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**UNITED NATIONS POPULATION FUND
PROPOSED PROJECTS AND PROGRAMMES**

Recommendation by the Executive Director
Assistance to the Government of the Lao People's Democratic Republic

Proposed UNFPA assistance: \$9 million, \$5 million from regular resources and \$4 million from co-financing modalities and/or other, including regular, resources

Programme period: Five years (2002-2006)

Cycle of assistance: Third

Category per decision 2000/19: A

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

	Regular resources	Other	Total
Reproductive health	3.0	4.0	7.0
Population and development strategies	1.5	-	1.5
Programme coordination and assistance	0.5	-	0.5
Total	5.0	4.0	9.0

LAO PEOPLE'S DEMOCRATIC REPUBLIC

INDICATORS RELATED TO ICPD & ICPD+5 GOALS*

		Thresholds*
Births with skilled attendants (%) ^{1/}	30	≥60
Contraceptive prevalence rate (%) ^{2/}	19	≥55
Proportion of population aged 15-24 living with HIV/AIDS (%) ^{3/}	0.04	≤10
Adolescent fertility rate (per 1,000 women aged 15-19) ^{4/}	103.6	≤65
Infant mortality rate (per 1,000 live births) ^{5/}	93	≤50
Maternal mortality ratio (per 100,000 live births) ^{6/}	650	≤100
Adult female literacy rate (%) ^{7/}	44	≥50
Secondary net enrolment ratio (%) ^{8/}	72	≥100

*AS CONTAINED IN DOCUMENT DP/FPA/2000/14 AND APPROVED BY THE EXECUTIVE BOARD IN DECISION 2000/19.

^{1/} Electronic database, World Health Organization, December, 1999.

^{2/} United Nations Population Division, *Levels and Trends of Contraceptive Use as Assessed in 1998* (1999).

^{3/} UNAIDS, *Report on the Global HIV/AIDS Epidemic*, June 2000.

^{4/} United Nations Population Division, *World Population Monitoring, 2000: Population, gender and development* (forthcoming).

^{5/} United Nations Population Division, *World Population Prospects: The 1998 Revision*.

^{6/} The World Bank, *World Development Indicators, 2000*.

^{7/} UNESCO, *Education for All: Status and Trends* series (1997, 1998, 1999 editions).

^{8/} UNIFEM, *Targets and Indicators: Selections from Progress of the World's Women* (2000), based on 1999 data from UNESCO.

Two dashes (--) indicate that data are not available.

Demographic Facts

Population (000) in 2001	5,403	Annual population growth rate (%).....	2.30
Population in year 2015 (000)	7,334	Total fertility rate (/woman)	4.80
Sex ratio (/100 females).....	100	Life expectancy at birth (years)	
Age distribution (%)		Males	53.3
Ages 0-14.....	42.7	Females	55.8
Youth (15-24)	19.4	Both sexes	54.5
Ages 60+.....	5.6	GNP per capita (U.S. dollars, 1998).....	320

Sources: Data are from the Population Division, Department of Economic and Social Affairs of the United Nations, *World Population Prospects: The 2000 Revision, Highlights*; GNP per capita is for the year 1998 from the UNDP, *Human Development Report 2000*, based on World Bank data (World Bank Atlas method).

N.B. The data in this fact sheet may vary from the data presented in the text of the document.

1. The United Nations Population Fund (UNFPA) proposes to fund a comprehensive population programme covering the period 2002-2006 to assist the Government of the Lao People's Democratic Republic in achieving its national population and development goals. UNFPA proposes to fund the programme in the amount of \$9 million, of which \$5 million would be programmed from UNFPA regular resources to the extent that such resources are available. UNFPA would seek to provide the balance of \$4 million through co-financing modalities and/or other, including regular, resources to the extent possible, consistent with Executive Board decision 2000/19 on the allocation of UNFPA resources. This would be the Fund's third programme of assistance to the Lao People's Democratic Republic, a "Category A" country under the Fund's resource allocation criteria.
2. The proposed programme was formulated in close consultation with national authorities, United Nations and other multilateral organizations, bilateral donors and non-governmental organizations (NGOs). It takes into account the national policies and priorities outlined in the country's five-year plan (2001-2005), development strategy, and national population and development policy as well as the interim poverty reduction strategy paper (PRSP), the Common Country Assessment (CCA), and the United Nations Development Assistance Framework (UNDAF). The proposed programme cycle is harmonized with those of UNDP, UNICEF and WFP and is based on the mid-term review and evaluation of the second UNFPA programme, a reproductive health survey and a contraceptive requirements report.
3. The goal of the proposed programme is to contribute to national efforts to improve the quality of life of the people of the Lao People's Democratic Republic through better reproductive health for women, men and adolescents; reduced levels of infant and maternal mortality and morbidity; improved education and socio-economic status for girls and women; greater participation of women in public life; enhanced capacity of national institutions and mass organizations; and integration of population concerns into development, environment and poverty eradication strategies and programmes. UNFPA assistance will be channelled through two subprogrammes: reproductive health, including family planning and sexual health, and population and development strategies. Gender issues and advocacy interventions will be mainstreamed in all activities under the two subprogrammes.
4. The proposed programme was developed within the framework of a human rights approach. All the activities under the proposed programme, as in all UNFPA-assisted activities, would be undertaken in accordance with the principles and objectives of the Programme of Action of the International Conference on Population and Development (ICPD), which was endorsed by the United Nations General Assembly through resolution 49/128.

Background

5. The Lao People's Democratic Republic is one of the poorest countries in Asia. Although economic growth averaged 7 per cent a year from 1990 to 1997 and the incidence of poverty fell from 45 per cent to 39 per cent of the total population, the annual gross domestic product in 2001 only reached an estimated \$330 per person.

6. The population of the Lao People's Democratic Republic was estimated at 5.2 million in 2000. If the current annual population growth rate of 2.8 per cent remains unchanged, the population will double by 2025. Over 54 per cent of the population are under the age of 20, and young people aged 15 to 24 comprise nearly 18 per cent of the total population. The total fertility rate has dropped from 6.5 in 1994 to 4.9 in 2000, but still ranks among the highest in Asia. The contraceptive prevalence rate has tripled since 1995, but remains low at 32 per cent. Life expectancy at birth is 61 for females and 57 for males. The maternal mortality rate is 530 per 100,000 live births, down from 650 per 100,000 in 1995. Infant mortality has dropped as well, from 105 per 1,000 live births to 82 per 1,000. The high maternal mortality rate is attributed to the lack of prenatal care, poor nutrition, anaemia, lack of emergency obstetrical care, abortion-related complications, the early age at which girls become pregnant, and the unavailability of family planning services.

7. Per capita government spending in the health sector in 1998-1999 was \$1.30, while each household spent an average of \$6.70, mainly for medicines. Foreign assistance to the health sector reached \$3.50 per person. The Government is committed to increasing the resources available for social development, including health and education.

8. Public health services in the Lao People's Democratic Republic provided through a network of about 700 facilities at central, provincial, district and subdistrict levels. About 67 per cent of the population have access to at least some basic health services. Attention has been given to the improvement of physical infrastructure, most of which dates back to the pre-war or immediate post-war period, but many facilities are still in need of major rehabilitation. Although 79 per cent of villages were within four hours of a district hospital in the dry season as of 1999, utilization of the public health care system is very low. For example, only 10.5 per cent of mothers deliver their babies in hospitals. Part of this can be explained by the unavailability of equipment and medical supplies and to the low level of skills of service providers. It is estimated that 79 per cent of married women have knowledge of at least one contraceptive method, and the unmet demand for family planning is estimated at nearly 40 per cent. The most popular method of contraception is the pill, followed by injectables, intra-uterine devices (IUDs), female sterilization and condoms. There is only limited information on the prevention of sexually transmitted infections (STIs), and adolescent reproductive health needs are of particular urgency due to the early age of marriage and childbearing.

9. According to UNAIDS, the prevalence rate of HIV/AIDS is less than 1 per cent. This low prevalence rate is confirmed by the national AIDS committee and a number of other agencies and NGOs working in the country. By December 2000, the cumulative number of infected persons with HIV was 717, according to UNAIDS. The Government is determined to prevent the further spread of the HIV/AIDS epidemic and developed a national HIV/AIDS policy in June 2001 to coordinate efforts and donor assistance in this area.

10. Although the Lao People's Democratic Republic has ratified the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), the country is characterized by significant gender disparities. While women comprise 52 per cent of the labour force, they continue to be economically disadvantaged and tend to have fewer job opportunities. Women presently hold 21.2 per cent of seats in the national assembly.

11. In November 1999, the Government adopted a national population and development policy (NPDP) to promote population growth compatible with the country's socio-economic development and to implement the ICPD Programme of Action. The policy aims to: (a) enable individuals to reasonably and responsibly determine the number and spacing of their children and to improve their health and quality of life; (b) reduce maternal and child mortality and morbidity; (c) reduce gender imbalances; (d) promote a balanced distribution of population between urban and rural areas and between different regions of the country; (e) promote the country's human resource potential and the full utilization of this potential in socio-economic development to reduce poverty, especially among minority groups; and (f) integrate population factors into all socio-economic policies and programmes. The NPDP sets specific objectives for 2010 and 2020.

Previous UNFPA assistance

12. UNFPA has provided assistance to Laos since 1976. This assistance has included support for data collection, maternal and child health services, and a national fertility survey, which revealed a very large unmet demand for contraceptive services. With UNFPA assistance, the Ministry of Health developed a birth spacing policy and began providing birth spacing services at provincial and district hospitals and health centres starting in 1991.

13. Under the second country programme (1997-2001), family planning and selected reproductive health services were introduced to about 700 primary health-care facilities and referral hospitals. More than 10,000 village health volunteers, in more than one third of the country's villages, received basic training on how to disseminate information to their communities on reproductive health and family planning. UNFPA included HIV/AIDS prevention topics in the nationwide training of service providers and procured most of the

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reproductive health commodities for the innovative condom social marketing project of the National Committee for the Control of AIDS that was carried out in partnership with Population Services International, an NGO.

14. A partnership with the Lao Women's Union (LWU) to provide community-based reproductive health education in two provinces has developed into a platform for advocacy and awareness on reproductive health issues for women and adolescents, with information disseminated nationwide through the union's network of 800,000 members. The programme also worked with the Ministry of Education to introduce sexual health and population education into the general school curriculum and the non-formal education programme. The project has expanded to some 223 education facilities in seven provinces. Feedback from parents, teachers and students has been overwhelmingly positive. The strategies employed and materials developed are attracting considerable support and interest, and collaboration with UNICEF in continuing these initiatives is planned for the next programme cycle.

15. During the second country programme, UNFPA provided support to the State Planning Committee (recently renamed the Committee for Planning and Cooperation) for the development of the NPDP and for the integration of population variables into development planning. A plan of action has been prepared to monitor the implementation of the policy up to 2020, as well as for national efforts in implementing the ICPD Programme of Action.

16. UNFPA continued its support and partnership with the National Statistics Centre to improve the national database for population and development planning and to incorporate gender issues into their analyses. A population studies centre was established in Vientiane at the National University of Laos to train graduates in applying population analysis to socio-economic issues. A phased undergraduate course in population studies will be established in the academic year 2001-2002, following the completion of post-graduate training of various faculty members.

17. A special programme has been funded by the European Commission in collaboration with UNFPA and international NGOs to provide young people with reproductive health information and services. Currently, four projects are being implemented in the Lao People's Democratic Republic as part of the wider European Commission/UNFPA Initiative for Reproductive Health in Asia. This initiative has, for the first time, introduced country inter-linkages and collaboration among various international NGOs in the area of reproductive health and adolescent reproductive health counselling and services. Through the European Commission/UNFPA Initiative for Reproductive Health in Asia, \$2.5 million were earmarked for expenditure in the Lao People's Democratic Republic for the period 1997-2002.

18. The previous programme period saw considerable achievements in all programme areas, including greater access to family planning services, expansion of sexual education for

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adolescents, and increased capacity for population-related data collection and analysis. Results in some programme areas fell short of projected outputs, however, due largely to the absence of a UNFPA Representative prior to January 2000 and to the limited capacity and staffing of the UNFPA country office.

19. The key lessons learned from the past programme include the following: (a) the need to focus on a selected core package of reproductive health services based on resource availability; (b) the need for staff training in logistic management information systems, to ensure continued supply of contraceptives; (c) the need to make population and sexual health education less theoretical and more life-skills oriented; (d) the need to obtain broad-based support for the implementation of the NPDP; (e) the need to build capacity, particularly at decentralized levels, to analyse and interpret the implications of population dynamics for economic and social development; and (f) the need to incorporate findings and data into national and sectoral planning.

Other external assistance

20. Various United Nations agencies, bilateral donors and NGOs provide support to health and social development projects in the Lao People's Democratic Republic. UNICEF and WHO support national capacity building, health sector reforms, primary health-care development, women's empowerment, safe motherhood, and HIV/AIDS prevention and care. UNDP supports public administration reforms, rural development and natural resources management.

21. The World Bank and the Asian Development Bank (ADB) have provided soft loans for construction and for equipping a number of health facilities. A new ADB loan project targets eight northern provinces, and about \$2 million of that funding is earmarked for reproductive health. Other important donors include the European Commission and the Governments of Australia, Germany and Japan. Most donors have a provincial focus and provide support to primary health care. The Government of France supports tertiary care and the faculty of medicine. Among international NGOs, the Japanese Organization for International Cooperation in Family Planning (JOICFP) is an executing agency for UNFPA. Save the Children Australia, funded by the Australian Agency for International Development (AusAID), has provided long-term support in primary health care in one province. Other NGOs include the Australian, Danish, and Swiss Red Cross societies and the McFarlane Burnett Center.

Proposed programme

22. The overall goal of the proposed programme is noted in paragraph 3 above. The proposed programme's main strategic focus would be on contributing to the effective implementation of the NPDP and consolidating existing partnerships and interventions;

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expanding partnerships for advocacy, awareness raising and population research; institutionalizing coordination mechanisms; continuing support for in-school and out-of-school sexual health programmes; supporting the expansion of family planning nationwide, while at the same time focusing on a few under-served provinces for integrated reproductive health interventions; providing adolescent reproductive health information and services; and collaborating with other donors in the area of reproductive health, including for support to the national HIV/AIDS prevention programme.

23. Reproductive health. The purpose of the reproductive health subprogramme would be to improve access to and utilization of quality reproductive health services by women, men and adolescents. In addition to supporting the nationwide expansion of family planning services, the programme would also support the introduction of a core package of reproductive health services in at least three under-served provinces. The criteria for province selection would ensure complementarity of efforts with other donors and that interventions are targeted where poverty levels are highest.

24. The programme would continue to support the sexual health education programme of the Ministry of Education, in collaboration with UNICEF. It would also assist in the establishment of special reproductive health programmes for adolescents, mainly through co-financing arrangements. Quality issues – such as the need for confidentiality, sensitive counselling and the participation of adolescents in programme definition, implementation and service delivery – would also be addressed. Efforts would also be taken to promote awareness of and access to reproductive health services and to increase community participation in their delivery.

25. Outputs would include: increased availability of quality reproductive health services for women, men and adolescents; nationwide availability of at least three modern family planning methods for women, men and adolescents; enhanced knowledge and awareness of reproductive health, reproductive rights and the need for gender equality among women, men and adolescents; special services and efforts to modify harmful behaviours among adolescents and ethnic groups in selected provinces; and enhanced capacity of provincial health departments, the education system, and central and provincial authorities charged with planning, management and implementation of the national reproductive health programme.

26. Funds in the amount of \$7 million would be allocated to the reproductive health subprogramme, of which \$4 million would be sought through co-financing modalities and/or other resources. About \$1.5 million in regular resources would be allocated for interventions through the Ministry of Education, the LWU and the Lao Youth Union. The Fund would allocate the remaining \$5.5 million, of which \$4 million would come from other resources, to the national reproductive health programme of the Ministry of Health to be used for: family planning services; enhancing the forecast and logistics system; conducting surveys and research on

commodities distribution and use and on consumer satisfaction and behaviour; focused assistance in a few provinces to introduce integrated reproductive health services; continued upgrading of the skills of service providers; and collaborative efforts with other donors to address the special needs of adolescents.

27. With regard to reproductive health commodity security, the estimated cost of contraceptives needed for the period 2002-2006 is over \$6 million: \$2.5 million for oral contraceptives, \$2 million for injectables, \$1.5 million for condoms, and \$200,000 for IUDs. UNFPA would provide \$500,000 from regular resources and would seek up to \$3 million from multilateral and bilateral resources for reproductive health commodities and logistics and for condoms for a social marketing programme for HIV/AIDS prevention. The programme would also work with the Government to secure the remaining required resources from the Government itself and other donors.

28. Population and development strategies. The purpose of the population and development strategies subprogramme would be to contribute to the full implementation of the NPDP and its action plan in accordance with the ICPD Programme of Action, and to increase political and community support for improving the status of women. The strategies for achieving this would include: (a) strengthening the capacity of relevant implementing agencies; (b) improving socio-demographic data analysis and dissemination; (c) strengthening the research and training capabilities of various national institutions; and (d) promoting greater understanding of the linkages among population issues, the environment, socio-economic development and gender equality. Funds in the amount of \$1.5 million would be allocated to the population and development strategies subprogramme from regular resources.

29. The outputs would include: having the NPDP objectives fully integrated into population and development policies, plans and programmes; increased availability of data disaggregated by gender and locality, to be achieved in part through support for a second reproductive health survey in 2005; and increased technical capacity of relevant national institutions in the area of population and development strategies. This third output would be achieved through: (a) strengthening the capacity for analysis and dissemination of data at the provincial level; (b) increased capacity for the teaching of population- and development-related topics; (c) strengthened advocacy capacity for the promotion of gender equality and for the full implementation of the NPDP; and (d) increased availability, dissemination, and utilization of demographic, socio-economic and reproductive health data, disaggregated by sex, at the national and provincial levels.

Programme implementation, coordination, monitoring and evaluation

30. The proposed programme would be implemented by the Government, UNFPA and international NGOs, with the National Coordinating Committee (NCC) taking primary responsibility for programme coordination and for advocacy for population and development issues. UNFPA would collaborate with UNICEF to strengthen the sexual health programme of the Ministry of Education. HIV/AIDS prevention activities would continue to be coordinated by the United Nations country team theme group, currently chaired by WHO. Increased collaboration with the ADB and with the European Commission would be sought for integrated rural development projects in the northern provinces, and with other donors for ensuring adequate reproductive health commodities and logistics. UNFPA would continue to implement reproductive health interventions and would seek cost-sharing arrangements with the European Commission and other donors for adolescent-targeted interventions.

31. Programme implementation would be monitored and evaluated in accordance with established UNFPA guidelines and procedures. Government reports, UNFPA project reports and research findings by the Ministry of Health and other stakeholders would be utilized as data sources to measure programme implementation. Annual programme reviews would be based on these reports. A midterm review would be conducted, possibly within the context of a jointly conducted United Nations midterm review in 2004, and adjustments would be made as needed. The planned reproductive health survey of 2005 would provide data on programme impact. A final evaluation would be carried out in the beginning of 2006 to assess performance under the two subprogrammes and determine lessons learned for inputs into future programmes.

32. The UNFPA country office includes a Representative, two National Programme Officers, two National Programme Assistants, two Junior Professional Officers, and four support staff. Due to the very limited experience and knowledge of national staff in various population and management areas, the implementation of the proposed programme would require that additional international staff be provided to the country office. National professional project personnel would need to be appointed to support national execution and strengthen the technical and managerial capacity of government officials attached to the various projects. As in the previous country programme, the Government would assign senior officials and technical and support staff to contribute to the implementation of the UNFPA country programme. Technical backstopping would be provided by national and international experts, and the Country Technical Services Team (CST) in Bangkok, Thailand, would play an important role in continued national capacity building. The amount of \$500,000 would be set aside from regular resources for programme implementation, coordination, monitoring and evaluation.

Recommendation

33. The Executive Director recommends that the Executive Board approve the programme of assistance to the Government of the Lao People's Democratic Republic as presented above, in the amount of \$9 million for the period 2002-2006, of which \$5 million would be programmed from the Fund's regular resources to the extent such resources are available, with the balance of \$4 million to be sought through co-financing modalities and/or other, including regular, resources to the extent possible, consistent with Executive Board decision 2000/19 on the allocation of UNFPA resources.

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