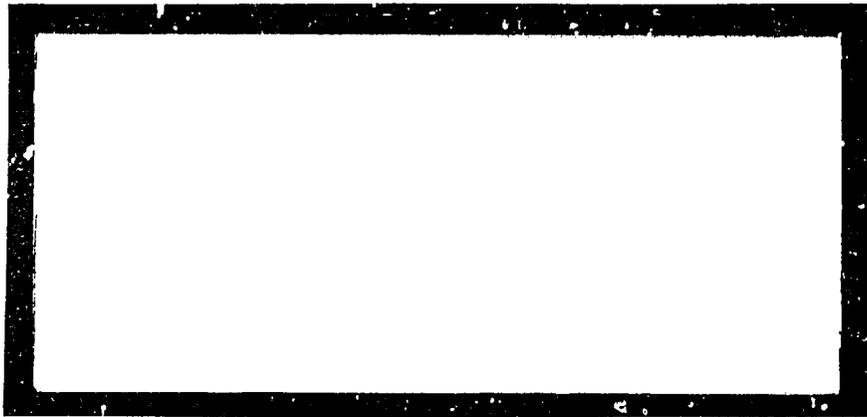


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**A Review of
Colloquium Summary
"International Cooperation in Population
Programs in the 1990s: The U.S. Role"**

**Sponsored by
The Futures Group**

October, 1988

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Colloquium Summary

International Cooperation in Population Programs in the 1990s: The U.S. Role

Sponsored by
The Futures Group

Report by
John Stover

OVERVIEW

This paper discusses the ways USAID is currently assisting modern family planning methods. Historical experiences are examined given the demographic changes (a decline in mortality in LDCs), socioeconomic changes (improvements in education, health, and the status of women), and policy changes (consensus among LDC governments that there is a need for population planning).

Furthermore, changes within the U.S. approach, both good and bad, are examined in light of the lessons learned. No radical change in the U.S. approach was recommended, but the ability of LDCs to strengthen their own capacity and do it efficiently will become increasingly important goals. There was also sentiment expressed that population planning should take on an operational policy focus.

HIGHLIGHTS

Topic #1: What have been the historical goals upon which USAID has operated, and what lessons have we learned from the experiences?

Issue #1: What were the goals that caused USAID to be the single largest donor for population services in the past?

1. To enhance the freedom of choice to choose the number of babies.
2. To improve health and survival of mother and child.
3. To encourage population growth consistent with economic growth.

Issue #2: What has changed recently?

1. Decreasing budgets combined with an unclear position. This was exemplified by the hazy U.S. position portrayed at the International Conference on Population in 1984.

Issue #3: What lessons have we learned from these past experiences?

- Recommendations:
1. Policy development is essential.
 2. Fertility and contraceptive prevalence surveys are essential.
 3. Improved methods lead to greater safety, effectiveness and acceptability in LDCs.

4. Pilot and experimental programs are critical to acceptability.
5. National family planning programs are critical to the availability and delivery of services.
6. The private sector offers an effective channel for delivery.
7. Monitoring and evaluation systems are critical to sustained success.
8. Bipartisan support makes funding easier.

DRAFT

INTERNATIONAL COOPERATION IN
POPULATION PROGRAMS IN THE 1990s:

THE U.S. ROLE

Policy Proposals from
the Task Force on Population Policy

to the
Michigan State University Conference

Cooperation for International Development

East Lansing, Michigan
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ACKNOWLEDGEMENT

This paper has drawn ideas and suggestions from a large number of people interested in the U.S. program for international population assistance. The final responsibility for the views expressed here rests with the author. However, important contributions have come from several sources that deserve mention.

A special colloquium on this topic was held in Washington, D.C. on April 12, 1988. This colloquium was devoted to a discussion of the role of U.S. population assistance in the 1990s and suggestions for improving this program. Many of the recommendations in this paper were discussed at that colloquium. A list of people participating in the colloquium is given at the end of this section.

The Population Task Force of the Blueprint for the Environment Project discussed the recommendations in this paper on several occasions. These discussions had a major influence on the final set of recommendations presented here. The Task Force on Population is composed of Patricia Baldi, John Dumm, Hugo Hoogenboom and Joe Speidel.

Finally, a number of papers prepared on this and related topics served as key input to this paper as well. Four of these papers were presented at the April 12th colloquium. They are:

"Twenty Years of A.I.D.'s Experience in Population", by John Dumm, Deputy Director for Population, U.S. Agency for International Development.

"Foreign Assistance in the 1990s and the Role of Population", by Patricia Baldi, Director of Population Programs, National Audubon Society.

"U.S. Population Assistance in the 1990s", by Hugo Hoogenboom, Association for Voluntary Surgical Contraception.

"Resource Needs for Population and Family Planning Activities in Less Developed Countries", by J. J. Speidel, Population Crisis Committee.

Two other papers that provided useful ideas for this effort were:

Lindsey Grant, "A Population Focus for U.S. Aid", The NPG Forum, June 1987.

Harry E. Cross, "A.I.D.'s Population Assistance and the Policy Development Process: Twenty Years of Change", presented at the 1988 Annual Meeting of the Population Association of America, New Orleans, April 23, 1988.

Participants in the Colloquium on
U.S. International Population Assistance
in the 1990s

April 12, 1988
Washington, D.C.

Convened by
The Futures Group

Ms. Patricia Baldi, National Audubon Society
Ambassador Richard E. Benedick, The Conservation Foundation
Dr. George Brown, Population Council
Dr. Rodolfo Bulatao, World Bank
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Mr. Philander Claxton, World Population Society
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I. THE IMPORTANCE OF POPULATION ASSISTANCE

Today about 120 million couples in developing countries excluding China are using modern family planning methods. By 2000 this figure is expected to more than triple to 390 million. Although the developing countries are doing more and more to provide family planning services, they can not do it all alone. International donors, particularly A.I.D., play a key role. Given the tremendous growth in demand that is occurring in developing countries, they will need to do even more in the future. A.I.D. has been a leader in international population assistance since the mid-1960s. It plays a unique role through such activities as:

- supporting contraceptive research;
- supporting data collection and research efforts that have increased our understanding of demand for family planning and the consequences of population growth and high fertility;
- supporting policy development efforts by developing countries;
- providing funds and commodities for new family planning programs;
- developing innovative approaches to family planning delivery;
- providing on-the-spot personnel to coordinate population activities;
- developing programs to involve the private sector in providing family planning services; and
- supporting a network of private voluntary organizations and private research firms that provide responsive, specialized services to developing country programs.

Population programs are a key part of the U.S. development assistance program for several reasons. Perhaps most important is the fact that population programs help couples take control of their own lives by providing them with the information and services necessary to choose voluntarily the number and timing of their births.

Effective population programs also have a number of beneficial effects on the broader goals of social and economic development. Among the most important effects are:

- The health of mothers and children. When a family has a large number of births the health of the mother and children are affected adversely. Early pregnancies and close birth spacing are related to high infant mortality and high maternal morbidity and mortality. Research has shown that significant health benefits result from delaying the time of the first birth to beyond the age of 20 and spacing births at least 2 years apart. About 20 percent of infant deaths in developing countries could be avoided if all couples spaced their births at least two years apart.

-Cost of public services. The costs of many public services, such as health and education, are directly related to the number people they serve. As the population needing these services grows rapidly it becomes more and more difficult to both improve the level of services and provide for the expanding number of people needing services. This is especially true for education. Some countries have not been able to achieve universal primary education because of the large number of school age children and others have achieved this goal only by allocating extremely large portions of their budgets to education. A reduction in population growth rates would allow a country to provide quality education for a larger portion of its school age population.

-Underemployment. Unemployment and underemployment result from too many people and too few productive jobs. Rapid population growth is not the only cause of underemployment but many developing country economies are hard pressed to provide productive employment for the large number of young people entering labor force age each year. These large numbers are the result of high birth rates that occurred 15 years ago. A reduction in birth rates today would begin to relieve some of the pressure on new job creation shortly after the year 2000.

-Destruction of the environment. Rapid population growth is contributing to environmental destruction in developing countries in serious way. When the demand for farmland exceeds the supply farmers move onto land unsuited for farming. The result is the destruction of forests and severe erosion. Expanded and intensified grazing in fragile areas, such as the Sahel, contributes to desertification. Deforestation, resulting from high demand for fuelwood among rapidly expanding populations, also leads to erosion and the destruction of land and coastal resources. Although population is only one factor affecting environmental degradation, it is an important one because it affects all aspects of environment: arable land, forests, water, air quality, coastal resources and flora and fauna. A reduction in population growth rates is a necessity to the goal of achieving sustainable development.

During the 1960s and much of the 1970s the debate about population programs centered around whether family planning or development was most important. Today there is consensus that it is important to have both. For the 1990s the key question is not "Are population programs important?" or "Should countries have population policies?" but "How will we meet the demand for family planning services that is emerging?" A.I.D. has a key role to play in this effort to meet these needs.

II. THE HISTORICAL EXPERIENCE OF U.S. POPULATION ASSISTANCE

Major international assistance in population programs began in the mid-1960s. Since that time there has been a dramatic change in perceptions about population programs and in use of family planning services.

The most important changes have taken place in 5 areas: demography, socioeconomic development, population policy, technology and information.

The key demographic changes during the past thirty years include a dramatic decline in mortality in the developing world, particularly in Asia and Latin America. By 1960 mortality levels in these regions were approaching those of the industrialized countries. Fertility decline started much later. Large reductions in fertility (over 55 percent) have taken place in East Asia from 1960 to 1980. A similar but smaller decline occurred in South Asia and Latin America. In Africa significant decline has not yet started, in fact several countries experienced increasing fertility during much of this period.

Socioeconomic development has also been dramatic in many countries. Improvements in education, health and women's status have helped to raise the standard of living of much of the developing world and has produced conditions conducive to fertility decline. The use of modern methods of contraception has increased rapidly in many countries. Impressive increases have been recorded in such countries as Brazil, Colombia, Mexico, Indonesia, Thailand and Zimbabwe. In Africa, however, and a few countries in Asia and Latin America, the use of modern contraception still remains extremely low. One of the major effects of the increase in the use of modern contraceptives among couples in developing countries has been reduced use of abortion as a birth control method of last resort. Previously many abortions resulted from a lack of family planning services and information that prevented couples from achieving their desired family size and birth spacing.

Perhaps the most striking change since 1965 has been in the policy area. In 1965 only 15 countries (14 of them in Asia) had policies favoring lower population growth. By 1974, the time of the World Population Conference at Bucharest, this figure had increased to 31 countries. A growing number of countries, particularly in Latin America, had realized the importance of population programs. However, there was still a wide diversity of opinions about the role of population programs in development. Today, the number of countries favoring lower population growth rates has jumped to 64. This includes 27 countries in Africa. There is a clear consensus among developing country governments that effective population programs are an integral part of social and economic development programs.

There have also been important improvements in contraceptive technology during this period. The safety, effectiveness and acceptability of such methods as the pill, the IUD and surgical procedures have improved. The result is a wider range of effective choices for couples making it easier for them to select a method appropriate to their family situation.

Finally there have been important improvements in information about population. Through data collection and research efforts we now have a much better understanding of fertility levels and trends in developing countries and the consequences of high fertility and rapid population growth. In addition we now have relatively good information on fertility intentions and knowledge and attitudes about family planning among couples in most developing countries.

A.I.D. has played a key role in population and family planning programs during this period. It was one of the first donors to start providing assistance in the mid-1960s. The objectives of this assistance have been:

- to enhance the freedom of individuals in developing countries to choose voluntarily the number and spacing of their children;

- to improve the health and survival of mothers and children by promoting adequate birth spacing and childbearing during the safest years for women, and by reducing abortions;

- to encourage population growth consistent with the growth of economic resources and productivity.

Although A.I.D.'s population assistance has been only a very small part of its total assistance program, it has been the largest single donor for population, providing over \$1 billion since 1965. During this period A.I.D. has been a clear leader in the population field. Among the key contributions of A.I.D. to the population effort are:

- Data collection. A.I.D. has been the major force behind the census and survey efforts that have collected the data required to understand the current demographic structure in developing countries and the knowledge, attitudes and practice of family planning by couples in developing countries. This has played a key role in helping countries understand the family planning desires of their people and importance of population in development.

- One-the-spot expertise. A.I.D.'s population program is implemented by a worldwide network of health and population officers backed up by a core staff of technical experts in Washington. The technical expertise of A.I.D.'s staff and its continuing presence in the field has been essential to the effective development and implementation of population programs. This staff has played a key support role for population programs of other donors as well.

-Focus on family planning. Although data collection and research are important to population programs, the delivery of family planning services is the ultimate goal. A.I.D. has been a leader in this field, devoting a larger portion of its budget to family planning services than any other major donor.

-Critical mass of expertise. A.I.D. has supported a number of organizations involved in the population field. These include government organizations, private voluntary organizations, universities and private research organizations. This support has created a critical mass of individual and institutional expertise that is able to provide a wide range of expertise in a responsive, timely manner.

-Leadership. A.I.D. has provided clear leadership in the population field to governments and international organizations. This leadership has resulted from a number of factors including: A.I.D.'s early entrance into population assistance, its provision of a major portion of population funding, the technical quality of its staff, its large expert field staff, its support for contraceptive research and its innovative approaches to population programs.

In these and other areas A.I.D. makes a unique contribution to population assistance that is not provided by any other donor. It continues to seek ways to improve its performance by developing innovative programs. Among the new efforts that have been undertaken recently are programs to improve effective use of contraceptives, programs to help countries improve their own capabilities to implement their population programs and programs to enlarge the participation of the private sector in providing family planning services.

The record of achievements has not been uniformly smooth during this period. There have been new directions and changes in emphasis as the program has evolved. Recently, there have been changes that have begun to erode the effectiveness of A.I.D.'s contribution to population assistance. The position of the U.S. delegation to the International Conference on Population in Mexico City in 1984 left many developing countries wondering what the U.S. policy was. The cessation of funds for UNFPA and IPPF has reduced the influence and respect that the U.S. has traditionally had in those and other organizations. The recent cuts in the population budget (from \$288 million in 1985 to \$223 million in 1987) have hurt A.I.D.'s effectiveness in responding to important requests for assistance from developing countries. The current budget is \$50-\$100 million below the level required.

During the last 20 years there have been a number of lessons learned that are relevant for any discussion of A.I.D.'s future role in population assistance. Among the key lessons are:

- Policy development efforts have been critical in fostering government and private sector support for population and family planning programs.

- Fertility and contraceptive prevalence surveys have been essential for documenting the need for family planning and the success of service delivery efforts.

- Improved contraceptive methods have greatly enhanced the safety, effectiveness and acceptability of methods in developing countries.

- Pilot and experimental programs are critical to demonstrate that family planning services are wanted and that they can be delivered efficiently in a variety of settings.

- National family planning programs have been instrumental in increasing the availability of contraceptive services in a number of developing countries.

- The private sector can be an effective channel for initiating programs and for expanding access to family planning.

- Support for contraceptive procurement has been a critical element in service delivery programs.

- Monitoring and evaluation systems are a critical component of effective service delivery.

- Bipartisan support from Congress for population assistance has ensured that resources were available to carry out a major assistance effort.

III. RECOMMENDATIONS FOR POPULATION ASSISTANCE IN THE 1990s

As we approach the 1990s it is important to consider the implications of past experience and changing future conditions for A.I.D.'s future role in population assistance. A.I.D. needs to continue and improve those activities that have led to past successes and to search for new activities that will be appropriate in the changing conditions of the 1990s.

In general A.I.D. has been quite successful in providing population assistance, therefore we do not propose a radical change in the way population assistance is conducted. A.I.D. has been the most effective actor in population assistance and should continue to build on these past successes.

There are a number of changes that need to be made, however. Most of these recommendations involve a renewed emphasis on activities that have received less priority in recent years. Other recommendations are associated with new actions that need to be undertaken to address the conditions of the 1990s. Several of these recommendations are derived from pilot activities that A.I.D. has implemented in the last few years. These recommendations and the associated actions that are necessary to implement them are grouped according to two major categories: (1) Actions Necessary to Re-Emphasize Past Activities that Contributed to A.I.D.'s success and (2) New Directions:

ACTIONS NECESSARY TO RE-EMPHASIS PAST ACTIVITIES THAT CONTRIBUTED TO A.I.D.'S SUCCESS

RECOMMENDATION: CONTINUED COMMITMENT TO PROVIDING ON-THE-SPOT EXPERTISE

One of A.I.D.'s major strengths in the past has been its ability to provide on-the-spot expertise. This has allowed A.I.D. to respond more rapidly to host government requests, to manage its population projects effectively, to participate effectively in the conceptualization and identification of population projects and to help in coordinating its own population projects as well as those of PVOs and other donors. The availability of well trained population officers in the field has made a major contribution to a number of country programs including Thailand, Mexico, Philippines, Egypt, India, Bangladesh and Kenya.

In order to continue this successful approach two activities are necessary.

Action: Recruit a new generation of highly motivated and qualified staff

One of A.I.D.'s strengths has been the high quality and commitment of its field staff. Many of the population officers of the 1960s and 1970s have moved on to other responsibilities. A.I.D. needs to make a concerted effort to recruit a new generation of qualified staff that will guide A.I.D.'s population assistance activities in the 1990s.

Action: Maintain the system of population officers in key countries.

There is no substitute for the effective population officer in the field. A number of suggestions for restructuring U.S. foreign assistance would reduce dependence on local mission personnel to help conceive and implement A.I.D.'s programs. This would definitely be a mistake for population assistance, especially in those countries that are in the early phases of their population programs. One of A.I.D.'s unique contributions to international population assistance has been its qualified field staff. Maintaining the system of qualified population officers in the field will be crucial to A.I.D.'s effectiveness in the 1990s.

RECOMMENDATION: EMPHASIS ON A FUNCTIONAL ORGANIZATION
RATHER THAN GEOGRAPHIC

The population program has benefited from the strong functional focus provided by the Office of Population. It has proven to be an effective vehicle for providing high quality technical assistance.

Action: The technical focus provided by the Office of Population should be maintained and strengthened.

A.I.D.'s population program has been one of its most successful efforts in development assistance. The strong focus provided by the Office of Population has been key to this success. This role needs to be continued. There should be no weakening of the role of the Office of Population. In fact, consideration should be given to the possibility that much of A.I.D.'s work could be carried out better if it were organized in functional bureaus. A Population and Health Bureau could increase the effectiveness of the population program even more.

Action: A.I.D. needs to maintain maximum flexibility in providing population assistance. It should maintain a mix of strong central and strong bilateral programs.

A.I.D. needs to maintain the flexibility to respond to country needs and conditions in the most appropriate fashion. This often involves the use of central funds in the early stages

of population activity in a country to support activity by PVOs and private research organizations. As the program develops and becomes less controversial a stronger emphasis on bilateral assistance and private sector involvement is often appropriate.

RECOMMENDATION: CREATE A SPECIAL ASSISTANT TO THE SECRETARY
OF STATE FOR POPULATION

The responsibility for population matters within the State Department rests with the Office of the Coordinator of Population Affairs within the Bureau of Oceans and International Environmental and Scientific Affairs. According its the goals and objectives statement the objectives of this Office are to: (1) Coordinate the development of U.S. international population policy and ensure that full consideration is given to foreign policy objectives in its implementation; and (2) Maintain the Department's relations and interchange on population matters with the UN, other international organizations, foreign governments, private agencies and foundations, and Congress.

In spite of this mandate, the importance of the Office has been declining in recent years. The Office has often been cut out of communications between the White House and A.I.D. on important matters. Serious consideration has been given to abolishing the Office.

The Coordinator of Population does have a useful role to play and should be maintained and strengthened. This position is important for providing advice to the Secretary on U.S. population policy, including the political consequences of population growth in other countries. It should be responsible for population policy and coordination.

In order to carry out this function it is important that the Coordinator report directly to the Secretary of State. The position should be within the Secretary's Office as it was when it was first established. This would strengthen the position and allow the Coordinator to deal directly with the regional Assistant Secretaries. The Coordinator should also receive responsibility to coordinate population matters with the Policy Planning Staff.

RECOMMENDATION: A.I.D. SHOULD MAKE A COMMITMENT REGAIN ITS
CLEAR LEADERSHIP IN INTERNATIONAL POPULATION
ASSISTANCE

Throughout most of the past 20 years A.I.D. has been the clear leader in the international population assistance effort. However, that position has eroded in recent years for three reasons: a policy enunciated at the International Population Conference in Mexico City in 1984 that is at odds with the views of most of the developing world, reduced funding levels for population assistance, and the cessation of funds for UNFPA and IPPF.

In much of the developing world there is a change from rhetoric to action in the population field. The 1990s will be a critical time for population programs. The U.S. has a unique contribution to make to this effort. It should regain the clear leadership to ensure that the efforts of the 1990s are productive and efficient.

Several actions are necessary in order to regain this leadership.

Action: Resume funding for UNFPA and IPPF.

The U.S. has lost much of its influence with UNFPA by ceasing its contributions. It is true that the UNFPA is not as effective as we would like it to be. (This issue is addressed further later in this chapter). However, it does provide a vehicle for activities that the U.S. cannot or does not want to carry out. It can work in countries where we do not have A.I.D. programs. It also provides a useful international forum for legitimizing many aspects of the population debate through its international conferences and publications.

The UNFPA and IPPF are major actors in the population field. A.I.D. should resume funding to them in order to ensure their continued activities. They serve as major multilateral vehicles for population funding that should not be ignored or lost. Funding these organizations will help the U.S. regain its clear leadership role in this field.

The renewed funding of UNFPA and IPPF should take place. However, it should be done carefully, involving a full review of the levels of funding that will be most appropriate.

Action: Make a clear statement of the goals and framework for U.S. population policy assistance.

U.S. leadership in international population assistance in the past was aided by a clear understanding of the rest of the development community of the goals and programs of the U.S. population assistance program. Since 1984, however, that message has been unclear and often contradictory. It is important for the U.S. to renew its commitment to providing population assistance as an integral part of its efforts to help developing countries achieve their development goals. The statement should make it clear that the U.S. considers population programs to be of crucial importance to development and that its aim is to help developing countries meet the demand of their citizens for family planning services.

Action: Increase funding levels.

The decline in funding for U.S. population assistance has seriously hurt the U.S. program. While some of this shortfall has been compensated for by other donors, much of it has not. Several important programs have been severely cut or eliminated entirely (such as long-term training) and the U.S. influence and prestige has been hurt by the decline in its funding levels. Furthermore, there has been a serious decline in areas of special U.S. advantage. Increased funding levels are required both to meet the challenge of increasing demand for family planning services (discussed more fully in the next chapter) and in order for the U.S. to regain the clear leadership in this field. The current demand for A.I.D. population assistance from developing countries indicates that A.I.D. should immediately increase its funding to \$300-\$320 million dollars per year.

RECOMMENDATION: A.I.D. SHOULD CONTINUE ITS FOCUS ON FAMILY PLANNING ACTIVITIES

Action: A.I.D. should continue to allocate the major portion of its funds to family planning services.

A.I.D. has spent almost 75 percent of its funds on activities directly related to family planning since 1965. These activities include training, commodities, motivational information and recurrent budget support for services. This is a higher percentage than any other international donor or agency. This focus on services has played a key role in A.I.D.'s effectiveness and should continue.

Action: A.I.D. should continue its efforts to improve the quality of family planning services.

A.I.D. has also played an important role in improving the quality of family planning services that are available in developing countries. Current research is demonstrating that the quality of services is key to program success. A.I.D. should continue its activities to improve the quality of services through continued focus on contraceptive safety and effectiveness, free and informed choice, expanded access, and field worker training to improve the client-provider interaction.

RECOMMENDATION: CONTINUE SUPPORT FOR DATA COLLECTION AND RESEARCH ON THE CONSEQUENCES AND CAUSES OF RAPID POPULATION GROWTH

Action: Continue data collection and research efforts but with a greater emphasis on operational issues.

A.I.D. has led the data collection and research efforts that have increased our understanding of the importance of population programs to national development and the desire for family planning services among Third World couples. This increased understanding has been key to the widespread adoption of population policies and programs among developing countries in the last 15 years. This effort should definitely continue in the 1990s with a greater emphasis on data collection and research that improves our understanding of how to implement successful programs to achieve the goals of these policies.

NEW DIRECTIONS

The 1990s will be different from the 1970s and 1980s in several important aspects. First, the intellectual basis for population programs is now well established. Although there remains disagreement about specific population development interactions it is generally accepted that population programs are important to maternal and child health, help reduce the growth of expenditures required for social services and can be cost effective. Second, there is a large unmet need that exists today. Population assistance needs to react to this demand for services rather than develop activities designed to stimulate demand. Third, it is clear that the developing countries themselves will determine the success or failure of population efforts in their countries.

These new conditions lead to the need for new ways of operating in the future. In many cases A.I.D. already has been moving in new directions in response to these trends. Many of these efforts need to become an integral part of the effort in the future.

RECOMMENDATION: MAKE A GREATER EFFORT TO BUILD DEVELOPING COUNTRY CAPACITY TO CONDUCT THEIR POPULATION PROGRAMS THEMSELVES

Family planning programs have succeeded most in countries where the policies, resources and commitment have come from the countries themselves. Examples include China, Taiwan, Korea, Columbia, Thailand, Indonesia, and Mexico. Recently a number of new countries have shown the desire to take control of their programs in a similar fashion, including Nigeria, Ecuador, Zaire, Liberia, Sudan and others. It will be important for U.S. population assistance to be structured so that it can make a maximum contribution to the capability of developing countries to

implement their own programs.

In addition to developing the capability to manage programs locally, it is important to help new programs get started. A new focus toward building local capability should not preclude the provision of financial assistance for new programs. However, these programs should be structured toward the idea of eventual sustainability.

Action: Increase long term training programs for population-related social scientists, biomedical scientists and health scientists.

Much of the intellectual leadership in developing country population programs, particularly in Asia, comes from people who received long term training under earlier A.I.D. programs. Many of these programs were cut back due to budget constraints. Long term training programs need to be increased in order to ensure that well qualified professional will be available in developing countries to carry out the population programs of the 1990s.

Action: Support the development of population-related research capacity in developing country universities and government organizations.

This is necessary in order to develop local capacity to to train additional people required to refine policies and to implement and evaluate programs.

Action: Encourage cooperation between developing countries in sharing experiences and information.

As developing countries take more responsibility for their own programs they are developing experience and expertise that can be very valuable to other countries. A.I.D. should look for new ways to encourage the sharing of information and experiences between these countries. One of the initiatives that has proven very useful in Africa has been the use of observational travel to allow officials from countries such as Senegal and Sudan to learn from the experiences of other African countries such as Nigeria and Zaire.

RECOMMENDATION: IMPROVE THE EFFICIENCY OF POPULATION ASSISTANCE

Since U.S. population assistance has been declining in recent years at the same time that demand for services has been increasing, the per capita availability of funds has dropped substantially. A.I.D. has been searching for ways to improve the effectiveness of the funds that are available. There is a clear need for local governments and the private sector to take a

greater share of financial responsibility. At the same time it will be important for donors to develop programs to improve efficiency, stimulate private sector involvement and assist governments in structural changes that may be required to achieve long term sustainability. Efforts also need to be made to ensure that the focus on high quality service is not lost in the effort to improve efficiency.

A.I.D. has begun several initiatives in this area recently. The most promising activities are those that act catalytically to stimulate new programs and relieve bottlenecks. Among the new efforts that need to be emphasized are:

Action: Concentrate on pilot projects and new directions which can stimulate new investments.

Action: Give particular focus to stimulating private sector involvement in the delivery of family planning services.

A.I.D.'s initiatives in contraceptive social marketing (through the SOMARC and other contracts) and in stimulating private enterprise investment (through the TIPPS and ENTERPRISE contracts) have proven to be highly effective.

Action: Focus on long-term sustainability.

This issue has recently received much attention at A.I.D. It involves the careful consideration of all aspects of programs that affect long-term sustainability. This includes cost recovery techniques such as user fees, incentives for private sector involvement, new contraceptive technologies, operations research to determine the most efficient approaches and new partnerships between the public and private sector.

Some aspects of family planning programs will not be self-sustaining in the foreseeable future, such as services for the poorest segments of the population. For those programs that need to provide free or highly subsidized services it is important to strive for increased efficiency through, for example, improved management and logistics training.

Action: Address the issue of local manufacture of contraceptives.

Developing country programs are largely dependent on a few U.S. and European companies for their contraceptives. This makes them vulnerable to supply disruptions and large price increases, both of which could be damaging to local programs. It has been suggested that A.I.D. should encourage local manufacturing of contraceptives as a way to reduce this dependency and reduce costs. This is a complex topic that involves a number of other important issues such as A.I.D.'s role vis-a-vis U.S. manufacturers, the siting of regional contraceptive production facilities, quality control and others. This issue is important enough that A.I.D. should undertake a special review of the

factors benefits and drawbacks in order to develop a clear policy on this issue.

Action: Stimulate support for contraceptive research by other donors and the private sector.

A.I.D. has been a major funder of research on new and improved contraceptive technology. The major pharmaceutical companies and other donors have contributed very little to this field. Continued research is important to increasing the range of choices available to couples and improving the effectiveness and safety of available methods. A.I.D. should search for ways to stimulate other donors and the private sector to share these costs by investing in contraceptive research.

RECOMMENDATION: WORK TO IMPROVE THE ACTIVITIES OF UNFPA AND THE WORLD BANK

With a renewed commitment to population assistance and a resumption of clear leadership in this area the U.S. will be in position to strive for improvements in the activities of international organizations, particularly the UNFPA and the World Bank.

Action: Support recent UNFPA efforts to decentralize its operations and recruit a qualified, professional field staff.

The UNFPA has provided an important role through its international conferences and publications in legitimizing population activities. However, it has not been as effective in delivering competent advice or effective programs in the field. Recently, the UNFPA has begun to make changes to improve its performance. The U.S. should strongly support these efforts.

Action: Encourage the World Bank to focus more effort on policy change and improvement of its population projects.

The World Bank plays an important role in policy dialogue in many developing countries. It can exert a great amount of leverage to encourage policy change that is important to effective development. Until recently it has not used this leverage for population policy change. Recently, however, it has begun to use this leverage and it can be quite effective. Senegal is the best example. The World Bank should be encouraged to use this leverage more to promote positive population policy change.

The World Bank also provides loans for population projects. Often, however, these loans include a population component in a larger health project that includes hospital or clinic construction. This approach has not been effective in providing funds for family planning services. The Bank needs to be

encouraged to be more flexible in the types of projects it supports and in providing a larger component of low interest loans and grants in its population projects.

RECOMMENDATION: THE FOCUS OF POLICY ACTIVITIES SHOULD SHIFT
TO OPERATIONAL POLICIES

A.I.D. has successfully provided assistance to developing country governments in the formulation of population policies. This activity will need to continue in the future. However, meeting the increasing needs for family planning services in the future will require new resources and more efficient delivery systems. In order to assist developing country governments in implementing their new population policies A.I.D. needs to provide assistance and training in policy implementation.

Action: More resources should be devoted to activities and research which assists governments in the implementation of population policies.

This includes expanding data collection efforts to include information useful to operationalizing policies and conducting more research on the effectiveness and efficiency of delivery channels and integrated approaches.

IV. FINANCING POPULATION ASSISTANCE IN THE 1990S

Approximately \$3.0-\$3.5 billion are now being spent on population and family planning activities in developing countries. Of this total about \$ 1 billion is being spent by China. About \$1.5 billion is spent for public programs by other developing countries. The private sector accounts for \$400-\$800 million. The remaining \$550 million is provided by donors, of which A.I.D. contributes about \$220 million.

These expenditures for population and family planning activities include support for direct family planning services as well as demographic data collection, research, evaluation, training and information dissemination. In addition, many population activities are integrated with other development activities, such as maternal and child health programs.

The amount spent on family population and family planning activities has been increasing worldwide as the number of users in developing countries increases. Funds from international donors have increased in real terms from \$198 million in 1975 to \$246 million in 1987 (in constant 1975 dollars). Since the increase in the number of people using contraception has been considerably larger than the increase in funds from international donors, there has been a decrease in per capita funding by international donors. A.I.D.'s contribution has declined in real terms during this period from \$110 million in 1975 to \$223 million in 1987 (in constant 1975 dollars).

As we look to the future it is clear that the rapid increase in the number of people using contraception will require a similar increase in funding for population and family planning services. The number of people needing family planning services during the 1990s can be estimated from current needs and future trends and goals in contraceptive use in developing countries.

In 1987 there were 5 billion people in the world. About 3.8 billion people live in the developing world. If we assume that China will pay for its population program from internal sources, then we can concentrate on the rest of the developing world, with a total population of about 2.8 billion. This population contains about 460 million sexually active women between the ages 15 and 49. About 27 percent, or 124 million are currently using some form of effective contraception.

The total fertility rate (the average number of children born per woman) in the developing world (excluding China) is about 4.7 . It is about 6.2 in Africa, 3.7 in Latin America and 4.0 in Asia excluding China. The United Nations low population projections for these regions assume that the total fertility rate will decline by 2000 to 4.9 in Africa, 2.5 in Latin America and 2.8 in Asia. Given the recent expansion of interest in population programs in Africa it is likely that the decline in Africa could be even more rapid, possibly to 4.5 by 2000. This is

roughly in accord with the goals of many African nations with population programs that are setting targets of a total fertility rate of 4.0 by 2000.

In order to achieve these fertility declines the percentage of married women using contraception would have to increase from 14 percent to 35 percent in Africa, from 54 percent to 66 percent in Latin America and from 33 percent to 61 percent in Asia. Given the increases in the number of married women between the ages of 15 and 49 in these regions, the total number of couples needing effective family planning services would increase from about 124 million today to 390 million by 2000.

The cost of providing a couple with family planning services for one year varies from less than \$10 to over \$50, depending on the country and the type of delivery program and method. The average is about \$20 per couple per year. A.I.D. and others have been striving to improve the efficiency of population programs. It is possible that this figure can be reduced in the future. However costs are typically higher at the beginning of a program. Given the number of new programs that will be starting in Africa during the 1990s it may be difficult to achieve a large decline in the average cost per user. Perhaps it can decline to about \$17 per couple per year by 2000. At this rate the total funding requirement for population and family planning activities in the developing world, excluding China, would reach about \$6.6 billion by 2000.

Of the approximately \$2.1 billion spent on population programs today roughly half comes from local sources, one-quarter from international donors and one-quarter from private sources. A.I.D. is providing about 40 percent of the international donor contribution (or about 10 percent of all funding).

In the 1990s we certainly expect that funding from local sources will increase. In fact, A.I.D. should continue to expand programs to stimulate local funding. However, given a tripling in demand for services by 2000, it would be a major achievement if this sector can maintain its share of total funding. The private sector should be stimulated to increase its participation in population activities. This could lead to an increase in the share of the private sector. Other donors have been increasing their funding levels as well, as evidenced by the fact that A.I.D.'s share of donor funding has declined from 55 percent in 1975 to 40 percent today. The should be encouraged to contribute even more in the future. However, A.I.D. population assistance plays a unique role as described in the earlier chapters. As the leader in international population assistance the A.I.D. role should not diminish too much.

The share of funding coming from the private sector should increase in the futures as innovative programs to involve the private sector are applied more widely. Perhaps, this can increase the private sector share to 35 percent by 2000. Local governments will be hard pressed to increase their funding much

above the 50 percent level achieved today. That leaves 15 percent, or about \$1.0 billion for international donors.

A.I.D. should contribute 45 to 50 percent of this amount. This means an annual contribution of about \$500 million by 2000. A.I.D. should increase its funding to \$300 million immediately, to meet the needs that exist today. Then levels should gradually increase after that as demand for services builds. In order to reach the level of \$500 million by 2000 would require a 4.3 percent annual growth rate in real terms.

We are presently putting only about 1.4 percent of our foreign aid budget into population. We are putting more than twice that into El Salvador and Honduras, four times that into the Philippines, eight times that into Pakistan and over thirty times that much into the Middle East. If the foreign aid budget were to increase only as fast as GNP between now and the year 2000 and if the annual growth in GNP averaged 2.5 percent, then the recommended level of funding for population would increase the population share of the budget only to 2.3 percent by 2000. This is a small increase given the tremendous importance of population to increasing the welfare of couples in developing countries and the contribution population programs make to decreasing the costs of other development programs.