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TECHNICAL CO-OPERATION: NATIONAL HOUSEHOLD SURVEY  
CAPABILITY PROGRAMME

Progress in implementation and co-ordination of the National  
Household Survey Capability Programme

Report of the Secretary-General

SUMMARY

At its twenty-fifth session the Statistical Commission requested a further report on the progress of the National Household Survey Capability Programme and its co-ordination with other household survey programmes. The present report has been prepared in response to that request.

It reviews the progress in programme implementation in the context of its overall objectives of promoting the collection of data and developing capability in participating countries. It highlights its strategy in programme implementation as an "umbrella" programme for the co-ordination of technical co-operation efforts at the country level, optimizing at the same time on the contributions of the United Nations and its specialized agencies through "network" arrangements.

After detailing progress in programme implementation (paras. 2-11), the report reviews co-ordination arrangements with other international programmes (paras. 12-28). It then reviews activities in the training and preparation of technical studies (paras. 29-42); programme management and evaluation (paras. 43-49); and the work programme for 1991-1992 (paras. 50-66). Points for discussion are included in paragraph 67.

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## INTRODUCTION

1. At its twenty-fifth session, the Statistical Commission noted with appreciation the progress made in the implementation of the National Household Survey Capability Programme (NHSCP), endorsed its work programme for 1989-1990, and supported the suggestions for the future presented by the Secretary-General. It emphasized the need for further donor support for country-, regional- and global-level activities and effective co-ordination with other household survey programmes in operation, such as the World Bank's Living Standards Measurement Study (LSMS) and the Social Dimensions of Adjustment (SDA) project. As requested by the Commission, a report on the progress of NHSCP and its co-ordination with other household survey programmes is presented in this document.

## I. PROGRESS IN PROGRAMME IMPLEMENTATION

2. As of October 1990, the number of countries formally listed as participants in NHSCP was 45 - the target figure for phase III of the Programme, due to end in December 1991. The countries participating include:

Africa: Algeria, Angola, Benin, Botswana, Cameroon, Ethiopia, Ghana, Kenya, Lesotho, Malawi, Mali, Mauritania, Morocco, Mozambique, Niger, Nigeria, Rwanda, Sierra Leone, Sudan, Swaziland, United Republic of Tanzania, Zambia, Zimbabwe;

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

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

Europe: Cyprus;

Latin America and the Caribbean: Bolivia, Costa Rica, Cuba, Ecuador, Guatemala, Honduras, Jamaica, Nicaragua, Panama, Peru.

3. Of the above, 15 countries (Algeria, Angola, Mauritania, Mozambique, Niger, Nigeria, Rwanda, Swaziland, United Republic of Tanzania, Fiji, Bolivia, Cuba, Ecuador, Jamaica, Panama) were new entrants, having joined the Programme during 1989-1990.

4. Twelve of the participants (Botswana, Cameroon, Ethiopia, Kenya, Malawi, Zimbabwe, Thailand, Bahrain, Jordan, Syrian Arab Republic, Cyprus, Peru) have been transferred to the maintenance phase, having successfully completed one or more phases of the Programme or participated in it for a minimum of five years, and having attained reasonable ability or confidence to continue the survey programme on the basis of their own resources, subject to minimal external assistance without a formal project. However, some of them (Ethiopia and Malawi) have sought further assistance under other technical assistance programmes and are still being assisted by NHSCP in their household survey activities.

5. In addition, there are 23 countries for which project proposals have been prepared. They are:

(a) Government approved

Afghanistan, Argentina, Burkina Faso, Cayman Islands, Congo, Dominican Republic, Egypt, Guinea, Guyana, Oman, Senegal, United Arab Emirates;

(b) Government approval awaited

Brunei Darussalam, Burundi, Côte d'Ivoire, Equatorial Guinea, Papua New Guinea, Paraguay, Philippines, Seychelles, Tonga, Republic of Korea;

(c) Government proposal

China.

From among the proposals that have already been approved by their respective Governments, commitments for external funding support are almost "firm or nearing confirmation for programmes in Burkina Faso, Cayman Islands, Guinea and Guyana. Those four countries are expected to join NHSCP in 1991.

6. China submitted a proposal in 1988 for assistance under NHSCP. In view of the large component of external assistance involved in the proposal, it has not so far been possible to find a possible source of assistance, but exploratory discussions are still under way, and a formal project formulation mission is planned for the near future.

7. Papua New Guinea has advised that it will take up the household survey programme after the population census scheduled for 1990. In the mean time technical assistance was provided under NHSCP for the use of sampling in connection with the census and development of a sampling frame based on the census. Brunei Darussalam has also advised likewise that it will take up the survey programme after the census scheduled for 1990, while approval of the proposal for Seychelles by its Government is also imminent.

8. Others on the periphery ready to join the programme, with prospects of external assistance, include Argentina and Paraguay. Requests for programme formulation visits have also been received from the Central African Republic and Vanuatu, while the Congo has requested a reformulation visit and Nigeria has asked for a mission to extend its survey programme.

9. In addition, a subregional project for the Caribbean, which was prepared in 1988 at the request of the Caribbean Community secretariat, has been endorsed by the Standing Committee of Caribbean Statisticians, and efforts are being made to find the requisite external resources. The feasibility of a similar regional project for the South Pacific is to be considered at the forthcoming eighth South Pacific Commission Regional Conference of Statisticians, due to convene in February 1991. In the mean time, one country in the region, Fiji, for which a project proposal was prepared in the early 1980s, has, on indication of good

prospects for the continuing availability of requisite domestic resources, formally joined the programme in 1990.

10. NHSCP has also been closely involved in the Pan Arab Project for Child Development (PAPCHILD) sponsored by the League of Arab States and supported by the Arab Gulf Programme for United Nations Development Organizations (AGFUND), the United Nations Population Fund (UNFPA), the United Nations Children's Fund (UNICEF) and the World Health Organization (WHO), as well as the United Nations. The Project, which covers five Arab countries (Egypt, Mauritania, Somalia, Sudan and Yemen), envisages, essentially, surveys of maternal and child health, including infant and maternal mortality. It is executed, in part, by the Department of Technical Co-operation for Development (United Nations Secretariat) with the assistance of the Statistical Office of the United Nations Secretariat. NHSCP has been involved particularly in the development of the methodology and survey tools of the Pan Arab Project. Since it started in October 1987 the Project has made very good progress. Model questionnaires and related manuals,, including a sampling manual, have been prepared in Arabic, English and French. The survey has already started in Egypt, Mauritania and Yemen, with assistance from NHSCP, particularly in the field of sampling. Fieldwork was completed in Mauritania in August 1990, and a preliminary report will be available in November 1990. Fieldwork is scheduled to start in December 1990 in Egypt and in April 1991 in Yemen. Following recommendations of the Higher Steering Committee of PAPCHILD during its meeting in October 1989, a project proposal to extend the programme to eight more countries of the Arab world has been formulated and will be submitted for approval to the Higher Steering Committee during its meeting in November 1990. The total budget for that phase is estimated at \$3.3 million.

11. External assistance to household survey projects in countries participating in NHSCP has increased, cumulatively, from \$26.55 million at the end of 1988 to \$42.41 million at the end of 1990 - an addition of \$15.86 million: \$6.28 million in 1989 and \$9.58 million in 1990. Countries that have received contributions exceeding \$1 million include Algeria, Bangladesh, Benin, Bolivia, Ethiopia, Ghana, Malawi, Mali, Morocco, Nicaragua, Niger, Pakistan, Sierra Leone, Sri Lanka, Sudan, Yemen, Zambia and Zimbabwe. Among the donors, the United Nations Development Programme (UNDP), UNFPA and UNICEF, along with lending from the World Bank, account in all for over 60 per cent of the total external assistance; the United States Agency for International Development (USAID), the Canada International Development Agency (CIDA) and the Swedish International Development Authority (SIDA) contributed an additional 30 per cent. Of the increase of \$15.86 million in external contributions in 1989 and 1990, just under a half (\$7.91 million) is accounted for by contributions from UNDP, UNFPA and PAPCHILD, disbursed through NHSCP projects - the bulk of it executed by the Department of Technical Co-operation for Development. The balance includes contributions under the Demographic Health Survey Programme and other bilateral assistance benefiting NHSCP participants. The principal beneficiaries in 1989 and 1990 - i.e., those receiving contributions of \$500,000 or more - include Algeria, Angola, Bolivia, Ecuador, Ethiopia, Jamaica, Malawi, Mali, Morocco, Mozambique, Niger, Nigeria, Pakistan and Sri Lanka.

## II. CO-ORDINATION WITH OTHER INTERNATIONAL PROGRAMMES

12. Apart from the Pan Arab Project for Child Development (PAPCHILD), other international programmes involving household surveys are:

(a) Demographic and Health Survey Programme sponsored by the United States Agency for International Development, through the Institute of Resource Development;

(b) Inter-Agency Food and Nutrition Surveillance Programme, sponsored by UNICEF, FAO and WHO;

(c) The World Bank's continuing activities in regard to its Living Standards Measurement Study (LSMS);

(d) 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.

### A. Demographic and Health Survey Programme

13. The Programme was initiated in 1984 to follow up the World Fertility Survey (WFS) of 1971-1984, and the Contraceptive Prevalence Surveys of 1976-1985, as a further effort in international demographic data collection, with an added emphasis on maternal and child health. The programme has so far covered 29 countries which include Bolivia, Botswana, Burundi, Dominican Republic, Egypt, Ghana, Guatemala, Kenya, Mali, Morocco, Nigeria, Paraguay, Peru, Senegal, Sudan, Sri Lanka, Thailand and Zimbabwe, and in all of which NHSCP has either been in operation or been proposed. NHSCP has been kept informed of the programme activities as a matter of routine. In some countries (Ghana, Peru, Sri Lanka, Sudan, Zimbabwe) the surveys were conducted through the same agencies as those responsible for NHSCP activities. Elsewhere they were organized through agencies such as the Ministry of Health (Botswana, Guatemala, Morocco, Nigeria), the National Council of Population and Development (Kenya) and the Institute of Population Studies (Thailand). In a few cases, where the Programme meant an overlap with the NHSCP activity (Sri Lanka), the scope of the NHSCP survey was adjusted to avoid duplication.

### B. Inter-Agency Food and Nutrition Surveillance Programme

14. The Inter-Agency Food and Nutrition Surveillance Programme owes its origin to the World Food Conference of 1974 which recommended the establishment of a global surveillance system by FAO, WHO and UNICEF to monitor the food and nutrition conditions of the disadvantaged groups of the population at risk and to provide a method of rapid or permanent assessment of all factors which influence food consumption patterns and nutritional status. A joint FAO/WHO/UNICEF committee was accordingly established in 1975 to organize the Programme. The main objectives are to produce and analyse existing information, promote the use of that information, and strengthen the institutional capacity to produce, analyse and use the information. Its relationship to NHSCP is thus, essentially, complementary.

Moreover, as the sources of information are many and not confined to household surveys, its relevance to NHSCP is partial. However, in so far as it aims at strengthening institutional capacity to produce information, as far as household surveys are concerned, it could be co-ordinated with NHSCP.

15. In fact, NHSCP activities in several countries (Bangladesh, Ethiopia, Kenya, Zambia, Zimbabwe) include nutrition status surveys. Recent discussions with FAO have focused attention on the possibility of integrating food consumption surveys with household income and expenditure surveys.

#### C. Living Standards Measurement Study

16. The Living Standards Measurement Study was initiated by the World Bank in 1980 essentially as a research programme to strengthen national capabilities for conducting household surveys that generate policy-relevant data of high quality in a timely and cost-effective manner. The programme was based on the assumption that reliable data for assessing the distributional impact of macro-economic policies were not available; that the ongoing household survey programmes did not make it possible to assemble relevant data to address research and policy concerns since they usually involved uni-subject surveys; and that the usual data flow from sample surveys was not timely because of data processing constraints. In brief, the hypothesis was that the data supply did not match the demand.

17. The LSMS approach, therefore, favoured continuing multisubject household surveys based on small samples covering all relevant aspects through an integrated questionnaire and data processing arrangements integrated with survey operations in order to produce quick results. LSMS surveys have so far been conducted in Côte d'Ivoire, Ghana, Mauritania and Peru. Similar surveys have been initiated in Bolivia, Jamaica and Morocco, and are under consideration in Colombia and Pakistan.

18. The need for co-ordination between LSMS and NHSCP has been emphasized from time to time by the Statistical Commission, and has been actively pursued. In particular, NHSCP and LSMS have been collaborating in Bolivia, Jamaica and Pakistan.

#### D. Social Dimensions of Adjustment

19. The World Bank's project entitled Social Dimensions of Adjustment (SDA) envisages, among other things, the institution of "permanent household surveys" in participating countries. The empirical framework, developed for the implementation of the project, deals with the scope, content and methodology of the survey programme, and includes, as reconstituted now, two types of household surveys - namely, an intensive periodic multisubject survey on a small sample and an extensive current multisubject survey on a large scale for the collection of data on certain priority indicators. The project envisages consultative arrangements with NHSCP, which is accordingly represented on the SDA Project Steering Committee as well as on its Working Group and Sub-Committee on Statistics. The World Bank has likewise been a member of the NHSCP Programme Review Committee since its inception, as one of its sponsors.

20. NHSCP has participated in several consultative meetings, workshops and seminars organized by the World Bank in pursuance of its SDA project: Warwick (November 1987), Washington, D.C. (April 1988), Abidjan (May 1988), Paris (February 1989), Arusha (March 1989), Dakar (March 1989) and Washington, D.C. (November 1989). NHSCP has also participated in several informal bilateral and multilateral discussions with the World Bank at Washington, New York, Ottawa and Addis Ababa.

21. At the country level, NHSCP and the SDA project collaborated in Ghana, as a test case, to develop a survey programme which would meet the requirements of the Government. A joint mission also visited Malawi where an ad hoc household survey programme, approved after the termination of NHSCP, is to be expanded to accommodate some of the data requirements of the SDA project.

22. UNDP is the lead agency on implementation of the SDA project in Niger and the United Republic of Tanzania. NHSCP has been assisting UNDP to initiate an integrated household survey programme in the United Republic of Tanzania designed to meet the data requirements of the SDA project. In Niger, on the other hand, an already formulated NHSCP programme has been adjusted to accommodate such needs.

23. Co-ordination of internationally sponsored or supported household survey programmes in Africa was discussed by the Working Group on Household Surveys of the Economic Commission for Africa (ECA), held at Addis Ababa in October 1989. The Group observed that current attempts at co-ordination had not been adequately effective and recommended that UNDP should take the initiative in reviewing the current arrangements and establish more appropriate mechanisms for such co-ordination within the framework of NHSCP. It also called for more vigorous efforts to secure funding support for national household survey capability programmes and noted the apparent lack of interest on the part of most donors to support programmes structured to develop national capabilities per se in the context of nationally conceived programmes.

#### E. Monitoring the achievement of social goals

24. A new proposal which calls for inter-agency collaboration concerns monitoring the achievement of social goals during the 1990s. The proposal, worked out by a group of experts from UNICEF, UNFPA and the Statistical Office, aims at establishing a reliable and systematic programme for the development of appropriate indicators for monitoring the achievement of social goals being identified by the countries to be featured in their respective development plans and the strategy for the Fourth United Nations Development Decade. These goals are being adopted not only by UNICEF and UNFPA but also the other specialized agencies such as the International Labour Organisation (ILO), the World Health Organization (WHO) and the United Nations Educational, Scientific and Cultural Organization (UNESCO). The proposal is to take an objective look at the statistical and survey programmes of the developing countries in the light of recent developments and strengthen the national capabilities, wherever necessary, so as to enable them to produce current indicators on at least the more important social concerns. These include indicators on fertility, infant and child mortality, food consumption and



nutrition, education and literacy, employment and unemployment, and the status of women. The methodological approach, which is yet to be developed, may vary from country to country, depending on the existing institutional framework, but emphasis is laid on development of continuing household survey programmes, based on the experience already gained through NHSCP and other internationally sponsored efforts such as the ones discussed above.

25. The proposal was submitted to the ACC Sub-Committee on Statistics in June 1989 and was broadly supported. The proposal was also reviewed and endorsed by the Joint Conference of African Planners, Statisticians and Demographers in January 1990. The inter-agency working group has, in the meanwhile, followed up on the recommendations of the ACC Sub-Committee and conducted a preliminary study in Guyana. The progress made was reported to the ACC Sub-Committee at its last session in June 1990. The Sub-Committee has welcomed the report. Since then, proposals to undertake from six to eight pilot studies have been developed, followed by consultations with the regional commissions for their execution. Contacts with the participating countries concerned are also being established.

26. NHSCP has continued its pursuit of inter-agency co-operation in the promotion of household survey activities and the development of household survey methodology, with the specialized agencies of the United Nations system, especially the ILO, FAO, WHO and UNESCO, and received in return the active co-operation of those agencies through participation in project formulation and technical review missions and collaboration in preparation of technical studies and training programmes and organization of technical meetings at the interregional as well as regional and subregional levels. The ILO, in particular, has continued to provide the services of its regional advisers in Africa and Asia and the Pacific for assistance in the promotion and implementation of NHSCP.

27. A recent event of considerable significance was an inter-agency consultative meeting convened by FAO in January 1990 to discuss co-operation between FAO, the World Bank (SDA project) and the Statistical Office of the United Nations Secretariat (NHSCP) in the development of socio-economic indicators. The discussions concluded with recommendations concerning, among other things, integration of food consumption surveys with household income and expenditure surveys, use of socio-economic groups in household surveys for data analysis, and the development of socio-economic indicators of concern in rural development on the basis of household surveys.

28. NHSCP technical and operational activities are also closely co-ordinated with other statistical activities promoted by the Statistical Office of the United Nations Secretariat such as the population and housing censuses, economic and social statistics, statistics and indicators on the situation of women and national accounts. It has been a practice with NHSCP to develop household survey programmes as integral components of statistics development projects of wider scope. A recent development of major significance in this connection is an agreement between UNFPA and the Statistical Office to integrate some components of country household survey programmes - i.e., sample frames and post-censal demographic surveys - wherever possible, with UNFPA-funded population census projects.

### III. TRAINING AND TECHNICAL STUDIES

29. The NHSCP Training Programme in New Delhi, a regional household survey training project financed by UNDP, in support of the training facilities offered by the Government of India in pursuance of the concept of technical co-operation among developing countries, was extended for a further two years, effective January 1989, with a new focus on the least developed countries and the Pacific Island countries of the region of the Economic and Social Commission for Asia and the Pacific (ESCAP). Under the Programme, six more training courses have been conducted:

- (a) A fifth course in sampling and survey methodology, February to May 1989;
- (b) A fifth course in data processing for household surveys, August to November 1989;
- (c) A new course for the training of trainers in sampling and survey methodology, July to August 1989;
- (d) A sixth course in sampling and survey methodology, February to May 1990;
- (e) A sixth course in data processing for household surveys, August to November 1990;
- (f) A new course for the training of trainers in data processing for household surveys, July to August 1990.

30. The Training Programme, though primarily meant for Asia and the Pacific, has been opened up for the first time to Africa and West Asia, and a few countries of Africa have, accordingly, taken advantage of the courses. A tripartite review of the Programme, held in December 1989, expressed satisfaction with the progress and recommended that possibilities of further promotion of technical co-operation among developing countries be explored. The project executed by ESCAP has been assisted by NHSCP technical advisers and ESCAP regional advisers.

31. Unless extended through tripartite agreement with further assistance from UNDP, the project will be terminated at the end of 1990. A terminal review of the project is scheduled for early 1991.

32. NHSCP has also offered to provide the Statistical Institute for Asia and the Pacific (SIAP), located at Tokyo, with lecturing assistance in sample surveys, within the framework of its general course for statistical training. One of the NHSCP technical advisers gave a series of lectures, accordingly, at SIAP in January 1990.

33. The programme of technical studies undertaken by NHSCP to supplement the Handbook of Household Surveys 1/ has made further progress. The studies "Household income and expenditure surveys", 2/ "Measuring literacy through household surveys" 3/ and "Assessing the nutritional status of young children" 4/ have been released for wider circulation in a preliminary form. The ILO has also announced publication of its manual, Surveys of the Economically Active Population. 5/ In

the context of PAPCHILD surveys on maternal and child health, a sampling manual has been prepared, circulated for comments and finalized in the light of comments received and thereafter published and widely disseminated.

34. Preparation of draft guidelines for household surveys on health has been completed. The draft, along with the already published studies on nutrition status and literacy, was placed before an interregional working group convened in April 1990 for discussion and is being finalized in the light of the discussions.

35. The methodological case studies of household surveys in agriculture, initiated in 1987, with specific reference to Africa, were completed and placed before the Workshop on Food Supply Information Systems in Africa, held at Nairobi (Kenya) in March 1989 in collaboration with the European Economic Community (EEC) and the Commonwealth Fund for Technical Co-operation. A consolidated report, based on those case studies and other similar studies undertaken by FAO, has since been completed with the co-operation of FAO and is being prepared for publication and release in early 1991.

36. A new technical study on household surveys of energy consumption was initiated in 1989. The first draft of the study has since been reviewed and revised. The revised draft has been circulated for wider comments and is being finalized in the light of the comments. It will be available for release in a preliminary form in early 1991.

37. A technical study on surveys of household economic activities has recently been initiated, following consultations on a draft outline with the ILO, FAO, the World Bank and the concerned branches of the Statistical Office. A first draft of the study is likely to be available towards the end of 1990. That, along with the study on energy consumption surveys, will be placed for discussion before an interregional working group to be convened during the first half of 1991 and finalized thereafter.

38. Work has also been initiated on the preparation of guidelines for the estimation of sampling errors and guidelines for sampling for rare and elusive populations. A first draft of the former has been circulated for comments, and a draft of the latter is likely to be available in the first quarter of 1991.

39. Other subjects under consideration for technical studies or guidelines include:

- (a) Use of micro processors in household surveys;
- (b) Preparation and dissemination of survey reports;
- (c) Time-use surveys;
- (d) Housing surveys;
- (e) Household surveys for rural development.

Time-use and housing surveys are also on the work programme of the Statistical Office of the United Nations Secretariat and may call for technical inputs from NHSCP. Household surveys for rural development have been suggested by a recent FAO/Statistical Office/World Bank consultative meeting, to be taken up as a joint FAO/NHSCP undertaking.

40. NHSCP has continued to promote the organization of technical working groups, workshops or seminars on household survey methodology at the interregional, regional, subregional and national levels. Apart from the interregional working group on household surveys convened at London in April 1990 (see para. 34 above) and the regional workshop on Food Supply Information Systems held at Nairobi (Kenya) in March 1989 (see para. 35 above), NHSCP has also convened two international expert working groups in New York in the context of PAPCHILD - one in January 1989, to finalize the PAPCHILD model questionnaires, and another in July 1990, to review the proposed draft guidelines for country principle report and data analysis. Other meetings with which NHSCP was associated include:

(a) ECLAC Seminar on the Use of Sampling in the 1990 Round of Population and Housing Censuses, Buenos Aires (Argentina), April 1989;

(b) PAPCHILD Regional Workshop on Demographic, Health and Nutrition Surveys, Tunis (Tunisia), April 1989;

(c) Workshop for the Redesign of Socio-demographic Statistics, Buenos Aires (Argentina), August 1989;

(d) ECA Working Group on Household Surveys, Addis Ababa (Ethiopia), October 1989;

(e) ESCAP Seminar on the Design and Evaluation of Household Surveys, Beijing (China), May 1990;

(f) Expert Group Meeting on Strategy of PAPCHILD Data Analysis, Tunis (Tunisia), September 1990;

(g) ECLAC/NHSCP Workshop on Sampling Frames and Sample Designs for English-speaking Caribbean countries, Kingston (Jamaica), November 1990.

41. A regional workshop on household surveys, proposed for Western Asia and scheduled for October 1990 as a forum for the dissemination of the NHSCP technical studies on household income and expenditure surveys, health surveys, nutrition status surveys and literacy surveys, was cancelled due to disturbed conditions in the region.

42. NHSCP was represented at the forty-seventh session of the International Statistical Institute, held at Paris in August-September 1989, where a paper on household budget surveys in developing countries was presented; the twenty-first General Conference of the International Union for the Scientific Study of Population, held at New Delhi (India) in September 1989; the First Scientific Conference of African Statisticians, held at Abuja (Nigeria) in

October-November 1989, where a session on technical assistance in statistics was organized; the ECLAC meeting of the Directors of Statistics, held at Santiago (Chile) in September 1989; the Standing Committee of Caribbean Statisticians, held at Antigua (Caribbean) in November 1989, which endorsed the proposal for a subregional programme of household surveys in the Caribbean; the sixth session of the Joint Conference of African Planners, Statisticians and Demographers, held at Addis Ababa (Ethiopia) in January 1990; the Second Conference of the International Association for Official Statistics, in Beijing in October 1990, where one of the NHSCP technical advisers presented a paper on statistical issues in monitoring social goals in the 1990s; and the Tenth Inter-American Statistical Conference, in Mexico in November 1990, for which NHSCP was invited to present a paper on household economic activities.

#### IV. PROGRAMME MANAGEMENT AND EVALUATION

43. The Central Co-ordinating Unit had its sanctioned technical advisers in position all throughout 1989 and the first half of 1990. A vacancy at the end of June is being filled. Effective from January 1990, one of the UNDP-financed posts of technical advisers, along with one of the UNDP-financed posts of secretaries, has been taken over by the Department of Technical Co-operation for Development. The staff strength of the Unit thus consists at present of:

1 programme co-ordinator	- funded by UNDP
1 technical adviser	- funded by UNDP
1 technical adviser	- funded by UNFPA
2 technical advisers	- provided by the Department of Technical Co-operation for Development
1 documentalist	- funded by UNDP
1 secretary	- funded by UNDP
1 secretary	- provided by the Department of Technical Co-operation for Development

UNICEF continued to provide some funds for the implementation of NHSCP activities, especially in subject fields of its concern.

44. At the regional level, there are two full-time regional advisers on household surveys at ECA - one provided by UNDP and the other provided by the ILO. In addition, eight other regional advisers in ECA - funded by UNFPA mainly for assistance in demographic statistics (3), civil registration (1), cartography (1), sampling (1), and data processing (2) - were also available for help part-time in household surveys.

45. In Asia and the Pacific, the ILO post of regional adviser on household surveys, terminated at the end of 1988, was reinstated in August 1989 as regional adviser on labour statistics and surveys, to assist ESCAP as well as the ILO Regional Office for Asia and the Pacific. His services are available for four fifths of his working time for assistance in household surveys. The ESCAP Statistics Division has also two regional advisers on population censuses and surveys, one in energy statistics and one in data processing, whose services are available part-time for assistance in household surveys. In addition, the Government of India has agreed to provide short-term consultants for assistance in household surveys, if need be, under its programme of technical co-operation among developing countries.

46. In Western Asia, there is only one data processing adviser providing technical support for household surveys. However, an adviser mainly concerned with national accounts and two others, funded by UNFPA for assistance in population censuses and demographic analysis, do provide marginal support for household surveys, where needed. ESCWA has also concluded an agreement with AGFUND to provide limited support for NHSCP activities at the country level, while assurance has also been given by the ILO that, if necessary, short-term consultancy services can be provided for surveys of its concern for countries of the region, on request.

47. In Latin America and the Caribbean, consequent on the withdrawal of the ILO regional adviser in mid 1988, no other assistance is available for household surveys. One of the technical advisers, attached to the Central Co-ordinating Unit, has therefore had to take up occasional missions to countries of the region for technical assistance. Spain has in the meanwhile been providing technical co-operation both through bilateral technical assistance on an ad hoc basis and training workshops in Madrid (at Instituto Nacional Estadística).

48. The NHSCP Reporter, which remained suspended for five years, was revived in 1989 as a half-yearly feature, and three issues (June 1989, December 1989 and September 1990) have been released in English, French, Spanish and Arabic for general information. The fourth issue (December 1990) is under preparation.

49. Emphasis continues to be placed on the evaluation of NHSCP activities and projects. As a part of country operations, evaluations of NHSCP programmes have been conducted in Botswana, Lesotho, Mali, Sierra Leone, Zambia and Zimbabwe. UNDP commissioned and participated in the evaluations of Mali and Sierra Leone. Evaluation in Mali was undertaken by an independent team, while ECA along with two independent members constituted the evaluation team in Sierra Leone. ECA/ILO participated in all other evaluation missions. FAO and UNICEF participated in the evaluation mission to Zambia, FAO joined the mission to Lesotho and SIDA/Statistics Sweden was a member of the team which evaluated the programme in Zimbabwe. The Department of Technical Co-operation for Development participated in all evaluation teams except those to Mali, Sierra Leone and Zimbabwe. Respective mission reports indicate satisfactory implementation of survey programmes and progress towards establishment of self-sustaining capabilities. A further round of surveys has been recommended in each case. Lessons learned from these evaluation studies have helped all concerned to strengthen national programme activities and related technical co-operation. In addition, the results of these evaluations have been

used to strengthen NHSCP activities generally. Evaluation reports have been circulated widely among interested agencies and many of the participants in NHSCP.

#### V. WORK PROGRAMME FOR 1991-1992

50. As reported to the Statistical Commission at its twenty-fifth session, the NHSCP Programme Review Committee considered the draft plan of operations at its meeting held in August 1987 and November 1988 and approved the continuance of the Programme as an interregional project up to 1991. The Secretary-General's report to the Statistical Commission presented some suggestions for the future of the Programme beyond 1991. The Commission supported the suggestions for the future and emphasized the need for further donor support for country-level as well as regional and global-level activities on a continuing basis well beyond 1991. It also recognized the supportive role played by the regional commissions and reiterated the need for strengthening the regional teams.

51. The UNDP's present commitment to the Programme as an interregional project ends at the end of 1991. UNFPA has confirmed that its assistance would continue, and a review of the level of such assistance is being undertaken, possibly to enhance it further. UNICEF too has indicated that it would favourably consider any new requests for assistance. This is under current review. The new initiative for monitoring social goals, jointly developed by UNFPA, UNICEF and the Statistical Office of the United Nations Secretariat, is considered a promising means of obtaining current indicators on matters of social concern as identified by the countries for the Fourth Development Decade (see para. 24 above). Such an initiative will of course keep in view the need for establishing enduring national capabilities.

52. The work programme for 1991 was reviewed by the Programme Review Committee at its last meeting in November 1990. Both country-level activities and work in the field of methodological development and training will continue beyond 1991.

#### A. Country participation

53. It is expected that by the end of 1991, around 50 countries will have joined the Programme (see para. 5 above). In addition to the 12 countries already in the maintenance phase, 15 more, which joined the Programme before 1986, will be transferred to the maintenance phase by the end of 1991, thus leaving some 23 countries with currently active programmes, which call for continued support beyond 1991. The subregional project for the Caribbean and a similar project for the South Pacific, if developed before 1991, may also be operational. Whether the Central Co-ordinating Unit continues in its present form or gets absorbed into the technical advisory services of the Statistical Office, institutionally and functionally, it should be possible to provide technical backstopping services for the current and any new participants as well as those in the maintenance phase, during 1991 and thereafter.

### B. Co-ordination with international agencies

54. NHSCP will continue to extend its hand of co-operation to the World Bank in the implementation of its SDA project and the promotion of its LSMS methodology in a co-ordinated manner to avoid wasteful duplication, prevent disruption of current statistical activities and optimize the benefits of co-ordinated development. In particular, wherever NHSCP has been in operation, it would prefer to promote the SDA project and LSMS surveys within its framework, if the countries so desire. Thus, in countries interested in NHSCP and SDA and LSMS, joint missions could formulate integrated household survey programmes to be implemented through mutual collaboration. Such collaboration could materialize in 1991 in the missions that NHSCP has been invited to send to the Central African Republic for project formulation and to the Congo and Nigeria - the former for project reformulation and the latter for extension of its ongoing programme.

55. Similarly, to the extent that demographic health survey activities are complementary to NHSCP activities, they may be regarded as adding to national capabilities. Where they overlap NHSCP activities, it is desirable to co-ordinate the activities in order to avoid wasteful duplication. Two anticipated instances of such co-ordination are the case of Yemen, where a demographic health survey is to be implemented in collaboration with the PAPCHILD survey, and Niger, where the proposed demographic health survey has already been integrated within its NHSCP country programme. According to a recent DHS Newsletter, the programme is to be extended to 25 other countries, a majority of them in Sub-Saharan Africa. Some of them will be NHSCP participants as well. It would be desirable for NHSCP to continue promoting demographic health surveys within its framework.

56. NHSCP will continue to accommodate the statistical concerns of other specialized agencies such as the ILO, FAO, WHO and UNESCO in national household survey programmes organized with its technical support, to the extent feasible. It will also work in close collaboration with UNICEF and UNFPA and any other specialized agency in the further development, testing and implementation of the proposal for monitoring the achievement of social goals.

### C. Technical studies

57. Work on finalization of six new publications of NHSCP is nearing completion. The guidelines for household surveys on health and the respective guidelines for estimation of sampling errors and sampling for rare and elusive populations, along with the two technical studies on household surveys of energy consumption and surveys of household economic activities and the methodological report on household surveys of agriculture in Africa, will all be finalized and printed during 1991.

58. Technical studies on use of micro processors in household surveys and preparation and dissemination of survey reports will be initiated in 1991 and hopefully finalized and released in 1992.

59. NHSCP will continue to work closely with the concerned sections of the Statistical Office of the United Nations Secretariat in the studies on housing and



time-use surveys, if they are taken up during the course of the next two years. It will also continue to draw on and intensify its collaboration with the staff of the Statistical Office concerned with statistics and indicators on the situation of women, particularly in promoting improved methods for collecting and utilizing data on the economic activities of women and their participation in the informal sector. It will collaborate with FAO in the preparation of a technical study on household surveys for rural development if it is taken up by FAO during the next biennium. FAO is expected to prepare on its own supplementary guidelines on the analysis of food consumption data collected through household income and expenditure surveys, to be released under the NHSCP series of technical studies.

#### D. Other publications

60. The NHSCP Reporter will continue as a half-yearly feature as long as NHSCP continues. The December 1990 issue will include, among other things, an updated list of surveys conducted under NHSCP and indicate the status of the availability of survey results.

61. It is proposed that the summary results of household surveys conducted under NHSCP be prepared and published during the course of 1991. The publication will cover all the countries participating in the programme, to the extent that results are available in already published or unpublished forms.

62. It is also proposed that some of the technical papers prepared from time to time in pursuance of NHSCP and presented at various conferences, seminars etc. be assembled and published in a volume, to be entitled Occasional Papers of NHSCP, for wider circulation among the developing countries.

#### E. Training and technical workshops

63. NHSCP will continue to assist the Statistical Institute for Asia and the Pacific in its training programmes in sampling and survey methodology. It will also assist the ESCAP Statistics Division in its efforts to continue the regional training programme in household surveys organized in collaboration with the Government of India for the benefit of the developing countries of Asia and the Pacific, Western Asia and Africa. It will explore the possibilities of initiating similar programmes for English-speaking and French-speaking Africa in the context of ECA's Statistical Training Programme for Africa, and in Latin America and the Caribbean.

64. NHSCP will pursue the project titled "Technical advisory services in the development and application of sampling frames and sample designs for household survey programmes for Latin America and the Caribbean region", which is being funded by UNFPA, and will assist ECLAC in its implementation. The project involves six subregional workshops - two in English for the Caribbean subregion (see para. 40 above) and four in Spanish, two each for Central America and South America - for the discussion of general guidelines on the construction of sampling frames and sample designs for integrated household survey programmes on the basis of the 1990 round of population and housing censuses.

65. An interregional working group on household surveys, the third in a series, will be convened in 1991 to discuss the NHSCP technical studies on surveys of household economic activities and guidelines for household surveys on health and estimation of sampling errors and sampling for rare and elusive populations.

66. NHSCP will assist WHO in organizing its proposed working group on health statistics in South-East Asia in April 1991. Such assistance will also be made available to the regional commissions in the organization of similar other regional workshops.

#### VI. POINTS FOR DISCUSSION

67. The Commission may wish to comment on:

(a) The progress in programme implementation and the work programme for 1991-1992;

(b) The future of NHSCP after the termination of its present phase in 1991;

(c) The need for effective inter-agency co-operation and co-ordination of household survey promotional programmes.

#### Notes

- 1/ United Nations publication, Sales No. E.83.XVII.13.
  - 2/ DP/UN/INT-88-XO1/6E (1989).
  - 3/ DP/UN/INT-88-XO1/10E (1989).
  - 4/ DP/UN/INT-88-XO1/8E (1990).
  - 5/ Geneva, International Labour Office, 1990.
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