics

PDC has designed a service statistics system to collect information in a number of areas including services provided by FWCs, commodity logistics, and training. The system is intended to provide operational data to each administrative level of the program (FWC, district, provincial, and national). The system, parts of which will be computerized, is not yet in place.

Required resources include: increased data processing capacity and capability; funds to cover computer programming; and, technical assistance for approximately five months to assist in design testing and operationalization of the system. The long-term resident advisor will also provide technical support for the system. The GOP will cover most of the recurrent costs associated with maintaining this system.

g. Feedback/Evaluation System

Short-term technical assistance and training will be provided to help PDC develop a feedback/evaluation system. The feedback/evaluation system will provide performance information to all administrative levels of the program. Such feedback will allow comparison of the performance of various geographic and administrative units and of individual components of the program. The evaluation system will be divided into external evaluation and self-evaluation. The external evaluation will be administered by PDC using established evaluation techniques so that individual administrative or operational units, such as training or IE&C, can resolve problems or reinforce positive behavior. PDC will also develop a number of procedures and manuals to allow each level in the administrative hierarchy to evaluate its own performance. PDC is also planning to develop training programs in the use of evaluation materials for FWC, district and provincial level personnel.

h. Data Processing

PDC has a data processing center which consists of three IBM Model 3741 dual entry stations, an IBM Model 3742 Printer/Processor with 8K storage, a diskette to tape copier, and a Hewlett Packard Card reader processing unit. The Hewlett Packard unit was provided by A.I.D. under a previous project but arrived at a time when population activities had significantly decreased. Due to program inactivity, decreased need for data processing, and the high installation and maintenance costs, the unit was never hooked up. Under this project, funds will be provided for installation of this unit. For more complex work, the PWD has relied on the United Bank Limited's computer.

The current system has been sufficient to meet past needs, but the expanded role assigned to PDC by the GOP in population and development research, service statistics, and data analysis will soon outstrip its current capacity. To expand its capacity, therefore, an IBM System 34 programing station with display, printer, and 64 K storage/memory will be procured for PDC under the project. The System 34 can be complemented with assorted software packages (SPSS, BIOMED, P-STAT, SAS) with accompanying documentation, which would greatly facilitate sophisticated analysis of survey results. A computer analyst from SER/DM, AID/Washington visited Pakistan in February 1982 and reviewed the computer needs of PDC. (See Annex F.3.) His recommendation to purchase this IBM unit was approved by SER/DM. (See Annex F.4.) Justification for this particular model is provided in the Technical Analysis section of this Project Paper. A data management services request is included in Annex F.2.

An expanded data processing capability at PDC will increase its utility and credibility as it relates to various governmental organizations, as well as allow PDC to undertake work for other organizations, furthering its role as a coordinator of research. Increased speed of production, accuracy of results, and more detailed analysis will all result in greater impact of the research undertaken by PDC.

D. Logistics System and Contraceptive Supplies

This project component consists of: (1) construction of warehousing facilities; (2) improvement of the supply management system; and, (3) procurement of contraceptive supplies.

1. Warehousing Facilities

Under the GOP Population Welfare Plan, contraceptives and other program supplies for the PWD will be managed at three program levels: (a) a logistics control office and central warehouse in Karachi; (b) 65 intermediate District Offices; and, (c) 1,250 Family Welfare Centers (FWCs). Contraceptives for agencies outside the PWD, such as other government organizations, voluntary agencies, industrial corporations, and the military will be supplied directly from the central warehouse.

a. Current Facilities

PWD's central warehousing facilities are located in Karachi in two buildings: a portion of an old USAID/Pakistan building and a rented old textile mill in the industrial area. In the former building, PWD maintains its main supply office and also stores spare auto parts and some medical equipment. The building is controlled by the Disaster Relief Cell of the Cabinet Division, and the major portion is used for storage and handling of disaster relief supplies. In view of an increase in the volume of these relief supplies, the Cabinet Division has been pressuring the PWD to vacate the approximately 3,000 sq. ft. of space that it occupies on the premises. PWD has been unable to vacate because it has not been able to find suitable alternate accommodations within its budgetary means.

The other warehousing facility, originally a textile mill, is located approximately 10 miles from the main supply office, has approximately 10,000 sq. ft. of floor space, and is used mainly for storing orals and condoms. The building is in poor condition, with openings through which rain and dust penetrate to the extent that it is necessary to cover part of the supplies with tarpaulins to protect them from damage. PWD currently pays Rs 6,700 (\$642) ^{8/} per month rent. The rent has recently increased to Rs 20,000 (\$1,918) ^{8/} per month, and the landlord has started legal proceedings to have the PWD evicted. This building is not suitable for storage of contraceptives or any other items used by the program. In addition, both buildings are too far from the railway office.

The GOP has recognized for several years that the PWD's central warehousing facilities in Karachi are seriously inadequate to support the program. A.I.D., in a previous program evaluation report, concurred in this assessment.

^{8/} At exchange rate of \$1.00 = Rs 10.43 as of January 26, 1982.

Under the new Plan, the program will manage a larger quantity of contraceptives than in the past and many other items including medicines, food supplements, medical equipment, and educational supplies. The present storage facilities are inadequate in design, location, condition, and capacity.

The GOP specifically requested A.I.D. to provide funds for a new warehousing facility. No other donor has expressed interest in supporting this activity of the GOP Population Program, and the GOP does not have resources of its own for this purpose at the present time. A tour of the existing warehousing facilities in November 1981 by an A.I.D.-financed management/logistics specialist confirmed the immediate and urgent need for a new warehousing facility. Since A.I.D. will be providing over \$20 million worth of contraceptives during the life of the project, the Mission believes that it is highly appropriate and desirable for A.I.D. to support this request to ensure that adequate and proper warehousing facilities are available for the contraceptives as well as for other program commodities.

The GOP and USAID/Pakistan considered the option of purchasing and renovating a building rather than constructing a new facility. A preliminary search, however, indicated that it is unlikely that appropriate buildings will become available for purchase in the next few months. Since commodities are scheduled to begin arriving in July 1983 and at least 12 to 18 months should be allowed for construction, the Mission and the GOP jointly agreed that the option to purchase was not viable and that construction of a new facility should commence as soon as the Project Agreement is signed.

b. Proposed Warehouse

The logistics unit of the PWD has estimated that the new central warehousing facility should have 50,000 sq. ft. of floor space for storage of contraceptives and other program supplies to be provided by other donors and those purchased directly by the GOP with its own resources, and for office space, equipment, and supplies. The Mission considers this a reasonable estimate for calculating construction costs. The USAID/Pakistan Office of Energy and Engineering will work closely with PWD staff and the local architectural and engineering firm, which will be contracted under the project, to further refine total space needs and allocations of space prior to the design of the building.

1982 cost estimates for constructing a non-air-conditioned and an air-conditioned warehouse in Karachi are Rs .85 per sq. ft. and Rs 275 per sq. ft., respectively. At an

estimated annual inflation of 20% for construction costs in Pakistan, 1983 cost estimates would be Rs 222 and Rs 330, respectively. These 1983 cost estimates were used as a basis for calculations since most of the actual construction work will occur in the first half of 1983. At these rates, the cost of the proposed warehouse is as follows:

42,500 sq. ft. of non-air-conditioned space @ Rs 222 per sq. ft.	=	Rs 9,435,000
7,500 sq. ft. of air-conditioned space @ Rs 330 per sq. ft.	=	<u>2,475,000</u>
SUB-TOTAL	=	Rs 11,910,000
Cost of local architectural and engineering firm (estimated at 5% of construction costs)	=	<u>595,500</u>
TOTAL	=	Rs 12,505,500

or

the equivalent of \$1,198,993 ^{9/}

A.I.D. has also agreed to provide two pick-up trucks and spare parts and a limited amount of equipment for the warehouse including one forklift and smaller items such as cabinets, racks, fans, and trollies, all of which will cost approximately \$92,000. A list of the specific items and their estimated costs is included in Annex J.

2. Supply Management System

a. Current System

An Information System for Contraceptive Movement (ISCM) has been in operation since 1976. While the ISCM contains all the elements for logistics management, it has never functioned very well. Although the system has been revised several times, some of the procedures are cumbersome and not well-understood at all operational levels. Furthermore, the ISCM is not responsive to the needs of the new program strategies and field staffing. PWD personnel recognize that the system must be revised and documented to improve the availability of family planning related commodities to the end users.

^{9/} At exchange rate of \$1.00 = Rs 10.43 as of January 26, 1982.

b. Planned Improvements

The PWD is re-examining its procedures for managing the supply system in order to institute a revised system of recording, accounting, and reporting which will be tested in a few districts. Based on field testing, necessary modifications will be made and a supply manual will be prepared, printed, and distributed, followed by training of operational and supervisory staff at the district level. Upon completion of training and countrywide launching of the new system, implementation will be monitored by the PWD supervisory and inspection staff to ensure that the prescribed procedures are adhered to and that adequate inventory levels are maintained at all districts, Family Welfare Centers, and other program service outlets.

This project will assist the PWD in the redesign and implementation of the system by providing technical assistance, training, and other support. Consultants will work with PWD in:

i. evaluating the new system based on the results of the field trials and making necessary revisions;

ii. preparing a supply manual which will describe the supply management procedures at all program levels;

iii. training of district level operational and supervisory personnel including staff from those outside agencies which will be involved in the delivery of contraceptive services; and,

iv. evaluating the impact of the system and of training, and suggesting modifications in the design of the system and staff training.

Two U.S. consultants will visit Pakistan for 6 weeks each during June-July 1982 to help evaluate the system and prepare the supply manual. One week will be spent on preparatory work, two weeks for system evaluation, and three weeks for drafting the supply manual. The PWD will be responsible for the printing costs and distribution of the manual.

Training of operational staff will begin later in 1982 with the assistance of one U.S. consultant. Five training sessions will be held, two in the Punjab and one each in the capital cities of the Northwest Frontier, Sind and Baluchistan Provinces. A total of 80 participants, 16 in each course, will be trained in 3-day courses. To ensure participation, the cost of local travel and per diem for participants will be paid out of project funds. One U.S.

consultant will also visit Pakistan for four weeks after mid-1983 to evaluate the effectiveness of the system design as well as the training program.

Funds will also be provided to send two PWD logistics officers to visit the population programs in Bangladesh and Indonesia to observe their logistic systems. The Bangladesh Family Planning Program also has a new warehouse which was constructed with UNFPA assistance, and the Indonesia program has a computerized system for supply management which is reportedly the best among A.I.D. supported programs.

3. Contraceptive Supplies

a. Background

The contraceptive use pattern in most countries indicates that couples initiate contraception using conventional methods such as condoms, orals, and foams, and later move toward semi-clinical, clinical, and surgical methods. The new GOP plan calls for a "cafeteria" approach to contraceptive distribution in which a variety of contraceptive methods will be made available to prospective clients to enable them to choose the method best suited to them.

In Pakistan, the condom, followed by oral pills, has been by far the most popular contraceptive method. In the mid-1960's, the GOP population program included foaming tablets, IUDs, diaphragms, and foams, in addition to condoms. However, because of the higher cost, lower rate of effectiveness, and, for foams, special storage requirements, diaphragms, foams, and foaming tablets were discontinued. The GOP at that time decided to give high priority to IUDs. In 1974-1976, while the program focused on condoms and orals, foam was again distributed but on a limited scale. However, before A.I.D. could assess the demand for foam and procure it for the GOP, U.S. assistance to Pakistan was suspended.

As discussed previously, the population program in Pakistan was either inoperative or operated only partially in the last 4-5 years. During this time, there was no new U.S. assistance, other donors also withdrew their support, and the program was reorganized substantially, which culminated in an extensive reduction-in-force of field staff. Consequently, delivery of contraceptives to clients became erratic as did the availability of contraceptive supplies for the program. These factors make it difficult to project future contraceptive usage with precision.

The price change for government-supplied orals and condoms in the GOP population program, which occurred in the last quarter of 1980, further complicated attempts to project future contraceptive usage. All contraceptives available through

the government distribution network are sold at uniform prices whether they are sold by population field staff at FWCs or door-to-door, by other government agencies, or by non-salaried selling agents, mostly shopkeepers, appointed by the population staff. Many of these shops also sell condoms and orals supplied by the private sector. Proceeds from the sales of government-supplied contraceptives are collected and used for the program. While the government staff deposits all of the sales proceeds, the non-salaried agents are allowed to retain a percentage for commission. As the retail prices of the contraceptives supplied by the private sector are much higher than that of the government-supplied orals and condoms, the shopkeepers earn a much higher commission on the former contraceptives.

In the last quarter of 1980, the price of orals was increased from Rs 0.25 to Rs 1.00 per monthly cycle, and condoms increased from Rs 0.25 to Rs 4.00 per dozen. As seen in Table 3, this resulted in a dramatic decline in sales, which has persisted till the present time. The GOP increased the price for two major reasons: (i) It was felt that the low price conveyed the image of an inferior product, especially when compared with the orals and condoms available through the private sector. (ii) In addition, because of the low price of these items, some of the population field staff were suspected of buying contraceptives with their own money and thereby inflating sales reports to exaggerate their own performance. Thus, sales reported prior to September 1980 as shown in Table 3 are regarded as being somewhat on the high side.

The decline in contraceptive sales is considered a temporary phase which will pick up as the new population program gains momentum. It should be noted that as of March 1, 1982, the government reduced the price of condoms from Rs 4.00 per dozen to Rs. 1.00 per dozen in an attempt to increase demand. The price of orals has remained at Rs 1.00 per monthly cycle.

b. Contraceptive Needs Assessment

Assessment of contraceptive requirements is difficult in Pakistan because good inventory data of current stocks of orals and condoms in-country are not readily available, and the reported usage data over the years are incomplete or suspect. The problem of assessment was further compounded by the need to recall a major part of the orals inventory in early 1982 because of loss of potency. This recall was in process as the Project Paper was being prepared. While the exact extent of the recall will not be known for another month or two, it is estimated that over 5,000,000 cycles will be recalled and destroyed.

Because of the limitations discussed earlier in using sales data for projecting contraceptive needs, future use and

TABLE 3

AVERAGE MONTHLY SALES OF CONDOMS AND ORALS
(JAN 1978 - SEP 1981)

<u>Year</u>	<u>Quarter</u>	<u>Condoms</u> (000 Pieces)	<u>Orals</u> (000 Cycles)
1978	Jan - Mar	3,667	86
	Apr - Jun	2,533	73
	Jul - Sep	5,033	119
	Oct - Dec	6,233	174
	Total	<u>17,466</u>	<u>452</u>
1979	Jan - Mar	5,294	165
	Apr - Jun	5,738	170
	Jul - Sep	5,805	255
	Oct - Dec	7,583	318
	Total	<u>24,420</u>	<u>908</u>
1980	Jan - Mar	6,328	291
	Apr - Jun	8,677	298
	Jul - Sep	7,126	275
	Oct - Dec <u>a/</u>	967	40
	Total	<u>23,098</u>	<u>904</u>
1981	Jan - Mar	324	40
	Apr - Jun	322	48
	Jul - Sep	263	23
	Total	<u>909</u>	<u>111</u>

a/ The dramatic decline in sales in the last quarter of 1980 is attributed mainly to the significant increase in the sales price of both orals and condoms at that time coupled with the subsequent reduction-in-force of population field staff.

import needs were projected on the basis of the amount of in-country stocks from data available at USAID/Pakistan and of anticipated contraceptive prevalence among the married couples of fertile age (MCFA). The 1975 Pakistan Fertility Survey places contraceptive prevalence at 5% for MCFA. In this paper, it was assumed that contraceptive prevalence would increase to 11% by the end of the project. The 11% prevalence rate assumed for 1987 is considered more realistic than the Plan's projection of 20% by 1983 and is based on more modest assumptions of use levels. The method mix used in making projections is a "best guess" approximation constructed from several estimates of mix. The projected trends of method mix are derived from experience in other countries when programs gained momentum and are graphically depicted on the following page. Based on these assumptions, the contraceptive use prevalence by method and the corresponding amount of contraceptives required are presented in Tables 4 and 5, respectively.

c. Proposed A.I.D. Assistance

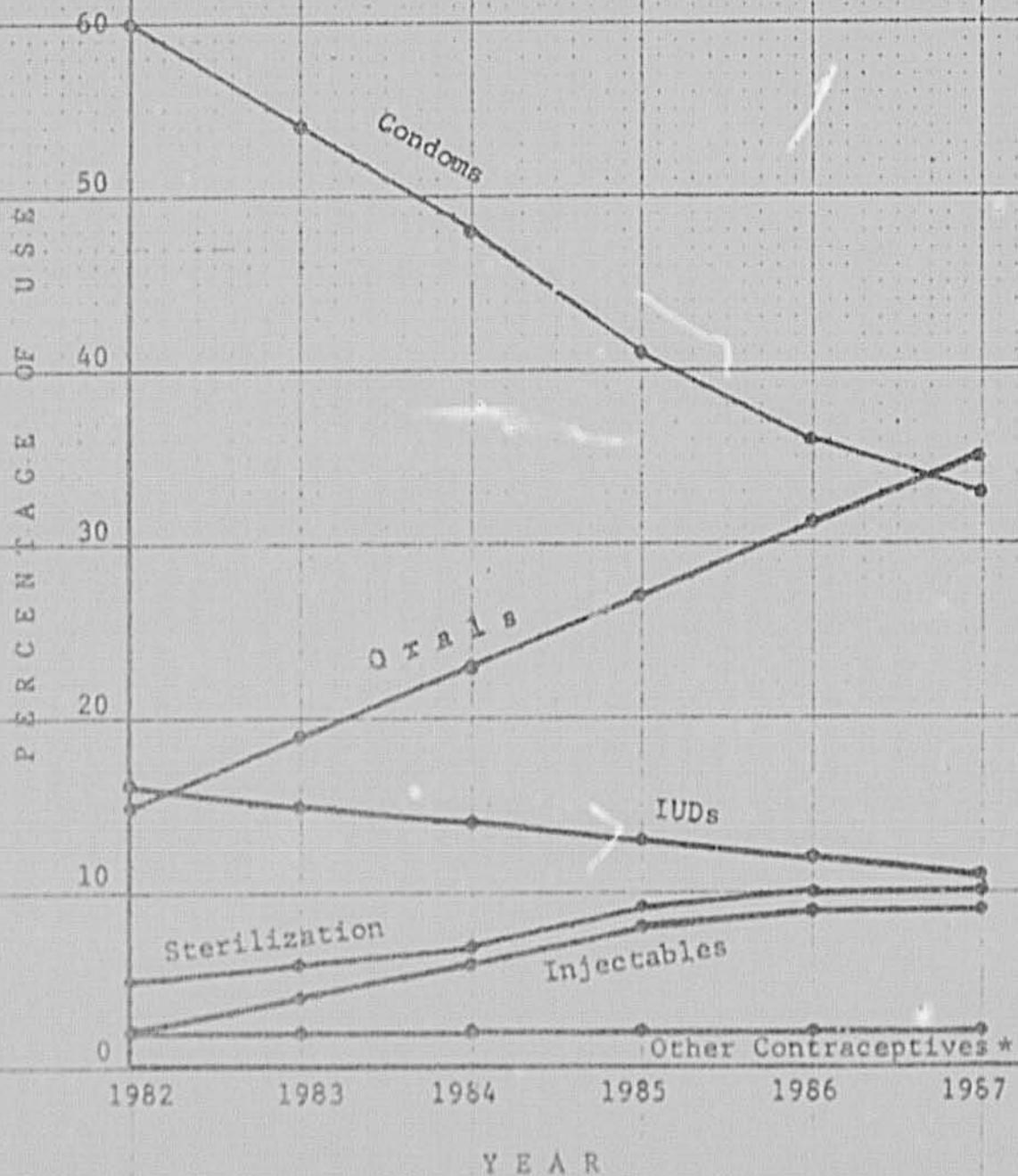
The GOP has requested A.I.D. to provide condoms, orals, and a mix of "other" contraceptives, which are likely to include foams, foaming tablets, jellies, and diaphragms. The current supply of condoms, which was donated by UNFPA, appears to be adequate for the first two years of the program. A.I.D. will provide all condoms required for the program beginning in 1983 through 1987. Because of the recall of orals in early 1982, the GOP asked A.I.D. to provide 2,000,000 cycles by June 1982 to cover the projected need for 1982 and to provide all the orals projected as needed for the remainder of the project period through 1987. Other donors, most notably UNFPA, have been and will continue to provide all the injectables required under the program, and UNFPA will also provide support to the GOP in the area of sterilization. Since Pakistan manufactures Lippes loops, the GOP is not currently anticipating importing any IUDs, although they may decide to use some Copper T's in the program in the future.

Other donors, including UNFPA, have agreed to provide the program's 1981 and 1982 needs for "other" contraceptives. The GOP has therefore requested A.I.D. to provide a mix of these "other" contraceptives beginning in 1983 through 1987. The exact method mix for the first tranche to be imported in 1983 will be determined at the end of 1982 after the GOP and the Mission have had an opportunity to evaluate the experience with these contraceptives over the last year.

Contraceptive import needs and costs during the project period were based on the projected usage of condoms, orals, and "other" contraceptives and are presented in Table 6. The cost of foaming tablets was considered to be representative of the latter category of contraceptives

FIGURE 1

PROJECTED CONTRACEPTIVE METHOD MIX



* Foams, jellies, diaphragms, and foaming tablets.

TABLE 4

ESTIMATES OF CONTRACEPTIVE USE PREVALENCE BY METHOD, 1982-1987

(In 000)

	<u>1982</u>	<u>1983</u>	<u>1984</u>	<u>1985</u>	<u>1986</u>	<u>1987</u> ^{a/}
A. Married Couples of Fertile Age (MCFA) <u>b/</u>	14,700	15,100	15,600	16,000	16,500	17,000
B. Contraceptive Use Prevalence						
1. Percentage of MCFA	5.00	6.00	7.50	8.75	10.00	11.00
2. No. of Contracepting MCFAs or Users	735	906	1,170	1,400	1,650	1,870
C. Users Breakdown by Method						
1. Condoms						
a. Percentage (of B.2)	60	54	48	41	36	33
b. No. of Users	441	489	562	574	594	617
2. Orals						
a. Percentage	15	19	23	27	31	35
b. No. of Users	110	172	269	378	512	655
3. IUD						
a. Percentage	16	15	14	13	12	11
b. No. of Users	118	136	164	182	198	206
4. Injectables						
a. Percentage	2	4	6	8	9	9
b. No. of Users	15	36	70	112	148	168
5. Sterilization						
a. Percentage	5	6	7	9	10	10
b. No. of Users	37	54	82	126	165	187
6. Other Contraceptives <u>c/</u>						
a. Percentage	2	2	2	2	2	2
b. No. of Users	15	18	23	28	33	37

a/ PACD of A.I.D. project - September 30, 1987.

b/ Projections are based on the component method using data from the 1981 census and 1975 age distribution from the Pakistan Fertility Survey.

c/ Jellies, foams, foaming tablets, diaphragms.

TABLE 5

PROJECTED USE OF ORALS, CONDOMS AND "OTHER" CONTRACEPTIVES, ^{a/} 1982-1987

(In 000)

	<u>1982</u>	<u>1983</u>	<u>1984</u>	<u>1985</u>	<u>1986</u>	<u>1987</u> ^{b/}
1. Condoms						
a. No. of users (MCFA)	441	489	562	574	594	617
b. Pieces needed at 100/year	44,100	48,900	56,200	57,400	59,400	61,700
2. Orals						
a. No. of users (MCFA)	110	172	269	378	512	655
b. Monthly cycles needed at 13/year	1,430	2,236	3,497	4,914	6,656	8,515
3. "Other" Contraceptives ^{a/}						
a. No. of users	15	18	23	28	33	37
b. Pieces needed at 100/year	1,500	1,800	2,300	2,800	3,300	3,700

^{a/} The GOP has requested A.I.D. to provide a mix of "other" contraceptives including foams, jellies, diaphragms, and foaming tablets after 1983, in addition to condoms and orals. The exact composition of this category of contraceptives has not yet been determined. (See text) However, for planning purposes, foaming tablets were considered to be representative of this category of contraceptives.

^{b/} PACD of A.I.D. project = September 30, 1987

TABLE 6

ESTIMATED CONTRACEPTIVE IMPORT NEEDS AND COSTS, 1982-1986

(In 000)

Contraceptive and Calendar Year	Inventory As of Jan. 1	Annual Use	As of Dec. 31		Annual Import Needs <u>c/</u>	Cost <u>d/</u> (In \$000)	Funding Year <u>e/</u>
			Expected <u>a/</u> Inventory	Desired <u>b/</u> Inventory			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
CONDOMS (Pieces)							
1982	111,456	44,100	67,356	51,000	-	-	-
1983	67,356	48,900	18,456	56,200	37,744	1,434	1982
1984	56,200	56,200	-	57,400	57,400	2,290	1983
1985	57,400	57,400	-	59,400	59,400	2,489	1984
1986	59,400	59,400	-	61,700	61,700	2,714	1985
					63,528 ^{1/}	2,935	1986
				SUB-TOTAL	274,772	11,862	
ORALS (Cycles)							
1982	1,430 ^{f/}	1,430	-	2,327	2,000	408 ^{g/}	1982
1983	2,000	2,236	(236) ^{h/}	3,497	3,733	728	1982
1984	3,497	3,497	-	4,914	4,914	1,006	1983
1985	4,914	4,914	-	6,656	6,656	1,431	1984
1986	6,656	6,656	-	8,515	8,515	1,922	1985
					8,772 ^{1/}	2,079	1986
				SUB-TOTAL	34,590	7,574	
OTHER ^{i/}							
1982	-	-	-	-	-	-	-
1983	18	18	-	23	23	150	1982
1984	23	23	-	28	28	191	1983
1985	28	28	-	33	33	236	1984
1986	33	33	-	37	37	278	1985
					381 ^{j/}	300	1986
				SUB-TOTAL	159	1,155	
				TOTAL		20,591	

a/ Arrived at by deducting use (Column 3) from inventory as of Jan. 1 (Column 2).

b/ It is desirable to have one year's supply on hand. Hence, quantity equals next year's estimated usage.

c/ Equals Column 4 minus Column 5.

d/ 1982 cost estimates were based on the following prices: Condoms = \$3.80/hundred; Orals = \$0.195/cycle; Foaming Tablets = \$6.50/hundred. For each year beyond 1982, an inflation factor of 5% compounded annually was added to the 1982 prices.

e/ Due to long lead time, procurement must be funded in previous year.

f/ Excludes the stocks of orals whose validity will expire on/before Dec. 31, 1982.

g/ Includes \$18,000 for air shipment of 400,000 cycles to replace expired stocks.

h/ This shortfall will be met by scheduling early receipt of part of the 3,733 ordered in prior year.

i/ For planning purposes, foaming tablets (in hundreds of tablets) were considered to be representative of this category of contraceptives. (See text).

j/ Extrapolated from 1986 figures.

and hence was used throughout for financial planning purposes only. Because of the 18-month lead time required to procure orals and condoms through the A.I.D. central procurement process, orders will be placed at least one and one-half years in advance of when the commodities are actually required. While the lead time for procuring "other contraceptives" is not as lengthy, orders for these commodities will be placed at least one year in advance of the date they are required in-country. Because of the uncertainties in demand for all contraceptives in the program, the GOP and USAID/Pakistan will conduct an annual review of sales statistics and usage patterns prior to placing orders for the next tranche of supplies and will make necessary adjustments in both the scheduling and amounts of deliveries at that time.

E. The National Institute of Technical Research

1. Background

The National Institute of Technical Research (NITR), until recently called the National Research Institute of Fertility Control, was established in 1962 to conduct program-oriented research and training. From the inception of the government's population program in 1965, it has served as the Population Welfare Division's technical unit responsible for bio-medical and socio-medical research and testing of contraceptives. It also has a collaborative program with WHO in clinical research and has sufficient professional standing to have been designated as one of the 22 WHO collaborative research centers worldwide. Located in Karachi, NITR operates contraceptive testing, radioimmunoassay, and pathology laboratories, and undertakes field and laboratory research on contraceptive delivery and acceptance. Up until 1976, it was active in collaborative social services research with Pakistani universities and other research units. Lack of sufficient funding since 1976 has prevented such collaborative research. The Institute at one time had about 90 staff positions, which, under the recent program reorganization, was reduced to 69 approved positions for all grades of staff. Its operating expense budget for 1982-83 is about Rs 3.0 million (\$287,632). ^{10/}

The following summarizes some of the activities NITR has been involved in since 1962:

a. Research (clinical trials of contraceptives, basic contraceptive-related bio-medical research, and international collaborative studies):

^{10/} At exchange rate of \$1.00 = Rs 10.43 as of January 26, 1982.

- b. Contract research with universities, medical schools and other organizations;
- c. Research coordination;
- d. Conducting seminars, workshops, and lectures;
- e. Publication of training materials, seminar proceedings, and research bibliographies;
- f. Contraceptive testing, largely of condoms and IUDs;
- g. Management of three family planning clinics which serve as a resource base for much of the clinical research;
- h. Training, both in-service and for special groups; and,
- i. Liaison for the PWD with other research, professional and technical groups.

Examples of research undertaken by NITR which influenced policy decisions include the following:

- a. The knowledge and experience gained from IUD studies conducted by the Institute during the Second Five-Year Plan resulted in the selection by the Government of the Lipps Loop for use as the main contraceptive method at that time.
- b. Studies conducted by the Institute showed that a high proportion of women discontinue the use of oral pills within the first few months of acceptance. Major reasons identified for discontinuation were side effects, occurrence of pregnancy due to improper use, and erratic supply at the local level. The Institute recommended that precise and thorough instructions be provided to new acceptors, that side effects be better handled, and that a continuous and sufficient supply of oral pills of good quality be available to the consumer.
- c. Before oral pills were introduced in the national program, the Institute conducted several studies to ascertain whether Pakistani women would follow a 21-day regimen of daily pill-taking. It was found that it was easier for women to take the pills regularly if the gap of 7 days could be avoided. The oral pills now used for the program have 28 pills, 21 hormonal and 7 iron pills.

On-going research includes the following:

- a. Phase IV trial of Norigest injection.
- b. Return of fertility after long-term use of injectables.
- c. The accumulation of injected hormones in the blood following long-term administration.
- d. A comparative trial testing various intervals for injecting contraceptive hormones.

2. Proposed A.I.D. Assistance

Despite its status as a WHO collaborative research center, the Institute has suffered since 1976 because of lack of adequate funding. The multi-disciplinary and long-experienced central and field staff have little access to refresher training, either in-country or overseas, to maintain the Institute's standing and to continue the professional education of its staff. WHO has provided limited short-term advisors for specific research projects and a limited number of fellowships. Nevertheless, the Institute suffers particularly in epidemiologic and analytic capabilities. There is a statistician but no full-time epidemiologist on the staff. The Institute is dependent on outside capability from Islamabad, Geneva or elsewhere for computer analysis. The Institute also tests the quality of samples of all batches of condoms imported as well as samples from field stocks. The testing equipment used is imprecise and primitive.

For the first ten years of its existence, the Institute has been located in private, rented facilities. It has shifted its location several times until it acquired its present quarters in 1972, which is a small two-story government-owned building with two halls and a few rooms in a very narrow compound. Repeated shifting of sophisticated scientific equipment due to the lack of a permanent facility is damaging, uneconomical, and disruptive. Inadequate electrical wiring presents problems in using all equipment at the same time and in controlling the temperature, particularly in the summer months. This, combined with dust gathering, adversely affects the operation and precision of the sophisticated scientific equipment. When it first moved to its present location, the Institute was given four additional rooms in another building. Shortly thereafter, however, the Provincial Government reoccupied the additional rooms, and the Institute was forced to move its staff to the already overcrowded present space.

The GOP requested and A.I.D. agreed to provide support to NITR in the following areas:

a. Long-Term Training

Two fellowships of twelve months each leading to a Master of Public Health degree in epidemiology.

b. Short-Term Training

Thirty person-months of short-term (average of 3 months each) training in the U.S. in such areas as biostatistics, computer theory, computer programming, contraceptive technology, and research design. Attendance at international technical seminars will also be included in this category.

c. Short-Term Advisory/Teaching Assistance

A total of 15 person-months (average visit of one month each) of teaching and advisory assistance by visiting professors and other technical experts.

d. Commodities

A condom testing unit.

e. Construction

Construction of a 25,000 sq. ft. three-story building of which 5,000 sq. ft. will be air-conditioned, to house the offices, laboratories, conference rooms, and equipment of the Institute. The cost of this building was estimated as follows:

20,000 sq. ft. of non-air-conditioned space @
Rs 222 per sq. ft. = Rs 4,440,000

5,000 sq. ft. of air-conditioned space @
Rs 330 per sq. ft. = 1,650,000

SUB-TOTAL = Rs 6,090,000

Cost of local architectural and engineering firm (estimated at 5% of construction costs) = 304,500

TOTAL = Rs 6,394,500

or
the equivalent of = \$ 613,100 11/1

11/ At exchange rate of \$1.00 = Rs 10.43 as of January 26, 1982.

The GOP specifically requested A.I.D. to provide funds for a new building for NITR. No other donor has expressed interest in supporting this activity, and the GOP does not have resources of its own for this purpose now or in the foreseeable future. A tour of the existing facilities in November 1981 by the project design team and Mission staff confirmed the need for a new facility. The Mission believes that the Institute has earned a reputation for undertaking sound, reliable and highly relevant bio-medical and socio-medical research in the population area. The Pakistan population program would be better served by an efficient and effective Institute which is able to perform its critically important functions without being handicapped by its physical environment. The Mission, therefore, has concluded that it is highly desirable to support this request of the GOP.

As in the case of the new central warehouse facility, the GOP and USAID/Pakistan considered the option of purchasing and renovating a building rather than constructing a new facility. At the present time, no appropriate buildings are available for purchase, and the GOP has already tentatively identified a plot of land for construction. The Mission also considered the possibility of continuing the search for a building for a specified period of time after the Agreement is signed but decided against this option for two reasons. The required specifications of a new building for the Institute include laboratories which will make the search for an appropriate building more difficult and time-consuming. Furthermore, since both NITR and the central warehouse are in Karachi, there are advantages in undertaking construction of both facilities simultaneously especially with respect to the contracting of local A&E firms. It is also highly desirable that the NITR be in a new facility as early as possible so that it can maximally benefit from the assistance programed for the Institute under the project. The Mission, therefore, has decided to initiate the construction process for a new facility as soon as the Project Agreement is signed.

F. Professional and Personal Awareness/Motivation

The GOP's renewed effort in population will take place in an extremely complex social, political, economic, and religious environment. National, provincial and community leaders can play an important role in supporting and sanctioning this program so that a broad base of support is established. Promotional/motivational and educational programs for this specific target group, therefore, represent a critical element of Pakistan's population program.

Funds will be provided under the project for fifty short-term (usually 2 weeks to 3 months) training and/or observational visits ^{12/} in the United States and third world countries for population, health, education, social welfare and other professional and managerial personnel; federal, provincial and district authorities; and, other prominent and influential Pakistanis from the public and private sectors who are leaders or who influence groups. The visits may be used for professional training, attendance at population-related conferences and workshops, and tours to observe or participate in population-related activities in other countries. Fifteen short-term (average one month) visits will also be made by U.S. population, health, demography, social science, education and other experts to Pakistan to consult or teach in population-related activities. An example of such an activity which is currently being considered is a "RAPID" presentation.

This component is designed to provide the exposure and education necessary to establish support for the program and thereby insure its acceptance and longevity. Such an approach has proven effective in other countries and is considered feasible and highly desirable in Pakistan.

IV. IMPLEMENTATION PLAN

A. Implementation Schedule

Project activities are programed to take place over a period of approximately five and one-half years from the date of signing the Project Agreement. The Project Assistance Completion Date (PACD) is September 30, 1987. A proposed implementation schedule is presented in Table 7.

Immediately upon signing the Project Agreement orders will be placed for all equipment and supplies to be procured under the project, including the FY 1982 and FY 1983 contraceptive needs. With the exception of contraceptives, which will be procured in tranches throughout the project, all commodity procurement should be completed in FY 1983. In addition, the PWD will identify land sites for the two construction activities and A.I.D. will initiate the contracting process for local architectural and engineering firms. A contract will also be executed with Westinghouse Health Systems as soon as possible after the Agreement is signed to undertake the first of three Contraceptive Prevalence Surveys planned under the project. Contracting for short-term technical assistance for the logistics system component

^{12/} These training activities are in addition to those planned under other components of this project.

will also be initiated to ensure that consultants arrive in-country in June.

While the contracting process for the long-term advisors will begin in FY 1982, the three Pakistani and one U.S. advisor are not expected to arrive in-country until early FY 1983. Similarly, actual construction of the warehouse and the new facility for the NITR is not expected to begin until early in FY 1983. Some training is programmed for FY 1982, but the majority of the training activities will occur in FY 1983 and later years. The majority of the short-term technical assistance is scheduled for FY 1982 and FY 1983 although short-term technical assistance will be provided throughout the life of the project. With the exception of the one CPS mentioned above, all research studies and survey work to be undertaken by PDC will begin in FY 1983.

B. Administrative and Monitoring Arrangements

1. A.I.D. Responsibilities

The USAID/Pakistan Office of Health, Population, and Nutrition (HPN) will assume overall responsibility for managing the project. This Office, which is currently staffed with two USDH and two Pakistani professionals, will be expanded by the addition of one USDH and two Pakistani professionals in FY 1982.

The Mission's Office of Energy and Engineering (E&E) will assist HPN in undertaking the construction activities under the project. E&E will be responsible for land site approval and for monitoring the local architectural and engineering firms and the local construction contractors. The Office of E&E currently consists of one USDH and six Pakistani professionals, four of whom are engineers. The Office of Project Development and Monitoring (PDM), which currently consists of three USDH and three Pakistani professionals, will assist HPN in all contracting and procurement actions under the project.

These staff resources, which will be supplemented by other USAID/Pakistan staff members, AID/W backstopping staff, the Regional Contracts Officer, and the Regional Commodity Management Advisor, are considered adequate to handle USAID/Pakistan's administrative and monitoring responsibilities under the project.

2. GOP Responsibilities

The Population Welfare Division (PWD), which is within the Planning and Development Division (P&D) of the federal Ministry of Finance and Economic Affairs, will be the Government of Pakistan implementing agency for all

four components of the project. While a Joint Secretary or higher-ranking officer of the PWD will be named as the GOP Project Director, responsibility for implementation of the planned activities for each of the four project components will be assigned to the officer in-charge of PWD's implementing units as listed below:

<u>Project Component</u>	<u>Implementation Officer</u>
Management Information, Research, and Evaluation	Chief Executive, Population Development Center, PWD
Logistics System and Contraceptive Supplies	Director General (Program), PWD
Bio-Medical and Socio-Medical Research	Director, National Institute of Technical Research, PWD
Professional and Personal Motivation	Director, Program, Training and Education, PWD

These implementing units within PWD will be responsible for: (a) on-going assessment of technical assistance needs; (b) ensuring that counterparts are in place for all the technical assistance provided under the project; (c) ensuring that qualified participants are selected for training under the project; (d) ensuring that adequate land sites are identified on a timely basis so construction of the warehouse and NITR facilities is completed on schedule; (e) accurate and on-going assessment of contraceptive needs to facilitate timely and adequate contraceptive procurement; (f) undertaking the specific procurement and contracting transactions for which the GOP will be responsible; and, (g) participating in scheduled evaluations. The budgetary and staffing levels of PWD and its implementing units are considered adequate to handle the GOP's administrative and monitoring responsibilities under the project.

C. Procurement Plan

1. Technical Assistance

Implementation of the Population Welfare Planning Project will require substantial inputs of technical assistance. Table 8 summarizes the proposed technical assistance plan for this project.

The 213.5 person-months of technical assistance to be provided consists of 81.5 person-months of short-term assistance and 132 person-months of long-term assistance. The latter includes one U.S. resident advisor for 24 person-months and three Pakistani researchers returning from abroad for 36 person-months each. All of the long-term assistance will be provided to the Population Development Center (PDC).

TABLE 8

PROPOSED TECHNICAL ASSISTANCE PLAN

<u>Project Component</u>	<u>Nature of T.A.</u>	<u>Person-Months</u>	<u>Source of T.A. and Type of Contract</u>
Management Information, Research & Evaluation (PDC)	Resident U.S. Advisor to PDC Director (1)	24	Private Firms or Universities; Direct A.I.D. contract
	Resident Pakistani Research Advisors (3)	108	PSCs; Host Country Contract
	Consultants for Contraceptive Prevalence Survey, Survey Design, Data Processing, Data Utilization, and Evaluation	30	Private Firms or ^{a/} Universities; Direct A.I.D. Contract
Logistics System & Contraceptive Supplies	Supply Management Consultants (2)	3	Existing RSSA with Center for Disease Control (CDC); Direct A.I.D. Contract
	Training Consultant	1.5	Existing RSSA with Center for Disease Control (CDC); Direct A.I.D. Contract
	Evaluation Consultant	1	Existing RSSA with Center for Disease Control (CDC); Direct A.I.D. Contract
Bio-Medical and Socio-Medical Research	Consultants in Epidemiology, Research Analysis, and Statistics	15	Universities; Direct A.I.D. Contract
Professional & Personal Motivation	Consultants (Visiting Scholars) in Demography, Social Science, Education, Population, and Health	15	Universities; Direct A.I.D. Contract
Evaluation	Demographer, Program Analyst, Logistician, and Applied Research Specialist	16	IQCs or PSCs; Direct A.I.D. Contract
Construction	Architectural, Engineering and Construction Supervision Firms (1 or 2)	24	Local A&E Firms; Direct A.I.D. Contract
	Construction Contractors (1 or 2)	12	Local Construction Firms; Host Country Contract

^{a/} The GOP will enter into a sub-contract with Westinghouse Health Systems, which is already under contract with A.I.D., to undertake the three CPSs.

The three Pakistani researchers will be recruited and contracted directly by the GOP under Personal Services Contracts (PSCs) in accordance with A.I.D. host country contracting procedures. They will serve in the capacities of Executive Director, Director of the Demographic and Allied Research Division, and Director of the Surveys, Statistics, and Data Processing Division of the PDC. The GOP will also execute a sub-contract with Westinghouse Health Systems, which is already under contract with A.I.D. through a central S&T/POP project, to undertake the three Contraceptive Prevalence Surveys (CPSs) planned under the project. Separate sub-contracts will be executed for each of the three CPSs. In addition, the GOP will contract directly with local construction firms to build the warehouse and the new NITR facility. (See below.)

All other technical assistance under this project will be contracted directly by the Mission in accordance with A.I.D. direct contracting procedures. Because of the limited expertise of PWD staff in contracting and the relatively limited number of staff available to implement all activities planned under the overall GOP Population Program, the Mission has determined that it is in the best interests of the project for A.I.D. to contract for the technical assistance described below. This procedure will not only expedite the entire contracting process but will also enable PWD staff to focus on those activities for which they have a comparative advantage in undertaking.

The Mission will contract with the Center for Disease Control (CDC) under an existing Research Support Services Agreement (RSSA) to provide the 5.5 person-months of assistance proposed to strengthen the logistics system. Consultants for the 36-month external evaluation will be contracted by the Mission under Indefinite Quantity Contracts (IQCs) or Personal Services Contracts (PSCs). An RFP will be issued for the remaining long-term and short-term technical assistance, except for that required for the construction component. On the basis of responses received, one or two private firms and/or universities will be contracted by the Mission to perform the services indicated.

For the two construction activities under the project, the Mission will contract with one or two local architectural and engineering firms selected in accordance with A.I.D. competitive procurement procedures to design and, on behalf of A.I.D., supervise and monitor construction of the buildings. Since both facilities are located in Karachi, the same firm may, as determined by A.I.D. to be in its best interests, be awarded one or both A&E contracts for this work. The GOP will contract with local construction firms selected by competitive procurement procedures to build the facilities. Again, the same firm may be awarded one or both construction contracts.

On the basis of the Mission's experience with construction activities under other projects in Pakistan and the inexperience of PWD staff in this particular area, the Mission concluded that A.I.D. should directly contract with the local A&E firms who would be monitored and supervised by the Mission's Office of Energy and Engineering.

2. Commodities

Commodities will be provided under three components of this project, namely, Management Information, Research, and Evaluation; Logistics System and Contraceptive Supplies; and, Bio-Medical and Socio-Medical Research. Aside from contraceptives which constitute by far the largest category of commodities to be procured under the project, there are a limited number of other commodities required under the project. Table 9 summarizes all the commodities to be procured under this project.

All off-shore procurement will be undertaken by either the Mission or AID/W in accordance with A.I.D. policies and procedures for direct procurement. This includes all contraceptives, the two pick-up trucks, the condom testing equipment, and a portion of the warehouse equipment. The Mission will also purchase a computer and related data processing supplies from the local IBM dealer (see Annexes F.2 through F.4). At the same time, the GOP will enter into a maintenance/service contract with IBM which will be financed with project funds during the life of the project. The PWD/GOP will also procure those items for the warehouse which are available locally.

With the exception of the computer and the two pick-up trucks, all commodities procured under this project will have their source and origin in the United States or Pakistan. A source/origin waiver request for the two right-hand drive vehicles is included in Annex F.1. The Mission will prepare a source/origin (for componentry) waiver request to procure the IBM System 34 computer and related supplies. Since the waiver amount will be under \$1 million, the USAID/Pakistan Mission Director has the authority to sign this waiver request.

D. Training Plan

Over \$1,000,000 over the life of the project has been allocated for training. This allocation reflects the high priority assigned by the Mission to manpower development and the recognition by both the Mission and the GOP of the need for skilled and adequately trained manpower to implement the GOP's Population Plan. While more detailed plans and more refined schedules will be developed during

TABLE 9

PROPOSED COMMODITY PROCUREMENT PLAN

<u>Project Component</u>	<u>Nature of Equipment</u>	<u>Source</u>	<u>Method of Procurement</u>
Management Information, Research and Evaluation	IBM System 34 Computer and Data Processing Supplies	Local IBM Dealer in Pakistan	Non-competitive by USAID/Pakistan <u>a/</u>
	Computer Software	U.S.	Competitive by USAID/Pakistan
Logistics System and Contraceptive Supplies	Warehouse Equipment <u>b/</u>	U.S. & Pakistan	Competitive by USAID/Pakistan for Off-Shore Procurement and by Host Country for Local Procurement
	Orals and Condoms	U.S.	AID/Washington Central Procurement
	Other Contraceptives	U.S.	Competitive by USAID/Pakistan
	Pick-up Trucks (2) <u>c/</u>	Japan	Competitive by USAID/Pakistan
Bio-Medical Socio-Medical Research	Condom Testing Equipment	U.S.	Competitive by USAID/Pakistan

a/ A source/origin (for componentry) and non-competitive waiver will be prepared by the Mission for approval by the USAID/Pakistan Mission Director.

b/ See Annex J.

c/ A source/origin waiver request is included in Annex F.1.

the implementation phase, a proposed participant training plan is presented in Table 10. This plan does not include the in-country training activities which are planned for the logistics system component and those to be undertaken by PDC. A proposed schedule of these in-country training activities is presented in Table 7, Proposed Implementation Schedule.

TABLE 10

PROPOSED PARTICIPANT TRAINING PLAN

<u>Project Component</u>	<u>Type of Training</u>	<u>Length of Training</u>	<u>Training Site</u>	<u>Number of Participants</u>	<u>Proposed Schedule</u>
Management Information, Research and Evaluation (PDC)	Workshop or Specialized Course	3 - 9 Months	U.S. and Asia	10	2 per year in 1983-1987
Logistics System and Contraceptive Supplies	Observational Visits	2 - 4 Weeks	Bangladesh and Indonesia	2	1982
Bio-Medical and Socio-Medical Research (NITR)	Academic	12 Months	U.S.	2	1983
	Workshop or Specialized Course	Average 3 Months	U.S. and Asia	10	3 per year in 1983 & 1984 and 2 per year in 1985 & 1986
Professional and Personal Motivation	Exchange Visits	Average 4-6 Weeks	U.S.	25	5 per year in 1983 - 1987
			Third World Countries	25	5 per year in 1983 - 1987

E. Evaluation Plan

The activities funded under this project fall largely under the "Support Activities" category of the GOP Population Welfare Plan and are designed to improve the capability and performance of the PWD and its allied agencies in population planning, evaluation, research, motivation, and logistics.

A major objective of the project is to strengthen the evaluation capabilities of the Policy and Program Evaluation (PPE) Section of the PDC. A key evaluation tool which PPE will use under the project will be a series of Contraceptive Prevalence Surveys which will provide much needed baseline data as well as programmatic data on a periodic basis throughout the project. The information gathered from these and other surveys and studies to be undertaken by PDC and NITR during the life of the project will be useful not only to evaluate the progress and impact of the overall GOP Population Welfare Program but will also supplement the three evaluations planned under

the A.I.D. project. In addition to the CPSs, a key study to be undertaken by PDC will be a cost-benefit and cost-effectiveness analysis of the GOP Population Welfare Program.

The first A.I.D. project evaluation will be a "program management audit" to be conducted eighteen months after the Project Agreement is signed. This evaluation will be an internal evaluation conducted by USAID/Pakistan and PWD staff. The evaluation will involve an assessment of implementation progress to date including planned versus actual scheduling of activities and planned versus actual commitments and disbursements of funds. On the basis of this evaluation, revisions will be made in the implementation schedule and budget. Representatives from USAID/Pakistan's Offices of Program, Project Development and Monitoring, Energy and Engineering, Financial Management, and Health, Population, and Nutrition will participate in the evaluation with PWD staff.

Thirty-six months after the Project Agreement is signed, the first of two external evaluations will be undertaken. This evaluation will include an assessment of progress toward meeting the project goal and purpose and an examination of each project component against input and output indicators. The validity of assumptions will also be examined. PDC's accomplishments in survey work and studies, seminars/workshops, utilization of technical assistance, publications, data processing, and development and implementation of the service statistics and feedback and evaluation systems will be examined and measured against expected outputs. Similarly, NITR's accomplishments in training, utilization of technical assistance, research, and improved condom testing procedures will be reviewed and evaluated. Construction of the new facility for NITR will also be assessed. Three areas will be examined in the logistics system: (a) construction of the warehouse; (b) completion of the supply manual and training of field staff and evidence of widespread utilization of the new procedures; and, (c) the adequacy of supplies of contraceptives, the distribution network, the maintenance of inventory data, and the recording and reporting of service statistics. The impact of the training of program staff and prominent citizens under the Personal and Professional Motivation component will be examined by interviewing trainees and reviewing their activities to determine whether any shifts in attitude or approach to population programming and/or increased involvement in population activities have occurred. The extent of other donor support and progress achieved under other donor projects will be examined in relation to the overall implementation of the GOP Population Plan in general and to the A.I.D. project in particular. The results of this evaluation will be used to make any necessary adjustments in the existing project for the last two years of the project and as a basis for considering additional A.I.D.

inputs in the population area by either extending the existing project or designing a new A.I.D.-assisted program.

The actual scope of work for the evaluation will be worked out by the PWD and the Mission three months in advance of the evaluation, which will be conducted on the basis of field trips, interviews, and a review of secondary source data. The evaluation team should include a demographer, program analyst, logistics specialist, and a specialist in applied population research. The evaluation will take about four to six weeks. A.I.D. will contract the evaluation team members under IQCs or PSCs.

An impact evaluation will be conducted approximately one year after the project assistance completion date and will include, inter alia, an examination of the following: contraceptive usage, fertility trends, population growth rate trends, research quality and utilization, and performance of individuals trained under the A.I.D. project. The evaluation team should include a demographer, statistician, population research analyst, and social scientist. This four to six week evaluation will be funded under the Project Design Fund.

In addition to the three project evaluations, the Mission and GOP will conduct an annual review of service statistics and contraceptive sales data prior to the ordering of the next tranche of contraceptives. Any necessary adjustments in the type, amount, and scheduling of deliveries will be made on the basis of these reviews.

V. PROJECT ANALYSES

A. Technical Analysis

1. The GOP Population Welfare Plan

The Plan, through its core and supplemental projects and support activities, provides an exceedingly wide array of effective family planning measures. In addition, the Plan encompasses related social welfare measures, termed "beyond family planning", which will be introduced on an experimental basis. Unquestionably ambitious, the Plan nonetheless introduces no new technology which has not previously been utilized in Pakistan to some extent, with the exception of a Social Marketing Program. The Plan's combination of family planning and social welfare services, when implemented, should have significant short and long-term effects on fertility reduction.

2. The A.I.D. Project

A discussion of the technical soundness and feasibility of the following elements of the proposed A.I.D. project is provided below: (a) the rationale for supporting demographic and bio-medical and socio-medical research; (b) the technical capability of PDC and NITR; (c) the acquisition of a computer for PDC; (d) the basis for construction estimates; and, (e) the basis for contraceptive projections.

a. Rationale for Supporting Research

The proposed research component is based, in part, on the reasonable expectation that if decision-makers are given access to valid and relevant scientific information concerning population policy and family planning activities, they will use this information in the decision-making process. The extent to which research activities in Pakistan have influenced policy decisions concerning population and family planning is not well documented. The process whereby these findings are communicated to policy-makers is essentially unstructured, and the dissemination of findings has often been limited. The program, however, has a long history of support for and recognition of the benefits of quality research. Many measures and techniques widely used in the field of family planning program analysis were first developed in Pakistan, including "couple years of protection", the Contraceptive Prevalence Survey, and variations on the service statistics system. The Secretary of the Planning and Development Division as well as other influential persons within the Population Welfare Division have repeatedly expressed their support of innovative research which has programmatic implications. As the program emphasizes more innovative approaches to service delivery, it is anticipated that the findings of this research will increasingly be seen to be important.

b. Technical Capability

1. Population Development Center (PDC)

PDC is an amalgamation into one organization of several on-going functions. Most of the activities which will be carried out are refinements of activities carried out in the past. As such, the technical capability of the staff is not really an issue; however, the range of research and associated activities which PDC hopes to get involved in will require more staffing depth than currently exists in the organization. PDC and the Mission view this as a temporary problem which can be remedied. The technical assistance and training to be provided under the A.I.D. project is specifically designed to address this problem.

In addition, the long suspension of population activities caused a number of well-trained researchers in demography, biostatistics, and sociology to shift to other GOP organizations. It is likely that under the renewed and reinvigorated Population Program, PDC will be able to attract some of these researchers back.

PDC has not had much experience in publications and conference/workshop planning. With the technical assistance available under the project, however, PDC will develop an extensive publications center and data clearinghouse to facilitate the dissemination of results. The project will also assist PDC to arrange workshops, conferences, and seminars to inform and train colleagues in research findings and utilization. Inasmuch as these activities are fairly new ventures for the staff of PDC, they will also require technical assistance input.

ii. National Institute of Technical Research (NITR)

Aside from association with a few short-term advisors for specific projects and a limited number of fellowships, NITR staff opportunity for professional education has been minimal in the last few years. To maintain the high research standards of the Institute, some on-going training is warranted. Training, coupled with the need for a permanent facility, are the most pressing problems. Project assistance is directed towards overcoming staff deficiencies in epidemiology, exposing staff to computer applications, and updating technical capabilities of other professional staff. Construction of a research facility conducive to professional research is also planned. The objectives of the assistance are technically sound and should significantly improve the technical capability of the Institute.

c. Acquisition of a Computer for the Population Development Center

A major objective of the proposed assistance to PDC is to expand the capability of its existing data processing center to manage anticipated increases in the amount and complexity of data collected and utilized. Modern data processing facilities are essential to carry out quality research and evaluation. An expanded data processing capability will increase PDC's utility and credibility as it relates to other governmental organizations as well as to enable PDC to coordinate population research.

Selection of the IBM System 34 computer to meet PDC's automated data processing needs is based on the following considerations:

i. The System 34 will meet anticipated project needs beyond the life of the project at reasonable costs.

ii. The System 34 is a business computer which is well-suited for many functions of PDC such as inventory control, accounting, and data editing.

iii. The System 34 is completely compatible with and a normal complement to the PDC's existing data processing equipment.

iv. Should its capacity be exceeded in the future, the system will still be useful for smaller jobs, as a programming station and for printing.

v. Inasmuch as the PDC staff are thoroughly familiar with the existing system, the System 34 is not beyond the technical capability of the staff. In addition, in-service training on the use of the System 34 will be provided with the installation.

vi. An important consideration in Pakistan is that IBM maintains an equipment and maintenance facility in Islamabad so that servicing would not be a problem.

Acquisition of the IBM System 34 is thus deemed technically sound and highly justified programatically.

d. Construction Estimates

The construction estimates provided in the Project Paper for the warehouse and the new facility for the NITR are considered reasonable and sound. They are based on actual 1982 costs of construction for air-conditioned and non-air-conditioned buildings in Karachi. Since construction will not begin until 1983, an inflation factor of 20%, which is a reasonable estimate based on the recent inflationary trend in the construction industry in Pakistan, has been added to the 1982 cost estimates. Local architectural and engineering firms selected on the basis of competitive procurement procedures will assist the PWD and Mission staff in refining space estimates and space allocations and corresponding cost estimates.

e. Contraceptive Projections

As discussed in the Project Description section, a number of factors complicated attempts to project future contraceptive usage and contraceptive requirements. Contraceptive import needs were projected on the basis of the amount of in-country stocks from data available at the Mission and of anticipated contraceptive

prevalence among the married couples of fertile age (MCFA), based on data available from the 1975 Pakistan World Fertility Survey. The projected trend of method mix is a "best guess" approximation constructed from several estimates of mix and is derived from experience in other countries when programs gained momentum.

The reported high use of condoms in the Pakistan program is indeed unique. However, based on experience in other countries, it is reasonable to expect that condom usage will decline and the use of other contraceptives will increase. The proposed activities under the GOP Plan, including a possible Social Marketing Program, should result in changes in method preference which simulate that projected over the next five years. If a Social Marketing Program is launched, it may reduce the amount of contraceptives required for distribution through the government distribution network. Because of the uncertainties involved in contraceptive projections, the Mission and the GOP have agreed to monitor closely and undertake an annual review of service statistics and sales data before the ordering of the next tranche of contraceptives. Any necessary adjustments in the type, amount, and delivery schedule will be made on the basis of these reviews.

3. Summary

The project is judged to be technically feasible and sound. Minimal new technology (a computer) is being added by the project, and capable staff are on board who can readily assimilate the technology. The project design provides appropriate and sufficient technical assistance and training.

B. Administrative Analysis

1. Introduction

The new Population Welfare Planning program is a complete redirection and revitalization of past GOP efforts. It is welfare-oriented, multi-sectoral, inter-disciplinary, and calls for support, collaboration, and involvement of numerous government departments, the private sector, and, most importantly, active participation of the community.

Although the federal government will continue as before to be responsible for implementation of the population program, the collaborative and community participatory nature of the new program has made it necessary to seek strong inter-ministerial and departmental coordination and collaboration. Consequently, program administration has been de-centralized. The federal level will retain policy formulation, training, communication, education, financing and evaluation functions; the provinces will have implementation and coordination responsibilities; the districts will directly execute the program; and, the community will take the lead in designing and executing population-related efforts. Management advisory councils and committees have been established at the federal, provincial, district and community levels to facilitate coordination and participation of various ministries, departments, administrative heads, non-governmental organizations (NGOs), and community representatives.

2. Administrative Organization Structure

a. Federal Level

There is no separate Ministry of Population. The population portfolio has been retained by the President of Pakistan, who appointed an Advisor for Population with the rank of Minister of State. In effect, however, the Advisor functions as the Minister for Population with her own staff. The Population Welfare Division (PWD) serves as the federal executing agency for the program. The PWD has been placed within the Planning and Development Division (P&DD) of the Ministry of Finance and Economic Affairs to assure linkages between population planning and the country's overall development planning. This arrangement also provides important status to the program, inasmuch as the head of the P&DD also heads the Economic Affairs Division, the federal agency entrusted with approval of development activities.

The PWD is in charge of the overall population program and retains the responsibility for program planning, policy-making, funding, and evaluation. PWD is headed by an

Additional Secretary and supported by senior civil servants and staff to carry out these functions.

PWD is also responsible for training and research functions in the following allied departments:

- i. Directorate of Training in Karachi;
- ii. National Institute of Technical Research (NITR) in Karachi; and,
- iii. the newly created Population Development Center (PDC) in Islamabad.

b. Provincial Level

The new Plan calls for the de-federalization of the program, with the provinces being responsible for program implementation and coordination. Rather than establish a separate department, the provincial Director Generals (DGs) and their staffs work under the direct supervision of the provincial Chief Secretary or Additional Chief Secretary. Provincial DGs also serve as ex-officio Secretaries for Population. Placement of population matters directly under the Chief Secretary is likely to result in the resolution of a number of administrative constraints as well as facilitate better coordination and active support of other provincial public service and welfare departments. In addition, the design and execution of program activities within the parameters of the National Plan can be tailored to local environments. Funds for the execution of program activities in provinces will be released by the federal government to the provinces with the stipulation that these funds will be utilized only for the Population Welfare Program. Like the federal PWD, the provincial population directorates will retain their present number of technical and operational directorates to ensure proper and timely execution of approved activities.

c. District Level

The district population office is responsible for directing the execution of the planned activities. In addition, a district store is maintained to carry out logistic support to Family Welfare Centers (FWCs) in the district and to other institutions involved in the delivery of contraceptive services under the new population program. For example, district offices will be responsible for acquiring support and collaboration of other government, commercial, industrial, and private organizations located in the district.

The district office is headed by a Senior District Population Welfare Officer (DPWO). He is assisted by a Deputy DPWO and Assistant DPWO, several Family Welfare Counselors, and other administrative clerical staff. Many of the DPWOs and Deputy and Assistant DPWOs joined the government population program in the 1960's. The administrative and leadership capabilities of the DPWO and his assistants will be a critical determinant of the success of the population program.

The Family Welfare Counselor represents a new female cadre which is responsible for providing guidance, in-service training, and supervision to the FWC staff and their operations. A majority of the Counselors was selected from the senior Family Welfare Visitors (now Workers) category, and have been or are being given special training to improve their skills. There is one Counselor for every two FWCs.

d. Village Level

The program at the village or community level is implemented through FWCs. FWCs constitute the most important core activity of the program. Each FWC serves a population of 25,000 to 30,000.

In the first year of the plan, the establishment of 750 FWCs is planned. This number will increase to 1,250 by 1984, the end of the plan period. Establishment of the FWCs will not be created de novo; 1,003 fully staffed Family Welfare Clinics already exist which are being converted to FW Centers. Conversion entails: (i) the provision of auxiliary training to the existing clinic staff of FWs to convert them to FWs; and, (ii) the relocation of the clinics to sites where no Health Department facility exists and where the community is receptive to such an activity.

The main functions of the FWCs are to deliver family planning and health services, including care of minor ailments, midwifery, and pre- and postnatal care. In addition, depending upon community and voluntary support, FWCs will undertake ancillary welfare activities in the areas of development of women, income generation, vocational training, adult literacy, and other activities aimed at improving the family's living conditions.

Each FWC will have an advisory management committee composed of local community leaders and prominent citizens. The committee will be chaired by the local elected representative and seek community involvement and voluntary support for such welfare and developmental activities that the committee requires the FWC to undertake.

Fully staffed FWCs consist of a Family Welfare Worker (FWW), two Family Welfare Assistants (one male and one female), and an Attendant. In addition, each FWC will enlist 20 to 40 community volunteers to act as the Center's outreach workers. These volunteers will include satisfied clients, social workers, influential villagers and traditional birth attendants (TBAs).

3. Analysis of Administrative Support

a. Government Support

The following are indicative of top administrative commitment to the program:

i. The President has retained the population portfolio.

ii. The President has appointed a capable, experienced, dedicated, and internationally-known person in the population field as his Advisor to revitalize the program.

iii. The President and Governors of the provinces chair the National and Provincial Population Councils, respectively.

iv. The highest civil servant in the province, the Chief Secretary, assumes responsibility for supervising the provincial population program.

b. Collaboration with Other Departments and Organizations

i. Health Department

Health Department outlets were made responsible for delivery of family planning (FP) services when the government assumed responsibility for the population program in 1960. For administrative, management and a variety of other reasons, the Health Department did not deliver FP services as effectively as desired. A separate FP organization was created in 1966 which has continued since then in one form or another. Since 1977, there has been a growing realization within the GOP and among the donors that family planning is closely related to health, but the government health infrastructure was not considered sufficiently strong to implement an effective population effort. Stronger involvement by the country's physicians, with family planning services freely available through the health infrastructure, would considerably strengthen family planning efforts. While the government is not at this time seeking the merger of the two Departments, the GOP Plan clearly seeks much closer coordination between the two sectors as evidenced by the following actions:

(a) Population subjects have been included in medical school curricula.

(b) Surgeons at government hospitals are being trained by population personnel in surgical contraceptive techniques.

(c) Public health schools are training the Population Department's Family Welfare Workers (FWWs) in midwifery, and the Population Division's Regional Training Institutes are training the Health Department's Lady Health Visitors (LHVs) in the delivery of population services.

(d) In addition to their normal duties, the population outlets will also provide health services and the health outlets will also provide population services. In fact, some of the duties of Community Health Workers under the A.I.D. supported Basic Health Services Project and those of the Community Volunteers under the Population Welfare Plan are identical.

(e) A health official is a member of all national, provincial, and district advisory councils/committees for population.

It is evident that the new Population Plan recognizes the need for close cooperation and coordination between health and population and provides an opportunity for the Health Department to demonstrate its ability to deliver population services effectively. It would be imprudent to insist on a population/health merger beyond the actions that are being taken at this time. It is logical to expect that population and health will ultimately be merged. This could result in active support for family planning by the country's prestigious doctors who currently are not assuming significant responsibility for this important service.

ii. Social Welfare and Education Departments

Like the Health Department, representatives of the Social Welfare and Education Departments are members of all national, provincial, and district advisory councils/committees for population. The Plan provides for several collaborative projects with these departments.

iii. Institutionalized Sectors and NGOs

Population education and services will be delivered to the employees of such organizations as the armed forces, police, Pakistan Postal, Telephone and Telegraph Departments, Water and Power Development Authority, Pakistan Steel Mills, Pakistan International Airlines, and Pakistan Railways, using their own health and welfare service staff and facilities. These organizations are

influential and highly important organizations in Pakistan and together have several hundreds of thousands of employees who will be specifically targeted for population education and services. Thus, the Plan seeks to achieve broad coverage at little or no cost to the program.

c. Administrative Feasibility of A.I.D. Project Components

i. Population Development Center (PDC)

The Center was established by consolidating the existing data processing, survey, statistical and research units of the PWD. These units were already staffed with trained and experienced personnel and relatively well-equipped, including an IBM Programable Work Station mini-computer. Consolidation of these units will not only avoid duplication of effort, but will also result in more coordinated, positive, and efficient use of staff and facilities. The current PDC staff is capable of absorbing and managing the proposed assistance.

ii. National Institute of Technical Research (NITR)

Like the PDC, the NITR also has adequate and trained staff to carry out socio-medical and bio-medical research. These functions are similar to those which the Institute has been performing under its previous name of National Research Institute of Fertility Control (NRIFC) since 1962, but will improve in quality under the proposed project. Some of the NITR equipment is either obsolete or worn out. The NITR will need to be partially re-equipped, the staff will require limited short-term training, and the Institute will need more functional space in order to play an expanded role in bio-medical and bio-social research. The organization and management of the institution is such that the above additional resources will be used effectively.

iii. Logistics

The Population Welfare Division (PWD) possesses the capability to plan program logistics, but has deficiencies in the areas of field staff training, supervision and follow-up, all of which will be strengthened under the proposed project. Under the A.I.D. project, administratively weak areas will be identified and improved upon to assure capable functioning necessary to support and enhance the entire population plan.

4. Conclusion

On the basis of the foregoing, the proposed A.I.D. project, which includes appropriate institutional and human resource strengthening, is deemed administratively feasible.

C. Social Soundness Analysis

1. Introduction

This analysis addresses itself to the socio-cultural and socio-economic feasibility of the Plan. Implicit in most analyses of population planning in Pakistan is the fact that the main target group for population activities consists of people who are both poor and rural in lifestyle (though sometimes urban in location). Thus, the point of departure for this discussion is the Pakistani village and its subsidiary social units -- as a sociological rather than a geographic entity. The objective is to identify potential obstacles to program success.

2. The Social Landscape

Pakistan contains a wide variety of ethnic groups, incorporating not only the indigenous population of the Indus watershed, but also refugees coming from India after Partition. Each of the four major regions of the country is dominated by an ethnic group distinguished by a separate language: Punjabis in the Punjab, Pathans in the Frontier, Sindhis in the Sind, and Baluchis in Baluchistan. In addition, there are groups which do not form a majority anywhere, such as Jatts and Lassis in the Sind, and Brahuis in the Sind and Baluchistan. The people of the mountainous northern areas (which have been historically isolated both from the plains and from each other) belong to a number of diverse ethnic groups, often with distinct customs of their own. Approximately 97% of the population of the country as a whole is Muslim, a factor which tends to counteract ethnic differentiation.

Tribe, caste, and language are important factors in social classification. The Pathans and Baluchis are organized on a basis of tribe and lineage. In the Punjab and Sind, however, caste is more important as a distinguishing feature. The main classification in the Punjab is between agricultural caste and occupational or service castes. The Sind is more diverse than the other provinces. The Sindhis themselves are divided into a great number of geographical, tribal, caste and occupational groups. There are also large groups of Baluchis and Brahuis.

Three-fourths of the population lives in rural villages. Agriculture, including animal husbandry, is the major source of livelihood. The per capita gross national product of 5319 (at current 1980-81 prices) ^{13/} reflects the fact that these people are poor and only partially integrated into a cash economy.

^{13/} Economic Survey of Pakistan, 1980-1981

Police and revenue functions are carried out on a "circle"^{14/}, rather than village level, and intra-village affairs are managed on an informal basis and along considerations of kinship, caste and social class. The significant organizational units involved in village level activities are: (a) the family; (b) the biraderi, which are brotherhoods or lineages; and, (c) the zat (qoum) or caste. The system as a whole is hierarchical with authority vested in older people generally and especially in men and wealthy farmers. Women are expected to defer to the authority of their male relatives; and, among families which can afford it, they observe purdah or seclusion within the home. Even among poorer groups, women associate mainly with other women and are supposed to avoid social contact with men who are not relatives.

Decision-making and economic cooperation are primarily functions of the biraderi. Within a village, different biraderi perform separate economic functions. Village politics may be viewed as a process of alliance and faction formation among biraderi.

A village council known as the panchayat or jirgah exists and consists of heads of biraderi, but its power is weak and is mainly limited to dispute settlements. Temporary work associations whose membership overlaps with those of biraderi are formed from time to time to deal with such tasks as upkeep of watercourses, where group cooperation is required.

Zats are ranked social groups composed of biraderi. They function in the organization of marriage and marking of social status. Membership is determined by birth. Some zats, mainly those of artisans, are occupational groups. As zats are distributed on a regional basis, they constitute a source of intervillage social, economic and political linkages. Zat classifications overlap with and are sometimes parallel to distinctions in socio-economic class, such as those between landlord/tenant, small farmer/merchant, or landholder/artisan. For members of the lower classes, access to resources is in varying degrees mediated through upper-class, educated, politically and economically powerful landlords.

3. Socio-Cultural Factors Involved in Population Program Implementation

Regardless of the types of organizations and institutions which may be involved in the activities of this project, there are certain features characteristic of social

^{14/} An administrative unit corresponding to the old union council of the Ayub Khan era. There are approximately 5 villages in each circle.

organization, cultural tradition, and power structures in Pakistan to take into account. These factors are inter-related and overlap in many ways.

a. Hierarchically Stratified Relationships
Between Superior and Subordinate (Landlord-
Tenant, Employer-Employee, Parent-Child,
Man-Woman)

Prestige and power are monopolized by the former and the latter are expected to follow and serve. These attitudes are somewhat modified by the expectation that a powerful person will behave paternalistically towards his subordinates -- helping them financially in times of difficulty, participating in major celebrations and rituals affecting the subordinate, and resorting to extreme sanctions (e.g., dismissal, expulsion from the land one is tilling) only after severest provocation. In fact, the powerful and powerless are often tied together by bonds of mutual obligation affording only limited freedom to each. Within this context, roles are diffused rather than specific (an employer may be seen as a patron, lender and a mediator as well as a work supervisor), and are expected to be of long duration rather than being related strictly to the task at hand.

b. Personalism as a Feature of Relationships

People tend to relate to others on personal terms rather than on the basis of role expectstions. This is true of relationships which in western cultures may be defined as institutionalized transactions (obtaining credit, for example), as well as those considered less institutionalized (consulting a doctor).

c. The Role of the Extended Kin Network

This structure provides the individual with his most important social, economic and ritual frames of reference. A person's lineage or biraderi cooperates with him in farming and other economic activities, supports him in community disputes, and participates with him in life-cycle rites. In many cases, a lineage is a source of linkage that cuts across geographical distinctions, as for example, when some members of a rural family are employed in an urban, or even foreign setting. There they provide contacts for other family members, remittances, and some exposure to the work outside the village.

d. Sex-Role Segregation

Separation between men and women culturally is mandated in most everyday activities. This separation is elaborated by such customs as separate living quarters

for women in the home if space is available, lady's sections in public vehicles and buildings, and the wearing of the burqa or veil by women when they leave the home or village in order to avoid social contact between them and men outside their family circle. A traditional division of labor, based on a perception of women as dependent and subservient to men by nature, tends to exclude them from the work force or at least to make their participation in it contingent upon obtaining family approval and often upon maintaining social distance from male workers (through use of the burqa, separate work space, etc.). Within the home, this tradition tends to restrict women to the roles of wife and mother and to encourage them to have numerous children, especially sons, as their main source of personal satisfaction.

e. Discontinuities Between Urban and Rural Populations

Because of stronger western influence in urban areas -- the development of educational, administrative and commercial systems modeled after European ones, plus the concentration of the western-oriented work force in the cities -- a considerable percentage of urban residents speak some English and are receptive to some extent to Western ways of construing experience and structuring their actions. The values of rural people are more likely to be derived from indigenous South Asian and Islamic sources. Even when rural people migrate to cities and live there permanently, they tend to maintain traditional attitudes and behavior, and to depend strongly on village-based kinship networks. Thus, the urban elites are separated both from agrarian villagers and from urban lower classes by important world view differences in their personal arenas of action and to some extent by language.

f. Inter-Regional Rivalries

Ethnic and linguistic differences, reinforced by restrictions on marriage outside close kinship lines, create social distance between people of different regions. These differences are less pronounced among the national elites, but important in the lower echelons of central and provincial bureaucracies, and highly important among villagers, who view strangers with suspicion. Considerable time and effort must be expended in order to establish rapport with villagers. Even in national organizations such as the civil service, a person posted outside of his home region finds it difficult to work effectively (compare, for example, the case of a New Yorker appointed by a federal body to serve in a rural area of the southern United States).

g. Conflict Between Traditionalist and Modernist Religious Schools of Thought

Differing customs and conditions in different regions of the country have contributed to disagreement between orthodox and modernist interpretations of Islamic tradition. This disagreement has been marked where issues involving social values -- particularly the status of women and the family -- are concerned. The Muslim Family Laws Ordinance of 1961, which restricted a husband's freedom in taking more than one wife and in divorcing his wife, was criticized strongly by conservative religious spokesmen. Opposition on the part of traditionalists toward family planning programs or to changes in the customary role and status of women has also been strong, even if not made a major, overt, organized public issue.

h. Other Factors Influencing Fertility

The above discussion describes the social context within which all social services programs must operate in Pakistan. What follows is a more specific discussion of the socio-economic determinants of fertility based upon census and survey data and research.

a. Parent's Perceptions of the Economic Costs and Benefits of Children

The evidence available is largely inferential. To begin with, it is clear that Pakistani parents act as if they believe the benefits of large families far outweigh their costs. Families are large; completed average family size is over seven. The marginal cost to the family of additional children is low; fewer than 30 percent are currently enrolled in school, and the number drops with each successive class level.

One study attempts to document the economic role of children, male and female, in a rural area of Punjab Province. ^{15/} That study, which was based both on participant observation and survey methodologies, concludes that children begin to make substantial economic contributions to household income at remarkably early ages. They assist with light farm chores (feeding and caring for small animals) and selling milk from the age of five or six. They begin to work in the fields at nine or ten and by the time they reach their teens, they are able to represent their families in Government offices where loans for tractors, seeds, fertilizer and farm implements are granted. Moreover, the study stresses that parents are well aware of the economic

^{15/} Mahmud Roshan, "Family Planning: An Innovative Exercise," mimeo, USAID/ Islamabad, 1976

importance of children to family well-being and believe that they are acting in accordance with this perception.

There is reason to believe that most Pakistanis, as is almost universally true in traditional societies worldwide, depend on their offspring for social security in their old age. While the evidence is slim and admittedly somewhat subjective, it does support the contention that many Pakistani families are acting in their perceived self-interest in continuing to bear large numbers of children.

b. Effect of Declining Infant Mortality on Completed Family Size

The relationship between infant mortality and fertility has never been well understood anywhere, and Pakistan is no exception. Data simply do not exist in Pakistan either to confirm or deny the infant mortality hypothesis. One Ph.D. thesis which has been done on the subject suggests that parents who experience child loss tend to overcompensate for that loss by producing more children than parents who have experienced no child losses.^{16/} Furthermore, the more child losses a couple experiences, on an average, the more "overcompensation" in terms of additional births they engage in. However, this relationship may well be spurious. Some other variable or set of variables could be causing both high fertility and high mortality (e.g., poverty, low levels of education); or, it could be that high mortality is the result of high fertility. Whatever the causal relationship may be, there is no country which has had significant fertility decline which did not experience a concomitant decline in infant and child mortality.

c. General Position of Women in the Society

Women in general play a significantly different role compared to men in Pakistan. Thirty-six percent of the males as compared to twelve percent of the females in the country are literate. Male school enrollment far exceeds female school enrollment. Only a very small percentage of women ever progress beyond the second or third class in school.

In rural areas, there are essentially two roles for women. Among the very poor, women serve as adjunct labor in the fields and as cooks, mothers, and caretakers in the home. Among the more affluent families, women tend to observe pardah, in which role they are essentially proscribed from

^{16/} Razaque Ruknuddin, "The Effect of Infant and Child Mortality and Sex Preference on Fertility Behavior of Couples in Pakistan," doctoral dissertation, The Johns Hopkins University, 1975.

participation in the labor force and are required to serve solely as wives, mothers, and status symbols -- visible reminders of the fact that the head of household can afford to forego the assistance of his wife.

Under these circumstances women have little say in their reproductive behavior. Those in purdah, especially, have no effective alternative roles to motherhood and homemaking. Furthermore, considering the economic value of children in subsistence or near-subsistence agriculture, women not in purdah who assist in farm labor are equally responsible for producing adequate numbers of offspring to contribute to family well-being. The vast majority of Pakistani women rarely have the opportunity of expressing themselves outside the conventional roles of mother, homemaker, and workmate. The alternatives to child-bearing for most women are limited and generally socially unacceptable.

d. Female Educational and Employment Opportunities

Only a miniscule proportion of Pakistani women ever enroll in school and almost none complete primary education. Few become active members of the labor market, at least insofar as that implies employment away from the home or off the farm.

The Pakistan Fertility Survey suggests that women who have received more than six years of education have significantly fewer children than women who have either received less education or who have never been to school. As in other Islamic societies, six years of education seems to represent a significant threshold of reduced fertility. Clearly, female education is a major factor in fertility behavior. A study carried out by the Pakistan Institute of Development Economics shows that, in a multivariate analysis, the best single predictor of fertility behavior, among a broad range of variables, is the educational level of females.

Less work has been done on the relationship between female employment and fertility in Pakistan. Part of the reason for the paucity of information on this subject is the relative rarity of out-of-home employment among Pakistani women. Nonetheless, among the few studies which have been done on this subject, it appears that women who are employed in occupations which require them to be away from the home for substantial periods of time each day have fewer children than women who are either unemployed or employed in the home. ^{17/}

^{17/} See for example Basra M. Shah, "Female Labor Force Participation and Fertility Desire in Pakistan: An Empirical Investigation," *Pakistan Development Review*, Vol. XIV, No. 2, Summer 1975.

As in the case of infant mortality, the causal relationships between female education and employment are uncertain. It is certainly possible that fertility is lower among educated women because they are more likely to be employed. Similarly, both education and employment are undoubtedly a function of social class, and the elite may have fewer children as a general rule. However, income is a comparatively poor predictor of fertility in Pakistan, as is social class. As in much of the rest of the world, female education per se seems to be an important determinant of fertility behavior. There are several reasons why this might be the case, not the least of which is that education provides a window to the outside world and thus the expectation of an alternative future which is not available to the less educated or the uneducated. In many cases, an alternative future may well imply a life in which children are perceived as less needed or represent more of an encumbrance than they do for the typical Pakistani woman today.

e. Rate of Economic Growth and Distribution of the Benefits of Development

As far as fertility is concerned, the rate of economic growth means practically nothing. The distribution of the benefits of growth (i.e., development) means a great deal. Several countries have experienced rapid rates of economic growth in recent years without experiencing correspondingly rapid rates of fertility decline. However, those few countries which have experienced rapid rates of economic growth-cum-redistribution have also experienced rapid fertility declines. It appears that more equitable distribution not only of income, but also of the access to social and economic opportunity, is central to explaining fertility decline.

It is not possible to generalize about the effect of economic growth or income redistribution on fertility in Pakistan. There have been no studies to date which have attempted to analyze this relationship. By the same token, income data at the micro level are so undeveloped in Pakistan that no correlational analysis is really possible at present. All that can be said at this point is that income redistribution has apparently not occurred in sufficient magnitude to cause people to have a significantly different view of their relative roles and statuses than they have had in the past. There is no real evidence to suggest that access to social or economic goods has improved sufficiently for people to have altered their perceptions of the relative costs and benefits of children. Put another way, there is little reason to believe that the economic environment has changed to the point that people have significantly different perceptions of the opportunities

available to their children than they had for themselves. As a result, their fertility behavior is not likely to be much different from their parents. 18/

5. Social Analysis of the GOP Population Welfare Plan

Whereas previous population program efforts in Pakistan took little account of many of the factors just discussed, the new Population Welfare Plan is based on a sophisticated appreciation of their bearing on the demand for children. As a result, the multisectoral and interdisciplinary approach of the plan is designed to modify family size preferences at the same time that the delivery system is intended to respond to existing and, hopefully, growing demand for contraceptive services. In this sense, the program is far more socially sound than its predecessors have been. It recognizes quite clearly that different program approaches are needed for different sub-groups of the population. While the urban middle class may require nothing more than a reliable supply of safe contraceptives, a rural village may require a whole program of activities that are designed to alter couple's perceptions of their roles and responsibilities and their decisions to bear children. These could include the definition of alternative female roles (e.g. shopkeeper rather than housewife), the modernization of farm work, or improvements in health services that in turn improve the survival chances of children. In short, the degree to which the Population Welfare Plan addresses itself to Pakistan's social reality is encouraging. The new approach to population planning in Pakistan is likely to achieve concrete results.

6. Project Impact on Social Factors

While the social fabric of Pakistan is relatively well-understood, the specific effects of the various social factors on fertility behavior are less well-understood because of the relative absence of quality data. The project will support high quality research efforts at the Population Development Center and the National Institute of Technical Research in order to acquire this vitally needed information. Both institutions have well-trained professional and survey staff as well as a long history of research efforts in sensitive fertility-related projects. Technical assistance provided by the project will sharpen research design and

18/ The recent large-scale but short-term migration of male workers to the Middle East, with exposure to radically different levels of material goods, different social systems, and non-traditional ideas, in time may have effects on the situation described above, but it is too early to tell.

analytic capabilities. The addition of computer hardware and software packages provided by the project will also enhance analytic capabilities.

7. Beneficiaries

A direct beneficiary of the project will be the GOP Population Welfare Division. The project will improve the management information feedback system, demographic research, and evaluation used for program planning and management. A permanent facility and updated equipment for the National Institute of Technical Research also will contribute top quality bio-medical and socio-medical research findings to be used in program planning and management. Strengthening the logistics and contraceptive supply system through the provision of an adequate warehousing facility and development of supply procedures with a corresponding manual will enable adequate supplies of contraceptives to be available at approved storage places and outlets down to the village level.

A second group of direct beneficiaries will be the considerable number of persons to be trained under the project. These include demographers, researchers, data processors, epidemiologists and logistics supply personnel. As a result of the project, the Population Welfare Division will acquire new skills and improved capacity to fulfill its responsibility to direct the GOP effort to reduce the rate of national population increase.

The third and most important group of direct beneficiaries include the millions of couples, including the rural poor, who will have access to a reliable supply of quality contraceptives and other family planning services. More broadly, the entire nation will benefit from the favorable effect of this project on Pakistan's ability to direct its scarce resources to improve the quality of life of its citizens, particularly the rural poor who account for more than 70% of the country's population.

8. Summary

The project will have a beneficial effect on social factors affecting fertility by supporting research institutions which will help to better understand these factors. All project activities are socially feasible and acceptable.

D. Economic Analysis

Social sector projects are not amenable to the same sort of rigorous cost-benefit analysis and calculation of economic rate of return that can be performed for projects

that involve physical infrastructure. However, in this economic analysis section, an effort is made to assess both cost - benefit and cost - effectiveness.

1. Cost-Effectiveness

A 1976 study, "Cost-Effectiveness of Pakistan's Family Planning Programme," was conducted by the Pakistan Institute of Development Economics (PIDE). ^{19/} That study attempted to calculate the cost of averting a birth (the conventional measure of cost-effectiveness) by calculating the number of births averted during Pakistan fiscal year 1973-74. The methodology employed to estimate the number of births averted is complex, but it can be characterized as follows: (a) the number of active users of contraceptives is calculated by contraceptive method; (b) coefficients of use-effectiveness, derived from international data, are applied to each group of contraceptive users, thus deriving a measure known as "couple years of protection" (CYP); (c) the CYPs for all methods are then aggregated to provide a single estimate which can be converted into an estimate of the total number of births averted; and, (d) this figure is then divided by the total cost of the program to produce the final estimate of the average cost of averting a birth.

The 1976 PIDE study was based on the national population program's own service statistics which are known to overstate the actual number of active users of contraceptives. Based on those use estimates and estimates of total cost, in FY 1973-74, PIDE estimated the average cost of averting a birth at Rs 424 (\$41). ^{20/} This is probably an underestimate of actual costs because it overrepresents the number of births actually averted.

The Family Health Care program evaluation report of 1977, in contrast, concluded that the program might have caused some 1.2 million births to be averted between 1965 and 1975 at a total cost of \$ 84 million, or \$70 per birth averted, almost \$30 more than the PIDE estimate. This figure is considerably higher than the figures for other Asian countries such as Indonesia, the Philippines, Thailand, and India. It is considerably lower, however, than some other countries, notably Kenya, Ghana, Egypt, Ecuador, and Nepal. Considering the obstacles to family planning in Islamic Pakistan (see Social Soundness Analysis), one would certainly expect the cost per unit of output to be higher than in countries like Thailand where the predisposition to limit family size is considerably stronger.

^{19/} Islamabad, March 11, 1976, mimeo.

^{20/} At exchange rate of \$1.00 = Rs 10.43 as of January 26, 1982.

A study of the cost-effectiveness of the new GOP population program will be funded under the A.I.D. project and will be undertaken by PDC during the project when more reliable usage and financial data will be available than is currently the case.

2. Cost-Benefit

Over the years, there have been many efforts to establish the economic benefits of controlling or limiting population growth. Some of the earliest work was done by Stephen Enke and his associates at the firm of GE-TEMPO. This school of thought, which is still generally acknowledged to represent the main-stream in economic - demographic analysis, holds that the economic benefits of slowing the rate of population growth in LDCs far outweigh the costs involved in carrying out such programs. Research by Enke, Ronald Ridker, and others indicates that the present value of a birth averted in underdeveloped areas such as South Asia is at least twice per capita income (i.e. \$638 or twice the PCI of \$319 for Pakistan in 1981). It would appear, as a rule of thumb, that any program which costs less than \$300 per birth averted will yield a positive net social rate of return. Whether one accepts the estimate of \$70 or \$42 per birth averted, the cost of averting a birth is far lower than the cost to society of the addition of another individual. In a separate study, PIDE calculated that Pakistan saves more than Rs 600 (\$58) ^{21/} in school costs alone for each birth averted. If one also calculates the savings in food consumption and the demand for services, housing, and the costs involved in the employment - unemployment matrix (not to mention the incalculable social costs associated with environmental degradation caused by population growth), even at \$70 per birth averted, family planning begins to look more like a bargain.

3. Program Prospects

Despite the past record of poor program performance, a number of new approaches incorporated in the new GOP Population Welfare Plan suggests a greater potential for program impact and success because the new Plan deals intelligently with the reasons for past failures. These approaches link population activities to other activities in health, social welfare, labor, and education. In addition to the use of a multi-sectoral approach, the Plan also incorporates participation of the private sector and the community in the population effort. This extensive mobilization of resources is the first attempt in Pakistan to promote family planning and population activities within the context of overall economic and social development.

^{21/} At exchange rate of \$1.00 = Rs 10.43 as of January 26, 1982.

During the Population Welfare Plan four-year implementation period, 1.2 million births are projected to be averted as a result of the series of activities being implemented. Based on prior performance, this expectation may well be optimistic. However, results from the 1975 Pakistan Fertility Survey indicate that 3.2 million births could be averted if optimum family size were achieved. If the Plan achieves its goal of 1.2 million births averted, the cost would be \$53 per birth averted. Should the Plan succeed in going beyond its projected goal and be able to bring actual fertility more in line with desired fertility, i.e. 3.2 million births averted, each birth averted could cost as little as \$20. The potential for both high cost-benefit and cost-effectiveness ratios is great since the major program efforts are intended to reduce family size norms and increase the number of births averted, thus further reducing the cost per birth averted.

E. Financial Analysis

1. General

This Project provides assistance to support activities important to the success of the GOP Population Welfare Plan. The four-year plan was estimated in 1980 to cost \$93 million, of which the GOP has budgeted \$29 million and other donors have pledged \$19 million. The plan is to be implemented during the period 1981-1984, or during the first three of the five and one-half years covered by the A.I.D. project. The A.I.D. project has been designed to provide significant contributions to the Population Welfare Program in Pakistan even if other portions of the Population Welfare Plan are not implemented on schedule. Accordingly, the project supports GOP efforts which essentially are unsupported by other donors.

Four summary tables are provided on the following pages:

Table 11 summarizes project costs by fiscal year and source of funding; Table 12, project costs by expense category and source of funding; Table 13, project components by expense category and source of funding; and, Table 14, A.I.D. funding by foreign exchange and local costs. Project costs are defined as anticipated sub-obligations or commitments of funding through, e.g., P/Os, contracts, or purchase orders. Inflation was calculated on the basis of ten percent for U.S. salaries, fifteen percent for all other foreign exchange costs except contraceptives (five percent), and twenty percent for local costs, all compounded annually. Contraceptives, because of the long (eighteen-month) pipeline, are funded two years before intended use, except for some oral contraceptives to be funded and delivered during FY 1981. A contingency factor of approximately 13% was applied to all costs except contraceptives. Supporting financial tables which provide cost details for each project component are included in Annex E.

TABLE 11
SUMMARY OF PROJECT COSTS^{a/} BY FISCAL
YEAR AND SOURCE OF FUNDING

(In \$ 000)

Source of Funding	Fiscal Year					
	1982	1983	1984	1985	1986	Total
A.I.D. Dollar Grant	4,300	4,600	4,900	6,000	5,800	25,600
Mondale Rupees ^{b/}	2,013	-	-	-	-	2,013
GOP ^{b/}	1,306	1,567	1,880	2,256	2,705	9,714
TOTAL	7,619	6,167	6,780	8,256	8,505	37,327

^{a/} Project costs are defined as anticipated sub-obligations or commitments of funding through, e.g., FIOs, contracts, or purchase orders.

^{b/} Expressed as dollar equivalents at exchange rate of U.S. \$1.00 = Rs 10.43 as of January 26, 1982.

TABLE 12
SUMMARY OF PROJECT COSTS ^{a/} BY EXPENSE CATEGORY
AND SOURCE OF FUNDING
(In \$ 000)

Expense Category ^{b/}	Life of Project Funding		
	A.I.D. Dollar Grant	Mondale ^{c/} Rupees	GOP ^{c/}
1. Technical Assistance			
a. Short-Term	1,396	-	-
b. Long-Term	711	-	-
SUB-TOTAL	2,107	-	-
2. Training			
a. U.S.			
i. Short-Term	622	-	-
ii. Long-Term	125	-	-
b. Third Country			
i. Short-Term	189	-	-
ii. Long-Term	-	-	-
c. In-Country	88	-	-
SUB-TOTAL	1,024	-	-
3. Commodities			
a. Vehicles	36	-	-
b. Contraceptives	20,591	-	-
c. Other	415	-	-
SUB-TOTAL	21,042	-	-
4. Other Costs			
a. Construction	-	1,813	-
b. Evaluation	108	-	-
c. Salaries, Rent, Land	732	-	9,714
SUB-TOTAL	840	1,813	9,714
TOTAL	25,013	1,813	9,714
Contingency ^{d/}	587	200	-
GRAND TOTAL	25,600	2,013	9,714

^{a/} Project costs are defined as anticipated sub-obligations or commitments of funding through, e.g., FIDs, contracts or purchase orders.

^{b/} Inflation; 10% FX salaries, 15% all other FX except 5% for contraceptives, 20% LC, compounded annually.

^{c/} Expressed as dollar equivalents at the exchange rate of U.S. \$1.00 = Ru 10.63 as of January 26, 1987.

^{d/} Not applied to contraceptives. 15% was applied to A.I.D. dollar grant costs and 10% to Mondale rupee costs.

TABLE 13
 SUMMARY OF PROJECT COSTS ^{a/}
 BY PROJECT COMPONENT, EXPENSE CATEGORY
 AND SOURCE OF FUNDING
 (in \$ 000)

Project Component ^{b/}	Life of Project Funding		
	A.I.D. Dollar Grant	Mondale ^{c/} Rupees	COP ^{d/}
<u>1. Management Information</u>			
a. Technical Assistance	1,407	-	-
b. Training	397	-	-
c. Commodities	346	-	-
d. Other Costs	732	-	2,876
SUB-TOTAL	2,882	-	2,876
<u>2. Logistics System</u>			
a. Technical Assistance	78	-	-
b. Training	11	-	-
c. Commodities	20,683	-	-
d. Other Costs	-	1,199	4,441
SUB-TOTAL	20,772	1,199	4,441
<u>3. Bio-medical Research</u>			
a. Technical Assistance	311	-	-
b. Training	267	-	-
c. Commodities	13	-	-
d. Other Costs	-	614	2,397
SUB-TOTAL	591	614	2,397
<u>4. Personal Motivation</u>			
a. Technical Assistance	311	-	-
b. Training	349	-	-
c. Commodities	-	-	-
d. Other Costs	-	-	-
SUB-TOTAL	660	-	-
5. Evaluation	108	-	-
TOTAL	25,013	1,813	9,714
Contingency ^{d/}	587	200	-
GRAND TOTAL	25,600	2,013	9,714

^{a/} Project costs are defined as anticipated subobligations or commitments of funding through, w.x., PIDs, contracts, or purchase orders.

^{b/} Inflation: 10% FX salaries, 15% all other FX except 5% for contraceptives, 10% LC, compounded annually.

^{c/} Expressed as dollar equivalents at exchange rate of U.S. \$1.00 = Rs 10.4) as of January 26, 1982.

^{d/} Not applied to contraceptives. 15% was applied to A.I.D. dollar grant costs and 10% to Mondale rupee costs.

TABLE 14
SUMMARY OF A.I.D. FUNDING
BY FOREIGN EXCHANGE (FX) AND LOCAL COSTS (LC)
(In \$ 000)

Expense Category ^{a/}	Life of Project Funding			
	A.I.D. Grant		Mondale ^{b/} Rupees (LC)	TOTAL
	FX	LC		
1. Technical Assistance				
a. Short-Term	860	536	-	1,396
b. Long-Term	432	279	-	711
SUB-TOTAL	1,292	815	-	2,107
2. Training				
a. U.S.				
i. Short-Term	451	171	-	622
ii. Long-Term	112	13	-	125
b. Third Country				
i. Short-Term	96	93	-	189
ii. Long-Term	-	-	-	-
c. In-Country	-	88	-	88
SUB-TOTAL	659	365	-	1,024
3. Commodities				
a. Vehicles	34	2	-	36
b. Contraceptives	20,591	-	-	20,591
c. Other	175	240	-	415
SUB-TOTAL	20,800	242	-	21,042
4. Other Costs				
a. Construction	-	-	1,813	1,813
b. Evaluation	70	38	-	108
c. Salaries, Rent, Land	-	732	-	732
SUB-TOTAL	70	770	1,813	2,653
TOTAL	22,821	2,192	1,813	26,826
Contingency ^{c/}	300	287	200	787
GRAND TOTAL	23,121	2,479	2,013	27,613

^{a/} Inflation: 10% FX salaries, 15% other FX except 5% for Contraceptives, 20% LC, compounded annually.

^{b/} Expressed as dollar equivalents at exchange rate of U.S. \$1.00=Rs 10.43 as of January 26, 1982.

^{c/} Not applicable to contraceptives. 13% was applied to A.I.D. dollar grant costs and 11% to Mondale rupee costs.

2. Summary Cost Estimate and Financial Plan

a. A.I.D. Funds

The total cost of the project is \$37.3 million, which includes \$25.6 million in A.I.D. ESF grant funds, 21 million Mondale rupees (\$2.013 million equivalent), ^{22/} and the equivalent of \$9.7 million ^{22/} in local currency by the GOP. The A.I.D. ESF grant and Mondale rupee component will provide seventy-four percent of project costs, and the GOP contribution twenty-six percent.

The A.I.D. grant will fund technical assistance, training, commodities (including contraceptives), evaluation, and local staff support for demographic surveys. Of these, the largest budget item is contraceptives, \$20.6 million, which accounts for eighty percent of the dollar grant. Success of the GOP population program is dependent upon the uninterrupted flow of contraceptives which will be assured by this project. Technical assistance (\$2.1 million) and training (\$1.0 million) account for eight percent and four percent of the dollar grant, respectively.

A.I.D. will finance with dollar funds the international travel costs of all participant training up to and including one year. Annex F contains a justification for this signed by the USAID/Pakistan Mission Director which waives the requirement for the host country to cover these costs.

Approximately \$2.5 million, or ten percent of the \$25.6 million grant, will be used to finance local costs. These funds will be disbursed in U.S. dollars in order to maximize the balance of payments impact of this program in accordance with the overall objectives of the renewed USG-GOP economic and development assistance program. A FAA Section 612(b) certification has been signed by the USAID/Pakistan Mission Director and is included in Annex C.

The dollar grant portion of the project will be incrementally funded. Dollar grant obligations are scheduled as follows: \$4.3 million in FY 1982, \$4.6 million in FY 1983, \$4.9 million in FY 1984, \$6.0 million in FY 1985, and \$5.8 million in FY 1986. The Rs 21 million will be used to construct a warehouse for commodities and adequate facilities for a research institute. The Mondale rupee component constitutes approximately seven percent of the U.S. contribution and will all be obligated in FY 1982.

^{22/} At the exchange rate of \$1.00 = Rs 10.43 as of January 26, 1982.

b. GOP Funds

Funds provided by the GOP cover personnel salaries and allowances, operating costs, building rental costs, and the value of land. Since GOP budget estimates are available for only three of the five and one-half project years, the total estimate was arrived at by extrapolation from budgetary information available for the first three years.

F. Environmental Statement

This project falls under Section 216.2(c)(2)(viii) of A.I.D.'s Environmental Procedures which excludes the requirement of an initial environmental examination or any other environmental documentation for "programs involving nutrition, health care or population and family planning services....".

G. Women in Development

This project has both direct and indirect impact on the status of women. Direct benefits will accrue to female researchers, demographers, computer technicians, prominent citizens, and students who will improve their skills, awareness, and social-economic competitiveness as an immediate result of project inputs. Indirect benefits resulting from research and evaluation findings will permit all service providers, including the significant cadre of women, to provide MCH and family planning services of greatly improved quality, which will promote development of self-esteem and social consciousness in these providers. Most importantly, the recipients of services supported by the Population Welfare Planning Project will nearly all be women, who will benefit immeasurably from the improved health, family planning, and social welfare services and the resultant improvement in the quality of their lives.

H. Narcotics Impact Statement

The Population Welfare Planning Project, being basically humanitarian in nature, does not lend itself to specific actions or policies relative to narcotics suppression. It is one of the few projects in the proposed economic assistance program to Pakistan which, because of its basic thrust and mechanism for implementation, cannot be meaningfully connected to the U.S. Government's continued efforts, in conjunction with the GOP, to curtail opium poppy cultivation and the processing of opium into heroin in Pakistan. The provision of family planning services and contraceptives does not provide a useful vehicle for suppression of narcotics activities. Accordingly, no narcotics impact analysis is submitted for this project, and no poppy clause will be included in the Project Agreement.

VI. CONDITIONS, COVENANTS, AND NEGOTIATING STATUS

A. Conditions Precedent to Disbursements

1. First Disbursement

Prior to the first disbursement under this Project or to the issuance by A.I.D. of documentation pursuant to which disbursement will be made, the Grantee shall, except as the parties may otherwise agree in writing, furnish or have furnished to A.I.D. in form and substance satisfactory to A.I.D. within sixty (60) days after the signing of the Project Agreement:

a. An opinion of Counsel acceptable to A.I.D. that the Project Agreement has been duly authorized and/or ratified by, and executed on behalf of, the Grantee and it constitutes a valid and legally binding obligation of the Grantee in accordance with all of its terms.

b. A statement setting forth the names and titles of persons holding or acting in the Office of the Grantee and representing that the named person or persons have the authority to act as the representative or representatives of the Grantee, together with a specimen signature of each such person certified as to its authenticity.

2. Conditions Precedent to Warehouse Construction

a. Prior to A.I.D. entering into a contractual commitment with an Architectural and Engineering (A&E) firm which may result in a future disbursement of funds by A.I.D., the Grantee, through its Population Welfare Division (PWD), shall have identified a proposed land site or land sites approved by A.I.D. for the warehouse to be constructed under this Project.

b. Prior to A.I.D. authorizing the A&E firm to proceed beyond the site investigation stage which may result in a future disbursement of funds by A.I.D. for activities other than site investigation, the Grantee shall establish, in form and substance satisfactory to A.I.D., the Grantee's right to ownership or adequate and sufficient use and occupancy of the proposed land site under this Project.

c. Prior to A.I.D. making the final disbursement for design services to the selected A&E firm, the Grantee shall confer with A.I.D. and, in writing, concur in the approval of the design prepared by the A&E firm.

3. Conditions Precedent to Construction of a New Facility for the National Institute of Technical Research (NITR)

a. Prior to A.I.D. entering into a contractual agreement with an A&E firm which may result in a future disbursement of funds by A.I.D., the Grantee, through its Population Welfare Division (PWD), shall have identified a proposed land site approved by A.I.D. for the NITR building.

b. Prior to A.I.D. authorizing the A&E firm to proceed beyond the site investigation stage which may result in a future disbursement of funds by A.I.D. for activities other than site investigation, the Grantee shall establish, in form and substance satisfactory to A.I.D., the Grantee's right to ownership or adequate and sufficient use and occupancy of the proposed land site under this Project.

c. Prior to A.I.D. making the final disbursement for design services to the selected A&E firm, the Grantee shall confer with A.I.D. and, in writing, concur in the approval of the design prepared by the A&E firm.

B. Covenants

1. The Grantee, through its Population Welfare Division (PWD), and in consultation with USAID/Pakistan, shall prepare on or about July 30th of each year, and provide copies to A.I.D., an annual training plan detailing the number of participants, types, and duration of training programs with a tentative schedule.

2. The Grantee, through its Population Welfare Division (PWD), and in consultation with USAID/Pakistan, shall prepare on or about July 30th of each year, and provide copies to A.I.D., an annual technical assistance plan detailing the types, duration, and scheduling for short-term technical assistance.

3. The Grantee shall ensure that all participants trained under this Project will continue working in population-related activities in Pakistan for a period of time equivalent to three times the length of the training program from the date of the participant's return to Pakistan but not less than one year and not more than five years.

4. The Grantee and USAID/Pakistan will conduct a joint annual review of contraceptive sales data and service statistics prior to the ordering by USAID of the next tranche of contraceptives.

C. Negotiating Status

The above Conditions Precedent and Covenants have been discussed with and agreed to by the Government of Pakistan. During Project Agreement negotiations, USAID/Pakistan will incorporate into the Agreement appropriate language to cover these terms and conditions.

VII. ANNEXES

PP HUFHIL
DF RUEHC #3900 3081923
ZNR UUUUU 22H
P 040821Z NOV 81
FM SFCSTAFF WASHDC
TO AMEMBASSY ISLAMAPAD PRIORITY 3667
BT
UNCLAS STATE 293900

AIDAC

E.O. 12865: N/A

TAGS9

SUPJ: APAC REVIEW - POPULATION WELFARE PLANNING
(391-0469)

THIS PROJECT WAS REVIEWED AND APPROVED BY THE APAC ON OCTOBER 15TH. THE FOLLOWING ITEMS WERE DISCUSSED AT THE APAC FOR CONSIDERATION DURING DEVELOPMENT OF THE PROJECT.

1. THE APAC SUGGESTED CHANGING THE NAME OF THE PROJECT TO FAMILY WELFARE PLANNING TO CONFORM TO GOP TERMINOLOGY FOR POPULATION PROGRAM ACTIVITIES.

2. THERE IS A HISTORY OF INTENSE RIVALRY BETWEEN THE FAITH AND POPULATION DIVISIONS OF THE GOP, AND THE LIKELIHOOD OF SUCCESS IN FAMILY WELFARE PLANNING EXISTS ONLY IF THE TWO DIVISIONS WORK TOGETHER MORE CLOSELY. IN DEVELOPING THE PROJECT, THE MISSION SHOULD TRY TO DETERMINE WHICH POPULATION AND HEALTH PROJECT COMPONENTS COULD BE SUPPORTED WHICH MAY STIMULATE MORE EFFECTIVE COORDINATION IN THE POPULATION PLANNING ACTIVITIES OF THE TWO DIVISIONS.

3. IF OTHER DONORS HAVE INSUFFICIENT FUNDS IN THE NEAR FUTURE, CRITICAL ELEMENTS OF THE GOP FAMILY WELFARE PLAN MAY BE UNDERFUNDED, THEREBY JEOPARDIZING THE SUCCESS OF THE USAID SUPPORTED ACTIVITIES. THE PROJECT SHOULD CONTAIN SUFFICIENT FLEXIBILITY TO INSURE AGAINST DISRUPTION OF CRITICAL ELEMENTS OF THE COMPREHENSIVE GOP PLAN.

4. THE APAC DOUBTED THE WISDOM OF CONSTRUCTION OF CENTRAL WAREHOUSING AS THE BEST USE OF USAID RESOURCES. THE PROJECT PREPARATION TEAM SHOULD EXPLORE THE POSSIBILITY OF OTHER DONORS SUPPORTING CONSTRUCTION (ASIAN DEVELOPMENT BANK, FOR EXAMPLE). IF THE MISSION CONSIDERS SOME CONSTRUCTION TO BE A LOGICAL COMPONENT OF THE PROJECT, THE APAC SUGGESTS RENOVATION OF MEDICAL SCHOOL HOSPITAL FACILITIES FOR REPRODUCTIVE HEALTH CARE SERVICES WHICH HAS PROVEN TO BE AN EFFICIENT WAY TO DELIVER POPULATION ASSISTANCE.

5. THE MISSION SHOULD DISCUSS WITH THE GOP SUPPORT FOR A COMMERCIAL RETAIL SALES COMPONENT. THIS IS CRITICAL TO

EXPAND RAPIDLY THE CONTRACEPTION METHODS AT THE LOWEST COST AND SHOULD BE MANAGED BY A PRIVATE OR SEMI-AUTONOMOUS ORGANIZATION WHICH CAN PROMOTE FAMILY PLANNING CONCEPTS AT A PACE MORE RAPID THAN THE GOV ITSELF MAY WISH TO UNDERTAKE.

6. IF THE MISSION IS CONSIDERING SUPPORT FOR POPULATION INTERMEDIARIES, SPECIALIZED TA SHOULD BE SOUGHT TO EXPLORE METHODS TO PROGRAM THIS ACTIVITY EFFECTIVELY. DURING PROJECT PREPARATION IF ANY CENTRALLY FUNDED INTER-MEDIARY APPEARS TO BE CRUCIAL TO PROJECT SUCCESS, THE MISSION SHOULD INSURE PARTICIPATION OF THE INTERMEDIARY BY ROUTING PROJECT FUNDS THROUGH ST/POP FOR SPECIFIED SERVICES IN PAKISTAN. THIS MECHANISM GUARANTEES AVAILABILITY AND REQUIRES LESS STAFF EFFORT AND OVERHEAD COSTS THAN NEGOTIATING A SEPARATE CONTRACT.

7. ALTHOUGH THE PID STATES NO CONTRACEPTIVES ARE LIKELY TO BE REQUIRED IN THE FIRST TWO YEARS OF THE PROJECT, THE MISSION IS REMINDED THAT ORDERS FOR CENTRALLY PROCURED ORALS AND CONDOMS MUST BE PLACED IN THE FIRST PROJECT YEAR FOR DELIVERY IN THE THIRD PROJECT YEAR.

8. SUPPORT FOR COMPETENT CONTRACEPTIVE PREVALENCE SURVEYS IN THE FIRST AND FIFTH PROJECT YEARS IS STRONGLY RECOMMENDED. THESE SURVEYS HAVE PROVEN TO BE VERY VALUABLE IN OTHER AID POPULATION PROJECTS AND SERVE ADDITIONALLY TO STIMULATE THE DEVELOPMENT OF LOCAL SOCIAL SCIENCE SURVEY RESEARCH INSTITUTIONS.

9. IN ALL PROJECTS (VOLUNTARY STERILIZATION) AND PD-56 (ABORTION RELATED ACTIVITIES) MUST BE KEPT IN MIND. HAIG

BT
#3900

UNCLASSIFIED

STATE 293900

PROJECT CHECKLIST

CROSS-REFERENCES: IS COUNTRY CHECKLIST UP TO DATE? Yes
HAS STANDARD ITEM CHECKLIST BEEN REVIEWED FOR THIS CHECKLIST? Yes

A. GENERAL CRITERIA FOR PROJECT

1. Continuing Resolution Unnumbered;
FAA Secs. 634A; 653(b)

- (a) Describe how authorizing and appropriations Committees of Senate and House have been or will be notified concerning the project; (a) Congressional Notification and Congressional Presentation
- (b) Is assistance within (Operational Year Budget) country or international organization allocation reported to Congress (or not more than \$1 million over that amount)? (b) Yes, assistance is within the 1982 operational year budget.

2. FAA Sec. 611 (a) (1)

- Prior to obligation in excess of \$100,000, will there be (a) engineering, financial, and other plans necessary to carry out the assistance and (b) a reasonably firm estimate of the cost to U.S. of the assistance? (a) Yes (b) Yes

3. FAA Sec. 611 (a) (2)

- If further legislative action is required within recipient country, what is basis for reasonable expectation that such action will be completed in time to permit orderly accomplishment of purpose of the assistance? No further legislative action is required.

4. FAA Sec. 611 (b); Continuing
Resolution Sec. 501

- If for water or water-related land resource construction, has project met the standards and criteria as set N.A.

forth in the Principles and Standards for Planning Water and Related Land Resources, dated October 25, 1973?

5. FAA Sec. 611(e)

If project is capital assistance (e.g., construction), and all U.S. assistance for it will exceed \$1 million, has Mission Director certified and Regional Assistant Administrator taken into consideration the country's capability effectively to maintain and utilize the project?

Yes, the Mission Director has signed a FAA 611 (e) certification.

6. FAA Sec. 209

Is project susceptible of execution as part of regional or multi-lateral project? If so why is project not so executed? Information and conclusion whether assistance will encourage regional development programs.

Other donors, specifically, World Bank UNFPA, ADB, the Government of Japan are financing other components of the GOP Population Welfare Plan as separate projects. Assistance will not encourage regional development programs.

7. FAA Sec. 601 (a)

Information and conclusions whether project will encourage efforts of the country to: (a) increase the flow of international trade; (b) foster private initiative and completion; and (c) encourage development and use of cooperatives, and credit unions, and savings and loan associations; (d) discourage monopolistic practices; (e) improve technical efficiency of industry, agriculture and commerce; and (f) strengthen free labor unions.

No significant effect in these area is expected.

8. FAA Sec. 601 (b)

Information and conclusion on how project will encourage U.S. private trade and investment abroad and encourage private U.S. participation in foreign assistance programs (including use of private trade channels and the services of U.S. private enterprise).

Most of the goods and services procured under this project will have their source and origin in the United States and will be procured in accordance with A.I.D. competitive procurement procedures.

9. FAA Sec. 612 (b), 636 (h);
Continuing Resolution Sec. 508

Describe steps taken to assure that, to the maximum extent possible, the country is contributing local currencies to meet the cost of contractual and other services, and foreign currencies owned by the U.S. are utilized in lieu of dollars.

The GOP will contribute the equivalent of approximately \$9.7 million in local currency during the life of the project which is approximately 26% of the total cost of the project.

The Mission Director has certified the disbursement of U.S. dollars in lieu of U.S. Treasury-owned excess rupees to cover some of the local costs under this project. This action is consistent with one of the major objectives of the renewed economic assistance program to Pakistan which is to maximize the balance of payments impact of the program.

10. FAA Sec. 612 (d)

Does the U.S. own excess foreign currency of the country and, if so, what arrangements have been made for its release?

Yes, and Rs.21,000,000 of these U.S. owned excess rupees will be used to finance some of the local costs under the project.

11. FAA Sec. 601 (e)

Will the project utilize competitive selection procedures for the awarding of contracts, except where applicable procurement rules allow otherwise?

Yes

12. Continuing Resolution Sec. 522

If assistance is for the production of any commodity for export, is the commodity likely to be in surplus on world markets at the time the resulting productive capacity becomes operative, and is such assistance likely to cause substantial injury to U.S. procedures of the same, similar or competing commodity?

N.A.

13. FAA Sec. 525

Will the funds for this project be used to lobby for abortion?

No

B. FUNDING CRITERIA FOR PROJECT

This is an ESF project.

1. Development Assistance Project Criteria

a. FAA Sec. 102 (b), 111, 113, 281 (a)

Extent to which activity will (a) effectively involve the poor in development, by extending access to economy at local level, increasing labor-intensive production and the use of appropriate technology, spreading investment out from cities to small towns and rural areas, and insuring wide participation of the poor in the benefits of development on a sustained basis, using the appropriate U.S. institutions; (b) help develop cooperatives, especially by technical

N.A.

assistance, to assist rural and urban poor to help themselves toward better life, and otherwise encourage domestic private and local governmental institutions; (c) support the self-help efforts of developing countries; (d) promote the participation of women in the national economies of developing countries and the improvement of women's status; and (e) utilize and encourage regional cooperation by developing countries?

b. FAA Sec. 103, 103A, 104, 105
106, 107

Is assistance being made available: (including only applicable paragraph which corresponds to source of funds used. If more than one fund source is used for project, include relevant paragraph for each fund source.)

N.A.

(1) (103) for agriculture; rural development or nutrition; if so (a) extent to which activity is specifically designed to increase productivity and income of rural poor; 103A if for agricultural research, full account shall be taken of the needs of small farmers, and extensive use of field testing to adapt basic research to local conditions shall be made; (b) extent to which assistance is used in coordination with programs carried out under Sec. 104 to help improve nutrition of the people of developing countries through encouragement of increased production of crops with greater nutritional value, improvement

N.A.

of planning, research, and education with respect to nutrition, particularly with reference to improvement and expanded use of indigenously produced foodstuffs; and the undertaking of pilot or demonstration of programs explicitly addressing the problem of malnutrition of poor and vulnerable people; and (c) extent to which activity increases national food security by improving food policies and management and by strengthening national food reserves, with particular concern for the needs of the poor, through measures encouraging domestic production, building national food reserves, expanding available storage facilities, reducing post harvest food losses, and improving food distribution.

(2) (104) for population planning under sec. 104 (b) or health under 104 (c); if so, (i) extent to which activity emphasizes low-cost, integrated delivery systems for health, nutrition and family planning for the poorest people, with particular attention to the needs of mothers and young children, using paramedical and auxiliary medical personnel, clinics and health posts, commercial distribution systems and other modes of community research.

N.A

(4) (105) for education, public administration, or human resources development; if so, extent to which activity strengthens non-formal education, makes formal education more relevant, especially for rural families and urban poor, or strengthens management capability of institutions enabling the poor to participate in development; and (ii) extent to which assistance provides advanced education and training of people in developing countries in such disciplines as are required for planning and implementation of public and private development activities.

N.A

(5) (106; ISDCA of 1980, Sec. 104) for energy, private voluntary organizations, and selected development activities; if so, extent to which activity is: (1) (a) concerned with data collection and analysis, the training of skilled personnel, research on and development of suitable energy sources, and pilot projects to test new methods of energy production; (b) facilitative of geological and geophysical survey work to locate potential oil, natural gas, and coal reserves and to encourage exploration for potential oil, natural gas, and coal reserves; and (c) a cooperative program in energy production and conservation through research and development and use of small scale, decentralized, renewable energy sources for rural areas;

N.A

(ii) technical cooperation and development, especially with U.S. private and voluntary or regional and international development organizations; (iii) research into, and evaluation of, economic development process and techniques; (iv) reconstruction after natural or manmade disaster; (v) for special development problems, and to enable proper utilization of earlier U.S. infrastructure, etc., assistance; (vi) for programs of urban development, especially small labor intensive enterprises marketing systems, and financial or other institutions to help urban poor participate in economic and social development.

- c. (107) Is appropriate effort placed on use of appropriate technology? (relatively smaller, cost-saving, labor using technologies that are generally most appropriate for the small farms, small businesses, and small incomes of the poor.)

- d. FAA Sec. 110 (a).

Will the recipient country provide at least 25% of the costs of the program, project, or activity with respect to which the assistance is to be furnished (or has the latter cost-sharing requirement been waived for a "relatively least developed" country)?

N.A.

e. FAA Sec. 110 (b)

Will grant capital assistance be disbursed for project over more than 3 years? If so, has justification satisfactory to Congress been made, and efforts for other financing, or is the recipient country "relatively least developed"?

N.A

f. FAA Sec. 281 (b)

Describe extent to which program recognizes the particular needs, desires, and capacities of the people of the country; utilizes the country's intellectual resources to encourage institutional development; and supports civil education and training in skills required for effective participation in governmental processes essential to self-government.

N.A

g. FAA Sec. 122 (b)

Does the project have reasonable promise of contributing to the development of economic resources, or to the increase of productive capacities and self-sustaining economic growth?

N.A

2. Development Assistance Project
Criteria (Loans Only)

This is an ESF project.

a. FAA Sec. 122 (b)

Information and conclusion on capacity of the country to repay the loan, at a reasonable rate of interest.

N.A.

b. FAA Sec. 620 (d)

If assistance is for any productive enterprise which will compete with U.S. enterprises, is there an agreement by the recipient country to prevent export to the U.S. of more than 20% of the enterprise's annual production during the life of the loan?

N.A.

3. Project Criteria Solely for Economic Support Fund

a. FAA Sec. 531 (a)

Will this assistance promote economic or political stability? To the extent possible, does it reflect the policy directions of FAA Section 102?

Yes, the Project will improve the GOP's capability to deliver Population Welfare Planning services, contribute to the reduction of the population growth rate, and thereby facilitate the achievement of the GOP's development goals as they relate to economic stability.

b. FAA Sec. 531 (c)

Will assistance under this chapter be used for military, or paramilitary activities?

No

5C (3) - STANDARD ITEM CHECKLIST

A. Procurement

1. FAA Sec. 602

Are there arrangements to permit U.S. small business to participate equitably in the furnishing of commodities and services financed?

Yes

2. FAA Sec. 604 (a)

Will all procurement be from the U.S. except as otherwise determined by the President or under delegation from him?

Yes

3. FAA Sec. 604 (d)

If the cooperating country discriminates against U.S. marine insurance companies, will commodities be insured in the United States against marine risk with a company or companies authorized to do a marine insurance business in the U.S.?

Yes

4. FAA Sec. 604 (e); ISDCA of 1980 Sec. 705 (a)

If offshore procurement of agricultural commodity or product is to be financed, is there provision against such procurement when the domestic price of such commodity is less than parity? (Exception where commodity financed could not reasonably be procured in U.S.).

N.A.

5. FAA Sec. 604 (g)

Is the geographic code for the project 941? If it is, is the construction and/or engineering to be procured from a firm in an advanced developing country?

No, the geographic code for this project is 000 and Pakistan.

Construction and engineering services will be procured from local Pakistani firms.

6. FAA Sec. 603

Is the shipping excluded from compliance with requirement in section 901 (b) of the Merchant Marine Act of 1936, as amended, that at least 50 per centum of the gross tonnage of commodities (computed separately for dry bulk carriers, dry cargo liners, and tankers) financed shall be transported on privately owned U.S.-flag commercial vessels to the extent that such vessels are available at fair and reasonable rates?

No

7. FAA Sec. 621

If technical assistance is financed, to the fullest extent practicable will such assistance, goods and professional and other services be furnished from private enterprise on a contract basis? If the facilities of other Federal agencies will be utilized, are they particularly suitable, not competitive with private enterprise, and made available without undue interference with domestic programs?

Yes

N.A.

8. International Air Transport.
Fair Competitive Practices Act 1974

If air transportation of persons or property is financed on grant basis will provision be made that U.S. carriers will be utilized to the extent such service is available?

Yes

9. Continuing Resolution Sec. 505

If the U.S. Government is a party to a contract for procurement, does the contract contain a provision authorizing termination of such contract for the convenience of the United States?

Yes

B. Construction

1. FAA Sec. 601 (d)

If capital (e.g., construction) project, are engineering and professional services of U.S. firms and their affiliates to be used to the maximum extent consistent with the national interests?

Yes

2. FAA Sec. 611 (c)

If contracts for construction are to be financed, will they be left on a competitive basis to maximum extent practicable?

Yes

3. FAA Sec. 620 (k)

If for construction of productive enterprise, will aggregate value of assistance to be furnished by the U.S. not exceed \$100 million?

N.A.

C. Other Restrictions

1. FAA Sec. 122 (b)

If development loan, is interest rate at least 2% per annum during grace period and at least 3% per annum thereafter?

N.A.

2. FAA Sec. 301 (d)

If fund is established solely by U.S. contributions and administered by an international organization, does Comptroller General have audit rights?

N.A.

3. FAA Sec. 620 (h)

Do arrangements exist to insure that United States foreign aid is not used in a manner which, contrary

Yes

to the best interests of the United States, promotes or assists the foreign aid projects or activities of the Communist-block countries?

4. Will arrangements preclude use of financing:

a. FAA Sec. 104 (f)

To pay for performance of abortions as a method of family planning or to, motivate or coerce persons to practice abortions; to pay for performance of involuntary sterilization as a method of family planning, or to coerce or provide financial incentive to any person to undergo sterilization?

Yes. Abortion is illegal in Pakistan. A.I.D. funding does not support the GOP voluntary sterilization program.

b. FAA Sec. 620 (g)

To compensate owners for expropriated nationalized property?

Yes

c. FAA Sec. 660

To provide training or advice or provide any financial support for police, prisons, or other law enforcement forces, except for narcotics programs?

Yes

d. FAA Sec. 662

For CIA activities?

Yes

e. FAA Sec. 636 (1)

For purchase, sale, long-term lease, exchange or guaranty of the sale of motor vehicles manufactured outside U.S., unless a waiver is obtained.

Yes

- f. Continuing Resolution Sec. 504
- To pay pensions, annuities retirement pay, or adjusted service compensation for military personnel? Yes
- g. Continuing Resolution Sec. 506
- To pay U.N. assessments, arrearages or dues. Yes
- h. Continuing Resolution Sec. 507
- To carry out provisions of FAA section 209 (d) (Transfer of FAA funds to multilateral organizations for lending.) Yes
- i. Continuing Resolution Sec. 509
- To finance the export of nuclear equipment fuel, or technology or to train foreign nationals in nuclear fields? Yes
- j. Continuing Resolution Sec. 510
- To aid the efforts of the government of such country to repress the legitimate rights of the population of such country contrary to the Universal Declaration of Human Rights? Yes
- k. Continuing Resolution Sec. 516
- To be used for publicity or propaganda purposes within U.S. not authorized by Congress? Yes



UNITED STATES AGENCY FOR INTERNATIONAL DEVELOPMENT
MISSION TO PAKISTAN

Cable : USAIDPAK

HEADQUARTERS OFFICE
ISLAMABAD

THE DIRECTOR

POPULATION WELFARE PLANNING PROJECT

FAA SECTION 611(e) CERTIFICATION

I, Donor M. Lion, the principal officer of the Agency for International Development in the Islamic Republic of Pakistan, having taken into account, among other things, the maintenance and utilization of projects in the Islamic Republic of Pakistan previously financed or assisted by the United States, do hereby certify, pursuant to Section 611(e) of the Foreign Assistance Act of 1961, as amended, that, in my judgement, the Islamic Republic of Pakistan has both the financial capability and the human resources capability to effectively implement, utilize and maintain the proposed Population Welfare Planning Project.

This judgement is based upon the project analysis as detailed in the Population Welfare Planning Project Paper and is subject to the conditions imposed therein.

Donor M. Lion

Donor M. Lion
Director
USAID/Pakistan

March 7, 1982

Date



UNITED STATES AGENCY FOR INTERNATIONAL DEVELOPMENT
MISSION TO PAKISTAN

Cable : USAIDPAK

HEADQUARTERS OFFICE
ISLAMABAD

THE DIRECTOR

POPULATION WELFARE PLANNING PROJECT

FAA SECTION 612 (b) CERTIFICATION

A major purpose of the \$1.625 billion economic assistance program negotiated between the governments of the U.S. and Pakistan, acknowledged by both governments and a primary reason for both governments having decided to develop an economic assistance package, is to provide balance of payments assistance to Pakistan.

I have carefully reviewed the advisability of disbursing U.S. dollars in lieu of U.S.-owned excess foreign currency to pay for local costs of projects being implemented in Pakistan. In light of the U.S. Government's objectives concerning the program, I have determined that it would be prejudicial to U.S. interests and goals to pay for all local currency costs with U.S.-owned rupees. Such a procedure would prevent the U.S. from providing the maximum amount of balance of payments support under the economic assistance package, and would consequently undercut one of the basic objectives of the program. The objective of providing balance of payments assistance to Pakistan can best be achieved by disbursing U.S. dollars to pay for local costs of the program. Section 612(b) of the Foreign Assistance Act of 1961, as amended, authorizes the administrative official approving the voucher to determine that local costs will be funded with direct payment of dollars for the program. Pursuant to this provision, Handbook 19 requires that the Mission Director (or his designee) make a determination as to the reason in any instance where U.S. dollars are used (disbursed) when U.S.-owned foreign currency is available. Where dollars are used for local cost financing, therefore, USAID/Pakistan will make disbursements to the GOP in U.S. currency.

FAA Section 612 (b) Certification (Continued)

In addition to disbursing dollars for local costs, USAID/Pakistan plans to use the U.S.-owned excess rupees known as "Mondale rupees," which are available under the provisions of Section 104 of the Agricultural Trade Development and Assistance Act of 1954, as amended, to finance some of the local costs associated with U.S. dollar-financed activities, thereby increasing the overall development impact of the proposed \$1.625 billion economic assistance program.

In view of the above rationale, I, Donor M. Lion, principal officer of the Agency for International Development in Pakistan, pursuant to Section 612(b) of the Foreign Assistance Act of 1961, as amended, do hereby certify the need to disburse dollars to cover local currency costs in lieu of using U.S.-owned excess rupees under the Population Welfare Planning Project.

Donor M. Lion

Donor M. Lion
Director
USAID/Pakistan

March 17, 1982

Date



No. 1(1)CH-VI/52,
Government of Pakistan
MINISTRY OF FINANCE AND
ECONOMIC AFFAIRS
(ECONOMIC AFFAIRS DIVISION)

Islamabad the, 16th March, 1983.

Telegram : ECONOMIC
Telex : ECDIV No 05-634
SECRETARY,
Phone: 22763

Dear Mr. Lion,

As part of our two governments' agreement on a six-year \$ 1.625 billion economic assistance program, the Government of Pakistan formally requests United States assistance from USAID/Pakistan of twenty-five million six hundred thousand dollars (\$ 25,600,000) in dollar funding and twenty-one million rupees (Rs. 21,000,000) in Mondale rupee funding to finance a Population Welfare Planning Project.

2. This project is designed to strengthen Pakistan's population planning, evaluation, research, motivational and logistic capabilities and performance.

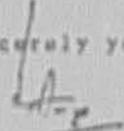
3. Subject to the availability of funds, approximately \$ 25.6 million of ESF Grant Funds would be provided over a five-year period. The project will also have a Mondale rupee component to help finance local currency costs of the project. The components of our population program which we are asking A.I.D. to support include: management information, research and evaluation; logistics system and contraceptive supply; bio-medical and socio-medical research at the National Institute for Technical Research; and, professional and personal motivation through short-term training and technical assistance.

BEST AVAILABLE DOCUMENT

4. The Government of Pakistan assures the United States Government of its full cooperation in carrying out the Population Welfare Planning Project. The manpower, financial and other inputs required of us will be provided in an expeditious manner.

5. We look forward to a continued, combined effort by both our Governments to yield a productive and beneficial program for the people of Pakistan.

Sincerely yours,


(EJAZ AHMAD HAIK)

Mr. Donor H. Lion,
Director,
USAID Mission,
Islamabad.

BEST AVAILABLE DOCUMENT

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PROJECT DESIGN DRAWING
LOGICAL FRAMEWORK

Population Welfare Planning 191-1469

ANNEX 2
Page 1
Date of Preparation: 1987
Page No: 82 of 87
Total Cost: \$23.6 million +
Govt share: \$11.78 million

Strategic Objectives	OBJECTIVELY VERIFIABLE INDICATORS	MEANS OF VERIFICATION	IMPORTANT ASSUMPTIONS
<p>To reduce the rate of natural population increase as part of the goal of achieving national social and economic development.</p>	<p>Measures of Dem. Advancement</p> <ul style="list-style-type: none"> - Rate of natural increase reduced from the 1972-1983 inter-censal growth rate of 2.87 percent to 2.4 percent by the end of the project. - Crude birth rate reduced from the present level of 41 per 1000 to 36 per thousand by the end of the project. - Contraceptive use prevalence = 11% of WUSA by the end of the project. 	<ul style="list-style-type: none"> - Demennial census, contraceptive prevalence and other surveys, birth and death registration (vital statistics). - Data provided by Information Feedback System of the Population Welfare Division. 	<p>Assumptions for achieving this objective</p> <ol style="list-style-type: none"> 1. An increasing number of Pakistani couples of child-bearing age will practice effective contraception. 2. The GOP will continue to give high priority to population activities and will demonstrate this support by adequate budgetary support. <p>(Continued on page 2)</p>
<p>Assumptions for achieving this objective</p> <ol style="list-style-type: none"> 1. The GOP will accept and utilize findings of demographic research and program planning processes. 2. The GOP will give logistics and contraceptive supply sufficient priority to provide the necessary facilities, personnel, and logistic support needed to meet service demands. 	<p>Continued on page 2</p>	<p>Continued on page 2</p>	<p>Continued on page 2</p>
<p>Assumptions for achieving this objective</p> <ol style="list-style-type: none"> 1. The GOP establishes mechanisms necessary for identifying information and research needs, setting priorities, designing valid methodologies, selecting qualified personnel and consultants, monitoring work and disseminating results. 2. GOP obtains necessary contraceptive supplies from own and donor sources in a timely fashion. 	<p>Continued on page 2</p>	<p>Continued on page 2</p>	<p>Continued on page 2</p>
<p>Assumptions for achieving this objective</p> <ol style="list-style-type: none"> 1. US and GOP proposed funding levels are approved by the respective governments and expenditures proceed on a timely basis. 	<p>Continued on page 2</p>	<p>Continued on page 2</p>	<p>Continued on page 2</p>

ANNEX 2
Page 1

PROJECT DESIGN SUMMARY
LOGICAL FRAMEWORK (Continued)

<p><u>Conditions that will indicate purpose has been achieved:</u> <u>End of project status.</u></p> <p>3. Bio-medical and social-medical research findings are used by the GOP for planning and management.</p> <p>4. Program personnel, other government ministries, and prominent Pakistani citizens are more aware of the consequences of uncontrolled fertility, and better motivated to participate in reducing it.</p> <p style="text-align: right;">B-2</p>	<p><u>Means of Verification</u></p> <p>2.a. Inventory and utilization records show there is a one-year supply of contraceptives in the country, and a one-year supply in the pipeline.</p> <p style="padding-left: 2em;">b. Storage and utilization records for each outlet.</p> <p style="padding-left: 2em;">c. Site visits and special surveys.</p> <p>3.a. Bio-medical and socio-medical research is targeted to and meets the needs expressed by policy-makers.</p> <p style="padding-left: 2em;">b. Policy, strategy and management guidelines quote or otherwise reflect the findings of the research.</p> <p>4.a. Evaluation of performance by program personnel affected by project training.</p> <p style="padding-left: 2em;">b. Evaluation of the degree of participation by prominent citizens in population-related activities and their support of the GOP program after their observational visits.</p> <p style="text-align: right;">B-3</p>	<p><u>Assumptions for achieving goal targets:</u></p> <p>3. International donor assistance will continue at adequate levels until the GOP can wholly sustain the program.</p> <p>4. Political stability will result in uninterrupted program operations.</p> <p style="text-align: right;">A-4</p> <hr/> <p><u>Assumptions for achieving purpose:</u></p> <p>3. Appropriate overseas training and U.S. based technical assistance can be identified and provided to meet project needs.</p> <p style="text-align: right;">B-4</p>
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PROJECT DESIGN SUMMARY
LOGICAL FRAMEWORK (Continued)

<u>Outputs:</u>	<u>Magnitude of Outputs:</u>	<u>Means of Verification:</u>
<p>2. Logistics Systems and Contraceptive Supplies:</p> <ul style="list-style-type: none"> a. Warehouse constructed and equipped. b. Supply procedures designed and tested. c. Supply manual developed. d. Trained personnel. e. Continuing contraceptive availability. <p>3. Bio-medical and Socio-medical Research:</p> <ul style="list-style-type: none"> a. Trained personnel. b. Facility constructed. c. Improved contraceptive testing capability. <p>4. Professional and Personal Motivation</p> <ul style="list-style-type: none"> a. Trained program personnel b. Motivated government officials and prominent citizens. <p style="text-align: right;">C-1</p>	<p>f. 30 staff trained locally; 10 overseas; and 5 interns trained.</p> <p>2. a. 1 warehouse built and equipped.</p> <ul style="list-style-type: none"> b. Set of logistic forms designed and tested. c. 1 procedure manual produced, distributed and used at all distribution points. d. 65 district, 4 provincial, and 11 personnel from other organizations trained. e. Contraceptives present at each service level to meet program needs. <p>3. a.i. 2 staff trained to MPH level.</p> <ul style="list-style-type: none"> ii. 10 staff receive short-term training. iii. 15 teaching visits by US experts. b. NITR constructed. <p>4. a. 15 visits to Pakistan by US experts.</p> <ul style="list-style-type: none"> b. 50 visits by Pakistanis to US or other developing country. <p style="text-align: center;">C-2</p>	<p>f. Training records, on-site inspection, research reports.</p> <p>2.a. On-site inspection.</p> <ul style="list-style-type: none"> b. Inspection of forms; performance evaluation. c. Inspection, performance evaluation, service records. d. Training records and evaluation. <p>3.a.i. Training records and evaluation.</p> <ul style="list-style-type: none"> ii. Trips reports. b. On-site inspection c. Testing meets international standards. <p>4.a. Training records, trainee reports, and evaluation.</p> <ul style="list-style-type: none"> b. Trip reports. <p style="text-align: right;">C-3</p>
<p><u>Inputs:</u></p> <p>2. GOP funding in cash or in kind for:</p> <ul style="list-style-type: none"> a. Salaries and benefits. b. Operating expenses. c. Land used for program facilities. <p style="text-align: right;">D-1</p>		<p><u>Assumptions for achieving outputs:</u></p> <p>3. Appropriately qualified personnel are made available for training.</p> <p style="text-align: right;">C-4</p>

VEHICLE WAIVER

Problem: A waiver of Section 636(i) of the FAA and the source/origin requirements from AID Geographic Code 000 (U.S. only) to AID Geographic Code 935 (Special Free World) is required to permit the purchase of two (2) right-hand drive, 3/4 ton capacity, diesel pick-up trucks and spare parts.

Background:

- (a) Cooperating Country: Pakistan
- (b) Project: Population Welfare Planning
- (c) Project Number: 391-0469
- (d) Geographic Code: 000 and Pakistan
- (e) Name of Commodity Importer: USAID/Pakistan or an organization contracted by USAID/Pakistan
- (f) Description of Commodity Sought: Two (2) pick-up trucks, diesel, 3/4 ton capacity, right-hand drive, and spare parts
- (g) Manufacturer of Commodity Sought: Most probably Toyota, Mazda, or Datsun since adequate spare parts, maintenance and repair capability exist in Pakistan for these Japanese vehicles
- (h) Approximate Value of Commodity Sought: \$36,000
- (i) Nature of Funding: Economic Support Fund Grant
- (j) Procurement Origin: Most probably Japan
- (k) Procurement Source: Most probably Japan
- (l) Is the commodity sought from a sole source or from more than one source?: Multiple sources

Discussion: One component of the Population Welfare Planning Project is to strengthen the logistics support system of the Government of Pakistan's population program. Funds will be provided for the construction of warehouse facilities, technical assistance, the production of a logistics supply procedural manual, training for appropriate Population Welfare Division staff, and the provision of contraceptives. Transport of

family planning supplies from the Karachi Port to warehouse facilities and to the railroad station for onward shipment to service delivery outlets is a critical component of the logistics support system. To ensure the availability of adequate transport for this purpose, the Project will provide funds for two pick-up trucks. Right-hand drive is an essential feature for vehicles in Pakistan where the traffic moves forward on the left-hand side of the road, and hazardous road conditions exist due to poor driving practices and disregard for general safety procedures and traffic laws. The U.S., however, does not presently manufacture right-hand drive pick-up trucks with the specific features required for the Project.

Justification: Section 636(1) of the Foreign Assistance Act of 1961, as amended, requires AID to procure U.S.-manufactured vehicles but allows for special circumstances that may justify waiving this requirement. AID Handbook 1, Supplement B, Chapters 4C2d and 5B4d(2) set forth special circumstances under which a waiver may be justified. The circumstance which pertains to this waiver request is the present inability of U.S. manufacturers to provide the required type of vehicle, i.e., 3/4 ton capacity, diesel, right-hand drive pick-up trucks.

Recommendation: For the above reasons, it is recommended that it be:

- (a) determined that pursuant to the waiver provision of Handbook 1, Supplement B, Section 4C2d, a waiver of Section 636(1) of the FAA and the source/origin requirements for the Project is justified, and thereby authorized, to permit the procurement of two (2) right-hand drive, 3/4 ton capacity, diesel pick-up trucks and spare parts valued at approximately \$36,000 from countries included in AID Geographic Code 935; and
- (b) certified that, pursuant to Section 5B4c of AID Handbook 1, Supplement B, exclusion of procurement of these project vehicles from Free World Countries other than the Cooperating Country and countries included in AID Geographic Code 941 would seriously impede the attainment of U.S. foreign policy objectives and the objectives of the foreign assistance program.

DATA MANAGEMENT SERVICES REQUEST			INSTRUCTION: See Handbook 18, Information Services, Chapter 3.	
1. TO	DIRECTOR, OFFICE OF DATA MANAGEMENT, AID/W			
2. FROM	REQUESTING OFFICE HPN	ORGANIZATIONAL SYMBOL USAID/Pakistan	SIGNATURE <i>Cornelia E. Davis</i> Cornelia E. Davis	DATE Feb. 1, 1982
3. DESCRIPTION OF REQUIRED SERVICE				

Acquisition of an IBM System 34 including: IBM 5251 Display Station
IBM 5340 System Unit (64 K)
IBM 3262 Printer (or comparable unit)

This equipment will be purchased under the Population Welfare Project, 391-0469 to enhance population research by creating self-sufficiency in data processing and increasing capacity to cope with future demand. The equipment will be utilized by the Population Development Center (PDC), the research arm of the GOP Population Welfare Division, to carry out population-related research supported under the project. The PDC's current system consists of an IBM Model 3742 Data Entry Station (8 K) and an IBM Model 3741 Dual Entry Stations.

4. JUSTIFICATION

- a. Increased demand for data processing (more work and larger data sets)
- b. Complete compatibility with current system
- c. Trained and experienced staff already in place
- d. Equipment and service available in Pakistan
- e. Lack of any effective alternative equipment
- f. Greater capacity (8K vs 64K) will allow almost all data processing to take place "in-house".
- g. The current system can only be programed in Assembler. The expanded system can be programed in Fortran IV, Cobol and RPG II.

5a. SYSTEM/ACTIVITY NAME Population Development Center, Population Welfare Division, GOP	5b. REQUESTED IMPLEMENTATION DATE June 1, 1982	5c. REQUESTED PRIORITY HIGH
6. SERVIC. ACTION	7. FOR SERVIC. USE ONLY	
4. DM CONTROL	3. SYSTEM NUMBER	
	5. PROJECT NUMBER	
8. DM REFERENCES	2. PROJECT MANAGER	
9. ACKNOWLEDGMENT DATE	1. PROJECT START DATE	10. PROJECT COMP DATE

EXCERPTS FROM
A REVIEW OF
THE AUTOMATED DATA PROCESSING COMPONENT
OF THE
POPULATION WELFARE PLANNING PROJECT (391-0469)
USAID/PAKISTAN

Prepared by:
John S. Marshall
SER/DM Computer Specialist
February 16, 1982

I. INTRODUCTION

USAID/Pakistan's Population Welfare Planning Project (391-0469) has as one of its goals, the strengthening of the research capability and the capacity of the GOP's Population Welfare Division (PWD). The Population Development Center (PDC) is the research unit within PWD and consists of two divisions: (A) Demographic and Allied Research, and (B) Surveys, Statistics, and Data Processing. The Surveys, Statistics and Data Processing Division is comprised of four sections: the Services Statistics Section; the Survey and Data Collection Section; the Data Processing Section; and the Administrative Section. This Division is responsible for the collection, analysis, and feedback of program services statistics, implementation of surveys, and provision of necessary administrative support for all of PDC such as recruiting, physical plant maintenance, finance, and report publication.

Under the proposed A.I.D. project, PDC will undertake numerous population-related surveys and studies. One component of the proposed A.I.D. project is designed to expand the capacity and capability of PDC's Surveys, Statistics, and Data Processing Section to accommodate the increased workload of data collection and computer processing which will result from the implementation of activities under the GOP's new Population Welfare Plan.

II. CURRENT FACILITIES AND STAFF

The PDC has a data processing center which has an air-conditioned room that houses its computer equipment. The Center is equipped with several key punch machines, three IBM model 3741 dual entry stations, one IBM model 3742 Printer/Processor with 8,000 units of storage, one diskette to tape copier, and a Hewlett Packard reader processing unit. In addition to the above, the PDC has access to the IBM 370-115 computer of the United Bank Limited in Pakistan for longer running applications.

PDC data processing staff consist of a director, one assistant programmer, and seven data entry personnel. The staff possess a high degree of skill, knowledge, and experience in data processing. The director and the programmer have extensive knowledge in ALC, FORTRAN, and COBOL.

III. PDC DATA PROCESSING CAPABILITIES

Due to the limited processing power and speed of the equipment at the Center, PDC can only process listings with a limited amount of computation. In addition, due to the limited printer speed (100 lines per minute) of the PDC equipment, reports that would normally take several minutes to complete on a larger computer take several hours on existing PDC equipment. One such report of several hundred pages, the Contraceptive Prevalence Survey (CPS), takes five to six hours to print using the IBM 3742.

IV. PROPOSED AUTOMATED DATA PROCESSING (ADP) EQUIPMENT

Under the new GOP Population Welfare Plan, PDC's role will increase significantly. To accommodate the increased workload PDC plans to hire an additional programmer. In order to support the planned applications, the GOP has requested A.I.D. to purchase an IBM System 34 computer. This system is adequate for current and immediate future needs to achieve self-sufficiency in data processing. The IBM System 34 is also compatible with existing PDC data processing equipment. In addition to the IBM System 34 Computer, A.I.D. will also purchase several program packages designed for Social Science Research (SPSS, BIOMED, P-STAT, SAS) to be used primarily for analysis of survey results. These packages will be used on the United Bank Limited's computer.

A.I.D. support will allow PDC to provide the data processing necessary to develop both the service statistics and feedback and evaluation systems as well as to undertake the large number of surveys and studies planned under the project, the most significant of which are the three Contraceptive Prevalence Surveys.

V. CONCLUSIONS AND RECOMMENDATIONS

Based on the review of the current ADP activities of the PDC computer center and the proposed new functions for PDC, the following conclusions and recommendations are offered:

A. Conclusions

1. The computer center with its existing hardware is not capable of assuming the additional workload required under the project.

2. Current staffing is inadequate to service the additional workload.

3. PDC plans to increase its computer capacity by procuring an IBM System 34. At a later date, when the proposed capacity of the System 34 approaches saturation, additional equipment can be added to the System 34. Once PDC's workload exceeds the capacity of the System 34, it plans to acquire a larger computer. PDC staff have indicated that the System 34 would be sufficient for their needs for 3 to 5 years.

B. Recommendations

1. A.I.D. procure an IBM System 34 computer for the PDC under this project. Due to few vendors in-country and compatibility of the existing equipment at PDC, A.I.D. should procure the equipment from IBM World Trade.

2. PDC should hire two additional programmers to support the workload due to the expanded functions of the organization

3. Additional training should be given in systems analysis and programming in addition to routine vendor training.

4. SER/DM approve the ADP component of this project.

I. ESTIMATED COST OF THE IBM SYSTEM 34

A. Hardware

<u>Model</u>	<u>Description</u>	<u>Qty</u>	<u>Cost</u> (S)	<u>Monthly</u> <u>Maintenance</u> (Rs)
5340 c34	Sys. Unit 64K	1	54,115	5,782
4655	Keylock	1	95	-
5251 011	Display Station	2	7,072	716
4600	Key Board	2	874	114
4655	Key Lock	2	98	-
5255 004	Printer 560 LPM	1	21,336	3,089
1470	Alarm	1	65	-
Sub-Total			\$ 83,655	Rs 9,701 or \$ 930 ^{a/}

^{a/} At the exchange rate of \$1.00 = Rs 10.43 as of 1/26/82.

B. Software

	<u>Monthly Licensing Fee</u> (In \$)
1. System Support Package	116
2. System 34 Utilities	34
3. Workstation Support Subroutines	15
4. PRPQ Assembly and Macro Subroutines	102
5. BASIC	48
6. COBOL	99
7. FORTRAN IV	105
8. RPG II	33
9. 5230 On-Line Data Collection	100
	<hr/>
Total	\$ 652

Total Monthly Maintenance and Licensing Costs (\$930+\$652)	\$ 1,582
Annual Maintenance Cost	\$ 18,984
5½ Year Maintenance Costs	\$104,412

II. 5½ Year ADP BUDGET

	<u>In \$</u>
IBM Maintenance (\$930 per month)	61,380
Hewlett Packard Installation	1,000
Hewlett Packard Maintenance (\$400 per month)	26,400
Data Processing Supplies	20,000
IBM System 34 Computer	83,655
Technical Assistance for Programing (3 PM per year)	51,600
IBM Licensing Fee for Software (\$652 per month)	43,032
Software Packages	4,000
	<hr/>
Total	\$ 291,067

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ADM AID

E.O. 12065: N/A

TAGS:

SUBJECT: PROJECT 391-0469 POPULATION WELFARE PLANNING

1. SER/DM MANAGEMENT HAS REVIEWED REPORT PREPARED BY JOHN MARSHALL, DATED 2-16-82.

2. WHILE PRIOR AND CURRENT PWD AND PDC ACTIVITY INDICATES INTEREST AND ACCOMPLISHMENT IN AUTOMATION ON IPM 3742 AND IPM 370/115 AT PANK, SER/DM HAS FOLLOWING RESERVATIONS WHICH SHOULD BE KEPT IN MIND DURING PROJECT MANAGEMENT.

..... CURRENT STAFFING IS CONSIDERED MINIMAL FOR PROPOSED SYSTEMS ACTIVITY WHICH IS SEEN AS GROWTH ORIENTED

..... HARDWARE IS RECOMMENDED AS A COMMENDABLE MATURE PRODUCT VERY SUITABLE FOR GENERAL PURPOSE USAGE FOR LDC'S

..... CONVERSION ACTIVITY FROM CURRENT APPLICATION WILL BE TIME CONSUMING AND A DRAIN ON CURRENT TECHNICAL STAFF.

..... NEW SYSTEMS DEVELOPMENT EFFORTS WILL NEED TO COMPETE WITH STAFFING FOR OLDER APPLICATIONS

..... MANAGERS WILL NEED TO PRIORITIZE CONVERSION VERSUS NEW APPLICATIONS

..... STRONGLY URGE THAT ADDITIONAL STAFF ANALYST AND PROGRAMMERS, BE HIRED PER MARSHALL RECOMMENDATION ASAP, AND

..... TRAINING ACTIVITY OF A FORMAL NATURE BE INITIATED SOONEST.

3. ON THESE AFOREMENTIONED PAGES, SER/DM CONCURS WITH RECOMMENDATION PERTAINING TO ADP COMPONENT OF SUBJECT PROJECT AND ENCOURAGES PROCUREMENT OF EQUIPMENT. REGARDS.

4. SER/DM CONCURS WITH THE REQUEST FOR PROPRIETARY PROCUREMENT AND PROCUREMENT SOURCE WAIVER OF COMPUTER EQUIPMENT. HAIG

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ADM AID

F.O. 12065: N/A

TAGS:

SUBJECT: PROJECT 391-2469 POPULATION WELFARE PLANNING

REF: ISLAMAPAD 02909

1. FOLLOWING IS DRAFT FOR PROPRIETARY PROCUREMENT AND SOURCE WAIVER FOR SUBJECT PROJECT.

2. PROCUREMENT OF COMPUTER EQUIPMENT AND RELATED GOODS AND SERVICES:

... A. THE MISSION REQUESTS A WAIVER TO PERMIT PROPRIETARY PROCUREMENT BY THE GOP OF IBM COMPUTER HARDWARE AND RELATED GOODS AND SERVICES. ASSUMING THE WAIVER IS APPROVED, THE GOP WOULD BE THE AUTHORIZED AGENT AND STANDARD LETTER OF COMMITMENT PROCEDURES WOULD BE USED TO PROCURE THIS EQUIPMENT.

...THE JUSTIFICATION FOR PROCURING IBM EQUIPMENT IS BASED ON TWO PRIMARY FACTORS: FIRST, A REVIEW OF EXISTING VENDORS THAT PROVIDE COMPUTER HARDWARE IN PAKISTAN HAS INDICATED THAT EXCEPT FOR IBM, THEY VENDORS ARE NOT PREPARED TO INSTALL MACHINES OF THE SIZE REQUIRED FOR THIS PROJECT, DUE TO THEIR LIMITED TECHNICAL CAPABILITY TO SERVICE THE EQUIPMENT. ON THE OTHER HAND, IBM HAS ALREADY INSTALLED SEVERAL SYSTEM 34 COMPUTERS AND LARGER MODEL COMPUTERS.

...IBM ALSO HAS TRAINED PERSONNEL AND SPARE PARTS TO SERVICE THE EQUIPMENT. SECONDLY, THE ORGANIZATION WHICH REQUIRES THE COMPUTER EQUIPMENT IS USING EXISTING IBM EQUIPMENT AT THE PRESENT TIME. DUE TO THEIR LIMITED STAFF, CONVERSION TO ANY OTHER EQUIPMENT AND RETRAINING OF EXISTING PERSONNEL WOULD BE PROHIBITIVE TO THIS PROJECT.

REQUEST FOR PROCUREMENT SOURCE WAIVER FROM GEOGRAPHIC CODE 002 TO GEOGRAPHIC CODE 935.

...THE SOURCE/ORIGIN WAIVER IS REQUESTED DUE TO THE FACT THAT IBM-PAKISTAN IS A SUBSIDIARY OF IBM WORLD TRADE CORPORATION, WHICH MANUFACTURES COMPUTER COMPONENTS THROUGHOUT THE WORLD. THEREFORE, THE MISSION REQUIRES LOCAL PURCHASE TO INSURE. BETTER SERVICE SUITABLE VOLTAGES. REPLACEMENT PARTS, WHICH MAY NOT

THE US ORIGIN DUE TO IFM'S WORLD WIDE MANUFACTURING
FACILITIES. HAIG

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UNITED STATES AGENCY FOR INTERNATIONAL DEVELOPMENT
MISSION TO PAKISTAN

ANNEX F.5
Page 1

Cable : USAIDPAK

HEADQUARTERS OFFICE
ISLAMABAD

THE DIRECTOR

USAID/PAKISTAN MISSION DIRECTOR'S WAIVER FOR A.I.D.
PAYMENT OF INTERNATIONAL PARTICIPANT TRAVEL COSTS

A.I.D. Handbook 10, Chapter 15B1, provides that the cost of international travel, including incidental costs en route as well as the cost of travel between the participant's city and the points of departure and return in the participant's home country, shall be paid by the host government or other sponsor unless, in the case of Mission-funded programs, the Mission Director has justified and authorized full or partial waivers and has so notified S&T/IT.

Training and institution-building are important components of the \$1.625 billion economic assistance program negotiated between the Governments of the U.S. and Pakistan. USAID/Pakistan's experience, however, has been that the Government of Pakistan (GOP), due to serious foreign exchange and budgetary constraints, has been historically unable to fund international travel costs for short-term training programs. The consequence has been that Pakistani participants have, on numerous occasions, been denied worthwhile and much needed training, inhibiting the achievement of project targets.

I have carefully reviewed the advisability of requiring full GOP funding for travel costs for participant training of one year or less and the alternative of funding such travel with grant and loan funds provided through USAID/Pakistan to the GOP. Recognizing the objectives of many of our projects and the fact that project success will be enhanced by encouraging opportunities for short-term training, I have determined that it would be prejudicial to U.S. interests to require that the GOP pay the entire international participant travel costs for training programs of one year or less.

Therefore, on all Mission-funded training programs up to and including one year, USAID/Pakistan shall be responsible for the entire cost of the round-trip economy class air ticket and other necessary incidental costs en route. Where a PIO/P has been originally written for a program of one year or less, but, after the participant has initiated his or her program, the program is extended so that it exceeds one year in total, USAID/Pakistan shall also fund the round-trip ticket. The justification for funding programs that are extended is to minimize administrative problems which are otherwise likely to occur.

On the basis of the above justification and pursuant to Handbook 10, Chapter 1st Bla, I, Donor M. Lion, principal officer of the Agency for International Development in Pakistan, do hereby waive the requirement that the host government fully fund international travel for training courses of one year or less and authorize payment with USAID/Pakistan loan and grant funds for travel costs as specified above.

Donor M. Lion

Donor M. Lion
Director
USAID/Pakistan

March 17, 1982

Date

b. Conditions Precedent to Warehouse Construction

i. Prior to A.I.D. entering into a contractual commitment with an Architectural and Engineering (A&E) firm which may result in a future disbursement of funds by A.I.D., the GOP, through its Population Welfare Division (PWD), shall have identified a proposed land site approved by A.I.D. for the construction of the warehouse under this Project.

ii. Prior to A.I.D. authorizing the A&E firm to proceed beyond the site investigation stage which may result in a future disbursement of funds by A.I.D. for activities other than site investigations, the GOP shall establish, in form and substance satisfactory to A.I.D., the GOP's right to ownership or adequate and sufficient use and occupancy of the proposed land site under this Project.

iii. Prior to A.I.D. making the final disbursement for design services to the selected A&E firm, the GOP shall confer with A.I.D. and, in writing, concur in approval of the design prepared by the A&E firm.

c. Conditions Precedent to Construction of a Building for the National Institute of Technical Research (NITR)

i. Prior to A.I.D. entering into a contractual agreement with an A&E firm which may result in a future disbursement of funds by A.I.D., the GOP, through its PWD, shall have identified a proposed land site approved by A.I.D. for the construction of the NITR building under this Project.

ii. Prior to A.I.D. authorizing the A&E firm to proceed beyond the site investigation stage which may result in a future disbursement of funds by A.I.D. for activities other than site investigations, the GOP shall establish, in form and substance satisfactory to A.I.D., the GOP's right to ownership or adequate and sufficient use and occupancy of the proposed land site under this Project.

iii. Prior to A.I.D. making the final disbursement for design services to the selected A&E firm, the GOP shall confer with A.I.D. and, in writing, concur in approval of the design prepared by the A&E firm.

4. The following waiver to A.I.D. regulations is hereby approved:

A source/origin waiver from A.I.D. Geographic Code 000 to A.I.D. Geographic Code 935 to permit the purchase of 2 right-hand drive diesel pick-up trucks and spare parts. (See Attached Annex F.1, Action Memorandum).

APPROVED: M. Peter McPherson

DATE: _____

AGENCY FOR INTERNATIONAL DEVELOPMENT

ADVICE OF PROGRAM CHANGE

COUNTRY:	Pakistan
PROJECT TITLE:	Population Welfare Planning
PROJECT NUMBER:	391-0469
FY 1982 CP REFERENCE:	None
APPROPRIATION CATEGORY:	Economic Support Funds
LIFE OF PROJECT FUNDING:	\$25,600,000 Grant
INTENDED FY 82 OBLIGATION:	\$4,300,000 Grant

This is to advise that A.I.D. intends to obligate \$4,300,000 of Economic Support Funds in FY 1982 for the Pakistan Population Welfare Planning Project. This is a new project and was not included in the FY 1982 Congressional Presentation.

This project will: (1) strengthen the GOP's existing management information, demographic research, and evaluation unit through the provision of technical assistance, training and computer hardware; (2) improve the logistics system through construction and equipping of a warehouse for storage of contraceptives and other commodities and the provision of technical assistance for development of a supply procedural manual, training, and 2 pick-up trucks for logistics support; (3) strengthen the capacity and capability to undertake bio-medical and socio-medical research through construction of a new facility for the National Institute of Technical Research, and the provision of technical assistance, training, and contraceptive testing equipment; and, (4) create a keener awareness of demographic problems in Pakistan among program personnel and prominent Pakistanis through population seminars/workshops and related activities in other developing countries and in the U.S.

ANNEX: Activity Data Sheet

TITLE Population Welfare Planning		FUNDS 100	PROPOSED OBLIGATION (in thousands of dollars)		
NUMBER OF-ORIGINS GRANT <input type="checkbox"/> LOAN <input type="checkbox"/>		PRIOIR REFERENCE None	FY 81 4,100	LIFE OF PROJECT 25,000	ESTIMATED FINAL OBLIGATION FY 85
NEW <input checked="" type="checkbox"/> CONTINUING <input type="checkbox"/>			ESTIMATED FINAL OBLIGATION FY 86	ESTIMATED COMPLETION DATE OF PROJECT FY 87	

Purpose: To strengthen the Government of Pakistan's population planning, evaluation, research, motivation, and logistic capabilities and performance.

Background: Pakistan's population growth rate has continued to increase at approximately 3 percent a year. This trend imposes an enormous burden on Pakistan's economy. The Government of Pakistan, recognizing the alarmingly high population growth rate as one of its most serious problems, has designed a comprehensive Population Welfare Plan for the period 1980-1984, which provides for the interaction of fertility reduction efforts with the country's other development programs. The Plan has three core projects related to family planning delivery, supplemental projects, and support activities. The implementation of the core projects will result in 1,250 Family Welfare Centers to provide family planning, health and social welfare services; expand reproductive health care services to all medical colleges and other sites throughout the country; and provide training and continuing education for over 5,000 population staff. Supplemental projects at the national and provincial level will involve the health, education, labor, social welfare as well as other sectors in promoting population activities. Support activities in research, evaluation, training and logistics are also included in the overall plan.

Project Description: The proposed five-year \$25.6 million project will partially fund components of the GOP Plan falling largely under the "Support Activities" category. Components to be financed by A.I.D. include: (a) management information, research and evaluation; (b) logistics system and contraceptive supplies; (c) bio-medical and socio-medical research at the National Institute of Technical Research; and, (d) professional and personal motivation through short-term training and technical assistance. Assistance in management information system development, research and evaluation will enhance research capabilities within the country, permit the generation of reliable and timely program data, and promote wide dissemination of program and research findings, ultimately leading to overall program improvement as well as influencing policy decisions affecting population. Assistance in logistics and contraceptive supplies will be used to construct and equip a new central warehouse, develop procedural guidelines and manuals for the supply system, train district level personnel, and provide contraceptives needed to insure the continuing availability of commodities throughout the project period. Assistance in bio-medical and socio-medical research will be used to provide training, technical assistance, construction of a permanent facility to house the National Institute of Technical Research, as well as to procure contraceptive testing equipment. Assistance for short-term training and observation tours outside of Pakistan and short-term visits by U.S. experts will provide Pakistani professionals and prominent citizens exposure to worldwide developments in family planning, demography, and other key issues related to population planning and programming. The project will also include a Rs 21 million Mandaie rupee component to finance the local costs associated with the construction activities under the project.

Relationship of Project to A.I.D. Country Strategy: If the trend in Pakistan's population growth rate is sustained, the 1981 population of 85 million would double in 23 years. Such a population explosion would impose enormous burdens on the country. It would gravely impede Pakistan's ability to achieve food self-sufficiency and provide adequate transportation, water, health care, education, and energy for its people. Recognizing the seriousness of the population problem existing in Pakistan, A.I.D. has placed the support of population activities in Pakistan as one

of its highest development priorities since population is inevitably linked with other sectors in the development process. Clearly, any gains made in agriculture, health, nutrition, water supply, energy and other sectors will be minimized if the rapid population growth rate continues. As part of A.I.D.'s overall development strategy to stabilize and develop Pakistan's economy and improve the quality of life of its people, it is therefore essential that A.I.D. assist Pakistan in tackling one of its most pressing problems, population.

Beneficiaries: The direct beneficiaries of this project will include the millions of couples in the fertile age group, including the rural poor, who will have access to a reliable supply of quality contraceptives; the GOP's Population Welfare Division; and the large number of policy, management, and technical staff trained under the project. More broadly, the entire nation will benefit from the favorable effect of this project on Pakistan's ability to direct its scarce resources to improve the quality of life of its citizens, particularly the rural poor who account for more than 70% of the country's population.

Host Country and Other Donors: The total funds required to support all activities under the GOP Population Welfare Plan for the period 1980-1984 is estimated at \$93 million. However, the GOP has decided to postpone some \$31 million of activities, bringing the total funding required for the 1980-1984 period to \$62 million. The GOP plans to provide \$29 million out of its own resources and has been seeking funds for the rest of the Plan from the donor community. At the present time, the World Bank, the Asian Development Bank, the United Nations Fund for Population Activities, the World Health Organization, UNICEF, and the Government of Japan have committed a total of approximately \$19 million in grant and loan funds. The United Kingdom, Government of Canada, EEC, and OPEC are currently negotiating with the GOP with no specific amounts pledged at this time. Future yearly commitments are likely to be forthcoming from these donors as well as new commitments from other donors.

Major Outputs:	All Years
Trained Staff	150-200
Construction of Facilities (logistics warehouse and NITR)	2
Supply Procedural Manual	1
Contraceptive Prevalence Surveys	3
Seminars/Workshops	40
Evaluation and Other Demographic, Bio-medical and Socio-Medical Surveys and Studies	8
Births Averted	1.2 million
Contraceptive Use Prevalence	11% of MCFAs
A.I.D. Financed Inputs	Life of Project (\$ 000)
Technical Assistance	2,107
Training	1,024
Commodities	21,042
Other Costs	1,427
TOTAL	25,600

U.S. FINANCING (in thousands of dollars)

	Obligation	Expenditure	Unliquidated
Through September 30, 1979	-	-	-
October 1, 1979 - 1980	-	-	-
Estimated Through September 30, 1980	-	-	-
Through 9/30/1980	4,100	21,300	25,400

PRINCIPAL CONTRACTORS OR AGENCIES

U.S. Contractors selected in accordance with A.I.D. competitive procurement procedures.

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DRAFT PROJECT DESCRIPTION FOR INCLUSION IN PROJECT AGREEMENT

This five and one-half year \$ 25.6 million and Rs 21.0 million in Mondale rupees project is designed to assist the Government of Pakistan (GOP) in implementing its Population Welfare Plan to reduce the prevailing high population growth rate. The GOP Population Welfare Plan projects a population growth rate of 2.7 percent by 1984, down from the 1972-1981 intercensal growth rate of 2.97 percent. This target represents a beginning toward achieving the optimum demographic profile. The sector goal is considerably broader than that described in the GOP's Population Welfare Plan. Measurement of progress toward goal achievement will involve the analysis of data from the following sources: (1) a series of contraceptive prevalence surveys undertaken during the life of the project; (2) birth and death registrations; (3) decennial census figures; (4) data provided by the Population Welfare Division's information feedback system; and (5) special surveys undertaken by the Population Welfare Division.

The specific purpose of the A.I.D. project is to strengthen the GOP's population planning, evaluation, research, motivational, and logistic capabilities and performance. Major objectives of the project include: institutionalizing management information, demographic research and evaluation functions; providing an adequate supply of contraceptives and storage and logistic support for their distribution; improving the quality and utilization of bio-medical and socio-medical research; and increasing the understanding and motivation of program personnel and prominent citizens in population-related activities.

By the end of this project, a management information, demographic research, and evaluation unit, the Population Development Center (PDC), will be operational and fully staffed with adequately trained personnel, and PDC resources and data will be utilized appropriately for program planning and management. Demographic research conducted by PDC will be targeted to the needs expressed by policy-makers, and policy, strategy, and management guidelines will draw upon and will reflect the findings of research and evaluation. Adequate supplies of contraceptives and contraceptive-related materials and supplies will be available continuously at all approved stock-points and distribution points down to the village level. Inventory and utilization records will be properly maintained, and there will be a one-year supply of A.I.D. provided contraceptives (including orals, condoms and other contraceptives) in-country, and a one-year supply in the pipeline at all times during the life of the project. Bio-medical and socio-medical research conducted by the National Institute of Technical Research will be of high quality and will be used by policy-makers and program managers to determine program direction. As a result of exposure to family planning programs

and population-related activities in other developing countries and the U.S., and the sharing of ideas and teaching by U.S. experts from varying disciplines, there will be a keener awareness of demographic problems by program personnel and by prominent Pakistanis from the public and private sectors, and their participation in GOP population programs will increase.

To achieve these objectives, the A.I.D. project will:

- (1) strengthen the GOP's existing management information, demographic research, and evaluation unit (PDC) through the provision of technical assistance, training, and computer hardware;
- (2) improve the logistics system through construction and equipping of a warehouse for storage of contraceptives and other commodities, provide technical assistance for development of a supply procedural manual and training, and provide 2 pick-up trucks for logistics support;
- (3) strengthen the capacity and capability to undertake bio-medical and socio-medical research through construction of a new facility for the National Institute of Technical Research, and the provision of technical assistance, training, and contraceptive testing equipment; and,
- (4) create a keener awareness of demographic problems in Pakistan among program personnel and prominent Pakistanis through population seminars/workshops and related activities in other developing countries and in the U.S.

ITEMS TO BE PROCURED FOR CENTRAL WAREHOUSE

<u>Quantity</u>	<u>Description</u>	<u>Cost in \$</u> ^{a/}	
		<u>FX</u>	<u>LC</u> ^{b/}
2	Pick-up Trucks and Spare Parts	34,300	1,800
1	Fork Lift (5 ton capacity)	29,065	
20	Fire Extinguishers (2 Kg)	4,628	
24	Fire Fighting Buckets (3 gallon)		126
4	Stand for Buckets		126
20	Steel Cabinets	3,024	
50	Steel Racks		5,807
16	Ceiling Fans		1,150
18	Exhaust Fans		943
40	Tube Lights		760
6	Bin Card Racks	3,900	
2	Small Trolleys	402	
2	Large Trolleys		1,000
-	Carpenter Shop Instruments	4,293	
	SUB-TOTAL	79,612	11,712
	TOTAL	91,324	

a/ Includes freight and insurance for items procured off-shore.

b/ At exchange rate of \$1.00 = Rs 10.43 as of January 26, 1952.

SUMMARY PROJECT COST FOR MANAGEMENT INFORMATION COMPONENT (FY 1982-1986)

(In \$ 000)

Expense Category	FY 1982		FY 1983		FY 1984		FY 1985		FY 1986		TOTAL	
	FX	LC										
Technical Assistance	321.0	195.9	364.9	187.9	25.8	58.9	145.3	106.8	-	-	857.0	549.5
											1,406.5	
Training	62.3	17.3	71.6	41.3	47.6	29.3	36.5	33.1	42.0	15.3	260.0	136.3
											396.3	
Commodities	116.5	18.2	-	39.4	-	47.3	-	56.8	-	68.2	116.5	229.9
											346.4	
Other	-	146.9	-	219.7	-	20.0	-	317.2	-	28.7	-	732.5
											732.5	
Sub-Total	499.8	378.3	436.5	488.3	73.4	155.5	181.8	513.9	42.0	112.2	1,233.5	1,648.2
TOTAL	878.1		924.8		228.9		695.7		154.2		2,881.7	

SUMMARY PROJECT COST FOR LOGISTICS COMPONENT (FY 1982-1986)
(In \$ 000)

Expense Category	FY 1982		FY 1983		FY 1984		FY 1985		FY 1986		TOTAL	
	FX	LC	FX	LC	FX	LC	FX	LC	FX	LC	FX	LC
Technical Assistance	23.4	14.0	25.9	14.3	-	-	-	-	-	-	49.3	28.3
											77.6	
Training	-	-	4.9	6.4	-	-	-	-	-	-	4.9	6.4
											11.3	
Commodities	2,720.0	-	3,566.6	11.7	4,156.0	-	4,914.0	-	5,315.0	-	20,671.6	11.7
											20,683.3	
Other (Construction)	-	1,199.0 ^{a/}	-	-	-	-	-	-	-	-	-	1,199.0 ^{a/}
											1,199.0 ^{a/}	
Sub-Total	2,743.4	1,213.0	3,597.4	32.4	4,156.0	-	4,914.0	-	5,315.0	-	20,725.8	1,245.4
TOTAL	3,956.4		3,629.8		4,156.0		4,914.0		5,315.0		21,971.2	

^{a/} These local costs will be financed with Mondale rupees expressed as dollar equivalents at the exchange rate of \$1.00 = Rs 10.43 as of January 26, 1982

SUMMARY PROJECT COST FOR BIO-MEDICAL AND SOCIO-MEDICAL RESEARCH COMPONENT (FY 1982-1986)
(in \$ 000)

Expense Category	FY 1982		FY 1983		FY 1984		FY 1985		FY 1986		TOTAL	
	FX	LC	FX	LC	FX	LC	FX	LC	FX	LC	FX	LC
Technical Assistance	31.9	16.4	35.1	19.7	51.6	31.5	42.7	28.3	31.3	22.7	192.6	118.6
											311.2	
Training	26.0	2.9	71.6	12.0	47.6	10.4	36.5	8.3	42.0	9.9	223.7	43.5
											267.2	
Commodities	12.5	-	-	-	-	-	-	-	-	-	12.5	-
											12.5	
Other (Construction)	-	614.2 ^{a/}	-	-	-	-	-	-	-	-	-	614.2 ^{a/}
											614.2 ^{a/}	
Sub-Total	70.4	633.5	106.7	31.7	99.2	41.9	79.2	36.6	73.3	32.6	428.8	776.3
TOTAL	703.9		138.4		141.1		115.8		105.9		1,205.1	

^{a/} These local costs will be financed with Hondale rupees expressed as dollar equivalents at the exchange rate of \$ 1.00 = Rs 10.43 as of January 26, 1982

SUMMARY PROJECT COST FOR PERSONAL MOTIVATION COMPONENT (FY 1982-1986)
(In \$ 000)

Expense Category	FY 1982		FY 1983		FY 1984		FY 1985		FY 1986		TOTAL	
	FX	LC	FX	LC								
Technical Assistance	31.9	16.4	35.1	19.7	51.6	31.5	42.7	28.3	31.3	22.7	192.6	118.6
											311.2	
Training	25.4	24.0	29.1	28.8	33.4	34.6	38.5	41.4	44.3	49.8	170.7	178.6
											349.3	
Commodities	-	-	-	-	-	-	-	-	-	-	-	-
											-	
Other	-	-	-	-	-	-	-	-	-	-	-	-
											-	
Sub-Total	57.3	40.4	64.2	48.5	85.0	66.1	81.2	69.7	75.6	72.5	363.3	297.2
TOTAL	97.7		112.7		151.1		150.9		148.1		660.5	



FIFTH FIVE YEAR PLAN POPULATION WELFARE PLANNING PLAN 1980-83



a document of the
Population Division
Ministry of Planning & Development
Government of Pakistan Islamabad

SUMMARY

SUMMARY OF THE POPULATION WELFARE PLANNING PLAN 1980-83

Pakistan's standard of living and per capita income are amongst the lowest in the world. A third of the population lives below the poverty line, and unemployment and underemployment are widespread. The country has achieved a 5 percent annual growth rate in GNP for 30 years; yet the quality of life has improved little. Population increases have wiped out the benefits that should have been forthcoming from years of sustained investments. Pakistan's population rose from 32 million in 1947 to 80 million by January, 1980. And the annual rate of growth-about 3 per cent-is one of the highest in the world. The population is expected to double in 20 years. It is in this critical context that the Population Welfare Planning Plan 1980-83 was designed.

I. GOALS AND ORIENTATION

2. Though a Government-backed population programme has been in effect since 1965, it has made only limited gains in tackling the population problem. Thus the current Plan, while drawing on the experience of the past population programme, seeks to chart a viable course of action. Based on the twin concerns of population growth and the imperative of development, the Plan joins efforts to manage fertility with actions to improve the welfare of the people. It recognizes the mounting evidence of an interaction between fertility levels and income, nutrition, health services, and education and employment for women. Far from being a single-purpose birth-control programme, the Plan is an integral part of the national development effort.

3. The Plan is composed of numerous projects which, individually and collectively, are aimed at changing the attitudes and behaviour of individuals and groups in ways that will favour adoption of the small-family norm. The Plan's targets for the three-year period 1980-83 are as follows:

- To raise the level of effective knowledge about population welfare planning services from 33 per cent to 55 per cent by 1983.
- To achieve a level of motivation 33 per cent through information and education about responsible parenthood.
- To raise the level of practice from an estimated 12.5 per cent in 1979-80 to 25 per cent by 1983.
- To raise the level of current practice from 9.2 per cent in 1979-80 to 19.4 per cent by 1983, and continuous practice from 6.4 per cent to 13.9 per cent.

4. In demographic terms these goals imply a reduction of the crude birth rate from 41 per thousand to 37.5 per thousand (see table 1) and the prevention of 1.2 million births over the Plan period (see tables 2 & 3). Thus the population growth rate would decline from an estimated 2.9 per cent (July, 1980) to 2.7 per cent by 1983.

5. The population programme of the past had little impact for a variety of reasons: inadequate delivery points, inadequate support from local communities and leaders, isolation from related programmes and activities; and perhaps most important, lack of sustained, committed leadership in the Government. The Plan has been designed to overcome such limitations, within a framework which is:-

- multisectoral. To successfully integrate population welfare planning and development planning, economic and social policies

at the highest levels must be co-ordinated with an eye to the demographic situation. Such an approach implies the incorporation of population goals into development plans and the framing of strategies that will have a salutary effect on the birth rate. Among other things, efforts to provide services will be part of broader activities in the fields of health, rural development, vocational training and other services.

- decentralized. Instead of constructing an ever larger apparatus of institutions and activities at the centre, the Plan seeks to devolve authority through successive levels all the way to community. Thus, while the Federal Government will maintain policy and planning functions, as well as funding the programme, implementation of the programme will take place at Provincial and District levels — and beyond the District, in the local communities themselves. For example, in the Family Welfare Centres—the centerpiece of the Plan—management is in the hands of a local advisory committee, thus ensuring direct community participation in the project. Each of the four Provinces of Pakistan has drawn up its own Plan for the implementation of population welfare in ways that will feed into other endeavours within the Province.
- adaptable. One of the key reasons for stressing local leadership and community participation is to ensure that the Plan and its projects are fitted to local and regional circumstances, and that they mesh with cultural and social variations between and within the many communities to be served.
- broad-based. The Plan has assigned a critical role to numerous organizations and institutions never before tapped. It relies on the already established programmes of the non-governmental organizations such as the Family Planning Association of Pakistan, on other groups in the infrastructure such as unions, and other public and private sector groups. Certain projects are directed by target-group institutions — the Pakistan International Airlines and the Railways, for example — institutions that are massive employers and that are interested in and capable of providing a range of population welfare services.
- project-oriented. The Plan has chosen the project as the vehicle for its activities. Projects tend to be concrete and effective. They lend themselves to accountability and checks on their results. And they generally manifest better ratios of developmental expenditure to non-developmental expenditure, with less spent on salaries and administrative costs. In the present Plan, because a large number of functionaries of departments and institutions outside the Federal Government are contributors to the programme, that ratio would tend to be particularly good and better results per rupee spent are anticipated.

II. PROJECTS OF THE PLAN

6. The Plan is designated as Pakistan's Population Welfare Planning Plan. It contains a variety of projects, three of which make up the "core" programme -- the areas of principal concern on which limited resources, both internal and external, can be concentrated. The other projects complement, reinforce and extend the activities of the core programme, and they are by and large, to be carried out by institutions and groups other than the Federal Government.

A. Core Programme

7. The core programme focuses on the delivery of services integrated with health services and other educational and social activities. It is particularly concerned with establishing services in rural areas and with involving the local leadership and the communities in defining needs and shaping the response.

1. Family Welfare Centres Project

8. The key institution for providing family health services in the rural areas is the Family Welfare Centre. It is proposed to organize 1,250 of these Centres during the Plan period, each to cover a population of 25,000 to 30,000. Staffed by a female Family Welfare Worker and two Welfare Assistants (one male, one female) and a Helper, the Centre will offer a range of individual welfare activities directed especially at women, among them the following:

- maternal services, including pre-and post-natal check-ups;
- child care services, especially for children under five;
- skill development for women, especially for promoting income-generating activities, including marketing;
- functional education involving development departments such as Agricultural, Education, Industry, Social Welfare;
- orientation for women in better living, eradicating social problems;
- training and supervision of dais (traditional midwives);
- training of volunteer workers;
- diagnostic services (facilities for urine tests, haemoglobin and blood slide examinations, and blood pressure readings); and
- provision of reliable and effective services.

9. The location of each Centre will be determined upon the request of local community leaders who will constitute an Advisory Management Committee. To start with, 750 Centres will be established at locations where the local communities are responsive to the need for family welfare and

offer their co-operation and collaboration in the form of physical infrastructure such as buildings. *

10. At the grass-roots level, each Centre will enlist and train 20 to 40 non-salaried outreach workers. Called "Community Volunteers", these persons will be drawn from among satisfied clients, teachers, natural leaders and others in the community. The use of volunteer outreach workers is designed to establish channels of communication between the people and the planners. Not only will such an approach lend credibility to the programme, but it will widen coverage without increasing expenditures and partially solve the problem of shortages of trained manpower.

11. For referral purposes, the Family Welfare Centres will be connected at a higher level with the doctors and clinical outlets of the Reproductive Health Services Project (see below), and through that project to District and teaching hospitals for gynaecological and obstetric cases needing attention as well as for contraceptive surgery.

2. Reproductive Health Services Project

12. The Reproductive Health Services Project is designed to reduce maternal morbidity and mortality rates through improved maternal care. A consequent decline in infant mortality and a higher acceptance of responsible parenthood are expected results.

13. Offering gynaecologic and obstetric care, child care, child spacing and infertility services, as well as contraceptive surgery, the project will operate with and through associated non-governmental organizations. It emphasizes improved services at existing gynaecologic/obstetric and clinical service delivery points in clinics, medical schools and Government and private hospitals. The project will also provide for the much needed mobile outreach services for rural areas.

3. Family Health Manpower Development Project

14. The efforts to integrate population welfare planning with family health services at the local level will require, first, the retraining of existing cadres of personnel working in the two fields, and second, new training programmes for personnel who will serve the new integrated approach. The 12 Regional Training Institutes will be enlarged to take on the task of such training and retraining programmes, which would be designed for workers at all levels, supervisors, Lady Health Visitors and Family Welfare Workers, as well as Community Health Workers.

* Under the previous programme family welfare clinics had been established. Under the current Plan, many of these may be converted into Family Welfare Centres and, as required, relocated to communities receptive to the programme.

15. The core programme's projects will individually and collectively assist existing health outlets in educating clients and providing a range of population planning services. This is the first effort in Pakistan to strengthen the health infrastructure through a supportive, collaborative programme, which, through the creation of a common paramedic cadre, extends coverage of mother and child care. It will also go beyond the reach of the existing health infrastructure and utilize Family Welfare Centres at points in the rural areas and the hinterland where healthy active women can have access not only to maternal and child health services but also to literacy and vocational training.

B. Complementary Projects

1. Provincial Population Welfare Plans

16. Each of the four Provincial Governments — Punjab, Sind, North Western Frontier Province (NWFP) and Baluchistan— has developed its own plan for the implementation of the core programme and other activities of the Population Welfare Planning Plan.

17. The provincialization of the population programme is a new arrangement resulting from a Federal Cabinet decision of February, 1980. In past years, population planning was the responsibility of the Federal Government, and implementation the responsibility of autonomous bodies at the Provincial level. This arrangement in effect isolated the population programme from all the other basic services to the people—health, education, rural development etc. — provided by the Provincial Governments. The current programme will not only end that isolation but will build population concerns into the activities of a number of Provincial departments — Health, Development, Education, and Social Welfare, among others.

18. Population welfare planning services will be offered in a variety of institutions and modes in the Provinces. In Punjab, for example, the Family Welfare Centres will be established in each of 290 rural development marakaz (centres where the full assortment of integrated rural development services is being offered). In Sind, more than 1,500 medical and paramedical outlets will be used for the provision of services and education. This undertaking is in addition to the establishment of Family Welfare Centres in the larger villages and hinterland. In NWFP 1,309 health facilities and 188 clinics will be converted to centres offering both health and population welfare planning services. In Baluchistan Population welfare activities will be integrated with other activities in 54 centres for the promotion of cottage industries run by the Small Industries Directorate, which also oversees the health services at the Family Welfare Centres.

19. Population education, too, will be carried out in various ways, ranging from a project for employees of the organized sector to NWFP's plan to use adult education centres for the dissemination of population welfare planning information.

20. Under the system of devolution of authority to the Provincial level (and beyond the Province, to the District and community levels), the Federal Government will retain responsibility for planning and policy making, funding and evaluation. Thus, the Federal Government will be able to undertake field monitoring and evaluations of the Provincial Population Welfare Planning Departments and their field activities.

2. Women and Population Development

21. In previous family planning programmes, services were directed at women as child bearers, with little attention to their perceptions, needs and priorities as individuals, or to the complex socio-economic and cultural reasons for large families. In light of the poor response to that approach— with few women adopting population planning practices — the projects in this Plan have been designed with a broader focus. Recognising the links between fertility levels and other individual and community problems, they aim at creating the conditions under which population planning will be a continuous practice and would lead to the small-family norm.

22. The projects for women are directed at disadvantaged women living mainly in rural areas or urban slums. The approach is to integrate their priority needs with population welfare planning information, education and services. In line with the finding that the education and training of women, their employment, and later marriage seem to form a sequence leading to lower fertility, the projects emphasize education and training.

Women in Social Development

Two projects, one to be mounted by the Population Division, the other by FPAP, to promote income-generation, nutrition, literacy and population welfare planning among rural women through workshops and follow-up activities.

Relay Training Service

A pilot project to reach large numbers of rural women with population welfare planning information and services, via the training of trainers from voluntary agencies, to be undertaken by an NGO core group.

Better Living Programme in NWFP

A project to be undertaken by the Girl Guides Association to promote women's development through population welfare education, including "better living" programmes of supplying tangible services to poor communities.

Behood Association's MCH and Mother's Club Programme

A project to be undertaken by the Behood Association to obtain the

services of a full-time doctor and dispenser for its Medical Unit and Day Care Centres.

Durree Weaving Cottage Industry

A project to be undertaken by the Awami Muslim Anjuman-e-Behbood, in collaboration with FPAP, to revive a successful cottage industry and to set up a social education programme promoting child-spacing concepts.

Training of Traditional Birth Attendants

A project to be undertaken by the Population Division to increase the number of trained TBAs to 5,000 by December, 1983.

Essential Care of the Mother and Child

A project to be undertaken through Family Welfare Centres to provide nutritional supplements for pregnant, lactating, mothers practising responsible parenthood and for children under five, along with immunization, and the provision of educational materials.

3. University Population/Demography Project

23. In the past, few adults--whether male or female--ever received formal preparation for responsible adulthood, nor did they develop sensitivity to the relationship between population dynamics and their civic obligations. This project seeks to rectify this omission by increasing the awareness among Pakistan's college and university students of the importance of population welfare planning and its impact on the quality of life of individuals and of nations. Another major objective of the project is to provide opportunities for advanced studies and post-graduate courses in the field of population development and demography. A multi-disciplinary approach has been adopted.

24. To be implemented by the University Grants Commission and the Population Education Wing of the Population Division, the project will establish working groups within the universities to determine student needs and to introduce the subject into the curriculum. Population Study Centres will be set up in two universities to offer post-graduate study in demography and to carry out population surveys and research. Other activities of the project orientation courses/seminars on population dynamics for 15,000 college and university students each year and the training of 100 co-ordinators and 500 students facilitators for follow-up.

4. National Population Education Project

25. Population education has been largely neglected in past population programmes. Yet experience has confirmed that an awareness and understanding of the population situation are necessary ingredients in the efforts to secure a better life and community well-being. The National Population Education Project attempts to create a sound and realistic understanding of population welfare issues at all levels in the formal educational system as well as in the broad spectrum of programmes constituting non-formal education.

26. At the formal level, the project focuses on curriculum development and training for 92,000 primary, secondary and college teachers, as well as for another 12,000 administrators and other key educational personnel. The activities will be undertaken by the Provincial and the Federal Government.

27. Among the non-formal educational endeavours are the introduction of population education into literacy and adult education programmes and the utilization of teachers, parents, and others in the community to promote population education concepts. In addition, national and provincial committees will be formed, with representatives from a number of concerned ministries, departments, and voluntary agencies, to co-ordinate non-formal educational projects.

5. NGOs and Population Development

28. In Pakistan, as elsewhere, non-governmental organizations (NGOs) have been in the forefront of past efforts. Their strengths--in undertaking innovations and experiments, in working in sensitive areas, and in winning public support should be utilized by a national programme. Thus the Population Welfare Planning Plan includes a number of NGO projects that complement and supplement Government efforts. These projects will for the most part be carried out by the NGOs themselves, and Government involvement will be through financial, advisory and administrative support. The following projects will be part of the Plan:

Population Education Through Teachers Association

A project to be undertaken by the Population Division to enlist commitment of teachers as leaders of a population education movement at the community level.

Family Planning Association of Pakistan (FPAP)

Projects will be undertaken amongst others for women's development; for offering population welfare and a range of family health services in two model clinics; and for broadcasting the "Sukhi Ghar" radio programme dealing with family welfare themes.

Comprehensive MCH/FP Operational Research
Project for an Integrated Model

A research experiment to be undertaken by the Mother and Child Welfare Association (MCWA) for lowering infant, young child, and maternal mortality rates and birth rates via services in two Government-provided welfare clinics.

Family Planning Training for Nurses-Midwife
Tutors and Ward Administrators

A project for training 977 nurses and other hospital personnel as trainers in population welfare planning, to be undertaken by the Pakistan Nursing Federation and the Population Division's Directorate of Clinical Training, Karachi.

Involvement of Family Physicians for
Providing Family Planning Services.

A project to train and involve general practitioners in population welfare services, to be undertaken by the College of Family Medicine.

Establishment of Day Care Centres and
Co-operative Store by and for Women

A project to provide working mothers with facilities where population welfare information and services are available along with other provisions for mothers, to be implemented by the Karachi Business and Professional Women's Club.

Insertion of Population Component into Pakistan
Voluntary Health and Nutrition Association

A project to introduce a population component into the Community Nutrition Programme for mothers and children in urban slums and villages.

APWA Training for Integrated
Population Planning Programmes

A project to train paramedical and non-medical workers (staff and others) in population welfare planning, to be undertaken by All Pakistan Women's Association (APWA) in collaboration with FPAP.

Rural Multipurpose Centres

A project to introduce and strengthen population welfare planning and MCH services in five APWA rural centres, with training for Lady Health Visitors, dais and teachers, to be undertaken by APWA with FPAP.

Family Health Care Project

Expansion of a 1976 project to establish Family Welfare Centres in villages, with practical training provisions for workers in health, nutrition education and child spacing, to be undertaken by Polyclinic, Islamabad, Paediatrics Department, and the Population Division.

6. Infrastructure Institutions Projects

29. Local occupational groups and organizations offer a potentially useful channel for communicating population welfare messages and providing supply outlets. The Plan includes projects that will involve several such groups:

Participation of Pan Farosh, Barbers and Rickshaw Drivers Unions

A project to involve 12,000 pan/cigarette farosh retailers, 12,000 barber shops and 400 rickshaw/taxi drivers as outlets for personal communication about population welfare in male-oriented surroundings, as well as for the sale of supplies. Project will be undertaken by the Population Division (supplies and materials) and union organizations.

Involvement of Hakims in Population Welfare Programme

A project to involve 1,200 Hakims (traditional medical practitioners) in promoting the practice of population welfare, to be undertaken by a Rehbar (Guidance) Committee, chaired by Minister/Secretary Population Division, with the participation of all major professional Tibb Associations.

All Pakistan Postal Employees Project

A project to launch motivational and service campaigns for population planning through Postal employees, including the use of selected rural Post Offices as sales outlets of supplies to be undertaken by the Postal Department.

7. Communications Strategy and Population Development

30. Because of the Plan's commitment to effecting changes in basic attitudes and behaviour in ways that will promote the small-family norm, a communications strategy is a key ingredient in the overall effort. The Plan provides for a systematic and co-ordinated communications strategy, ranging from person-to-person communication to various media-magazines and newspapers, posters and other visual material, films, TV and, especially, radio, because of its wide coverage.

31. The communications strategy includes the preparation of a master plan to identify discrete target audiences and to develop programme elements suited to their particular needs. Motivational materials will be

developed for the use of field personnel, workers and volunteers at the Family Welfare Centres as well as community leaders. To ensure suitability, materials will be pretested and their actual effectiveness evaluated. Workshops and seminars will contribute to the training of the persons designing communications for the programme. The Communication Directorate and the Communication and Publications Unit will be strengthened to meet the various tasks involved.

8. Social Marketing

32. The underutilization of services in the past has been attributed, in part, to the time, effort and transportation required to obtain the services. The need for more accessible outlets can be met by using existing commercial outlets, an approach to be launched for the first time in Pakistan.

33. The project will be undertaken by the Population Division as executing agency. The Population Services International (PSI) will assist in implementation on the basis of their experience elsewhere in introducing a commercially based distribution (CBD) system.

9. Target Group Institutions Projects

34. The Plan will tap the potential of a number of large public sector organizations as well as the nation's trade unions to further the objectives of population welfare through programmes for employees/workers and their families. These organizations have national spread, well-developed facilities and programmes, and personnel already exposed to modernization, and thus they can become key contributors to the Plan's goals.

35. The organizations, which include the Armed Forces, the Fauji Foundation, Kohistan Development Board, Pakistan International Airlines, Pakistan Railways, Pakistan Steel Mills, WAPDA and trade unions via the Labour Department, will incorporate population components -- both educational/informational and services -- into their activities and programmes. Training for medical, paramedical and other personnel is a component of all projects.

10. Azad Government of Jammu and Kashmir and Northern Areas Population Welfare Projects

36. The Plan includes provision, for the first time, for population welfare undertakings in these remote areas, with projects to introduce population education and services into the areas through MCH clinics and through the training and utilization of extension workers such as Health Guards for the distribution of supplies.

III. SUPPORTIVE ACTIVITIES

A. Evaluation

37. The Population Development Centre* will be responsible for macro-level evaluation of the programme, and local staff and target group participants will be responsible for project-level assessments, using a recording and reporting system developed by the Population Division.

38. The Population Development Centre will undertake three types of activities: performance evaluation, based on project data, including statistics on availability of services, programme personnel, supplies and logistics, and training; attitudinal and behavioural response evaluation, focusing on research on the gap between knowledge and practice of responsible parenthood, and impact evaluation, focusing on possible births averted due to the programme.

39. Evaluation instruments will include census data, method use surveys, vital registration, population growth surveys, and other national sample surveys, for which projects now exist. The Population Division is equipped with sophisticated data-processing equipment, permitting rapid analysis and assessments of field performance and also feedback on performance to the Districts and Provinces.

B. Research /Social Policy

40. The development of a research programme and the building up of research manpower are vital undertakings. Research is needed in existing technology and other biomedical and socio-medical areas and in the broad field of social research, where there are needs especially for policy-oriented studies dealing with behaviour and motivation; international migration; and social and economic factors influencing fertility.

41. Biomedical and related research will be carried out by the National Institute of Technical Research (NITR), which is also responsible for laboratory testing. Social research will be the responsibility of the Population Development Centre.

*The Population Development Centre is primarily a demographic research institute attached to the Population Division and the Planning Commission.

42. A Task Force is to be set up during the Plan period to examine and to introduce social policy measures that go beyond family planning, affecting the general social and economic climate. Among the measures it will examine are: old-age insurance schemes; nutrition allowance; bonuses for small families; and other incentives to groups or communities achieving notable progress toward small families. Raising the age of marriage and changing child labour laws are among the measures to be considered by the Task Force, which will be multidisciplinary in composition and independent in its functioning. It will report to the Population Division/Population Development Centre.

C. Training/Orientation Programme (Non-Clinical)

43. A total of 19 training projects primarily for non-clinical personnel have been formulated for the three years of the Population Welfare Planning Plan. These projects are aimed at all of the groups involved in implementation of the Plan, from master educators and trainers at the Population Division's Training Institutes to the thousands of field functionaries, officials and members of nation-building departments, NGOs, and local councils.

44. The Population Division will be responsible for planning and developing the education and training programmes; for providing support material, training tools, and courses; for experimenting with new techniques; and for evaluation. Implementation of most of the training programmes will be carried out by population welfare offices at the Provincial level. Four Population Welfare Training Institutes will be established, one in each Province.

45. In addition to the programmes for groups working in the projects, special seminars and conferences will be organized for senior Government officials and special-interest groups such as journalists, doctors, teachers and lawyers.

D. Logistics of Supply and Distribution

46. The success of the programme envisaged in the Population Welfare Planning Plan will depend in large part on the timely, continuous and uninterrupted flow of clinical and conventional methods to all distribution points in the country.

47. To meet the demand for methods and medicines engendered by the programme, supply and marketing strategies will be designed to extend the scope of existing channels of supply to the public sector; to enlist maximum support of the public; to promote sale through commercial outlets; to establish at least one sale point in each of 45,000 villages; to assess needs for transport; to achieve supply coverage for the entire eligible population by involvement of target groups in phases; and to achieve self-sufficiency through local production. The Plan provides a system for the procurement, proper storage, transport, and distribution to the field, taking into account the anticipated increase in consumption over present and past levels due to the greatly accelerated multisectoral activity under the Plan.

IV. STRUCTURAL/FINANCIAL REQUIREMENTS

48. The organizational structure and management of the Population Welfare Planning Plan have been designed to accord with the fundamental aim of enlisting co-operation and support from all levels of Government and the widest involvement of all responsive organizations and target groups in the public and private sectors. The programme will operate with a three-tier structure: at the Federal level: policy formulation, training, communication, education, funding, and evaluation, at the Provincial level: implementation and co-ordination and at the District level: direct execution. The basic administrative infrastructure for undertaking the core programme will be the responsibility of the population welfare authorities, while rest of the programmes will be operated by others, specified executing agencies. (See Matrix)

49. The financial implications of the Population Welfare Planning Plan have been summarized in table 4.

NOTE

This summary attempts to capture in a few pages the main features of the Population Welfare Planning Plan for 1980-83. The basic Plan document Fifth Five Year Plan, Population Welfare Planning Plan, 1980-83, approx. 200 pp. contains descriptions of all projects and associated activities as well as cost information on components of the Plan. That document is itself a summary of the extensive information on projects supplied in the total of 14 volumes that form the background for the Plan. The reader is referred to these materials for details.

<u>Table 1</u>				
<u>Targets for Crude Birth and Death Rates,</u> <u>Growth Rates, 1980-83</u>				
	1979-80 (Bench- mark)	1980-81	1981-82	1982-83
Estimated level of Crude Birth Rate	41	40.3	39.0	37.5
Estimated level of Crude Death Rate	12	11.6	11.0	10.5
Estimated level of growth rate	29.0 (2.90 %)	28.7 (2.87%)	28.0 (2.80%)	27.0 (2.70%)

<u>Table 2</u>				
<u>Target for Acceptors, 1980-83</u> (in 000s)				
	1979-80 (Bench- mark)	1980-81	1981-82	1982-83
Projected Population (Mid year 1st Jan.)	80,197	82,482	84,709	86,911
Number of women age 15-44	15,895	16,446	16,997	17,548
Married women age 15-44	11,842	12,241	12,570	12,893
Number of Acceptors	1,093	1,390	1,851	2,502
Acceptors as per cent of married couples with wife age 15-44	9.2	11.4	14.7	19.4
Number of Births Averted	216	285	380	514

Table 3

Targets for Method Delivery, 1980-83

Methods	1979-80 (Bench- mark)	1980-81	1981-82	1982-33	Total 1980-83
IUDs (No. of insertions)	99,535	150,000	200,000	250,000	600,000
Oral Pill (No. of monthly cycles)	1,485,131	1,500,000	1,700,000	2,000,000	5,200,000
Condom (Million units)	85.2	107.0	140.9	195.9	443.8
Contraceptive Surgery (No. of operations)	24,886	35,000	50,000	60,000	145,000
Injectable (No. of vials)	12,000	80,000	100,000	125,000	305,000
Other Conventionals (Million Applications)	-	-	3.6	4.8	8.4

* Adjusted for sale only.

Table 4

Summary of Financial Implications for Plan Period 1980-83

	(Shown in Rupees in millions)		
	1980-83	<u>Provided by:</u>	
		TOTAL	GOP
1. Population Division & Allied Units	53.893	53.893	-
2. Regional Training Institutes	16.726	16.726	-
3. Provinces	131.655	131.655	-
4. Family Welfare Centres	15.803	15.803	-
5. Reproductive Health Programme	3.459	3.459	-
SUBTOTAL	221.536	221.536	-
6. CORE PROGRAMME			
Family Welfare Centres	137.187	14.149	123.038
Reproductive Health Services Project	45.483	8.016	37.467
Family Health and Manpower Development	54.834	23.080	31.754
SUBTOTAL	237.504	45.245	192.259
7. PLAN PROJECTS			
(i) Provincial Projects			
(a) Punjab	2.890	-	2.890
(b) Sind	3.069	-	3.069
(c) NWFP	1.825	-	1.825
(d) Baluchistan	8.150	-	8.150
(ii) Women and Population Development	52.759	1.199	51.560
(iii) University Population/ Demography	9.341	-	9.341
(iv) National Population Education			
Formal	38.580	-	38.580
Non-formal	11.367	-	11.367
Agricultural Colleges	1.392	-	1.392

(continued)

(Shown in Rupees in millions)			
	1980-83		<u>Provided by:</u>
	<u>TOTAL</u>	<u>GOP</u>	<u>ASSISTANCE</u>
7. PLAN Projects (continued)			
(v) NGOs and Population Development	7.128	-	7.128
(vi) Development and Communication Strategy and Population Welfare	53.005	-	53.005
(vii) Social Marketing	15.078	-	15.078
(viii) Target Group Institutions and Population Welfare Planning			
(a) Armed Forces	1.199	-	1.199
(b) PIA	0.109	-	0.109
(c) Fauji Foundation	0.385	-	0.385
(d) Pakistan Railways	0.286	-	0.286
(e) Pakistan Steel Mills	0.105	-	0.105
(f) WAPDA	0.121	-	0.121
(g) Kohistan Development	0.087	-	0.087
(h) ILO Project	3.665*	-	3.665*
(ix) Azad Kashmir and Northern Areas Population Welfare Project	2.466	-	2.466
(x) Infrastructure Institutions			
(a) Pan Farosh, Barbers and Rickshaw Drivers Unions	0.340	-	0.340
(b) Involvement of Hakims in Population Welfare	6.424	-	6.424
(c) All Pakistan Postal Employees	0.199	-	0.199
(xi) Logistics (contracting of public transport)	10.651	10.651	-
SUBTOTAL	<u>230.621</u>	<u>11.850</u>	<u>218.771</u>

(continued)

(continued)	(Shown in Rupees in millions)		
	1980-83 TOTAL	Provided by: GOP ASSISTANCE	
8. EVALUATION	33.034**	-	33.034***
9. POPULATION DEVELOPMENT CENTRE	25.029	15.617	9.412
10. RESEARCH	16.178	-	16.178
11. TRAINING	2.132	-	2.132
12. COMMODITY			
(i) Contraceptives	159.232	-	159.232
(ii) Material & Paper	13.272	-	13.272
(iii) Transport, medical equipment, MCH kit, office equipment, Medicines, diet sup- plements, etc.	102.066***	-	102.066***
TOTAL	938.538 =====	294.248 =====	644.290 =====

NOTES: *ILO Project is financed by UNFPA; executed by Labour Division.

**Includes UNFPA-funded project (Rs. 8.548 million) Population Housing Census, which is executed by Census Organization.

***This amount has already been included in the respective projects listed at nos. 6 through 9.

PERSPECTIVE PLAN PROGRAMME MATRIX

