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Helping Hands: A Livelihood Approach to Population, Health, and Environment Programs

By Gib Clarke

"We cannot simply confront individual preventable illnesses in isolation. The world is interconnected, and that demands an integrated approach to global health," said President Barack Obama in May 2009, echoing what population-health-environment (PHE) practitioners have long argued: Integrated lives with integrated problems require integrated solutions.

Proponents of integration face significant barriers: lack of funding, programmatic silos, and policy disinterest. But the tide may be turning. With the Obama administration's commitment to integrating development assistance on global health, food security, and climate change adaptation, the PHE approach—with its proven successes—may serve as a model for integrated programming.

To fully harness this momentum, the PHE community must solidify its research base, reach out to new partners, and push for flexible funding and programming. In addition, PHE programs should formally recognize livelihoods as a critical element, and consider adopting a new moniker, "HELP"—Health, Environment, Livelihoods, and Population.

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Introduction

Today's population-health-environment (PHE) programs are based on the belief that the development challenges of individuals and communities require integrated solutions. By simultaneously addressing challenges such as population growth, natural resource management, and food security, proponents argue that this integrated approach will not only produce better results, but also improve operational efficiency, garner community trust, and increase women's involvement and equality (Pielemeier, 2005). Some data—mostly anecdotal and qualitative, and to a much lesser extent, quantitative—support these claims (Castro & D'Agnes, 2008; Pielemeier, Hunter, & Layng, 2007). But the field needs more—and more rigorous—data to convince donors to leave their silos.

In 2009-2010, after more than five years of working in the PHE field, I interviewed representatives of NGOs and foundations to explore two assumptions:

- That the PHE approach achieves most of its goals, even while long-standing shortcomings persist; and,
- That meeting community needs—one of PHE's fundamental goals—could be better achieved by adding more elements to the mix of population, health, and environment, particularly alternative livelihoods and income generation.

Seizing the Moment: The Time for Integration

Integrated programs have long had difficulty convincing funders, NGOs, researchers, and others to act across sectors. A recent confluence of factors, however, offers some hope that change is coming.

First, there is a growing emphasis on hard data. Newer programs are collecting and analyzing data from their inception. Strong existing data and results, such as that collected and analyzed by the Integrated Population and Coastal Resources Management (IPOPCORM) Project in the Philippines, offer encouragement that the more strategic new programs, especially those with a heavy focus on operations research, will deliver results (Castro & D'Agnes, 2008).

Second, the PHE community, including members of the Washington, D.C.-based PHE Policy and Practice Group, is seeking out other integrated programs that—though not called "PHE"—use similar approaches, to share lessons learned and grow the community.

A farmer holds up a cassava leaf in a plantation in Kampong Cham, Cambodia. (Photo by Neil Palmer, courtesy International Center for Tropical Agriculture [CIAT], http://www.ciat.cgiar.org and http://www.flickr.com/photos/ciat)

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The PHE Toolkit is an interactive online library of documents, videos, and other resources for program managers working on health, family planning, development, and conservation programs. Launched by the BALANCED Project, it is one of five public toolkits housed on the K4Health website.
http://www.k4health.org/toolkits/phe

The PHE Map is an interactive Google map, created by the Population Reference Bureau, that highlights current or recent PHE programs in Africa, Asia, and Latin America.
http://www.prb.org/About/InternationalPrograms/Projects-Programs/PHE.aspx

The PHE Listserv and the East Africa PHE listserv are email lists for sharing news, information, and opportunities with colleagues interested in PHE.
To join the PHE listserv, email **ecsp@wilsoncenter.org**
To join the East Africa PHE listserv, email **jbremner@prb.org**

The New Security Beat's column "The Beat on the Ground" reports on PHE projects around the world. Posts to date have featured youth programs in Ethiopia's Bale Mountains; a study tour with the Philippines' IPOPCORM project; and Rwanda's One Acre Fund.
http://newsecuritybeat.blogspot.com/search/label/Beat%20on%20the%20Ground

"Population, Health, and Environment in Ethiopia," a video by the Environmental Change and Security Program, explores two projects combining natural resource management, family planning, and holistic health services in southwestern Ethiopia's Wichi watershed (Ethio-Wetlands and Natural Resources Association - EWNRA) and the high plains region of Tigray (Relief Society of Tigray - REST).
http://www.youtube.com/ecspwwc#p/u/5/9WS0lKOy9Ng

Women fishing in an upland lake in Guinea, near the USAID-supported Landscape Management for Improved Livelihoods project. (Photo by Charlie Pye-Smith, courtesy World Agroforesty Centre, http://www.worldagroforestrycentre.org and http://www.flickr.com/photos/icraf)

BLUE VENTURES

The award-winning marine conservation organization Blue Ventures helps local communities in Madagascar protect their threatened marine environment—and their livelihoods.

In partnership with Madagascar's Institute of Marine Sciences and the Wildlife Conservation Society, Blue Ventures created the largest community-run preserve at Velondriake, Madagascar, spanning more than 800 km^2. Villagers manage it and benefit from alternative income opportunities such as ecotourism and sea cucumber and algae farming.

Working with regional health institutions and NGOs, Blue Ventures provides clinical sexual and reproductive health services to 24 villages along the country's southwestern coast. These services enable individuals to make their own reproductive health choices, and protect themselves against sexually transmitted infections.

"This pioneering, integrated approach to conservation and sexual and reproductive health offers opportunities for these different interventions to work synergistically, enabling far more effective achievement of the projects' objectives than could be achieved if these projects were carried out in isolation," says Blue Ventures.

http://www.blueventures.org/community/health.html

For example, the Population Reference Bureau has successfully established an East African PHE Network, made up of practitioners from integrated programs in the region, some of which are explicitly dubbed PHE, but many of which are not (Yin, 2008). The East African Network is a coalition of NGOs that promote PHE policymaking and improve implementation. Sharing national and regional expertise improves the capacity for integration; new individuals and organizations—including attract as-yet "undiscovered" PHE programs—are able to learn from the others' experience with integration.

Third, the potential impacts of large-scale global trends such as climate change—which could increase the chances of drought and famine and will affect the transmission rates of vector-borne diseases—are making clear that people's lives are not easily divided into traditional development sectors of health, environment, or agriculture.

Staff working in the field already know that "integration occurs and is available at the local level," said a foundation official (personal communication, June 2009). Successful examples, such as the integrated population-environment programs developed by the Guatemalan NGO ProPeten or the Jane Goodall Institute's TACARE Program, emerged after asking communities to identify their needs and priorities (Grandia, 2005; Goodall, 2006).

The PHE approach, with its ability to meet multiple and unique community needs—including the many stresses of poverty—could be an effective model for both donors and recipients seeking to improve community adaptation to global trends. In addition, PHE programs themselves may receive some of these new funds.

Fourth, influential government leaders, like President Obama and Secretary of State Hillary Clinton, are supporting integrated approaches to development, as evidenced by the administration's Global Health Initiative and Feed the Future Initiative. Global health luminaries such as Paul Farmer have pointed out that fighting infectious diseases also requires addressing environmental and social problems: "What we need is about houses and water and jobs and food security," he said in an interview with McKinsey & Company (2009).

In addition, some conservation organizations are changing the way they characterize their work. Conservation International, for example, includes "the long-term benefit of people" and "the well-being of humanity" in their vision and mission, a change from their traditional focus on wildlife. Development economist Jeffrey Sachs' Millennium Villages project incorporates an extensive suite of activities in health, environment, and economic development, delivering these components in a variety of ways that include both integrated and side-by-side delivery.

Finally, the people are changing. More staff at health and environment organizations are experts in cross-cutting issues such as economics and agriculture. These program staff are increasingly aware of the importance of incorporating other sectors into their own work, which may translate into greater receptivity to integrated work—particularly if funding streams also change.

A drawing of a threespot dascyllus with commonly used birth control methods, from Blue Ventures' family planning education programs in Madagascar. (Photo by Dennis Tang, courtesy Blue Ventures, http://blueventures.org and http://www.flickr.com/photos/tangysd/)

A Rose by Any Other Name

Of all of the challenges facing the PHE approach, perhaps none is as great as that of its name. Can a "PHE program" have population and environment components, but not health? Are rural and urban programs equally eligible for the label?

As a label, "PHE" may have the unintentional effect of reducing—rather than increasing—partnerships across sectors. The prominent "P" makes some environment groups hesitant to adopt a moniker with the politically sensitive "population" tag. Some environment groups do address "P" as part of their programs, but may draw attention away from it by discussing less controversial aspects like health benefits instead of family planning. Similarly, some population organizations avoid engaging with environmental programs because they view some conservation efforts as prioritizing environmental preservation over meeting the pressing needs of the world's poor.

In my opinion, the name does nothing to showcase the dynamism, flexibility, broad participation, and responsiveness of PHE programs. Thus, the inflexibility and vagueness of the name may close the door on additional funding opportunities from foundations that might value these attributes.

Most importantly, the name PHE leaves out an equally important letter: "L" for livelihoods. Because "meeting community needs" is the expressed goal of most PHE programs, it makes sense to include livelihood components in their design when appropriate. Livelihoods projects can be specifically tailored to benefit the environment, by decreasing the community's dependency on fishing, for example. Or they can be designed to improve health outcomes, by providing a microloan to a community-based distributor of condoms. In addition, livelihood projects can provide an entrée to community members who are not initially interested in population, health, or environment programs (De Souza, 2009).

With this in mind, I propose that the PHE community consider a new label: "HELP Plus," which stands for Health, Environment, Livelihoods, Population (HELP), with "Plus" to signal an openness to other variables, such as food security, that

Faces of southwestern Uganda. (Photo by Neil Palmer, courtesy International Center for Tropical Agriculture [CIAT], http://www.ciat.cgiar.org and http://www.flickr.com/photos/ciat)

may be requested by communities. The "E" has traditionally referred to biodiversity conservation, and in some cases natural resource management. Today, however, the "E" also needs to represent broader issues, including climate change impacts, soil erosion, water quality, and forestry management.

Challenges and Opportunities

Despite documented successes and the opportunities described above, integrated approaches will continue to face significant challenges—as well as find valuable opportunities.

First, with few PHE programs currently operating, there are limited opportunities to study, document, showcase, and learn from them. One solution is to reach out to similar types of programs, including those not labeled "PHE." Two examples are the Blue Ventures program in Madagascar and Family Health International's collaboration with Kenya's Green Belt Movement (see boxes on pages 4 and 9).

Next, the lack of qualitative and quantitative data is a significant hurdle. More systematic study would offer lessons for other PHE programs and, of course, provide donors with the results they demand. Linking with the research and academic communities, who could employ more sophisticated methods, would be an invaluable next step. According to Lori Hunter of University of Colorado-Boulder, "scientifically sound research is necessary to test claims of PHE's 'value added' – tests that would no doubt be of interest to current, and potential, funders" (personal communication, February 2010).

A few organizations have invested in costly and extensive operations research efforts to measure the impact of an integrated approach as opposed to a single-sector approach. While the data provided by these research efforts will help us evaluate PHE programs, it may not be advisable to invest scarce resources for PHE in such costly and lengthy research efforts. Instead, targeted and nimble use of monitoring and evaluation data can help organizations establish the value of integration.

Third, PHE programs are often a tiny part of the portfolio of large health or conservation organizations. Senior staff, including those who make personnel and budgetary decisions, may be unaware of or "unconverted" to PHE, or may be interested but consider it to be "mission drift," said a foundation official (personal communication, February 2010). The PHE community should develop strategies,

A new label, "HELP Plus," stands for Health, Environment, Livelihoods, Population, with "Plus" for other variables that may be requested by communities.

Cultivated terraces on a hillside in southwestern Uganda. (Photo by Neil Palmer, courtesy International Center for Tropical Agriculture [CIAT], http://www.ciat.cgiar.org and http://www.flickr.com/photos/ciat)

About the Author

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Prior to joining the Wilson Center, he worked for the Program for Appropriate Technology in Health (PATH), where he conducted evaluations of reproductive health and micro-lending components of the Integrated Population and Coastal Resources Management (IPOPCORM) project in the Philippines. Gib also opened and managed a new branch office for the micro-lending organization ACCIÓN in Texas.

Gib has a Master of Public Health in maternal and child health from the University of Washington, and Bachelor's degrees in economics and psychology from Vanderbilt University.

including specific messages, to win their support—and perhaps funding as well.

Jason Bremner of the Population Reference Bureau recommended that arguments employed by conservation groups should include explanations of the "unmet need" for family planning, which measures the latent demand for contraceptive services and commodities (personal communication, February 2010). They should explain what would happen if current needs are not met by looking at growth projections in high biodiversity areas. In addition, population organizations should show how meeting basic health needs of women has benefits for the environment that will improve the well-being of those same women, their families, and their communities. Finally, all groups can appeal to its potential cost-effectiveness; to the possibility of forming new partnerships (which is a critical asset in PHE implementation); and exposure to new funders.

For funders, the challenges may be somewhat different. Many of the individuals I spoke with understand the logic of integration, and appear interested in it. Some even said they are "encouraged" to work with their colleagues who fund other sectors. But there is little incentive to operationalize these interests, as they are judged on their performance in individual sectors, said a foundation official (personal communication, June 2009). Thus, the onus is on researchers and implementers to convince funders of the benefits of the integrated approach. But it is up to key decision-makers within funding organizations to incentivize their staff to go beyond good intentions.

Planting tree seedlings with Kenya's Green Belt Movement. (Photo by Kasuga Sho, http://www.flickr.com/people/skasuga).

Recommendations and Next Steps

1. The PHE community should adopt a new name that highlights the all-important livelihood component. "HELP Plus" is only one possibility, but no matter the name, the flexibility of the PHE approach and its livelihoods programs should be prominently emphasized. This simple fix offers a multitude of benefits, as outlined above.

2. PHE programs need to gather data and conduct operational research to justify the claims of the PHE field. Field programs must identify indicators and incorporate rigorous data collection techniques from the beginning of the project. Implementing NGOs must improve program design and monitoring and evaluation methods, as well as conduct analysis and publish the results.

3. The PHE community needs to "agree to disagree" on the issue of scaling up integrated programs. The issue has received much attention, perhaps because to date, no examples of successful scaling-up exist. This lack of examples is problematic, as donors often want to know that their investments can benefit a large number of beneficiaries. There are plenty of reasons—including reaching more beneficiaries—to continue experimenting with effective scale-up techniques. But given the focus on local needs and circumstances, scaling-up may be an unattainable goal that hinders PHE's strengths. I recommend that while scale is important and

innovative methods should be tried and best practices sought, PHE programs should not shy away from embracing the flexibility and very local focus that make them unique.

4. PHE programs should seek funding from a diverse array of donors. A small group of large donors funds a disproportionate number of PHE projects. Diversification is a priority. For example, individual donors can often be the most "spontaneous," moved by case studies, direct involvement, and stories with clear measurements and outcomes, suggested Judy Oglethorpe of World Wildlife Fund (personal communication, February 2010). In addition, because field-based integration is most visible at the local level, bilateral aid missions and NGO country offices should be more often included in funding discussions.

Conclusion

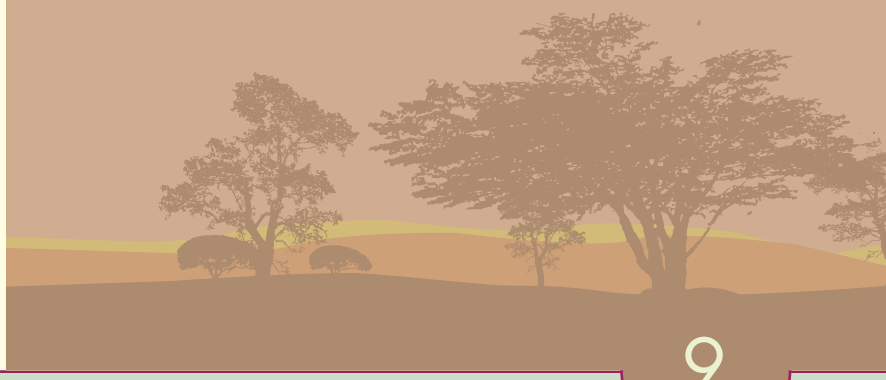
A diverse group of population, health, and environment organizations have done much good work with limited resources under the "PHE" label. The PHE community, and the many others doing similar integrated work, must continue to meet community needs with solutions and approaches that are flexible and adaptable to local conditions and needs. Given the strong base of existing and recent PHE programs, the PHE community is well-positioned to work with lead partners in Obama's Global Health Initiative, climate change adaptation efforts, food security programs, and other upcoming cross-cutting work. This increased interest in integration may also be the best opportunity for finding new funding, fostering replication, and scaling up. It is a promising moment for integrated approaches, whether we call them PHE, HELP Plus, or some other acronym.

PROGRESS: Family Health International and Kenya's Green Belt Movement

Family Health International and Kenya's Green Belt Movement (GBM) are working together to increase access to and use of family planning services for women involved in GBM's tree planting projects. Under the auspices of USAID's PROGRESS Project, this integration will enhance women's health and contribute to environmental sustainability.

The two NGOs worked with the BALANCED Project to develop information, education, and communication materials that integrate family planning messages and referrals into the tree planting program. This strategy conceptually links their conservation, livelihoods, nutrition, gender, HIV, and family planning activities, and uses integrated PHE messages based on these linkages.

http://www.fhi.org/en/Research/Projects/Progress/index.htm



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Students at the Maru-Chebot First Cycle Elementary School, which is part of a population-health-environment project in the Berga wetlands of Ethiopia. (Photo by Geoff Dabelko, courtesy Woodrow Wilson Center, www.wilsoncenter.org/ecsp and http://www.flickr.com/photos/ecsp)

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