U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT

POPULATION, HEALTH AND NUTRITION

OVERVIEW

DECEMBER 1994

USAID
Pop, Hlth, & Nut
Overview

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USAID'S COMMITMENT TO SUSTAINABLE DEVELOPMENT

In early 1994, USAID adopted strategic goals for sustainable development that closely parallel those of the Programme of Action adopted at the International Conference on Population and Development (ICPD). USAID strategies emphasize population stabilization and the promotion of health and nutrition; protection of the environment; broad-based economic growth; building democracy; providing humanitarian assistance and aiding post-crisis transitions. Across all of these sectors, the education and empowerment of women is seen as both a critical means and end. Strong emphasis is placed on the participation of non-governmental organizations. The fundamental building blocks of USAID programs are integrated country strategies developed in close cooperation with host governments, private sector institutions, local communities and other donors.

USAID'S POPULATION AND HEALTH STRATEGY

Progress in the population, health and nutrition (PHN) sector is critical to achieving USAID's overarching sustainable development objectives. Rapid population growth, high mortality rates, serious illness and malnutrition among women and children, and the burden of the HIV/AIDS epidemic are global problems as well as critical roadblocks to the ability of entire nations to achieve sustainable development. They are also fundamentally humanitarian issues, as their impact is felt most directly on the daily lives of families and individuals -- especially women.

Operational Objectives:

USAID's stated principles and objectives for the PHN Sector are:

- Promoting the rights of couples and individuals to determine freely and responsibly the number and spacing of their children.
- Improving individual health, with special attention to the reproductive health needs of women and adolescents and the general health needs of infants and children.
- Reducing population growth rates to levels consistent with sustainable development.
- Making programs responsive and accountable to the end-user.

Goals:

- USAID will contribute to a cooperative global effort to stabilize world population growth and support women's reproductive rights.

- Consistent with U.N. projections, this effort should result in: a total world population between 8 billion and 9 billion by the year 2025, and less than 10 billion by the year 2050, with very low growth thereafter.

- Over this decade, USAID also will contribute to a global health goal of halving current maternal mortality rates, reducing child mortality rates by one-third, and decreasing the rate of new HIV infections by 15 percent.

ORGANIZATION AND STRUCTURE OF USAID PHN ASSISTANCE

USAID assistance in Population, Health and Nutrition is provided through:

- **Bilateral and regional programs** in Africa, Asia/Near East, Europe/Newly Independent States, and Latin America and the Caribbean. These are carried out by USAID field missions in approximately 50 countries.

- **Centrally-funded projects** through cooperative agreements and contracts with U.S. government and private agencies in support of field programs. This assistance draws on a wide range of expertise and supports or complements the activities of USAID field missions.

- **Multilateral assistance** through support of the International Planned Parenthood Federation (IPPF), the United Nations Children's Fund (UNICEF), and the World Health Organization. The State Department also provides funds for the United Nations Population Fund.

Through these channels, USAID assistance supports service delivery, training, management, communications, commodities, research, policy development/reform, monitoring and evaluation.

Technical leadership for PHN sector programs is provided by the Center for Population, Health and Nutrition, located in USAID's Bureau for Global Programs, Field Support and Research. The Center houses the Agency's technical expertise, and its mandate is to respond to the needs of the field missions. The Center is composed of three offices with complementary objectives and activities -- the Office of Population, the Office of Health and Nutrition and the Office of Field and Program Support. These offices work together to accomplish the goals and objectives of

USAID in this sector.

The PHN Center provides high quality quick-response technical assistance and training, and by advancing state-of-the-art knowledge through field-relevant research carried out by its network of collaborating institutions. The Center's field support, research and technical leadership functions are synergistically interrelated: needs are identified in the field, research is undertaken to determine how best to respond to those needs, and on-the-ground experience with various interventions feeds back into program development and new initiatives. The Center also takes a leadership role in the sector in coordinating with other donors and encouraging them to direct their resources in support of sector goals.

Research and evaluation programs of the PHN Center are helping USAID to implement its broadened reproductive health agenda. These include basic data collection and analyses of reproductive health needs; programmatic research on new approaches to delivering reproductive health services; biomedical research on new and improved contraceptive methods to protect both against pregnancy and sexually transmitted diseases; and research on gender issues in reproductive health.

PHN PRINCIPLES AND PRIORITIES

- Family planning and reproductive health interventions that benefit the most women and men at an affordable cost and have the highest public health impact.

- Improving the quality of primary and preventive health services and expanding their availability especially to children and mothers. The focus is on developing policies and sustainable programs through the provision of technical assistance, training, and research.

- Informed choice and the empowerment of women. USAID's PHN programs work through local PVOs, NGOs and host country public and commercial sector institutions to provide these partners with the skills, techniques, and tools to implement their programs. Programs seek to ensure local participation, especially by women, in the design and implementation of family planning and health activities.

Program Priorities:

Building on three decades of experience, PHN program priorities include:

- **maximizing access and quality of care in family planning and other reproductive health services.**

- **adolescent reproductive health**, including addressing policy, research, information and service delivery needs.

- **maternal health and nutrition**, focusing on increased access to pre and post-natal care; improved delivery practices; emergency obstetrical care and family planning counselling and services; promotion of breastfeeding; reduction of female genital mutilation; and improved women's nutrition.

- **child survival**, emphasizing increasing global immunization coverage; promoting the use of oral rehydration therapy; early diagnosis and treatment of acute respiratory infections; improving nutrition with an emphasis on breastfeeding, proper infant and child feeding; reducing Vitamin A deficiency; and promotion of child spacing to reduce the number of high risk births.

- **HIV/AIDS**, emphasizing the reduction of sexual transmission of HIV by promoting safer sexual behavior, increasing condom availability and use, and improved diagnosis and treatment of other sexually transmitted diseases.

- **environmental health**, addressing communicable diseases and emerging environmental health hazards which contribute substantially to disease and death in the developing world (e.g., water borne diseases, malaria, cholera and air pollution).

INTERSECTORAL PROGRAMS

Population/Environment:

Through an intersectoral working group, USAID is laying the groundwork for new programmatic initiatives concerned with population/environment linkages. The Agency is currently supporting:

- **policy studies and awareness-raising activities** concerned with the impacts of rapid population growth on natural resources and environmental quality.

- **community development efforts** linking reproductive health service delivery to environmental management.

- **population/environment fellows** who work on linking these sectoral concerns in either environmental (e.g., The Nature Conservancy, Audubon Society) or general development NGOs (e.g., CARE, World Neighbors) in developing countries.

The Education and Empowerment of Women:

With non-PHN funds, USAID is developing a number of new intersectoral programs which will directly affect progress toward PHN goals and in which the Office of Women in Development is working with other sectors, including:

- **a girls' and women's education initiative** building on lessons learned from successful efforts in Guatemala, Nepal, Malawi, and elsewhere.
- **a legal rights initiative** which focuses on supporting women's political, economic and social empowerment through the promotion of women's legal rights.
- **an NGO advocacy and partnership initiative** to strengthen advocacy and information dissemination regarding gender considerations in national legislation and international instruments.

PHN GEOGRAPHIC SCOPE

In 1994, USAID supported health and population activities in over 50 countries in Africa, Asia, the Near East, Latin America, Europe, and the Newly Independent States. Among the largest recipient countries of USAID population, health, and nutrition assistance in FY 1994 are: Bangladesh, Kenya, Nigeria, Egypt, the Philippines, Mexico, Indonesia, Peru, Morocco, Turkey, and Brazil. In FY 1995 a large reproductive health program will be launched in Russia.

PARTNERSHIPS

The Cairo conference underscored the need for a cooperative global effort in population and reproductive health programs. To raise the $17 billion that the UN estimates to be needed in the year 2000 will require each partner in this effort -- donors, host countries, non-governmental organizations, and consumers themselves -- to contribute as fully as possible. Resources will go further if investments are made to build technical capacity at all levels of the system. More exchange of information among donors and coordination around specific issues and country programming needs will also help ensure more effective use of resources.

A particularly significant partnership for USAID at present is with counterpart agencies in Japan within the framework of the U.S.-Japan Common Agenda. Through this partnership between the two largest donors, technical exchange has increased. Agreement has also been reached on seven priority countries in which complementary programming will be undertaken.

USAID is committed to strengthening all of the partnerships that

will enable us to achieve our common goals for sustainable development.

PHN FUNDING

USAID has been active in the PHN sector since 1965. Over the last ten years alone, funding for this sector exceeded $6.6 billion*, with $3.1 billion for population and $3.5 billion for health and nutrition activities.

In fiscal year 1994, USAID's sustainable development funding totaled $2.05 billion. Of this, 41 percent or $841 million supported PHN sector programs, including $471 million for population, $195 million for child survival, $115 million for HIV/AIDS and $60 million for other health activities. These amounts include multilateral contributions to the International Planned Parenthood Federation, the World Health Organization and UNICEF. They exclude $40 million provided to the United National Population Fund, which was obligated through the Department of State.

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* These totals exclude activities supported through the Economic Support Fund (ESF) and activities in Eastern Europe and the Newly Independent States. If these funds are included, the ten-year total would amount to $7.7 billion, with $3.3 billion for population and $4.4 billion for health and nutrition.

Table 1.
Countries Receiving PHN Assistance
November 1994

AFRICA	ASIA/NEAR EAST	LATIN AMERICA	EUROPE/NIS
Benin	**Bangladesh**	Bolivia	Romania
Burundi	Cambodia	**Brazil**	Russia
Eritrea	**Egypt**	Colombia	**Turkey**
Ethiopia	**India**	Dominican Rep	Ukraine
Ghana	**Indonesia**	Ecuador	Central Asia
Guinea	Jordan	El Salvador	
Kenya	**Morocco**	Guatemala	
Madagascar	**Nepal**	Haiti	
Malawi	Oman*	Honduras	
Mali	Pakistan	Jamaica	
Mozambique	**Philippines**	**Mexico**	
Niger	Thailand	Nicaragua	
Nigeria	West Bank/Gaza	Paraguay	
Rwanda	Yemen	**Peru**	
Senegal			
South Africa			
Tanzania			
Uganda			
Zambia			
Zimbabwe			
West Africa Regional			

Bold indicates special emphasis countries.
* through FY 95.

Clearances:

SDAA/G:AVan Dusen	draft	date	11/94
DAA/G/PHN:DGillespie	draft	date	11/94
G/PHN/POP:EMaguire		date	12/15/94
G/PHN/FPS:JHolfeld	draft	date	11/94
G/PHN/HN:DOot	draft	date	11/94
PPC/SA:NDaulaire	draft	date	11/94
LPA/CL:JBuckley	draft	date	11/94

Drafted: G/PHN/POP/PE,SSNYDER:5-4654:11/22/94
G/PHN/HN,DGibb:5-4556:10/16/94
G/PHN/OFPS, MMoloney:5-4632:10/24/94

REVISED, G/PHN/POP/PE,BCrane:5-4634:12/15/94

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