BACKGROUND DOCUMENT ON THE SEATS URBAN INITIATIVE

In testimony before the Congress, USAID Administrator Brian Atwood has said that sustainable development is not possible without cities that work.

Many African cities are experiencing unprecedented population growth due to both rural-to-urban migration and natural population increase. Increasing populations affect all aspects of urban life and a focus on reproductive health in urban areas is a crucial matter. While many reproductive health projects are implemented in urban areas, few programs utilize an integrated and strategic approach to addressing the reproductive health issues of an entire city. The SEATS Urban Initiative does this by employing a three-pronged approach 1) conducting city-specific research in order to encourage data-driven approaches to designing urban service delivery models, 2) empowering municipal-level officials to become advocates for sustainable reproductive health delivery and 3) building coalitions between the public and private sectors and between institutions in order to maximize use of reproductive health resources.

Actual and Anticipated Results of the SEATS Urban Initiative

- Development of a cost-effective, data-driven model for urban reproductive health service delivery planning;
- Increasing local capacity to collect and analyze data;
- Implementation of service delivery programs which respond to the needs of urban populations;
- Strengthening of democratic institutions and empowerment of municipal officials;
- Increasing knowledge among municipal officials of:
  - the impact of population growth on their city
  - family planning and other reproductive health issues
  - youth reproductive health issues
  - the importance of data-driven programming
  - the design and implementation of urban service delivery strategies
  - leveraging funds from national level government and/or donors;
- Formation of potentially powerful alliances between municipal officials, the public and private sectors, special interest groups, NGO’s, and various other institutions;
- Long-term improvement in contraceptive prevalence rates, other reproductive health indicators and quality of care in the urban location;
- Preparation of comprehensive reports analyzing the current level of service provision and utilization in a city, including youth specific and private sector issues and other special interests;
Increasing awareness among Urban Initiative participants of the importance of STD/HIV management, including the dual protection approach;

- Coalition development and resource maximization among selected Urban Initiative cities through city-to-city and South-to-South technical exchanges.

Selected Urban Initiative Activities

In 1993-94, through support from the Africa Bureau, SEATS carried out urban studies in Blantyre (Malawi), Mombasa (Kenya), and Bulawayo (Zimbabwe), collectively known as the "Sub-Saharan African Urban Family Planning Study". Following each of the individual city studies, SEATS conducted workshops and seminars during which local and national officials, donors, and private sector representatives reviewed and discussed the implications of the findings and designed interventions. The studies highlighted the challenges to urban service delivery, such as limits to current service delivery capacities, high growth rates and resource constraints, while at the same time emphasizing existing strategies that merit funding and interest. Policy makers, program managers and donors found practical information which could be used in planning appropriate service delivery and policy interventions.

One objective of the study was to provide information upon which to base a new vision for urban family planning service delivery in Sub-Saharan Africa; this was discussed at a regional meeting in Blantyre in 1995. The "Sub-Saharan African Urban Family Planning Study" did lead to a vision for: the strengthened ability of urban programs to provide sustainable, high-quality services to a growing volume of clients; the utilization of a data-driven program design approach; and increased municipal advocacy and partnerships. The study and its dissemination were successful in a number of ways, including focusing needed attention on urban family planning service delivery issues, increasing resources for service delivery, and strengthening local partner institutions.

The SEATS II Project is now implementing five urban subprojects and two youth urban subprojects in Zimbabwe and Zambia which were designed and funded as a result of the study and subsequent Urban Initiative activities. Municipal officials involved in these projects are utilizing innovative strategies to address growing urban needs, including expanding community-based access to voluntary surgical contraception, establishing cost-effective systems for provider training and implementing quality improvement plans.

While SEATS and the Africa Bureau were unable to implement the study in any West African cities, they continued to seek opportunities to implement the Urban Initiative in that subregion. In 1996, Senegal became the first West African nation to begin Urban Initiative activities. In 1997, Senegalese researchers, along with SEATS and USAID staff, worked to identify existing research, complete secondary data analysis and minor additional data collection for the cities of Dakar and Louga. The research teams produced detailed preliminary reports which were disseminated in the first workshop held in September, 1997 in Dakar. The workshop attracted an impressive array of participants including mayors and their representatives, and generated substantial interest in the local media and among the donor community.
During the workshop, working-groups were established which partnered municipal officials with local reproductive health experts and representatives from youth organizations. The groups developed preliminary, data-based reproductive health workplans for their geographic areas. Currently, they are receiving technical support from SEATS to complete final data analysis and then will have the opportunity to present their final proposals to potential donors in a second workshop in Dakar scheduled for early 1998.

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<th>An Urban Initiative Process</th>
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<td>The Urban Initiative process is tailored to cities' needs and USAID's strategic objectives. An example of how the process might unfold follows:</td>
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<td>Stage I Research and Outreach</td>
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<td>A local institution conducts research and collects existing quantitative and qualitative data with guidance from SEATS. The &quot;Rapid Urban Assessment&quot; emphasizes secondary analysis of existing data with limited primary data collection only to fill major gaps. Special focus areas, such as STD/HIV prevention, youth or other pertinent local issues, may be studied. Contact is made with municipal officials, representatives from the private health sector, reproductive health experts, NGO's, and special interest groups in preparation for the next stage.</td>
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<td>Stage II The First Workshop</td>
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<td>The research findings are presented to municipal officials, urban leaders, representatives from donors and the private sector, etc. Working groups are formed to produce draft action plans based on the analysis presented and their own expertise. These plans iterate priority reproductive health problems and proposed solutions, and further research needs.</td>
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<td>Stage III Finalization of Workplans</td>
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<td>The researchers conduct fill-in research to satisfy the needs of the working groups. The working groups meet to revise their working plans and develop proposals. Technical support is provided by SEATS and the research team.</td>
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<td>Stage IV Second Workshop and Project Implementation</td>
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<td>Working groups formally present their proposals to representatives from USAID, CA's and other potential donors. Promising proposals are funded and implemented with technical assistance from SEATS if needed.</td>
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Selected Urban Initiative Innovations

Rapid Urban Assessment:

In keeping with SEATS tradition, the Urban Initiative is designed to accommodate the special circumstances of each country or city involved. The SEATS I Urban Study research team developed an approach to evaluate the service delivery capabilities of several African cities using a combination of new methods and adaptations of existing methods. These included the FPMES (FP Monitoring and Evaluation System), which estimates CPR for a defined area; the Capacity Estimator, which evaluates future service delivery capabilities in light of population growth, CPR targets and method mix assumptions; a streamlined version of the Population Council's Situation Analysis; DHS, and computer applications of mapping data. A low-cost, rapid assessment of FP in a city, followed by a workshop in which municipal officials and other key partners actively participate in data analysis and identifying opportunities for innovative programming, has been
shown to be highly effective for both program planning and stimulating relevant policy debate.

**City-to-City Technical Assistance:**

To enhance South-to-South dialogue between countries and cities and to improve commitment to urban services, SEATS coordinates technical exchanges of municipal officials and FP specialists. Officials from a city with a strong urban CBD program, for example, would spend time working with their counterparts from another city that expresses an interest in starting or improving similar programs. The benefits of an exchange of this type is realized at both the recipient and provider ends by promoting skill transfer, self reliance, empowerment and sustainability.