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***Overview of A.I.D.
Population Assistance to Africa***

August 1991

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A.I.D. Assistance to Africa

The U.S. Agency for International Development (A.I.D.) has provided population assistance to developing countries since 1965. In fiscal year (FY) 1990, A.I.D. spent almost \$281 million on population assistance activities worldwide. One-third of that assistance was provided to countries in Sub-Saharan and North Africa.

The first part of this report provides an overview of the policy objectives and organization of A.I.D.'s population assistance to Africa as well as of current funding levels. Descriptions of individual population assistance projects managed by A.I.D. Missions, the Bureaus for Africa and the Near East, and the Office of Population are included in Appendices A and B.

Policy Objectives

Support for voluntary family planning programs is an essential part of U.S. development assistance. A.I.D.'s population assistance program is based on the premise that high population growth rates inhibit economic development. Family planning programs provide one of the most cost-effective means of reducing fertility levels and, thus, lowering growth rates in developing countries. A.I.D. also provides family planning assistance because it enhances individual freedom to choose voluntarily the number and spacing of children and provides critically important health benefits for mothers and children.

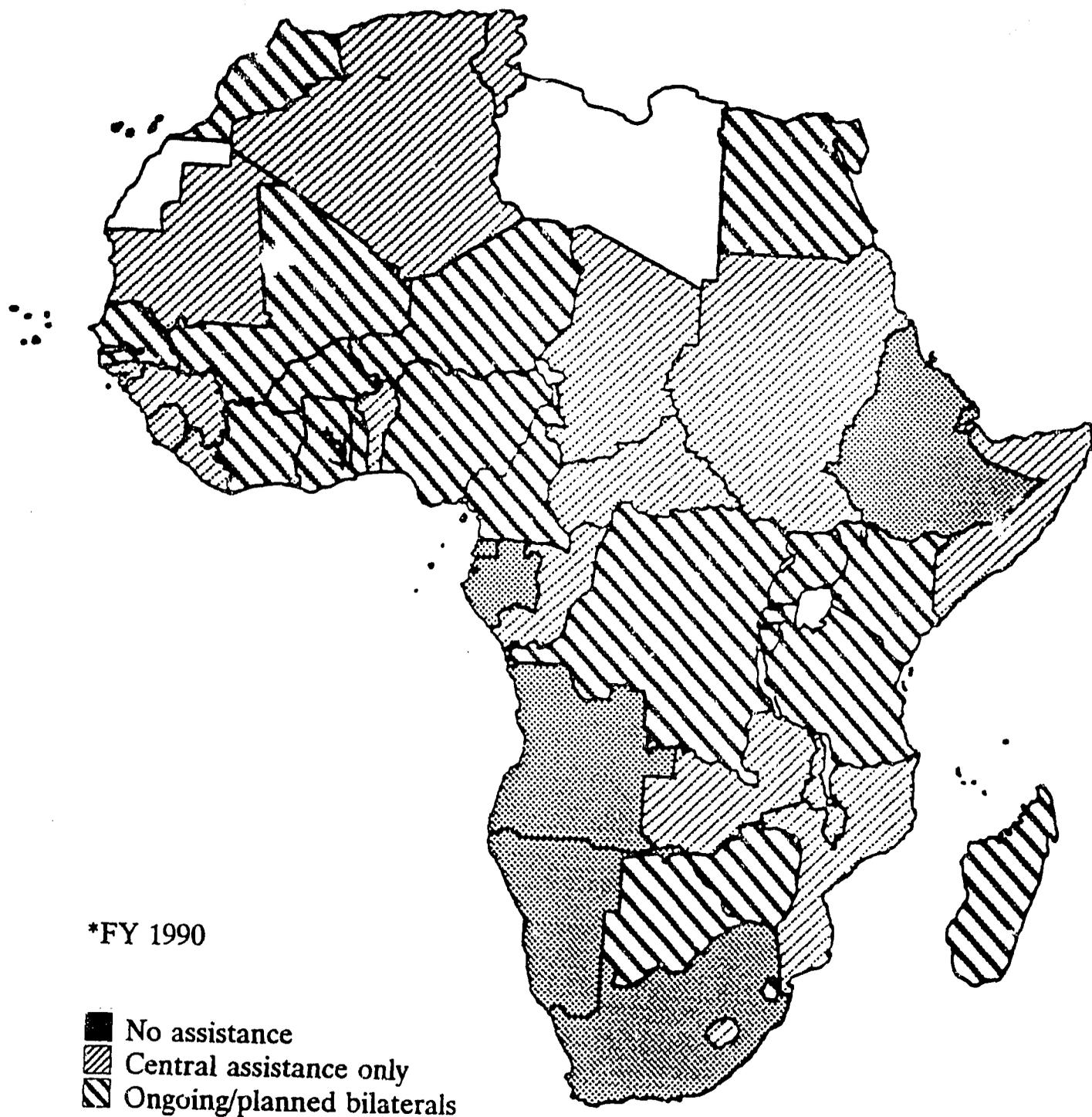
Organization of Assistance

A.I.D. population assistance to Africa is provided primarily through bilateral (direct country-to-country) programs managed by A.I.D. Missions in host countries and through centrally funded projects managed by the Office of Population. Regional projects administered by the Bureaus for Africa and the Near East also provide support for Sub-Saharan African countries and North African countries, respectively.

In FY 1990, A.I.D. assisted a total of 42 countries in Africa. Bilateral population programs were in place or planned in 19 countries, 17 in Sub-Saharan Africa and 2 in North Africa. The majority of the bilateral programs in Sub-Saharan Africa were established during the past decade; only four Sub-Saharan African countries had bilateral projects in 1980.

A.I.D. population assistance projects managed by the Office of Population are designed to complement bilateral population assistance and to provide support for family planning in African countries where there are no bilateral programs. The Office of Population project portfolio emphasizes service delivery activities and contraceptive procurement. Other areas for which support is provided include training; information, education and communication (IEC);

African Countries Receiving A.I.D. Population Assistance*



management development; policy development; and four broad areas of research: demographic, social science, operations and biomedical.

To provide assistance in these areas, the Office of Population has developed over 40 contracts or grant agreements with U.S.-based organizations--universities, private voluntary organizations and private firms. These Cooperating Agencies collaborate with both public and private sector institutions in African countries. A number of these agencies have provided assistance to family planning programs in African countries over a considerable period of time, and some have one or more field offices in the region.

Bilateral and regional programs providing population assistance to African countries are described further in Appendix A. Office of Population projects which support activities in Africa are described further in Appendix B.

Funding Levels

Sub-Saharan Africa

Sub-Saharan Africa received the largest share of A.I.D. population expenditures in FY 1990. FY 1990 population project assistance to Sub-Saharan Africa totaled over \$70 million. Support for in-country activities was provided to 36 countries, including:

Botswana	Guinea-Bissau	Rwanda
Burkina Faso	Kenya	Senegal
Burundi	Lesotho	Sierra Leone
Cameroon	Liberia	Somalia
Cape Verde	Madagascar	Sudan
Central African Rep.	Malawi	Swaziland
Chad	Mali	Tanzania
Congo	Mauritania	Togo
Côte d'Ivoire	Mauritius	Uganda
Gambia	Mozambique	Zaire
Ghana	Niger	Zambia
Guinea	Nigeria	Zimbabwe

In two other Sub-Saharan African countries, Benin and the Seychelles, A.I.D. provided only population information.

North Africa

A.I.D. provides population assistance to four countries in North Africa--Algeria, Egypt, Morocco and Tunisia. During FY 1990, population assistance to these North African countries totaled \$22.2 million.

Appendix A

Bilateral/Regional Population Assistance to Africa

Sub-Saharan African Bilateral Population Projects

Botswana

Population Sector Program Assistance. The purpose of this five-year project, approved in May 1988 for \$5 million, is to assist the Government of Botswana (GOB) to improve its population policies and to increase the efficiency of its family planning programs. A review of Botswana's population sector has revealed that significant progress by the GOB in achieving its goal of reduced population growth rates is unlikely to succeed unless policy, institutional and structural constraints are removed.

Through this project, A.I.D. and the GOB are collaborating to strengthen population programs and services through seven program objectives which will alleviate constraints inhibiting GOB efforts to reduce the rate of population growth. General targets include: (1) supporting GOB efforts to develop a national population policy; (2) improving coordination among GOB institutions dealing with population programs; (3) improving the contraceptive logistics system; (4) expanding the information, education and communication (IEC) services; (5) improving the delivery and management of maternal and child health/family planning (MCH/FP) services; (6) increasing the number of trained staff for population programs, and increasing GOB financing in the population sector, particularly for contraceptive procurement; and (7) expanding participation of nongovernmental organizations (NGO) and the private sector in population programs.

The sector grant has two components. The budget support component will distribute \$3.0 million as cash grants to the GOB; the technical assistance and training component will provide \$2.0 million for upgrading technical skills and training required by the GOB to meet program objectives. The project completion date is May 1993.

Burkina Faso

Family Planning Support. The purpose of this \$2.7 million project which began in 1986 is to strengthen the institutional capacity of the Burkina Ministry of Health and Social Action (MOHSA) to develop and execute improved programs for family planning information and services. The project is being implemented by the Directorates of Family Promotion and Family Health of the MOHSA. This project is a Phase I effort to assist the Government of Burkina

Faso to develop a strong public sector foundation from which to expand nationwide an integrated maternal and child health/family planning information and service program.

Family Health and Health Financing. This seven-year project was developed for obligation in FY 1990. The purpose of the project is to expand the availability of maternal and child health and family planning services; introduce health cost recovery mechanisms into the primary health care system in order to improve the quality of health services; strengthen the planning capacity of the Ministry of Health and Social Action. The project is structured as an umbrella project with three discrete subprojects, permitting greater programming flexibility and simplifying design requirements. Linkages among the subprojects will be established.

The **Health Care Financing** subproject's purpose is to improve the functioning of primary health care by instituting community-based cost recovery mechanisms. It will use a U.S. Private Voluntary Organization (PVO) to assist provincial health directorates and community health committees in five provinces to set up and manage revolving-fund drug stores; install other cost recovery mechanisms such as fees for laboratory tests; improve health care services using the revenues generated; and upgrade the skills of the health workers. The subproject will provide technical assistance, training and start-up supplies of essential drugs.

The **Maternal Child Health/Family Planning** subproject's purpose is to maximize maternal and child health by instituting improved programs of family planning, diarrheal disease control and nutrition. It will provide technical assistance and training through centrally-funded projects to expand on-going family planning activities in 15 provinces; and diarrheal disease control and nutrition activities in 10 of these provinces. Major activities include training, service delivery, IEC, and operations and quantitative research.

The purpose of the third subproject, **Health Planning**, is to complete the process of institutionalizing health planning functions within the MOHSA. It will continue financial assistance to the Directorate of Planning and Studies (DPS) to enable it to produce important planning documents and annual reports; coordinate health activities in the country; and support the health information system.

By the end of the project, the MOHSA will have improved service delivery, management, supervisory and information systems; better trained personnel; and the population will have greater access to primary health care services of improved quality.

Burundi

Population. This project began in August 1988 to assist the Government in expanding the availability and use of family planning information and services in order to reduce the high rate of population growth. The project is supportive of the Government of Burundi's officially-stated population policy. Its goal is to increase the contraceptive prevalence rate from 1.5 percent in 1988 to approximately 8 percent by 1993. The project focusses on strengthening the

ability of the Ministry of Health to improve and expand its capacity to provide family planning training, information, education, communication and contraceptive services. It will also analyze alternative methods for contraceptive distribution and will provide limited support for the 1990 national census as it relates to Burundi's population policy. The Pathfinder Fund is the implementing agency for this project. The project will be completed by September 1993. The total A.I.D. project cost is \$4.5 million.

Cameroon

Family Planning Support. The proposed family planning project will be a six-year \$6 million activity, to be funded in FY 1991, with the following major components: in-service and management training; commodity and contraceptive procurement; management system support in the area of logistics, supervision, and information collection; IEC; operations research; and development of medical protocols and quality of care standards. The project will have a significant private sector focus targeting parastatals, religious, and for-profit large companies, as major suppliers of family planning information and services. Finally, the project will expand the A.I.D.-supported condom social marketing program.

Côte d'Ivoire

Health and Population. The purpose of this project is to improve and expand the delivery of services in family planning, HIV/AIDS prevention, and maternal and child health/family planning in both the public and private sectors, thereby reducing the fertility rate and HIV/AIDS transmission and increasing maternal and child survival. The planned first year obligation of funds is FY 1991. It is proposed that 50 percent will be allocated for HIV/AIDS and 25 percent for MCH. The total proposed A.I.D. contribution for the five-year life of the project is \$19 million. Implementation will be carried out through the Ministry of Health, the private family planning association (AIBEF), the National AIDS Committee and other public and private sector institutions interested in the control of HIV/AIDS, and the private commercial sector (for contraceptive social marketing).

Ghana

Family Planning and Health. The purpose of the proposed project is to increase the use of and demand for family planning through expanding the public and private sector capacity for providing family planning and maternal/child health services, supplies and information, and to assist the National AIDS Control Program. The six-year \$32 million program will provide \$13 million in non-project assistance and \$22 million in project assistance.

Through the non-project assistance component, the Government of Ghana will be provided a cash grant over three years, tied to the successful implementation of specific policy

and regulatory reforms. These are: (1) the creation of a national population authority to develop a national population and family planning implementation plan and to spearhead the national effort; and (2) the reform of regulations to broaden the categories of family planning and MCH services and supplies (contraceptives, oral rehydration salts (ORS) and malaria treatment) which can be provided by government and private health care providers.

The project component will support activities to improve the capability and increase the capacity of health care providers to deliver family planning and MCH services, education and supplies. It will finance inputs to build on the strengths of the existing A.I.D. Contraceptive Supply project, in both the public and private sectors. In the public sector, it will continue to supply needed contraceptives, building in mechanisms designed to lead ultimately to financial sustainability; continue to provide assistance to training of traditional birth attendants as rural-based family planning and maternal and child health suppliers; continue to provide assistance to the MOH's Health Education Division to implement provision of long-term methods such as voluntary surgical contraception, IUDs and Norplant^R. It will integrate HIV/AIDS activities into these programs and will provide support to the establishment of HIV/AIDS diagnostic and information management systems.

In the private sector, the project will continue contraceptive supply, building cost recovery mechanisms which will lead towards reasonable profits to sustain a sales network; expand the private distribution network for contraceptives, oral rehydration salts and chloroquine; strengthen the social marketing component to effectively reach all areas of the country; and continue assistance to nongovernmental organizations (NGO) already active in family planning, such as the Ghana Registered Midwives Association, and recruit and assist other NGOs to become effective providers of information, goods and services. HIV/AIDS information and commodities will be provided.

Contraceptive Supplies. This \$7 million project was authorized in September 1985 and will continue through June 30, 1992. The overall purpose of the project is to increase the voluntary use of safe, effective and appropriate contraceptive methods by Ghanaian couples. Its goal is to lower the rate of population growth and improve maternal and child health. The achievement of project objectives depends on three major components: (1) provision of accurate family planning information and education for the childbearing Ghanaian population in order to reduce the gap between family planning knowledge and practice; (2) sound training in family planning theory and delivery skills for service providers; and (3) proper distribution of family planning commodities throughout Ghana. The project is supplemented by \$4 million in centrally funded activities.

Kenya

Private Sector Family Planning. This 10-year project, funded for \$8.4 million in August 1983, was designed to increase the institutional capacity of private sector organizations to carry out sustainable programs for the delivery of family planning and related maternal child health

services. This project will increase the range of options available to potential female and male users of natural and other family planning services. Under this project, family planning service delivery will be added to or improved in selected health care facilities sponsored by religious groups, private enterprises (factories and plantations) which employ significant numbers of men and women and provide basic health care to employees and their families, health facilities which are already supported on a fee paying basis (such as those provided by county councils) and national private and voluntary organizations whose support for women's group development activities includes community-based distribution of contraceptives.

Family Planning Services and Support. This project was authorized in August 1983, for \$46.2 million and will continue through September 1992. The project's purpose is to increase user rates of quality family planning methods. This project has two major thrusts--to expand family planning service delivery and to improve national family planning support activities. The clinical element will provide clinical training for personnel from the public and private sectors, under the direction and coordination of the Ministry of Health (MOH). The non-clinical element will support the expansion of community based services by engaging systems of community leaders and volunteers, coordinated by the Ministry of Health under the guidance and approval of the National Council for Population and Development (NCPD).

The strong commercial retail structure in Kenya will also be engaged at the community level through a program coordinated by the NCPD. Support activities will concentrate on improved policy, planning, communications, evaluation and reporting efforts, coordinated by the NCPD with strengthened authority.

The project has several components, including: (1) **Clinical Training and Support Services**, the purpose of which is to expand and improve the delivery of family planning services through both government and non-government hospitals and clinics (funded for \$9.9 million); (2) **Voluntary Surgical Contraception**, the purpose of which is to expand the availability of voluntary surgical contraception (VSC) services in Kenya (funded for \$7.8 million); (3) **Community-Based Services**, the purpose of which is to increase the awareness of the benefits of modern methods of preventive health, encourage use of modern family planning methods, and make family planning supplies and services conveniently available (funded for \$8.8 million); (4) **Subsidized Commercial Marketing**, the purpose of which is to increase knowledge and use of non-clinical contraceptives by making them accessible to consumers through selected local retail outlets at affordable prices (funded for \$3.7 million); (5) **Ovulation Awareness**, the purpose of which is to promote periodical abstinence for persons for whom other family planning methods are unacceptable (funded for \$.8 million); (6) **National Council for Population and Development (NCPD) Administrative Support**, the purpose of which is to strengthen the operational effectiveness of the NCPD (funded for \$.8 million); (7) **NCPD Policy Planning and Evaluation**, the purpose of which is to support demographic, social science, and contraceptive research on policy and program issues as well as project and program evaluation (funded for \$2.8 million); (8) **NCPD Information and Communication**, the purpose of which is to increase the demand for family planning by using a blend of selected mass media and interpersonal channels to reach target audiences with service-related messages (funded for \$3.8 million); and

(9) MCH Information and Planning Systems (IPS), the purpose of which is to strengthen the collection, analysis and use of information required by communities and decision makers for planning, implementing and evaluating the delivery of health and family planning services (funded for \$4.2 million).

CORAT Child Survival and Family Planning. This project, obligated in FY 1987, is a \$1.2 million grant to the Christian Organizations Research Advisory Trust (CORAT). In response to serious health and population concerns within Kenya, the Ministry of Health has instituted an integrated rural health/family planning program focussing on community-based health care (CBHC), with emphasis on child survival interventions. The MOH plans to utilize both public and private institutions (including NGOs and churches) to deliver CBHC services to local communities. The project is aimed at expanding health care and family planning services to many needy communities in rural Kenya, enabling members of the target communities to take responsibility for caring for and improving their own health.

The grant will enable CORAT to: (1) continue the activities of two on-going community based health care/family planning subprojects and begin two new subprojects which will focus on (a) identifying and training village health committees; (b) selecting and training community health workers; (c) supervising and retraining health workers; (d) providing information and education to families on vital aspects of family health; (e) providing immunization services through staff supervisors; (2) provide oversight and technical/management assistance to the subprojects in management and health planning areas; (3) conduct management workshops for subproject managers; and (4) conduct impact evaluations through community surveys.

It will also promote better information about and more effective local, regional and central planning and budgeting for primary health and family planning activities by the public and NGO sectors. This seven-year grant will total \$42.9 million and will continue through 1992.

Madagascar

Population Sector Institutional Development. This proposed \$6 million project will capitalize upon the opportunities presented by the adoption of the new policy for increased collaboration in population planning and expanded service delivery. It will consolidate successful ongoing activities to improve management and coordination, as well as support new initiatives in implementing the new national population policy in the following areas: (1) support for reorganization and strengthening of ministerial departments charged with implementing the population policy; (2) assistance to Malagasy private and voluntary organizations (PVOs), including the national organization, FISA (Happy Family), to carry out information, education, and communication programs and to expand family planning services delivery; (3) support for private enterprises and health services organizations to develop or expand provision of family planning services or sales of contraceptives; and, (4) support for improved population data collection and analysis for long-term planning.

Mali

Health Initiatives, Policy and Services. The purpose of this proposed project will be to improve the efficiency and effectiveness of the Government of the Republic of Mali's (GOM) health delivery services in the five regions of the country. The total funding will be \$10 million.

The project will employ a combination of project and program assistance to effect reforms on national health and population policies, community level primary health care activities, and population support activities. A.I.D. will support this effort by providing short-term and long-term pharmaceutical drug reform; finance personnel training, supervision and assignments policy at the arrondissement level; develop management information systems to address reporting of statistics; support immunization campaigns; and promote community level primary health care interventions.

In the area of population, the project will support the social marketing of contraceptives; the staffing of the family planning association (AMPPF) at both the national and central levels; upgrading training and the provision of family planning services in various hospitals; contraceptives procurement; and major information, education and communication campaign.

Integrated Family Health Services. This project began in FY 1986 to assist the Maternal and Child Health/Family Planning Program to strengthen and integrate services in 15 MCH/FP complexes in Bamako and a selected area and to assist the private family planning agency in upgrading its services. Activities include improvement of service delivery by integrating nutrition, vaccination, oral rehydration and voluntary family planning activities; upgrading of information, education and communication activities for health and family planning; and conducting special studies on selected topics. The project completion date is July 1992. The total project cost is \$8 million.

Niger

Family Health and Demography. This five-year project is an \$11 million project which commenced in FY 1988. The project's purpose is to strengthen the capacity of Nigerien institutions to plan, support and monitor family health services on a national basis, and to produce and use demographic analyses for national planning. The goal of the project is to assist the Government of Niger in its efforts to achieve a rate of population growth consistent with its economic resources and productivity. It will improve that capacity of the Ministry of Public Health and Social Affairs to deliver family health services and implement an effective national family health program. For the purpose of this project, family health includes family planning, treatment of sexually transmitted diseases and surveillance of high risk pregnancies. The project will also build the capacity of the Ministry of Plan to conduct demographic research and analysis and will make a major contribution to the demographic data base for Niger.

The project has two major components: the Family Health Component and the Demographic Research and Analysis Component. The **Family Health Component** will extend family health services to up to 146 public health facilities and will test private sector and "mixed" approaches to family health service delivery using pharmaceutical outlets and village health teams. Areas of A.I.D. assistance will include constituency development, training, IEC, contraceptive supply and logistics management, management development and operations research.

The **Demographic Research Component** will include assistance in the processing and analysis of the 1988 census data, a national demographic and health survey, long and short term training in demography and documentation and dissemination of demographic data.

Nigeria

Family Health Services. The purpose of this \$67 million project is to assist Nigeria to formulate and achieve family planning objectives appropriate to its circumstances. This project, authorized in FY 1987, seeks to increase the acceptability and availability of integrated family planning services in both the public and private sectors throughout Nigeria. It supports the rapid expansion of family planning through the coordinated activities of four key functional areas: (1) private sector service delivery to develop, refine, implement and expand large-scale, private sector networks which provide family planning and other basic services through a variety of commercial, work place and community outlets, and private maternity homes and medical facilities; (2) public sector service delivery to strengthen management systems and service delivery capacities in order to provide clinic-based services in all levels of government facilities, from large teaching hospitals to basic village dispensaries with initial programming in capital cities and other model primary health care/local government areas (LGAs); (3) information, education and communication to enhance the acceptability of smaller family norms and family planning as well as to provide information on available family planning options and services; and (4) policy implementation to strengthen the process of policy implementation and strategic planning for efficient mobilization of an effective and self-sustaining national family planning program.

Through the provision of technical assistance, training and commodity support, mutually reinforcing activities under these four components have been carefully coordinated to comprise an integrated Nigerian family planning project. By the end of this five-year project, it is expected that there will be a broad political and social constituency supportive of family planning policies and programs.

Rwanda

Maternal Child Health/Family Planning II (MCH/FP II). This five-year, \$9 million follow-on project to MCH/FP I commenced in FY 1988 and will continue through FY 1993.

Its purpose is to expand and improve the delivery and use of family planning information and services in Rwanda through both the public and private sectors. The goal of this project will be to reduce the fertility rate in Rwanda. The direct beneficiaries of the project will be those men and women who obtain information and access to modern family planning (FP) methods. By the end of the project, it is expected that: (a) 80 percent of men and women aged 15-45 will have gained information about and access to modern methods; (b) a decrease in the desired family size to 4.0 or less; (c) improved GOR capacity to develop/implement FP policies; (d) improved GOR capacity to plan, implement, and evaluate FP programs; (e) assist the GOR in revising its policies and operational guidelines that encourage family planning; (f) involvement of the private sector in providing family planning information and services; and (g) increased support of the Government of Rwanda's activities and policy changes which impact on increased contraceptive use.

Senegal

Family Health and Population. This seven-year \$20.6 million project, which commenced in FY 1985, is designed to enable the public and private sectors to carry out an effective nationwide family planning program and to provide the demographic survey and analytic capability required to inform policy makers of the impact of rapid population growth. Activities include expansion of the current public sector clinic-based programs carried out by the Ministry of Health and the Ministry of Social Development; expansion of family planning/family health services in the private non-governmental sector; improvement of the country's demographic data base so that more effective development planning can take place; and assistance in increasing the awareness of the relationship between rapid population growth and development. This project finances training, technical assistance, advisory services, commodities and other costs.

Swaziland

Family Health Services. This \$2.4 million project was initially obligated in July 1988 and will continue through July 1993. The project's purpose is to increase the prevalence of modern contraception and practice of child spacing. The project focuses on stimulating demand for family planning services and expanding their availability. The project also supports education and dialogue with leaders regarding population issues.

Tanzania

Family Planning Services Support. The goal of Tanzania's proposed six-year \$20 million Family Planning Services Support project is to improve the health and well-being of mothers and children by enhancing the opportunities for individuals and couples to choose the number and spacing of their children. The project purpose is to increase contraceptive prevalence rates from 5 to 12-14 percent by the end of the project. These achievements require the strengthening of

family planning institutions to carry out programs for the delivery of quality family planning services.

Project activities will emphasize improved and expanded service delivery; the development of an information base; and the consolidation of demand for services. Primary project emphasis will be placed on strengthening the institutional capacity of the MOH, UMATI and other institutions through the development of basic management systems and technical abilities on logistics, training, IEC, monitoring and evaluation.

The project will assist the Government of Tanzania in significantly increasing the contraceptive prevalence rate. The project anticipates five major accomplishments: 1) that 80 percent of all government health units will be staffed by trained personnel and stocked with adequate supplies of contraceptives and informational materials, and will be able to demonstrate an increase in service utilization and reduction in client drop-out rates; 2) a contraceptive logistics and management information system will be in place to monitor supply to all family planning service sites in the country; 3) information on utilization rates, contraceptive inventories and client drop-outs will be available and utilized by service providers, supervisors and program managers for client follow-up, program planning and monitoring, and the results of baseline and subsequent Demographic and Health Surveys will provide information to measure program impact; 4) knowledge of and favorable attitudes toward modern family planning methods by both women and men will have increased significantly; and 5) the number of people utilizing voluntary surgical contraception will have increased through greater awareness of this option and through increases in the number of sites offering this service.

Togo

Child Survival. The proposed \$12 million project will build and expand upon the successful experiences of the existing bilateral Health Sector Support for Child Survival project and the two regional projects, Combatting Childhood Communicable Diseases and Family Health Initiatives. The new project will aim at reducing child mortality while attempting to address Togo's rapid population growth.

Uganda

Expanded Family Health Services. This \$7.5 million project is designed to slow the rate of Uganda's population growth. The project seeks to strengthen both governmental and non-governmental institutions in order to formulate and implement sound, rational, family planning policies and programs. The five major project components are: (a) population policy development; (b) research and analysis; (c) commodity supply and logistics; (d) training; and (e) information, education and communication.

Zaire

Family Planning Services. This grant provides \$10 million to assist the Government of Zaire (GOZ) in coordinating and expanding family planning services. The project's purpose is to increase contraceptive use in 16 urban areas from approximately 1-3 percent of couples of fertile age to 7-10 percent. The project aims to strengthen and expand efforts to include family planning in on-going MCH programs and increase effective access to family planning information and services in 16 major cities. The areas of emphasis are policy development, program management, information and education, service delivery, training, supervision, and supply management and logistics. The ultimate objective of project assistance will be the integration of family planning services and related activities into the existing government health system.

Zimbabwe

Family Planning. The project is to increase access to and use of a wider selection of family planning methods delivered through a sustainable system that includes an expanded role for the private sector and reduced costs per user born by the government. The project was authorized at a grant level of \$15.7 million in A.I.D.'s bilateral and central funds to be obligated over a six-year life of project (1990-1995). Approximately \$5.2 million will be made available in counterpart funds by the Government of Zimbabwe, over the life of project, bringing total project financial resources to an estimated \$20.9 million.

The project has three components for channeling resources to family planning activities planned for achieving the project purpose. The first will diversify the available mix of contraceptive methods. The second will promote the role of the for-profit sector in the delivery and financing of family planning services. These two components will both contribute to sustainability by reducing costs per contraceptive user as well as the government's burden in service provision. A third component will support private sector coordination activities and measures to enhance the total system's continued sustainability and eventual self-reliance. The project's strategy for achieving a more diversified method mix is to support: (a) promotional efforts to increase awareness and knowledge of both the providers and potential users of longer-term methods; and (b) training, service delivery, evaluation and research and provision of contraceptive commodities.

Africa Bureau Population Projects

Program Development and Support (PD&S). To enable A.I.D. Missions and the Africa Bureau to obtain short-term technical expertise and the goods and services needed to develop and design projects and to undertake studies and analyses on which to base program strategies and project designs. More specifically, this project finances (1) special analyses related to development of sector and country program strategies; (2) feasibility studies; (3) project development and design activities; (4) assessments of the environmental and social impact of proposed activities; (5) evaluation of project activities; and (6) analyses and research related to specific problems affecting development efforts. The project on occasion also finances selective technical assistance in priority development areas of particular interest to A.I.D. where such assistance cannot be closely identified with ongoing projects.

Family Health Initiatives II (FHI II). The Family Health Initiatives II project is an eight-year \$35.5 million regional project designed to support a full range of population sector activities in Sub-Saharan Africa. The FHI II project, like its predecessor FHI I, is an umbrella project developed for flexibility and speed in meeting population/family planning needs in Africa beyond the scope of bilaterals, or in countries without bilateral population projects.

The purpose of the project is to assist Sub-Saharan African countries to formulate and implement population and family planning activities in ways compatible with their cultures, resources and development objectives. Specific subprojects finance activities relating to population and health which: (1) promote policy dialogue and policy development in support of family planning and inform potential family planning users of available services and family planning options; (2) provide training opportunities to ensure that essential program-related skills are available to plan, manage, implement and evaluate population/family planning programs; (3) develop, strengthen and/or expand family planning information and service delivery systems to address unmet needs for services; and (4) collect and provide accurate demographic and health data in support of policy development, research and evaluations of family planning operations.

There are currently 86 subprojects underway in Africa. Additionally, core funds have been made available to fund U.S. Census Bureau and American College of Nurse Midwives activities.

Africa Public Health and Development Support. This proposed 10-year project will strengthen A.I.D.'s capacity to provide regional and country-level analysis and strategic planning and guidance in the health, population and nutrition sector in Africa. The project will serve as the Africa Bureau's main mechanism for assessing and supporting sectoral strategies and investments and generating policy advice to senior management and program guidance for field Missions.

North African Bilateral Population Projects

Arab Republic of Egypt

Population/Family Planning II (POP/FP II). A.I.D.'s bilateral population program in the Arab Republic of Egypt is one of the Agency's largest, valued at approximately \$90 million. POP/FP II, which is funded through 1993, supports a broad scope of activities including: strengthened public sector family planning services; a network of sustainable quasi-private sector family planning clinics that place high emphasis on providing quality services; a social marketing program; a range of community-based distribution activities; training for private medical practitioners in family planning; the introduction of family planning services into urban polyclinics; and a family life education program. The program also provides extensive support for the National Population Council in institution building and for population planning activities.

POP/FP II will be succeeded by a \$90 million successor project, the funding for which is expected to be authorized in fiscal year 1992. The new project, Population/Family Planning III, will emphasize high level policy dialogue directed at improving the service environment for family planning and will aim to improve the effectiveness of contraceptive use.

Morocco

Population and Family Planning Support. Since the 1970s, A.I.D. has provided assistance to the Government of Morocco to plan, implement and evaluate cost-effective population and child survival programs. As result of this assistance, the Ministry of Public Health has developed an extensive family planning and child survival outreach program, has increased accessibility to fixed health facilities, has improved training and management capabilities, and has utilized research for program planning and development.

Health Care Financing. In a new project, A.I.D. will support innovative financing of health services and the expansion of the private health sector. The new health care financing project, scheduled for authorization in FY 1992, will: create a policy and regulatory environment conducive to the expansion of diversified health markets; expand private sector involvement in the delivery of health services; and target local financing of health services.

Appendix B

Office of Population Assistance to Africa

Family Planning Services Projects

Family Planning Services, Pathfinder International (PF)

Cooperating Agency: Pathfinder International

Duration: June 1985 - September 1993

This project introduces voluntary family planning services, information, and training to governments and private organizations in developing countries and makes existing family planning service systems more effective in both public and private sectors. Activities include community-based distribution programs, professional and para-professional training projects, institutional development efforts, commodity and logistics support, and youth programs.

Pathfinder has a long history of involvement in family planning service delivery in African countries. The organization has regional offices in Kenya, Togo and Egypt and is currently providing support for 23 subprojects throughout Africa.

Family Planning Service Expansion and Technical Support (SEATS)

Cooperating Agency: John Snow, Inc.

Duration: July 1989 - July 1994

The purpose of the SEATS project is to expand the development of, access to, and use of quality family planning services in currently underserved populations and to ensure that unmet demand for these services is addressed through the provision of appropriate financial, technical, and human resources.

The project has established regional offices in Togo and Zimbabwe. It is planned that SEATS will support family planning service delivery activities in over 20 countries in Sub-Saharan and North Africa.

Population and Family Planning Expansion Project (CARE)

Cooperating Agency: CARE

Duration: May 1991 - May 1996

This project is directed at expanding family planning services to rural populations in low prevalence areas of Sub-Saharan Africa and other regions. It seeks to add family planning to ongoing rural development, primary health care, and small business activities in CARE's worldwide, multi-sector portfolio.

CARE currently focusing on the development of family planning in four African countries.

Association for Voluntary Surgical Contraception Program (AVSC)

Cooperating Agency: Association for Voluntary Surgical Contraception (AVSC)

Duration: August 1988 - August 1993

The objectives of this project include making high quality voluntary surgical contraceptive (VSC) services available as an integral part of developing country health and family planning programs. Created in 1972, the program offers a variety of family planning choices for men and women including surgical contraceptive methods, intrauterine devices and other long lasting methods.

AVSC has regional offices in both Sub-Saharan and North Africa. Recently, 14 new subprojects were added as activities in Africa.

Contraceptive Social Marketing II (CSM II)

Cooperating Agency: The Futures Group

Duration: September 1988 - September 1993

The Contraceptive Social Marketing (CSM) project utilizes the techniques and resources of commercial enterprises to increase the availability and use of contraceptives among low and middle income groups in developing countries using commercial marketing and distribution techniques. It also seeks to establish cost recovery schemes and targets in all sales programs.

CSM projects in Sub-Saharan Africa have the potential for greatly expanding access to contraceptives, reaching populations not currently well-served in traditional programs (e.g., males). Presently, there are ten subprojects active in Africa, and the Futures Group has a regional office in Togo.

Family Planning Enterprise (FPE)

Cooperating Agency: John Snow, Inc

Duration: October 1985 - September 1991

The purpose of the Family Planning Enterprise project is to increase the delivery and use of acceptable, affordable family planning services through private sector resources. It has two approaches: to introduce and reinforce financial and human resource management skills and to integrate the provision of family planning products and services into existing profit-making commercial channels and employee benefit plans.

The Enterprise project, which is concluding its final year of funding, provided support to more than 10 African countries to assist in the development of private sector family planning services.

Extending Family Planning Services through Third World Women Managers

Cooperating Agency: Center for Development and Population Activities
Duration: September 1985 - Continuing

This project is designed to develop and extend family planning services in selected developing countries by utilizing the extensive alumnae network of the Center for Development and Population Activities (CEDPA). CEDPA trains middle-to-senior level managers in developing countries most of whom are women.

To date, CEDPA has trained more than 600 professionals in Africa.

Population Technical Assistance (POPTECH)

Cooperating Agency: Dual and Associates
Duration: September 1988 - September 1993

This project provides worldwide short-term consulting services to public and private sector institutions to improve the design and management of population programs. The project recruits and fields professionals in response to specific requests for technical assistance from a broad spectrum of disciplines for activities such as design, assessments, evaluations, and special studies.

POPTECH assistance is called upon 15-20 times annually in Africa.

Commodities and Program Support Projects

Family Planning Logistics Management

Cooperating Agency: Division of Reproductive Health, Center for Health Promotion and Education, Centers for Disease Control

Duration: October 1985 - Continuing

This project provides technical assistance to develop, design, improve, and evaluate population/family planning projects. Major activities include: evaluation of contraceptive distribution systems; development and/or improvement of management information; contraceptive commodity reporting and service delivery systems; TA for workshops in program management; evaluation and logistics management; and contraceptive requirements analysis.

Twelve African countries received logistics support in 1990.

Family Planning Logistics Management

Cooperating Agency: John Snow, Inc.

Duration: September 1990 - September 1995

The purpose of this project is to improve the capability of developing country public and private sector organizations to administer more effective and efficient contraceptive logistics systems, including more reliable forecasting of contraceptive requirements; and to provide support for the Office of Population in the management of the Population Projects Database (PPD) and the system for tracking contraceptive orders, shipments, and financial accounts.

Contraceptive Procurement

Cooperating Agency: Aladan, Incorporated (Condoms)
Ansell Incorporated (Condoms)
Finishing Enterprises Inc. (Copper T-380)
Ortho Pharmaceutical Corp. (Vaginal foam, tablets)
Syntex Laboratories Inc. (O/C - CSM)
Wyeth-Ayerst International Ltd. (O/C - Private Sector)
Matrix International Logistics, Inc. (Warehousing and Shipping)

Duration: 1981 - Continuing

The Central Contraceptive Procurement project provides an efficient mechanism for consolidated A.I.D. purchases of contraceptives, based on the transfer of all funds - Central, Regional, or Mission - to a central procurement account at the beginning of each operational year for implementation of the procurement process.

In FY 1990, 29 countries in Sub-Saharan Africa and three countries in North Africa received contraceptive shipments. The total value of the FY 1990 shipments to Sub-Saharan Africa was \$10.9 million, while \$4.7 million in contraceptives were shipped to North African countries. Condoms made up over two-thirds of the shipment to Sub-Saharan Africa.

Information and Training Projects

Population Communication Services (PCS)

Cooperating Agency: The Center for Communication Programs, Johns Hopkins University
Duration: July 1990 - July 1995

The project provides technical and financial assistance for information, education and communication projects to promote family planning and health in more than 30 developing countries. The project emphasizes audience research, pretesting the use of creative communication, interpersonal communication for service provider counseling, and regular monitoring and evaluation to link communication activities with service programs.

The project has supported a number of innovative mass media projects in African countries, including a music video featuring two of Nigeria's most popular singers. Currently, PCS supports IEC activities in 16 African countries as well as a number of regional projects.

Population Information Program (PIP)

Cooperating Agency: The Center for Communication Programs, Johns Hopkins University
Duration: August 1987 - August 1992

This project has produced scientific, technical, and general information that has become a highly credible source of guidance around the world for family planning administrative and medical decisions, paramedical training, and projections of population problems in many countries through its publication, Population Reports. The project also supports the POPLINE database which is now available on compact disc, facilitating its installation and use in many countries.

Forty-six African countries are currently on the PIP mailing list. PIP currently supports CD-ROM sites in 20 African countries.

Family Planning Management Development (FPMD)

Cooperating Agency: Management Sciences for Health
Duration: September 1990 - September 1995

The purpose of this project is to promote institutional development and strengthen the management capabilities of public and private (non-profit) family planning organizations. It is the successor to the Family Planning Management Training project which addressed family planning weaknesses through training of leaders and managers. Special attention is given to

management, quality assurance, and sustainability as guiding principles of the organizational development process.

FPMD is building on the activities of a successful earlier project. In the first year of the new project, assistance is being provided to eight Africa countries, working with both governmental and nongovernmental organizations to improve family planning program management. The project is also discussing collaborative efforts with two regional training institutes (CERPOD and CAFS).

The Johns Hopkins Program for International Education in Reproductive Health

Cooperating Agency: Johns Hopkins Program for International Education in Reproductive Health (JHPIEGO)

Duration: May 1987 - April 1992

The Johns Hopkins Program for International Education in Reproductive Health (JHPIEGO) trains developing country physicians, nurses, midwives, and medical administrators in family planning and reproductive health through medical, nursing, and midwifery schools. It works through a global network of national and regional training centers in developing countries as well as at its headquarters in the United States. Both short-term and long-term courses are available.

JHPIEGO is providing assistance to 16 different African countries with multiple projects in several.

Family Planning Training for Paramedical, Auxiliary and Community (PAC) Personnel IIb

Cooperating Agencies: Program for International Training in Health (INTRAH)
Development Associates

Duration: September 1989 - September 1993

The project provides assistance in training a wide variety of family planning paramedical workers including nurses, midwives, auxiliary and community workers, traditional practitioners, and others. It seeks to strengthen and develop the capacity and capability of developing country institutions and agencies to design, implement and evaluate a program of training activities so that paramedical, auxiliary and community workers will be able to provide family planning services.

INTRAH is currently planning eight training workshops and is supporting 34 other activities in Sub-Saharan Africa. INTRAH has regional offices in Kenya and Togo. Development Associates provides training support for North African countries.

International Population Fellows Program (IPFP)

Cooperating Agency: Department of Population Planning and International Health, School of
Public Health, University of Michigan

Duration: September 1990 - September 1995

This project provides population/family planning programs in the private and public sectors with individuals who are either recent graduates or mid-career professionals in population-related fields as a form of technical assistance.

There are currently six population fellows in Africa.

Policy and Evaluation Projects

Demographic and Health Surveys

Cooperating Agency: Institute for Resource Development

Duration: September 1984 - April 1991 (Phase I); and
August 1988 - August 1993 (Phase II)

For nearly two decades A.I.D., through its support of the World Fertility Survey, Contraceptive Prevalence Surveys, and Birth and Death Data Collection projects, has been a leader in supporting sample surveys to monitor trends in fertility and family planning behavior. The Demographic and Health Surveys project continues A.I.D. assistance for such surveys. This project provides support to conduct sample surveys of contraceptive knowledge, availability and use, recent demographic levels and trends, and maternal/child health on a global scale. The Demographic and Health Surveys (DHS) are important tools for policymakers and project planners.

Under auspices of the DHS project, surveys have been carried out or are planned in 20 African countries.

Demographic Data Initiatives

Cooperating Agency: U.S. Bureau of Census

Duration: April 1989 - March 1994

The purpose of this project is to strengthen the capacity of developing countries to process, evaluate and analyze demographic and family planning data as well as other social and economic data. It has two phases of support: technical support for the implementation of censuses and compilation and analysis of demographic data.

The project is a major resource for technical assistance for the design, data processing and analysis of censuses in Africa. Currently, the project supports census-related and other demographic analysis activities in 15 African countries.

Expert Studies on Population Issues

Cooperating Agency: Committee on Population, National Academy of Sciences

Duration: September 1990 - September 1995

A.I.D. supports the Committee on Population in conducting research on population issues of special interest to the international population community. Its publications include: Contraception and Reproductive Health Consequences for Women and Children in Developing

Countries, Demographic and Programmatic Consequences of Contraceptive Innovations, and Developing New Contraceptives: Obstacles and Opportunities.

The Committee on Population currently is sponsoring a major study on population dynamics in Sub-Saharan Africa. Six working groups are addressing various population issues, drawing information from many African countries. Two working groups are focussing on single countries: Kenya and Senegal.

Population Reference Bureau (PRB) Cooperative Agreement

Cooperating Agency: Population Reference Bureau

Duration: September 1990 - September 1994

This project seeks to increase the awareness among policymakers in developing countries and the donor community about the implications of population trends and family planning issues. The project supports the dissemination of population information and includes many media and training activities.

The data sheets, reports and other materials produced under this project are distributed to most African countries. Materials which have received widespread dissemination in Africa include the IMPACT booklets on "Family Planning Saves Lives" and "Contraceptive Safety: Rumours and Realities". Recently, the project prepared a special report on rapid population growth in Sub-Saharan Africa, and the project is currently preparing a policy-oriented comparative report on the findings from DHS surveys in Africa.

Resources for Awareness of Population Impacts on Development (RAPID)

Cooperating Agency: The Futures Group

Duration: September 1987 - September 1992

RAPID raises leadership awareness of relationships between population growth and development, and about the positive socio-economic and health effects of lower fertility. The project has developed interactive computer models focusing on population growth, environment, child survival and health care financing.

To date, RAPID has supported micro-computer based presentations on the implications of population growth in 28 African countries. Audiences for these presentations are generally to senior government officials.

Options for Population Policy (OPTIONS II)

Cooperating Agency: The Futures Group

Duration: September 1990 - September 1995

OPTIONS II assists developing countries in formulating and implementing population policies that increase access to and use of voluntary family planning services. While continuing efforts to further policy dialogue and secure commitment to family planning, OPTIONS II places special emphasis on mobilizing national resources to support the expansion of family planning service delivery.

Under the first phase of OPTIONS, support was provided in African countries to develop strong population policies, to increase host government support for family planning services, and to eliminate legal or regulatory barriers to the provision of contraceptives. OPTIONS II is continuing these activities, working in 4 African countries during the first year of activities in the second phase of the project. The project has a regional office in Togo.

Research Projects

Strategies for Improving Service Delivery

Cooperating Agencies: The Population Council (Africa and Asia/Near East OR/TA);
TvT Associates (MORE)

Duration: Africa OR/TA project -- August 1988 - August, 1993
Asia and Near East OR/TA project -- September, 1990 - September 1995
MORE -- September 1988 - September 1991

This umbrella project seeks to improve, through operations research and technical assistance (OR/TA), the quality, accessibility, and cost-effectiveness of family planning and maternal/child health delivery systems in the developing world and strengthens developing country institutional capabilities to use operations research as a management tool to diagnose and solve service delivery problems.

The Africa Operations Research and Technical Assistance project, a subproject under the umbrella OR/TA program, is currently providing assistance for OR studies to 15 Sub-Saharan African countries. The newly-funded Asia and Near East subproject will be providing support for OR to family planning organizations in North Africa. The MORE (Maximizing Results of Operations Research) subproject recently reviewed the impact of operations research projects carried out in a number of Sub-Saharan African and North African countries under earlier A.I.D.-supported OR programs.

Natural Family Planning Project

Cooperating Agency: The Institute for Reproductive Health, Georgetown University
Duration: September 1985 - September 1991

This project was created in order to meet the growing demand for Natural Family Planning (NFP) services and the interest in breastfeeding for childspacing. It improves the information and technical resources on NFP and breastfeeding available to family planning service providers and consumers, researchers, educators, and developing country policymakers.

The project is providing assistance for NFP subprojects in six African countries.

Population Council Programmatic Grant

Cooperating Agency: The Population Council
Duration: August 1988 - August 1993

A.I.D. supports the Population Council's contraceptive development program, which focuses on contraceptive introduction, the provision of technical information to the international

population and family planning community, and the provision of limited funds and technical assistance to institutions in developing countries. These activities support service delivery systems, research evaluation, training, and contraceptive marketing. In the contraceptive area, the Council conducts activities to establish local experience and management organization for the worldwide introduction of Norplant[®] implants and the Copper T 380a IUD.

The project is involved in working with a number of African countries to develop strategies for introducing Norplant[®] into family planning service delivery systems. Several project staff working on Norplant[®] introduction are based in Kenya.

Contraceptive Technology and Family Planning Research

Cooperating Agency: Family Health International

Duration: September 1990 - August 1995

The purpose of this project is to test, assess, and improve fertility regulation technologies and to disseminate information on their safety, effectiveness, and acceptability. It has tested and assessed the use of such methods as minilap and laparoscopic sterilization, Norplant[®], copper IUD's, low dose oral contraception, post-partum IUDs, and various barrier contraceptives.

The project is currently providing support to 14 African countries for contraceptive introduction activities, acceptability and other research studies, and workshops and other training activities. The project is also providing support to institutions in four African countries to develop family health research centers.

Contraceptive Research and Development (CONRAD)

Cooperating Agency: The Jones Institute for Reproductive Medicine

Duration: September 1986 - March 1993

The primary focus of the CONRAD Program is on the early stages of contraceptive research and development, beginning with targeted or applied research studies and progressing through the first two phases of clinical testing. Its main purpose is to develop improved and new methods of family planning for use in developing countries.

CONRAD has a program of research with the Institute for Primate Research in Kenya.