

**I. PROJECT IDENTIFICATION**

1. PROJECT TITLE <b>Population Council Programmatic Grant</b>		APPENDIX ATTACHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <span style="float: right;">21p</span>
3. RECIPIENT (specify) <input type="checkbox"/> COUNTRY <u>Worldwide</u> <input type="checkbox"/> REGIONAL <input type="checkbox"/> INTERREGIONAL		2. PROJECT NO. (M.O. 1095.2) <b>931-11-570-863</b>
4. LIFE OF PROJECT BEGINS FY <b>1969</b> ENDS FY <b>1977</b>		5. SUBMISSION <input type="checkbox"/> ORIGINAL _____ DATE _____ <input checked="" type="checkbox"/> REV. NO. <b>2</b> _____ DATE _____ CONTR./PASA NO. _____

**II. FUNDING (\$000) AND MAN MONTHS (MM) REQUIREMENTS**

A. FUNDING BY FISCAL YEAR	B. TOTAL \$	C. PERSONNEL		D. PARTICIPANTS		E. COMMODITIES \$	F. OTHER COSTS \$	G. PASA/CONTR.		H. LOCAL EXCHANGE CURRENCY RATE: \$ US _____ (U.S. OWNED)		
		(1) \$	(2) MM	(1) \$	(2) MM			(1) \$	(2) MM	(1) U.S. GRANT LOAN	(2) COOP COUNTRY	
											(A) JOINT	(B) BUDGET
1. PRIOR THRU ACTUAL FY	7,628											
2. OPRN FY 73	6,355											
3. BUDGET FY 74	5,005											
4. BUDGET +1 FY 75	5,340											
5. BUDGET +2 FY 76	5,257											
6. BUDGET +3 FY 77	5,340											
7. ALL SUBQ. FY												
8. GRAND TOTAL	34,925											

9. OTHER DONOR CONTRIBUTIONS

(A) NAME OF DONOR	(B) KIND OF GOODS/SERVICES	(C) AMOUNT
Other grants from private sources		

**III. ORIGINATING OFFICE CLEARANCE**

1. DRAFTER PHA/POP/FPSD, Jake Marshbarger	TITLE Project Manager	DATE 5/21/73
2. CLEARANCE OFFICER PHA/POP/R. T. Ravenholt	TITLE Director	DATE 2-2-73

**IV. PROJECT AUTHORIZATION**

1. CONDITIONS OF APPROVAL

2. CLEARANCES

BUR/OFF	SIGNATURE	DATE	BUR/OFF.	SIGNATURE	DATE
PHA/POP	H. H. Boynton	22/5/73	PHA/POP/EA	L. Kangas	
	A. K. Shafer, E. R. Backlund		PHA/POP/WA	E. G. Ruoff	
PHA/POP/LA	C. Johnson		ASIA	H. Rees	5/30/73
LA/DP	M. Hurley		PPG/DPR/PR	N. Cohen	5-29-73
PHA/POP/AFR	J. S. Pringle		PHA/PRS	G. Coleman	5/25/73
AFR/DS	J. Pinder	29/5/73	SA/PPB	ARoan (phone)	

3. APPROVAL AAS OR OFFICE DIRECTORS

SIGNATURE <i>Jarold Kieffer</i>	DATE 5/30/73
TITLE AA/PHA, Dr. Jarold A. Kieffer	

4. APPROVAL A/AID (See M.O. 1025.1 VI C)

SIGNATURE <i>John G. Horn</i>	DATE 5-31-73
ADMINISTRATOR, AGENCY FOR INTERNATIONAL DEVELOPMENT	

UNITED STATES GOVERNMENT

# Memorandum

TO : PHA/POP, Mr. J. Harshbarger

DATE: May 18, 1973

FROM : ASIA/SA/B, Robert W. Beckman 

SUBJECT: Proposed Pop Council MCH Project for Shibpur Thana

ASIA/SA agrees in principle to AID support for subject project. We would like to be able to review the project in greater detail prior to a final decision on the scope of AID funding.

There are two aspects of the present proposal which concern us. One is the split between administrative control of the project (vested in the Ministry of Health & Family Planning) and control over funding (vested in the BD Family Planning Board). This split may lead to problems in project management, and seems unnecessary in any case.

A second is that the construction schedule is heavy and ambitious. If past experience is any guide, the time allotted to build and equip the envisioned health complex -- one "construction season" is too short.



ACTION MEMORANDUM FOR THE ADMINISTRATOR

THRU: EXSEC

MAY 30 1973

FROM: AA/PHA, Dr. Jarold A. Kieffer

Problem: The attached revised PROP for the Population Council Programmatic Grant (Project No. 931-11-570-863) requires your approval under A.I.D. regulations pertaining to projects which involve an increase in total cost of more than \$2 million over the previous estimate.

Discussion: This project addresses the broad field of population/family planning with activities in all six major A.I.D. Population Goals.

The Population Council is a New York-based private organization founded in 1952 "to stimulate, encourage, promote, conduct, and support significant activities in the broad field of population." Its seniority, competence, and commitment to action programs in the developing world combine to make the Council an unusually influential and effective leader in the international population/family planning movement.

Affinities between the Population Council and A.I.D. program interests have been apparent from the inception of Title X programs, and it has been Agency policy to stimulate the growth of the Council and its LDC-oriented programs. Initially, this support was provided on an ad hoc country or regional basis, but currently most A.I.D. assistance is channelled through the worldwide Population Council Programmatic Grant (AID/csd-2897).

The purpose of the project is to support and expand the capabilities of the Population Council, Inc. in the following areas of population/family planning:

1. Maternal and child health based family planning demonstration program (Tab A).
2. Institutional development.
3. Family planning demonstration, research and evaluation and training.
4. Fertility research.
5. Information, education, and communications.
6. Fellowships.

The Population Council program funded in the attached PROP is, for the most part, a package of ongoing or similar activities. Annual sub-grant funding ranges from \$8 thousand (fellowships) to \$200 thousand (institutional development) with most sub-grants in the vicinity of \$50 thousand. A significant exception is a sub-grant in support of a Council project entitled Maternal and Child Health (MCH) - Based Family Planning Demonstration Program. It is discussed in detail in Tab A.

Sub-grants under A.I.D. consideration for the Population Council's Year 1973-74 support are as follows:

	(\$000)				
	<u>Africa</u>	<u>Asia</u>	<u>Latin Am.</u>	<u>Non-Regional</u>	<u>Total</u>
MCH-Based FP (Tab A)		757		400	1,157
Institutional Development	822		500		1,322
FP Demo., Res., & Eval.	30	327	787	128	1,272
Fertility Research	110	159	117	215	601
Information & Education				449	449
Fellowships, Conferences				420	420
Evaluation of Population Council				65	65
Overhead (2% audit + 10% Indirect)				554	554
TOTALS	962	1,243	1,404	2,231	<u>5,840</u>

\$1,100,000 was obligated earlier this fiscal year to complete A.I.D. support for the Council's 1972-73 program. \$585,000 of this amount remains available for application to the Council's 1973-74 program of \$5,840,000, thus requiring an additional obligation this fiscal year of \$5,255,000. With this additional obligation, total FY 1973 obligations for the Population Council will amount to \$6,355,000.

Subsequent obligations are forecast as follows to sustain programs of comparable size:

(millions)

<u>FY 74</u>	<u>FY 75</u>	<u>FY 76</u>	<u>FY 77</u>
5.0	5.3	5.3	5.3

Program composition in those years is expected to resemble the CY 1973 program and may carry forward second or subsequent year funding of specific sub-grants when justified.

ACTION MEMORANDUM FOR THE ADMINISTRATOR

Title X Funds to be made available to the Population Council under this Programmatic Grant plus population funds under one other project will provide about 31% of the Council's annual budget for 1973, estimated at \$18.5- 19 million. It is anticipated that grantee will commence grant activities prior to end of FY 1973, on projects funded in a total amount of approximately \$1.7 million.

The prospect of other donors does not arise in this programmatic grant, since the Population Council does not commingle program funds, preferring to identify each Council project with a specific donor. Non-monetary LDC contributions, particularly in the form of logistical support and access to facilities, are common. In institution building grants the LDC institution contribution usually starts low with annual increases until, after a maximum of five years support by the Population Council, the LDC institution assumes full responsibility. Continuing assistance is not uncommon where specific research projects are supported by the Population Council in the fields of family planning demonstration, research and evaluation and training and fertility research.

Expected results from this Grant are as varied as the sub-grants A.I.D. supports. (Each sub-grant has specific objectives by which to gauge performance). Individually and collectively, LDC capabilities in P/FP are strengthened, insights are gained, and the Population Council becomes a stronger, more skillfully.

As discussed in the PROP an evaluation of the worldwide programmatic grant will be carried out with funds in FY 1973, 1975 and 1977.

The four Regional Bureaus have cleared the PROP. In regard to the MCH/FP demonstration program, the Asia Bureau agrees in principle to A.I.D. support for the sub-grant. As requested, they will have an opportunity to review the project in greater detail prior to a final decision on the scope of A.I.D. funding.

We plan to continue the practice of approving Population Council sub-grant proposals prior to their implementation by the Council. PPC believes the degree of control involved in sub-grant approvals is inconsistent with the proposed policy determination concerning the use of grants. However, we believe that at this time continuation of the subgrant approval procedure is necessary in order to insure that subgrants meet the technical, methodological and other criteria established in the grant; are consistent with A.I.D. Population Program objectives; are fully coordinated with LDC program plans and with the activities of other Title X- assisted organizations.

In view of the need to provide the Population Council with assurance of A.I.D. support for their FY 1974 ~~program~~ activities, we do not think it would be advisable to delay PROP approval and project implementation pending issuance of the draft policy determination. We will keep the grant with Population Council under continuing review and will, at least within 18 months, undertake a comprehensive review to determine whether any changes should be made in the relationship between AID and the Population Council. The results of this review will be communicated to you.

Recommendation: That you sign the attached PROP revision for Population Council

PHA/POP/FPSD:JHarshbarger:nb:5/22/73

Clearance: *PB*  
AA/PPC:Mr. Philip Birnbaum *[Signature]*  
Date *May 30 1973*

PHA/POP:R.T. Ravenholt *KTR by M.F.*  
Director, Office of Population

GC:AZGardiner *AG*  
Date *May 30, 1973*

Proposed MCH-Based Family Planning Demonstration Program

One of the most controversial topics in the Population/Family Planning field is the desirability (or necessity) of maternal/child health (MCH) programs as a means of reducing fertility. Professional opinions range from the sine qua non school, which argues that large scale fertility change can only be achieved in the context of good mother and child health, to the bottomless-pit school, which argues that MCH is prohibitively expensive and that scarce resources must be conserved for direct P/FP programs. Population Council President Bernard Berelson's personal views as of early 1971 are reflected in the study appended as Tab B.

The proposed MCH-based Family Planning Demonstration Program is, in the Council's words, "...designed to test the hypotheses that an integrated MCH-family planning program is a feasible and effective system for delivering family planning education and services in rural areas of developing societies, and that substantial benefits, in terms of improved maternal health and child health and reduced fertility are obtainable at replicable costs." This is a most desirable test, with important implications for Title X resource allocation. Agency study suggests that the proposed program is basically well designed and affords reasonable likelihood of yielding valuable if not conclusive findings, whether or not the hypothesis is sustained. Accordingly, we plan to support this project for immediate implementation.

The program supported by this Bureau calls for the Population Council to undertake an MCH-based P/FP program in Bangladesh. Program highlights:

1. Functional integration of family planning in a rural area with minimal MCH services.
2. MCH/FP services during pregnancy and postpartum periods.
3. Improved health of mothers and children through checkups, immunizations, health education, etc.
4. Provision of a variety of effective contraceptive methods and sterilization (including vasectomies for men).
5. Evaluation designed to answer ten highly pertinent and important questions listed in the Council proposal. Responsive replies should do much to settle debate on the effectiveness, efficiency, and replicability of rural MCH-based family planning programs. Sample question: What levels of acceptance and continued use of family planning are achieved by this program, and what are the characteristics (age, parity, etc.) of the acceptors and continuing users?

The Bangladesh Government has participated in formulating the program proposed by Population Council, and we plan that final A.I.D. approval be predicated upon Bangladesh Government concurrence with the proposed sub-grant.

The Council's time table for the Bangladesh MCH-based family planning program assumes a five-year project life. Data collection is to commence immediately, and some program results are expected in the first and second years, with more detailed and conclusive data to be generated in the last three years.

Sub-grant costs are budgeted as follows:

<u>MCH-Based Family Planning Sub-Grant Budget</u>						
(\$000)						
<u>Category</u>	<u>FY 1973</u>	<u>FY 1974</u>	<u>FY 1975</u>	<u>FY 1976</u>	<u>FY 1977</u>	<u>Total</u>
Core Costs <sup>1/</sup>	400		250	250	250	1,150
Project Development	10					10
Demonstration Project <sup>2/</sup>	757	315	310	315	325	2,022
Total	1,167	315	560	565	575	<u>3,182</u>

<sup>1/</sup>Two years' funding in FY 1973; core costs include New York backstopping of up to five similar projects funded in the field by other donors.

<sup>2/</sup>Two years' funding in FY 1973; excludes \$315,000 construction costs pending full justification.

The Council estimates that Bangladesh will contribute some \$145,000 toward this project during its five-year life.

As indicated earlier, this project (together with similar projects supported by other donors) will test the hypothesis that "...an integrated MCH-family planning program is a feasible and effective system for delivering family planning education and services in rural areas of developing societies..." If it fulfills this promise, we shall know considerably more about reaching this elusive target group than we presently know. A clear positive answer will enable us to advocate and pursue the MCH-based family planning route with confidence, while a negative answer will enable us to channel our resources towards alternative programs. Meanwhile, an action program in Bangladesh will presumably have had beneficial effect on maternal and child health and the promotion of family planning.

Despite current controversy about the MCH approach to family planning, the Population Council proposal has generated relatively little debate in A.I.D. The consensus seems to be that it is high time that the MCH hypothesis be tested objectively and in depth. There is also agreement that we should limit Agency support to a single LDC, rather than two countries as originally suggested by the Council.

An issue to be resolved with the Population Council is that of construction costs. We do not intend to finance this category of expense unless there is clearly no practical alternative. (Life-of-project construction estimate: \$315,000)

A. PROGRAM GOAL

1. Goal Statement

The program goal to which this project contributes is the improvement of the quality of life in developing countries through reduction of fertility rates by developing adequate delivery systems for family planning services.

2. Measurement of Goal Achievements

The achievement of this goal can be effectively determined by demographic measurements and analysis of fertility rates in those countries which have reliable statistical data. Where reliable statistical data are not available, goal achievement must rely principally on actions of national and local leadership in support of programs and policies which have demonstrated positive effects in lowering of fertility rates in other LDCs.

3. Basic Assumptions of Goal Achievements

The important assumptions which are implied with regard to goal achievement are:

- a. The high fertility rates of most LDCs may be more rapidly reduced through the combined efforts of a concerned international community which provide financial and technical assistance to local and national leadership in extending modern technological developments toward reducing family size through action programs, education and research.
- b. Solutions of LDC population problems require indigenous development of soundly conceived social science research, demonstration programs and demographic analysis which enable opinion leaders at all levels make rational decisions of their self-identified need for reduced fertility rates.

B. PROJECT PURPOSE

1. Statement of Purpose

The purpose of this project is to support and expand the capabilities of the Population Council, Inc. in the following areas of population/family planning:

- a. Demonstration maternal and child health programs with integrated family planning services which through careful evaluation will generate information concerning efficiency, effectiveness and replicability throughout the LDCs;
- b. Institutional development which within LDC institutions includes establishment or expansion of departments, centers or institutes which provide research and training in demography, operational statistics, population/family planning policy or FP service-related programs;
- c. Programs and research designed to improve attitudes/practice/acceptance of FP through demonstration, research and evaluation, and training;

- d. Research in factors affecting demography and fertility;
- e. Development and diffusion of information about P/FP through publications, translations, provision of technical assistance, and organizing or assisting P/FP conference, meetings, seminars and workshops; and
- f. Training of a limited number of scholars in fields such as demography, physiology of reproduction, public health, P/FP administration and other areas specifically relating to P/FP.

2. Conditions Expected at the End of the Project

- a. Demonstration programs in LDCs adopted as national programs when evaluation findings indicate their viability and replicability in LDCs.
- b. Departments, centers or institutes established as functioning entities within or as a part of indigenous institutions capable of providing training and research direction in demography, operational statistics, population and family planning and family planning service-related programs.
- c. Improved attitudes/practice/acceptance of family planning at all levels of the LDC society.
- d. A capability in designing and conducting research in factors affecting fertility.
- e. Population and family planning information systems effectively functioning in the Population Council as determined by:
  - Periodic publications provide current information on research on P/FP programs which are widely distributed and quoted from.
- f. A capability in selecting and programming key personnel from the LDCs to study abroad in the broad area of P/FP.

3. Basic Project Assumption

The international prestige which the Population Council has earned in the field of population and family planning makes it uniquely qualified to take a leading role in aiding the LDCs solve their population/family planning problems.

C. PROJECT OUTPUTS

1. Kinds of Outputs

- a. Large scale model program which integrates maternal and child health (MCH) and family planning in a rural area of Bangladesh. Support to the Population Council staff for administration of 4 or 5 additional demonstration projects. This staff will be

2. Output Indicators

- a. Population Council in close collaboration with the Government of Bangladesh will develop an integrated MCH/FP project. The Council provides technical assistance which enables indigenous technical

responsible for coordination of projects, provide information on progress of each program to all project directors, staff and interested persons in LDCs, U.S. and other countries, and provide administrative services as required.

staff to perform major management and technical functions, collect and analyze data, evaluate activities, and provide detailed information on efficiency and effectiveness of project. Council develops innovative approaches for using paramedical and traditional midwives in the delivery of MCH and FP services. All administrative and technical functions will be carried out by indigenous staff by end of project. Techniques developed, training methods used, innovations developed will be incorporated in national MCH/FP programs to the extent replicability has proven possible. The Council administrative and technical staff provides: Coordination of all projects; highly technical analysis and interpretation of raw data collected at project sites; specialized technical services as required; publication and distribution of individual and comparative project studies; and liaison with A.I.D. and other agencies as required.

b. Departments, centers or institutes of demography, operational statistics, population/family planning policy and family planning service-related programs in LDC institutions.

b. LDC institutions supporting established departments, centers or institutes with adequate facilities and the qualified professors required to direct research and provide instruction in various disciplines related to P/FP. Indigenous students enrolled for majors in various fields, or engaged in research which may provide information required to improve P/FP programs. Graduates are being produced who find employment in government or P/FP related programs.

- c. Programs and research concerning attitudes/practice/acceptance of family planning are designed and implemented.
- d. Research studies carried out by either LDC scholars or scholars in U.S. to interpret and/or correlate data which has been gathered in censuses demographic and/or population studies carried out in the LDCs.
- e. Approximately one-third of the costs for the publication and distribution of Studies in Family Planning, Reports on Population and FP, Current Research on P/FP, and selected books and pamphlets. Full funding for French and Spanish translations of most Population Council publications as well as other selected articles, speeches pamphlets and books on P/FP for distribution in Francophone and Spanish speaking countries.
- f. Scholars from LDCs are provided fellowships to institutions abroad to study or carry out research in selected P/FP areas such as demography, physiology of reproduction, public health, P/FP administration and other areas specifically related to P/FP. Training or research usually takes place in Universities or colleges, but may be carried out in public or private institutions with expertise in P/FP field. Studies may be directed toward a higher degree.
- g. Collaborate in, assist or arrange conferences, workshops and seminars in LDCs and Developed Countries in selected area of P/FP for purposes such as discussions/demonstrations latest developments in P/FP research underway or completed, specialized techniques or methods of contraception, social science advancements related to P/FP, P/FP administration, etc.
- c. Results of research are published or made available to program designers, administrators or leaders which may assist in the improvement, innovation or implementation of P/FP programs.
- d. Published results which may provide insights into innovative techniques for P/FP programs and provide decision makers with information needed to interpret statistics, implement projects or plan new programs which effect the quality of life of the LDC.
- e. Studies issued 12 times a year- and their periodicals 6 to 8 times per year. All periodicals sent to approximately 20,000 names in LDCs and Western countries, with expanding distribution anticipated. French and Spanish translations are sent to approximately 5,000 names each in Africa and Asia (French) and Latin America (Spanish) with expansion anticipated.
- f. 20-30 scholars annually complete studies in specialized areas as indicated and return to countries of origin to work in P/FP field either public or private.
- G. Illustrative target groups;  
(1) Top leadership in P/FP field from all nations-  
(2) Administrators from LDCs  
(3) P/FP information and Education Specialist from LDCs.  
(4) P/FP generalists, MCH specialists, nutritionists, social scientists, health educators, sex educators from LDC and developed countries.

D. PROJECT INPUTS

1. Kinds of Inputs

A.I.D.

- a. Funds for subgrant and in-house program support
- b. Advisory services
- c. Project Monitoring
- d. Review and approval of subgrants and in-house programs proposed by Population Council

Grantee

- a. Staff to provide subgrant and in-house program development, research, technical, supervisory, and administrative services.
- b. Workplans developed annually and from which the annual budgets are prepared. Semi-annual project and fiscal reports prepared for A.I.D. review.
- c. Provide leadership to develop, implement and evaluate subgrants

Subgrantee

- a. Facilities and staff required to carry out proposal (service, developmental, research, teaching, medical, paramedical, and administrative)

2. Magnitude of Inputs

- a. About \$5.2 million per annum through FY 77 - On an FY basis from May 1 to the following April 30.
- b. Minor
- c. Project manager in direct liaison with Population Council staff
- d. Staff review time

- a. Approximately 75 professional staff in the major fields of P/FP such as: Medical: OE/CYN, biomedical, Physiology, public health/epidemiology/administration; demography; paramedical, nursing; contraceptive technology; social sciences relating to P/FP; geographers; and generalists having backgrounds such as economics, biological, physical and social sciences, humanities with demonstrated interests and ability to work with people in P/FP. In addition there are sixteen field representatives with professional backgrounds as dictated by the situation.

- b. Staff time as required.
- c. Professionals as needed.

P.C. Budget Year ( May 1 to following April 30) - \$000

Subgrant Activity <sup>a/</sup>	Budget Year 1973-74	Budget Year 1974-75	Budget Year 1975-76	Budget Year 1976-77	Budget Year 1977-78
MCH-Based FP Program					
a. Core	400		250	250	250
b. Bangladesh	767	315	320	320	320
Institutional Development	1,322	1,250	1,250	1,250	1,250
FP Demonstration, Research and Evaluation and Training	1,272	1,300	1,300	1,300	1,300
Fertility Research	601	650	650	650	650
Information, Education and Communications	449	500	500	500	500
Fellowships and Conferences	420	450	450	450	450
Evaluation of Population Council	65		65		65
Overhead (2% Audit and 10% Indirect)	554	540	545	540	545
<b>TOTALS</b> (FY of AID Funding)	<b>5,840</b> (FY 73)	<b>5,005</b> (FY 74)	<b>5,340</b> (FY 75)	<b>5,257</b> (FY 76)	<b>5,340</b> (FY 77)

Status of Funds 4-30-73 (\$000)

I. Funding to Date

Cumulative Obligations \$8,728

(Less) Encumbrances

Sub-Grant and Other  
Program Commitments \$7,455  
Overhead 688 (8,143)

Unencumbered Balance \$ 585

II. Funds Required for Budget Year 1973-74

Sub-Grant Proposals \$5,840

(Less) Unencumbered Balance (585)

Required A.I.D. Contribution \$5,255

III. Application of FY 1973 Funds

Population Council Budget Year

	<u>1972</u>	<u>1973</u>	<u>Total</u>
Obligated 12/20/72	515	585	1,100
Pending	- -	5,255	5,255
<b>Total</b>	<b>\$515</b>	<b>\$5,840</b>	<b>\$6,355</b>

<sup>a/</sup> Amounts for subgrants to begin in grant period shown. New subgrants will be forward funded maximum of two years and continuing subgrants at a

### 3. Basic Input Assumptions

The Population Council has demonstrated its ability to stimulate, encourage, promote, conduct, and support significant activities in the broad field of population/family planning.

A.I.D. and other U.S. Government agencies provide approximately one-third of the funds available to the Population Council and timely obligation of funds by A.I.D. is important.

### E. RATIONALE

1. The Population Council has an impressive record in assisting the leadership of many LDCs to develop population policy, integrate existing MCH facilities and family planning, and through research obtain insights into areas which affect population policies such as politics, social mores, the church, legal restraints, and medical practices. The Population Council can assist the leadership of the LDCs understand the implications of high fertility rates as they apply to the attainment of economic, social, educational and public health goals, and to undertake policies and programs to bring population growth in line with their development objectives.
2. A.I.D. contribution of funds makes it possible for the Population Council to substantially broaden its action programs.
3. The Population Council has an impressive record in assisting institutions of higher learning organize and support departments, centers or institutes where problems of population/family planning can be studied and research programs carried out. The publications which the Population Council has published for many years provide information upon which the leadership of the LDCs may base population policy. Other attributes which make the Population Council a valuable ally in carrying the population/family planning message to the LDCs include:

Stature based upon demonstrated competence in the international P/FP movement;

A broad range of services to the P/FP community, i.e., information and education, fellowships, training, conferences, workshops, seminars;

A private, independent status with freedom from government constraints; and

Ability to provide P/FP assistance where bilateral aid or aid from international bodies may take too long to organize, not have the personnel, or be politically impossible to carry out.

### F. COURSE OF ACTION

The worldwide project started with a programmatic grant to the Population Council in 1968. In December 1972 three regional grants afr-629, asia-08 and la-701 were merged with the programmatic grant into a consolidated project. A large rural maternal and child health-based family planning program is proposed for initiation in Bangladesh in FY 1974 with initial funding planned for FY 1973. Preliminary review of this program indicates that the developmental

study provides sufficient information for approval of the project except for the construction costs which require further review and may be funded in FY 74.

Proposals to be supported under this project are developed by the Population Council staff or consultants in close collaboration or by the implementing agent, reviewed and approved by the Council's Executive Board, and presented to A.I.D. for review and approval. The proposals must have scientific merit, sound technology, fit into A.I.D. strategy goals, and be compatible with A.I.D. activities. Each project proposal must fulfill the requirements of at least one of the following criteria:

1. The activity will test different approaches structured to ascertain the relative efficiency, effectiveness and replicability of an integrated MCH/FP delivery system.
2. The activity will promote the establishment, strengthening or expansion of departments, centers or institutes of institutions servicing population/family planning needs in LDCs for instruction or research in demography, operational statistics, population/family planning policy or FP service-related programs.
3. The activity will be directed toward programs or research designed to improve attitudes/practice/acceptance of family planning through demonstration, research and evaluation, and training.
4. The activity will provide for research in factors affecting demography and fertility.
5. The activity will result in the diffusion of knowledge or exchange of views in a field where such exchange is needed or information has been inadequately diffused.
6. The activity will result in the application of new technology and/or techniques for the presentation and dissemination of knowledge and ideas in the P/FP field.
7. The activity will be directed toward training to meet demonstrated shortage of personnel or to otherwise build specialized manpower competence needed in P/FP.

Proposals for activities will be prepared to include the following information:

1. The title, goals and objectives of the project and the time frame involved;
2. The services, studies and/or activities proposed under the Project, location, and the name of the implementing agent.
3. The budget estimates, personnel, transportation, commodities/equipment and other costs of the grantee or subgrantee; and
4. Inputs from sources other than A.I.D.

Exceptions from the foregoing proposal procedures will be made for:

1. Fellowships or training awards for individuals amounting to not more than \$10,000;
2. In-house subgrants which do not entail travel outside the United States amounting to not more than \$10,000; and
3. Institutional development proposals will follow the guidelines provided in Grant AID/csd-3435 dated May 31, 1972 under Attachment A, Section C.3. and 4.

For proposals under exceptions 1 and 2 above the Population Council will submit descriptions as soon as possible after commitments have been made. If costs for such activities are over \$10,000, the Population Council will submit proposals for review and concurrence.

A.I.D. may from time to time suggest types of studies or activities for possible Population Council support. French or Spanish translations proposed by A.I.D. of P/FP publications, pamphlets or books to be distributed in French or Spanish-speaking countries will be possible where PHA/POP determines the translations are appropriate for LDC distribution. Potential recipients of fellowships or training awards may be suggested by A.I.D. Such individuals will be considered under the same rules that apply to other candidates.

#### G. MANAGEMENT CONSIDERATIONS

An evaluation of the Latin America grant (1a-701) was carried out during the first quarter of FY-73 by Mrs. Anne Tinker, PHA/POP/LA, Felix J. Gruber, M.D., Assistant Professor of Epidemiology, University of North Carolina, Mr. Norman Lawrence, International Statistical Advisor, U. S. Bureau of the Census and AA/LA, Dr. Axel Munidigo, Assistant Professor of Sociology, Rensselaer Polytechnic Institute and Consultant, International Population Program, Cornell University, and Dr. Steven W. Sinding, PHA/POP/PPD. Based upon visits to nine field projects in five countries, the evaluation team's recommendations included: (1) A.I.D. should continue to support the Population Council in carrying out programs to strengthen Latin American institutions contributing to the diffusion of knowledge and understanding in P/FP. (2) A.I.D. waive its one-year funding limitation for future institutional development programs in favor of at least two or three years of assured funding. (3) Because of the importance of paramedical personnel in the FP system the Population Council should promote, give technical support to, and bring population and FP training to schools of midwifery and schools of nursing. (4) The Population Council should give preference to research focused on findings useful for practical ends during the near term, research relevant to policy-makers, and research undertaken by residents of the countries studied. In their submission of proposals for subgrants, the Population Council has implemented many of the recommendations, and will continue to use the recommendations for improving program implementation.

A comprehensive evaluation of the worldwide Population Council Programmatic Grant by a qualified team of consultants or an organization approved by A.I.D. to determine the significance, effectiveness and efficiency of program implementation will be conducted during the period October to December 1973 and a written report requested no later than January 31, 1974.

In order to prevent duplication full coordination will be maintained between PHA/POP and the Africa Bureau on all MCH-based family planning programs (rural health delivery systems) and institutional development programs which are proposed by the Population Council for Africa.