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TECHNICAL CO-OPERATION

Long-range future of the National Household Survey
Capability Programme

Report of the Secretary-General

SUMMARY

The present report provides a brief account of the progress made in the implementation of the National Household Survey Capability Programme (NHSCP), its current status and prospects. The report has been prepared in response to the request of the Statistical Commission at its twenty-fourth session for proposals on the long-range future of NHSCP.

The report describes in detail the progress made in programme implementation and the plan of operations through 1991 (paras. 1-16) and arrangements for programme co-ordination and management (paras. 17-20). NHSCP activities in the field of training and execution of technical studies have been reviewed separately (paras. 21-30).

The work programme for the biennium 1989-1990 has been set out in the report (paras. 31-38) followed by suggestions on possible avenues for development beyond 1991 (paras. 39-50).

Points for discussion are included (para. 51).

* E/CN.3/1989/1.

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I. INTRODUCTION

1. At its twenty-fourth session, the Statistical Commission requested the Secretary-General to submit proposals to its twenty-fifth session concerning the long-range future of the National Household Survey Capability Programme (NHSCP). 1/ The present document, prepared in response to that request, describes the progress made in the implementation of the programme and its current status and prospects. It outlines the draft plan of operations through 1991, including the work plan for 1989-1990, and suggests avenues for development beyond 1991.

II. PROGRESS AND PLAN OF OPERATIONS

2. As of mid-1988, 30 countries were formally listed as participating in NHSCP. These are:

Africa: Benin, Botswana, Cameroon, Ethiopia, Ghana, Kenya, Lesotho, Malawi, Mali, Morocco, Sierra Leone, Sudan, Zambia and Zimbabwe;

Asia and the Pacific: Bangladesh, Mongolia, Pakistan, Sri Lanka, Thailand and Samoa;

Western Asia: Bahrain, Jordan, Syrian Arab Republic and Yemen Arab Republic;

Europe: Cyprus;

Latin America and the Caribbean: Costa Rica, Guatemala, Honduras, Nicaragua and Peru.

3. In addition, there are 25 countries for which project proposals have been prepared but not yet taken up for implementation:

Africa: Burundi, Congo, Côte d'Ivoire, Egypt, Niger, Nigeria, Rwanda, Senegal and the United Republic of Tanzania;

Asia and the Pacific: Afghanistan, Brunei Darussalam, China, Fiji, Papua New Guinea, Philippines, Republic of Korea and Tonga;

Western Asia: Oman, United Arab Emirates and Yemen Democratic Republic;

Latin America and the Caribbean: Bolivia, Cuba, Dominican Republic, Jamaica and Panama.

Others awaiting project formulation include Algeria, Cape Verde, Ecuador, Mauritania and Tunisia.

4. In all, there are 60 countries presently involved or interested in NHSCP. In addition, many others, though not formally participating in NHSCP, have been receiving technical assistance from the NHSCP regional teams.

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5. Of the 30 countries listed as participating in the Programme, 14 have completed one or more phases of the Programme and some of them (e.g. Bahrain, Cameroon, Cyprus, Ethiopia, Jordan, Kenya, Peru, Syria and Thailand) have reached the maintenance phase. Projects for further assistance have recently been initiated in Mongolia and Sri Lanka. Proposals for further assistance are under consideration in a few other countries, namely Malawi, Morocco and Zimbabwe.
6. According to a draft plan of operations discussed and broadly supported by the Programme Review Committee in August 1987, it is envisaged that the NHSCP coverage will be extended to about 45 countries by 1989, including seven in 1987, six in 1988, and four in 1989. At the same time, 14 countries are to be transferred to the maintenance phase by 1989 and 14 others by 1991.
7. Of the 13 new participants targeted for 1987 and 1988, three have since joined the Programme - Ghana and Sierra Leone in 1987 and Sudan in 1988. Two others, Nigeria and the Philippines have been implementing the survey programme as envisaged, though not as formal participants of NHSCP. The United Republic of Tanzania has also been conducting some surveys with the assistance of Sweden, and a mission to that country is planned for early 1989 to reformulate the Programme taking into account certain new developments. Bolivia has initiated a demographic survey with assistance from the United Nations Population Fund (UNFPA), and efforts are being made to develop and extend the household survey programme in that country. Qatar has also initiated survey activities with the assistance of the United Nations Development Programme (UNDP). Jamaica has approved and submitted its project proposal for external assistance. New project proposals have recently been formulated for Brunei Darussalam, Côte d'Ivoire, Niger, Panama and Papua New Guinea.
8. Among the countries which already have project proposals, Afghanistan and China have expressed renewed interest in NHSCP. China has, in fact, submitted a revised project proposal to NHSCP for consideration. It will be discussed with the Government later this year.
9. In addition, NHSCP is actively involved in the development and implementation of the Pan-Arab Project for Child Development (PAPCHILD), a project sponsored by the League of Arab States for the organization of maternal and child health surveys in six Arab countries. The project is supported by the Arab Gulf Programme for the United Nations Development Organizations (AGFUND), UNFPA, the United Nations Children's Fund (UNICEF), the World Health Organization (WHO) and the United Nations. Survey activities at the country level are to be co-ordinated with NHSCP wherever it is in operation. The Department of Technical Co-operation for Development of the United Nations Secretariat is executing certain elements of the project with substantial support provided by NHSCP in the development of survey methodology, questionnaires and other survey instruments.
10. The progress made in the Programme has to be viewed in the context of the recent emergence of internationally sponsored survey programmes, such as the Demographic and Health Survey (DHS) Programme sponsored by the United States Agency for International Development (USAID) through the Westinghouse Institute of Resource Development; the PAPCHILD Project; the Inter-Agency Food and Nutrition

Surveillance Programme (FNS) sponsored by UNICEF, the Food and Agriculture Organization of the United Nations (FAO) and WHO; the programme of permanent household surveys sponsored by the World Bank in collaboration with the African Development Bank in the context of its Social Dimensions of Adjustment (SDA) Project for Sub-Saharan Africa, and the World Bank's continuing activities in regard to its Living Standards Measurement Study (LSMS).

11. Whereas DHS, PAPCHILD and FNS are programmes confined to certain subjects of specific interest, primarily involving ad hoc surveys, and LSMS has all along been projected as a research programme, the SDA Project envisages the establishment of permanent household surveys covering a wide range of subjects, including virtually all aspects of standards and levels of living. At present, some 25 African countries have expressed interest in the SDA Project.

12. The Administrative Committee for Co-ordination (ACC), at its meeting held in April 1988, discussed the need for close co-ordination between the SDA Project and NHSCP in the promotion of household survey activities in Africa. The ACC Sub-Committee on Statistical Activities, at its meeting held in June 1988, further considered the matter and stressed the need for effective co-ordination.

13. The World Bank envisages consultations with NHSCP on the SDA Project. Accordingly, a series of bilateral and multilateral consultations have been held. A representative of NHSCP is also included as a member of the SDA Project Steering Committee. The Statistical Office of the United Nations Secretariat has participated in several technical meetings organized by the World Bank. The need for co-ordination has been recognized on all sides and the modalities are being worked out (see also document E/CN.3/1989/19 prepared by the World Bank).

14. The NHSCP draft plan of operations estimates that the external assistance required for all the 45 countries targeted for participation is approximately \$US 48 million, or a little over \$1 million per country on average for a typical project of five years' duration. Of that amount, about \$23 million, or nearly one half of the external assistance requirement, has been secured so far. Twenty-five million dollars have still to be found, including approximately \$10 million to cover the shortfall for the countries presently participating in NHSCP. The above estimates do not include the assistance requirements of China; the proposal has yet to be discussed with the Government and possibilities of external assistance required for the project need to be explored. Efforts to secure the needed assistance through collaboration with other aid programmes continue; the funding arrangements for the PAPCHILD Project are an example of that approach.

15. So far, almost half of the external assistance for country level survey activities has come from United Nations bodies and specialized agencies; namely, UNDP, UNFPA, UNICEF and the World Bank, and the rest from other bilateral and multilateral donor sources, such as USAID, the Canadian International Development Agency (CIDA), the Swedish International Development Agency (SIDA), the British Overseas Development Administration, the European Economic Community (EEC) and the Commonwealth Fund for Technical Co-operation (CFTC) as well as the Federal Republic of Germany, France and Hungary. The bulk of the external assistance covers the

cost of expert and consultant services, training abroad, transport and data processing equipment. The domestic costs, including management, supervision and field operations, in general are met by the Governments themselves. Indeed, several countries have launched their programmes of household surveys with minimal external assistance, relying almost completely on domestic sources of finance and with technical co-operation support limited to advisory missions from the Central Co-ordinating Unit of NHSCP, the respective regional commissions and short-term consultancies. On the other hand, some of the least developed countries require substantial assistance in building up their survey-taking capabilities. Overall, the external assistance needed averages only about one fourth of the total cost.

16. The countries participating in NHSCP have all been actively engaged in conducting household surveys more or less on a continuous basis in accordance with their respective programmes as envisaged in the relevant projects. The surveys have covered various demographic, social and socio-economic aspects, such as fertility and mortality, migration, labour force, employment and unemployment, agricultural and non-agricultural activities, incomes and expenditures, literacy, housing, health and nutrition, disabilities, welfare, water supply and sanitation and energy consumption. A list of the surveys conducted under NHSCP is presented as an annex to the present report.

III. PROGRAMME CO-ORDINATION AND MANAGEMENT

17. The Central Co-ordinating Unit of the National Household Survey Capability Programme has recently been strengthened by the release of one of the technical positions held frozen since 1983. The Unit has, in fact, experienced a major turnover of staff over the last few years, including the appointment of a new Programme Co-ordinator in October 1987 following the retirement of the previous Co-ordinator.

18. The Central Co-ordinating Unit consists at present of five Professional posts, including that of the Co-ordinator: three of these posts are financed by UNDP, one by UNFPA and one is provided by the Department of Technical Co-operation for Development. The Unit also receives some financial support from UNICEF. Additional manpower, logistical support and overall substantive guidance is provided by the Statistical Office of the United Nations Secretariat. As a project, NHSCP is executed by the Department of Technical Co-operation for Development and guided in its implementation by a Programme Review Committee set up under the chairmanship of UNDP with representatives of the Department of Technical Co-operation for Development, UNFPA, UNICEF and the World Bank as its membership. A meeting of the Programme Review Committee held in August 1987 discussed and broadly supported a draft plan of operations for the period 1987-1991.

19. At the regional level, the size and composition of the household survey teams have undergone some changes since 1987. In Africa, following the termination of the UNDP-funded regional household survey project, only two regional household survey advisers remain: one funded by UNDP, the other provided by the International Labour Organisation (ILO). The post of a data processing adviser, financed by the Federal Republic of Germany for two years (1986-1988) has also

recently been terminated. The team, however, is provided with some supplementary assistance by other regional advisers attached to the Statistics Division of the Economic Commission for Africa (ECA). In the Asia and Pacific region, the services of a regional adviser on household surveys provided by the ILO are supplemented by regional advisers on censuses and surveys provided by UNFPA, notwithstanding their increasing involvement in population censuses. With the termination in 1987 of a UNDP-funded regional project, the Economic and Social Commission for Western Asia (ESCWA) has redeployed one of its technical advisers on a temporary basis to provide support for NHSCP. An agreement has recently been concluded with AGFUND for the provision of financial support in an amount of \$300,000 for NHSCP activities in the region. In the Latin America and Caribbean region, the adviser provided by the ILO was withdrawn in mid-1988. Thus, in all, there are four regional advisers on household surveys working full time on NHSCP in the various regions of whom two are provided by ILO and one by UNDP. Supplementary assistance is, however, provided by the regular NHSCP staff and other regional advisers attached to the regional commissions.

20. Arrangements for co-ordination with the specialized agencies remain active and effective. The involvement of ILO, FAO, WHO and the United Nations Educational, Scientific and Cultural Organization (UNESCO) in project formulation, technical reviews and technical studies has been a source of great support to NHSCP. The arrangements for co-ordination between NHSCP and the World Bank have acquired a new dimension with the initiation by the World Bank of its own programme of household surveys within the framework of its SDA Project. The modalities for collaboration at the working level in the countries participating in NHSCP as well as the SDA Project are still being worked out. The World Bank has also been going ahead with its Living Standards Measurement Studies (LSMS) outside of Africa, for example in Jamaica, where an NHSCP project has already been formulated and approved by the Government. The possibilities of co-operation in such cases are being explored. Moreover, the World Bank, as a sponsor of NHSCP, continues to function as a member of the NHSCP Programme Review Committee, and the NHSCP is represented on the SDA Project's Steering Committee.

IV. TRAINING AND TECHNICAL STUDIES

21. The Regional Household Survey Training Project, financed by UNDP, in support of the NHSCP training programme organized by the Government of India to promote technical co-operation among developing countries (TCDC), has completed five years of operation. During that time four courses in sampling and survey methodology and four courses in data processing for household surveys were conducted, and about 140 candidates from 22 developing countries of the Asia and Pacific region were trained: 80 in sampling and survey methodology and 60 in data processing. A tripartite review held in 1986 expressed satisfaction with the execution of the project and considered the project objectives to be still relevant. The Economic and Social Council for Asia and the Pacific (ESCAP) Committee on Statistics has strongly recommended that the training programme be continued, and the Government of India is agreeable. A proposal for a three-year extension has recently been approved; courses will resume in 1989.

22. The desirability of organizing similar programmes in other regions has been under consideration. A proposal to extend Mexico's national training programme in statistics to candidates from Central America, including Panama, Cuba and the Dominican Republic, has been prepared for submission to UNFPA and to other potential sources of assistance. The programme will take advantage of the existing training facilities in the region, such as the Inter-American Centre for Statistical Training, the School of Applied Statistics and Data Processing Technology and the Latin American Centre for Statistics. The Statistical Training Programme for Africa (STPA) sponsored by ECA has already been in operation for a number of years. Efforts will be made to explore the possibilities for assistance to strengthen its household survey content.

23. The programme of technical studies undertaken by NHSCP to supplement the Handbook of Household Surveys 2/ has made good progress. In particular, the study entitled "How to Weigh and Measure Children" 3/ published in collaboration with WHO and UNICEF, in November 1986, has been in great demand and has run out of print. A related study on assessing the nutritional status of children through household surveys has since been completed and awaits publication. The first volume of another study on measuring health through household surveys, undertaken in collaboration with WHO and UNICEF, has been drafted and is at present under revision. A second volume involving a number of special modules is under contract with the London School of Hygiene and Tropical Medicine, which had primary responsibility for the preparation of the first volume as well. Another study, on the measurement of literacy through household surveys, undertaken in collaboration with UNESCO and UNICEF, has been finalized and awaits publication.

24. A technical study on household income and expenditure surveys undertaken in consultation with ILO, the World Bank and the United Nations regional commissions is presently under revision in the light of comments received from various sources. At the same time, ILO is engaged, in consultation with NHSCP, in the preparation of a manual on surveys of the economically active population. It is proposed to organize in the near future a joint United Nations/ILO technical working group to consider both these studies.

25. A methodological study of household surveys of agriculture with specific reference to Africa has recently been initiated in consultation with FAO. The study involves a series of country-level case studies to be co-ordinated eventually into an overall study covering the African region. To supplement a study on the measurement of literacy through household surveys a series of case studies aimed at documenting country experiences with such surveys has recently been initiated. Other technical studies proposed for the near future include:

- (a) Surveys of household economic activities;
- (b) Surveys of household consumption of energy;
- (c) Preparation of survey reports and dissemination of survey results.

26. The following studies published in English have been translated into French and Spanish: "Survey Data Processing: A Review of Issues and Procedures" 4/

(French only); "Non-Sampling Errors in Household Surveys: Sources, Assessment and Control"; 5/ "The Role of the NHSCP in Providing Health Information in Developing Countries"; 6/ "Development and Design of Survey Questionnaires"; 7/ "Sampling Frames and Sample Designs for Integrated Household Survey Programmes"; 8/ and "How to Weigh and Measure Children".

27. Financial assistance has been provided to ESCWA for the translation into Arabic of the technical studies on development and design of survey questionnaires and sampling frames and sample designs. The United Nations Handbook of Household Surveys has already been translated into Arabic. Possibilities of assistance for the translation of "How to Weigh and Measure Children" are being explored.

28. In collaboration with the Centre for Social Development and Humanitarian Affairs of the United Nations Secretariat, the Statistical Office of the United Nations Secretariat has recently published a study entitled Development of Statistical Concepts and Methods on Disability for Household Surveys. 9/ Another study, entitled Improving Statistics and Indicators on Women using Household Surveys 10/ has been published in collaboration with the International Research and Training Institute for the Advancement of Women (INSTRAW).

29. NHSCP has been promoting the organization of regional, subregional and national seminars or workshops on ways to develop household surveys and disseminate the results. During the biennium 1987-1988, such seminars were held in the Caribbean, Costa Rica, Egypt, Guatemala, Kenya, Malawi, Syria, and Zimbabwe. An ESCAP/ILO seminar on employment and unemployment statistics with special reference to the National Household Survey Capability Programme is scheduled for January 1989.

30. In connection with the 1990 round of population censuses, three subregional workshops are planned for Latin America and the Caribbean during the period 1988-1991 to promote the development of appropriate sampling frames based on population censuses. NHSCP's technical study entitled "Sampling Frames and Sample Designs" will be used as the basic document for discussion.

V. WORK PROGRAMME FOR 1989-1990

31. The work programme for 1989-1990 will concentrate primarily on the implementation of household survey programmes in participating countries in accordance with the established goals of NHSCP. In addition to the 30 countries participating in NHSCP as of mid-1988, and a few others likely to join by the end of the year, it is expected that 7 to 10 countries from among those which have already formulated project proposals and those awaiting project formulation will join the Programme during the period 1989-1990. Efforts will be made, in consultation with the sponsoring and other potential donor agencies, to secure the external assistance wherever needed.

32. In the countries of sub-Saharan Africa that are participating in NHSCP as well as the World Bank SDA Project, efforts will be made to develop integrated household survey programmes to be operated in close collaboration with the World Bank. Collaborative arrangements will also be established in the context of the continuing World Bank efforts to promote living standards measurement studies.

33. In addition, extended assistance will be provided, when necessary, to countries that have completed or are in the process of completing one or more phases of the Programme. To others, who may be transferred to the maintenance phase, marginal assistance will be provided as needed.
34. Participating countries will be assisted, in collaboration with the regional commissions, in the preparation and maintenance of sampling frames (including cartography), the proper design of household surveys and the early tabulation and analysis of data collected. Countries will be encouraged to prepare and publish reports and disseminate the results through national seminars for the benefit of potential users.
35. The technical studies already in progress will be completed by the end of 1988. New studies on surveys of household economic activities, surveys of household energy consumption and the preparation and dissemination of survey reports will be started in 1989 and completed by 1990. The results of the methodological study of household surveys of agriculture undertaken in 1988 will be analysed in collaboration with FAO and a joint report prepared.
36. The NHSCP training programme in India will resume courses in 1989. In addition to the annual courses on sampling and survey methodology and data processing for household surveys, it will include one short course each year for the training of potential trainers. The training programme proposed in co-operation with Mexico will be supported and assisted for the benefit of the countries of Central America. Training facilities in the rest of Latin America and the Caribbean, Africa and Western Asia will be reviewed and proposals made for the improvement of training facilities for household surveys.
37. Subregional workshops proposed for Latin America and the Caribbean for the development of sampling frames on the basis of population censuses will be supported and assisted in collaboration with ECLAC. The feasibility of organizing similar workshops in other regions will be considered and proposals to that effect will be made in collaboration with regional commissions.
38. A meeting of the technical Working Group on Income and Expenditure Surveys and Surveys of the Economically Active Population will be held early in 1989 in collaboration with ILO. A workshop on household surveys of agriculture will be organized later in the year in collaboration with FAO and the Commonwealth Fund for Technical Co-operation. A workshop on surveys of health, nutrition and literacy will also be organized towards the end of 1989 in collaboration with WHO, UNESCO and UNICEF. A special workshop on health surveys in the context of the PAPCHILD project will be conducted towards the end of 1989 for the member countries of the League of Arab States. Another workshop on surveys of household economic activities and surveys of household energy consumption will be organized in 1990.

VI. SUGGESTIONS FOR THE FUTURE

39. As described above, a draft plan of operations was submitted to the NHSCP Programme Review Committee at its meeting in August 1987 and will be further considered in a meeting of the Committee scheduled for November 1988. The plan

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provides for the extension of the NHSCP through 1991. It envisages, *inter alia*, the continuation of the Central Co-ordinating Unit in its present form and strength through 1991. It also envisages the continuance of regional advisory teams in ECA, ESCAP, ESCWA and ECLAC, strengthened where necessary, through 1991. The total Professional strength thus envisaged is as follows:

Central Co-ordinating Unit	Programme Co-ordinator 4 technical advisers
ECA	4 regional advisers
ESCAP	2 regional advisers
ESCWA	4 regional advisers
ECLAC	2 regional advisers

40. Of the four technical advisers in the Central Co-ordinating Unit, two are presently financed by UNDP, one by UNFPA and one by the Department of Technical Co-operation for Development. It is anticipated that one of the posts presently financed by UNDP will be taken over by the Department of Technical Cooperation for Development during the biennium 1990-1991. Of the 12 full-time regional advisers envisaged, only four are now on board, two of them provided by ILO. If national survey-taking programmes are to be provided with the necessary technical support, it is imperative that the regional teams be strengthened and maintained as envisaged. Although some of the existing gap is being bridged by the joint use of regional advisers for census and survey work, additional support for these regional advisers will need to be sought from multilateral agencies, such as UNDP, UNFPA and UNICEF as well as the World Bank and bilateral agencies.

41. If 10 to 15 additional countries were to join the programme between now and 1991 as anticipated, there would be some spillover responsibilities to be discharged beyond 1991. Assuming that all 27 countries that joined the Programme before 1987 would have progressed to the maintenance phase by 1991, there would still be 18 countries at various stages of project implementation to be helped after 1991. It is anticipated that at least some of these countries would need support from NHSCP and its regional components through 1995. Under this scenario, the total staff of 16 advisers envisaged at the global and regional levels could gradually be reduced over the period 1992 to 1995, and NHSCP terminated thereafter.

42. However, national household survey activity, like population census activity, is a continuing feature of statistical development. Since the main objective of the Programme is to build capabilities in developing countries to conduct their own survey programmes, it is expected that the 45 NHSCP participants, upon the completion of one or two phases of project-based technical assistance, will have attained some degree of basic capability for, and self-reliance in, the organization of household surveys as a continuing feature of their statistical programmes. Even so, many of the developing countries will remain in need of assistance. Even those who received assistance may, in time, require further assistance to compensate for the turnover of trained staff, the depreciation of

transport and data processing equipment and the assimilation of methodological developments.

43. The United Nations Economic and Social Council, in its resolution 1979/5 of 9 May 1979 concerning the National Household Survey Capability Programme, requested the Secretary-General, in collaboration with the agencies concerned, to co-ordinate household survey technical co-operation activities within the context of NHSCP, and strongly urged the multilateral and bilateral donor agencies to provide resources to help developing countries implement their survey development plans within the framework of the Programme as part of their technical co-operation activities, and ensure that the survey activities they may promote will be compatible with and contribute to the Programme. As noted in paragraph 10 above, several externally aided independent survey programmes have been initiated in the recent past. The evolving role of NHSCP will entail the promotion of more effective co-ordination of such initiatives at the global, regional and country levels - the latter by assisting developing countries in improving their abilities to effect such co-ordination.

44. These are continuing responsibilities, and the Department of Technical Co-operation for Development and the Statistical Office of the United Nations Secretariat will have to provide assistance under the guidance of the Statistical Commission, with the requisite support of such funding agencies as UNDP, UNFPA and UNICEF, and with the co-operation of the regional commissions and specialized agencies, such as ILO, FAO, WHO and UNESCO, in the same manner as for other statistical development programmes.

45. Nevertheless, NHSCP as a separate project is finite. Its developmental functions will therefore have to be integrated with the ongoing related technical co-operation activities of the Department of Technical Co-operation for Development with the assistance of the Statistical Office of the United Nations Secretariat. The process of integration is expected to be initiated in 1990 when another post in the Central Co-ordinating Unit will be taken over by the Department of Technical Co-operation for Development; NHSCP, as a project, will then gradually be phased out during the period 1992-1995.

46. At the same time, the regional capability for providing advisory services in the design, implementation, tabulation and analysis of household surveys needs to be firmly established and maintained at the requisite level. Each region would need, as a minimum, two advisers: one to look after socio-economic surveys such as labour force, income and expenditure surveys (to be funded possibly by ILO as is the case at present); the other to look after demographic and other social surveys such as housing, health, nutrition and literacy (to be funded possibly by UNDP, UNFPA and/or UNICEF). The African region would probably need additional advisers (probably two more) because of the large number of countries involved, some English-speaking and some French-speaking. Thus, in all, a minimum of 10 regional advisers will be required to provide continuous assistance in household surveys.

47. After the termination of NHSCP as a separate project, the Statistical Office of the United Nations Secretariat will continue to be responsible for the effective co-ordination and documentation of household survey activities, methodological

research and the provision of technical assistance in such matters as sampling, development and maintenance of sampling frames, control of sampling and non-sampling errors and data processing. Despite the increasing involvement expected of the regional commissions, a minimum of three Professionals will need to be available in the Statistical Office of the United Nations Secretariat to carry out these functions.

48. NHSCP has so far been conceived and implemented as a project-based programme and its progress measured in terms of the number of countries having approved projects under implementation. The objectives of the Programme, beyond 1991, would be more broad-based, aimed at providing technical assistance to any developing country interested in organizing an integrated household survey programme, or even an ad hoc household survey, tailored to its needs. In addition to advisory missions, in highly specialized matters, assistance may have to be provided by short-term consultants.

49. If, in addition to technical assistance by the regional and central teams, a country needed external assistance for equipment, expert services or training abroad, technical advisers attached to the Statistical Office of the United Nations Secretariat and/or the regional team concerned would assist in the formulation of a project proposal. However, it would be primarily the responsibility of the country itself to find and secure such assistance, perhaps with the help of the Department of Technical Co-operation for Development. The Department may also assist countries in the periodic review and evaluation of their survey projects.

50. Thus, NHSCP would essentially consist of a network of regional advisers and technical advisers responsible for the provision of technical co-operation to all developing countries with such needs. Its achievements will be measured primarily in terms of the nature, quantity and quality of technical co-operation provided to the developing countries and the extent to which household survey activity is thus promoted.

VII. POINTS FOR DISCUSSION

51. The Commission may wish to comment on:

- (a) The progress and draft plan of operations of NHSCP (paras. 2 to 16);
- (b) The work programme for 1989-1990 (paras. 31-38); and
- (c) The suggestions for the future (paras. 39 to 50).

Comments on issues related to programme co-ordination and management (paras. 17-20) and training and technical studies (paras. 21-30) are also invited.

Notes

1/ Official Records of the Economic and Social Council, 1987, Supplement No. 6 (E/1987/19), para. 162.

2/ Studies in Methods Series F, No. 31 (United Nations publication, Sales No. E.83 XVII.13).

3/ United Nations, Department of Technical Co-operation for Development and Statistical Office (1986), preliminary version.

4/ United Nations, Department of Technical Co-operation for Development and Statistical Office (1982).

5/ United Nations, Department of Technical Co-operation for Development and Statistical Office (1982), preliminary version.

6/ United Nations, Department of Technical Co-operation for Development and Statistical Office, NHSCP Technical Study, No. 3 (1983).

7/ United Nations, Department of Technical Co-operation for Development and Statistical Office (1985).

8/ United Nations, Department of Technical Co-operation for Development and Statistical Office (1986), preliminary version.

9/ Studies in Methods Series F, No. 38 (United Nations publication, Sales No. E.88.XVII.4).

10/ Studies in Methods Series F, No. 48 (United Nations publication, Sales No. E.88.XVII.11).

ANNEX

Surveys conducted under the National Household Survey
Capability Programme

	<u>Topic</u>	<u>Year(s)</u>
I. <u>Countries that joined in 1980</u>		
Kenya	1. Annual crop forecast survey	annual
	2. Survey of handicapped	1981
	3. Household budget survey	1982-83
	4. Nutrition survey	1982, 1987
	5. National demographic survey	1983
	6. Urban housing survey	1983-84
	7. Contraceptive prevalence survey	1984
	8. Agricultural production survey	1986-87
	9. Rural housing survey	1987-88
	10. Literacy survey	1988
	11. Labour force survey	1987-88
	12. Demographic and health survey	1988
Nicaragua	1. Multi-purpose household survey (population, labour force, social characteristics): selected cities	1980
	2. Multi-purpose household survey (all urban areas)	1981
	3. Multi-purpose household survey (all urban areas and extended sample for the city of Bluefields)	1982
	4. Multi-purpose household survey (urban and rural areas)	1983
	5. Income and expenditure survey (Managua)	1984-85
	6. Demographic survey	1985-86
Sri Lanka	1. Labour force and socio-economic survey	1980-81
	2. Contraceptive prevalence survey	1982
	3. Survey of household economic activities	1984-85
	4. Labour force and socio-economic survey	1985-86
	5. Household survey on demographic and social aspects	1986-87
	6. Demographic and health survey	1987
	7. Agricultural survey	1987-88

	<u>Topic</u>	<u>Year(s)</u>
II. <u>Countries that joined in 1981</u>		
Ethiopia	1. Annual agricultural survey	annual
	2. Demographic survey (2 rounds)	1981-82
	3. Household income, consumption and expenditure survey	1981-82
	4. Abbreviated labour force survey (5 rounds)	1981-82
	5. Health and nutrition survey (2 rounds)	1982-83
	6. Census of population and housing	1984
Malawi	1. Agricultural survey (up to 1985)	annual
	2. Demographic survey	1982
	3. Labour force survey	1983
	4. Survey of disabled persons	1983
	5. Family formation survey	1984
	6. Housing survey	1986
Thailand	1. Annual labour force survey (2 rounds)	1981-1983, 1987, 1988
	2. Annual labour force survey (3 rounds)	1984, 85, 86
	3. Survey of health and welfare	1981, 1986
	4. Household income and expenditure survey	1981-82, 1986-87
	5. Surveys of children and youth	1982, 1983
	6. Survey of mass media	1984
	7. Survey of energy consumption	1984
	8. Survey of population change	1984-86
	9. Survey of cultural activities	1985
	10. Survey of migration	annual
Yemen Arab Republic	1. Pilot family budget survey	1981
	2. Pilot demographic survey	1981
	3. Demographic survey including migration	1982-83
	4. Survey of agricultural households	1983
	5. Survey of economic activity of rural women	1983

	<u>Topic</u>	<u>Year(s)</u>
<u>III. Countries that joined in 1982</u>		
Cameroon	1. Household income and expenditure survey	1983
	2. Post census evaluation survey	1983
Jordan	1. Labour force and employment survey	1982-83
	2. Migration survey	1983
	3. Health and nutrition survey	1983
	4. Household consumption and expenditure	1984
	5. Household economic activities and access to social services	1985
	6. Manpower and migration survey	1986
	7. Household expenditure and income survey	1986-87
	8. Household energy consumption	1987
Mali	1. Pilot agricultural survey	1982
	2. National agricultural survey	1983
	3. Demographic survey	1985
	4. Agricultural survey (annual)	1985, 86, 87
	5. Budget and expenditure survey	1988-89
	6. Informal sector survey	1988-89
<u>IV. Countries that joined in 1983</u>		
Bahrain	1. Household income and expenditure survey	1983
	2. Child health survey	1987
Benin	1. Demographic survey	1983
	2. Household income and expenditure survey	1986-87
Botswana	1. Primary health care survey	1983
	2. Labour force survey	1984-85
	3. Income and expenditure survey	1985
	4. Demographic survey	1986-87
	5. Demographic and health survey	1988
	6. Literacy survey (planned)	1988/89
Cyprus	1. Income and expenditure survey	1984-85
	2. Labour force and employment survey	1986-87
Lesotho	1. Agriculture survey (annual)	since 1983-84
	2. Labour force and migration survey	1985-86
	3. Income and expenditure survey	1986-87
	4. Health and nutrition survey (planned)	1988-89
Mongolia	1. Household budget survey	annual

	<u>Topic</u>	<u>Year(s)</u>
Morocco	1. Income and expenditure survey	1984-85
	2. Labour force and employment survey (urban)	annual
	3. Demographic survey (5 rounds)	1986-88
	4. Labour force and employment survey (rural)	1986-87
Peru	1. Employment survey (Lima)	1983-84
	2. National health and nutrition survey	1984
	3. Rural household survey	1984
	4. Living standards measurement survey	1985-86
	5. Income and expenditure survey: (Lima)	1986
	(rest of country)	1987-88
6. National demographic and family health survey	1986	
Zambia	1. Agricultural survey	annual
	2. Pilot income and expenditure survey	1985
	3. Labour force survey	1986
	4. Demographic and labour force survey	1987
Zimbabwe	1. Demographic and socio-economic survey in communal areas	1983-84
	2. Energy survey	1983-84
	3. Agricultural survey	annual
	4. Nutrition status survey	1983-84 1984-85
	5. Contraceptive prevalence survey	1983-84
	6. Income and expenditure survey	1984-85
	7. Water and sanitation survey	1983-84
	8. Labour force survey	1986-87
	9. Literacy survey	1986-87
	10. Intercensal demographic survey	1986-87
	11. Rural retail price survey	1986-87

V. Countries that joined in 1984

Samoa	1. Employment and unemployment survey	1984
	2. Demographic survey (except in 1984)	half-yearly
Syria	1. Labour force survey	1984
	2. Household income and expenditure survey	1984-85

	<u>Topic</u>	<u>Year(s)</u>
<u>VI. Countries that joined in 1985</u>		
Bangladesh	1. Current demographic survey	annual
	2. Labour force survey	annual (except 1987-88)
	3. Household expenditure survey - with nutritional status module	1985-86 1988-89
Pakistan	1. Demographic survey	annual
	2. Labour force survey	annual
	3. Household income and expenditure survey	annual
<u>VII. Countries that joined in 1986</u>		
Guatemala	1. National demographic survey with employment module	1986-87
Costa Rica	1. Household income and expenditure survey	1987-88
Honduras	1. Labour force survey	1986-87
<u>VIII. Countries that joined in 1987</u>		
Ghana	1. Living standards survey	1987-88
	2. Demographic and health survey	1988
Sierra Leone	1. Labour force survey	1988-89
<u>IX. Countries that joined in 1988</u>		
Sudan	1. Household income and expenditure survey	1988-89
