History and Future of Population-Health-Environment Programs:
Evolution of Funding and Programming

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Introduction

Since the 1990s, Population-Health-Environment (PHE) programming has been implemented around the world. PHE projects are generally on-the-ground projects that use a cross-sectoral approach by providing both family planning/reproductive health services and environmental/natural resource management services to a community. A synergistic relationship has been shown to occur when programming in biodiversity-rich areas addresses both family planning and natural resource management. There is also value added in an overall programmatic sense, through cost-effectiveness for non-governmental organizations (NGOs), time efficiencies for villagers/community participants, expansion of audiences, and efficient management for local leadership (Pielemeier, 2005). Over time, funding and programming in this area has evolved, bringing into question the future of PHE programming. Most significantly, funding of on-the-ground PHE projects by private foundations has dropped significantly and the focus of USAID funding has shifted. In this paper, I will examine the history of Population-Health-Environment programming with a focus on the evolution of these programs and their interaction with changes in funding sources. I wish to understand why shifts in funding have occurred and what impact this has had on the quality and quantity of PHE projects on-the-ground. With this knowledge and information, I draw lessons on strategies for the continued development and funding of on-the-ground PHE projects.

Methodology

For this paper, I employed several research techniques in order to succeed in my objective of understanding why shifts in funding have occurred for PHE projects and what impact this has had on the quality and quantity of PHE projects on-the-ground. In order to do accomplish this objective, I needed to examine the history of Population-Health-Environment
programming with a focus on the evolution of these projects and their interaction with changes in funding sources. The main two research techniques I employed are a review of relevant literature and interviews of staff at PHE funding organizations and other organizations in the PHE field. My focus for this paper is on-the-ground PHE projects, which I distinguish from projects and programs that are focused on capacity-building, policy, and other upper level work. On-the-ground projects provide services to a community, in this case relating to population, health, and environment. Most often, this comes in the form of the providing of family planning and environmental/natural resource management services. While the funding of capacity-building and policy work is very important (even for the future on-the-ground projects), I will only cover these areas in how they are directly relevant to my focus, on-the-ground PHE projects.

My research commenced with a review of literature pertaining to PHE projects and the general area of Population and Environment. I first consulted resources that were used for past papers that I had written relating to this area, looking for what information I was missing (Anderson, 2008; Anderson, 2009; Anderson, 2009). The resources I accessed where a mix of academic publications, books, case studies, program evaluations, and reports. As I had not previously focused on the evolution in funding of these projects, I discovered that I had need of more resources on funding and the more recent history of these projects. A great deal of the literature dates from the first decade of PHE programming (ending at the start of the 2000s).

I then began a comprehensive search for more up-to-date information as well as information about changes in funding levels and funding sources, which my initial research did not provide. This exploration included searches of academic journals, online with Google and Google Scholar, and online with relevant organizations’ websites and in their electronic
knowledge centers (including PHE-funding foundations, Population Reference Bureau, Population Action International, USAID, etc). While this search began to fill in some of the gaps in information, I realized that some of the data I sought was not published or was not accessible in print. Most of the comprehensive reports were outdated and funders had little to no information on their websites about current or past PHE projects they fund. This was especially the case for the early PHE projects, where institutional knowledge does not always go back to the early days of PHE. Upon this realization, I brainstormed around how else I could access this data and realized that some of the current and previous funders in this area would be good sources of information about their own work.

I began my interviewing process with the goal of filling in some of the gaps in information I had identified and hoped to gain a better understanding of the funding evolution that had occurred in this area. I created a target list using a list of foundations that had been involved in funding PHE projects, taken from a review of PHE programs that was commissioned by USAID and the Packard Foundation, written by John Pielemeier (Pielemeier, 2005). John Pielemeier is an independent consultant who spent most of his career as an interdisciplinary international development specialist designing, evaluating and managing international development programs. He has written multiple reports on PHE projects. With his list of foundations, including Packard, Summit, MacArthur, Hewlett, and Turner, I reviewed other articles and researched online for any other foundations that had been involved in funding PHE projects. I discovered that the Goldman Fund, the Charles Evans Hughes Foundation, the Prospect Hill Foundation, and Johnson & Johnson had also funded in this area. In addition, I also wanted to speak with someone from the U.S. Agency for International Development (USAID), who I knew had funded in this area. In total, my target list included ten organizations.
Once my target list was created, I began to contact individuals in each organization, requesting the opportunity to speak with them about their funding in the area of PHE. I choose one individual from each organization from their staff list online that would likely have knowledge in this funding area. For example, staff members in the population program area were a common target, or a staff member that worked with international environment projects. While I usually contacted one individual in each organization, I would contact two if the first was an upper level staff member who may be less likely to respond to my request. For each I emailed a request email or if email was not available, I called the organization. In total, my target list included 15 individuals. This process could result in some unintended bias, both in my choice of organizations to contact and due to the fact that some organizations did not respond to my request. However, I did speak with staff from three foundations that were rather representative of the group as well as a staff member from USAID. The questions I asked also would introduce some bias, although I worked off the same question list for each interview, adjusting them to be suitable for each.

From these conversations with PHE funders, it was also recommended that I speak with others that work in the field. This led me to speak with Roger-Mark DeSouza, currently with the Sierra Club, who has worked in this field for many years, and Jason Bremner, who works for the Population Reference Bureau with PHE providing capacity-building services to many on-the-ground PHE programs. Some of these conversations also resulted in the recommendation of certain literature to examine, which supplemented my previous literature search. I also followed-up via email with several of my interviewees, clarifying information gathered during the interview or to request other data.
With my data collected from the literature and interviews, I was able to begin my analysis. I looked for general trends in funding and noticed right away that there were some major trends that had occurred since the establishment of this funding area. The initial shifts in funding sources from private foundations to USAID was found in the literature, while the secondary shift from USAID to small-scale, localized funding was discovered through my interviews (mainly through my interviews of USAID staff and Jason Bremner, of PRB). I also looked for any impacts these shifts may have had on programming. While there is limited data available on how projects may have changes as well as limited data on exactly how many projects have been implemented and when, with what was available, I was able to draw some conclusions about what has happened in some areas and some situations. To generalize these results can be problematic, but when put in the context that they are not comprehensive of all projects, they can still provide some lessons learned and possible indications of the future of this area.

**Background**

The first global population conference was held in Bucharest in 1974, but it was not until Cairo in 1994 at the United Nations International Conference on Population and Development (ICPD) that the population-environment connection was recognized in the Programme of Action, better known as the “Cairo Consensus” (Bongaarts, 2009). The Cairo Consensus also encouraged the participating countries to invest in and strive for the following goals by the year 2015:

- Universal access to reproductive healthcare
- Universal primary education and closing the gender gap in education;
- Reducing maternal mortality by 75%;
• Reducing infant mortality; and
• Increasing life expectancy (Sierra Club, 2008).

The emergence of the population-environment framework has shaped both policies and programs on-the-ground internationally. As recognized in the Cairo Consensus, there are significant interconnections among reproductive health, a sustainable environment, and economic development (Sierra Club, 2008). With the world population currently over 6.7 billion people and over 9 billion expected by 2050 and the majority living in the developing world, the population-environment framework and Population-Health-Environment (PHE) programs are increasingly applicable.

*Population-Health-Environment (PHE) Programs*

Since 1993, the United States Agency for International Development (USAID), through its Office of Population and Reproductive Health, has strived “to better understand the synergistic relationship between population, health, and environment” (USAID, 2009). This population-environment framework focuses on the many connections between population growth, environmental degradation, and the ability of people to meet their basic needs. These projects are based on a model that integrates population, environment, and health. They are located in areas of high biodiversity that include countries in Africa, Asia, and Latin America (USAID, 2009). The main objective of these programs is to simultaneously “improve access to family planning and related health services while helping communities manage their natural resources, with the goals both of improving people’s health and livelihood and conserving wildlife and other biological resources” (PAI, 2005).
Funding of Programs

Versions of Population-Health-Environment programs first emerged in the late 1950s in the work of an international community development organization, World Neighbors. World Neighbors often provided advice connecting family planning and natural resource management. It was not until many years later that PHE programming emerged as a specific area of programming and started to receive focused funding. In the 1990s multiple private foundations in the United States, including the Packard, Summit, MacArthur, Hewlett, and Turner Foundations, began to fund small-scale PHE programs internationally. Many of these funders withdrew from the field by the early 2000s, except for a new donor, the United States Agency for International Development (USAID). While costs for PHE projects can vary greatly depending on the local situation, kinds of services provided, and other factors, “project costs per site…averaged from $70,000 to $100,000 per year” for USAID projects (Pielemeier, 2007). For these USAID projects, the project beneficiaries range from 15,000-20,000 in most WWF and CI project sites to 500,000 in the Democratic Republic of Congo (Pielemeier, 2007).

Target Regions and Appropriate Settings

Population-Health-Environment programming is being implemented around the world, but it is mainly concentrated in or near threatened biodiversity “hot spots” or protected areas. Other settings include places where high population density (in terms of arable land) puts pressure on the natural resource base and places where certain indicators such as demographic, health, or poverty are worse than the average (Pielemeier, 2005). In the past, specifically targeted areas have included buffer zones of protected areas, landscape and corridor areas, fishing villages in or near threatened marine or coastal areas where fishing waters are locally controlled, watersheds where water scarcity is an acknowledged problem, urban slums, and areas
that have disaster relief programs (Pielemeier, 2005). While these have been target areas, many areas with these characteristics have not been provided with PHE programming.

In addition to the local environment and needs of the population, the current infrastructure and social capacity of a community are considered in the selection of appropriate locations for PHE projects. Population and environment problems and pressures should be evident to the target communities but another factor is a lack of program services to address these problems (Pielemeier, 2005). The target communities need to demonstrate a degree of social capital and leadership as well as having mayoral or other local political support for the project (Pielemeier, 2005). There need to be NGOs that have worked in the area and have already gained the respect of the community (Pielemeier, 2005). Lastly, it is ideal that there are already a significant number of active donor projects or government programs working in the area that could benefit from working together (Pielemeier, 2005). While PHE programs may be suitable in communities with other circumstances, these are the factors that have been recognized as most important for successful implementation in the study of current programs funded by USAID and the Packard Foundation. It is important to recognize that while these are the optimal conditions, communities that may not have this kind of capacity may have an even greater need for programming.

**Quantity of Projects**

While PHE projects have been implemented for two decades, record keeping has been limited and a comprehensive inventory does not exist. Yet there have been estimates and counts that have been done over the years. In 1998, Population Action International published a report entitled “Plan and Conserve—A Source Book on Linking Population and Environmental Services in Communities,” which included a list of 41 projects under “Community-Based
Population and Environment Activities” (another term for PHE) (Engelman, 1998). In 2005, Roger-Mark DeSouza spoke of 50 documented projects around the world (DeSouza, 2005). In 2010, the Population Reference Bureau has created the Population, Health, and Environment (PHE) Project Map “to visually identify and describe recent and current efforts focused on PHE integration in developing countries” (PRB, 2010). The projects, totaling 51, included “actively address a component of population and reproductive health (such as family planning, HIV, or maternal health) in combination with environmental projects and programs,” but projected that ended before 2005 are not included (PRB, 2005). While these counts are not comprehensive, with the data available we can estimate that there have been approximately 100 PHE projects implemented to date. Important to note is that within each project, there may be one site or dozens. Therefore, even if the estimate of 100 is correct, there could be a thousand or upward of sites/villages that have had projects.

Benefits of PHE Programming

Population-Health-Environment programs have grown due to their effectiveness and the recognized value added by the hybrid approach. A synergistic relationship has been identified in the combination of programming in biodiversity-rich areas addressing both family planning and natural resource management. There is also value added in an overall programmatic sense, through cost-effectiveness for NGOs, time efficiencies for villagers, expansion of receptive audiences, and efficient management for local leadership (Pielemeier, 2005). Although there are many benefits to this multi-sector approach combining reproductive health services and natural resource management services, it remains challenging for many donors and central governments that prefer the more traditional single sector approach (Pielemeier, 2005). A single sector approach would be a project that is rooted in providing a certain kind of services, such as health,
environmental, agricultural, etc. A cross-sectoral approach breaks down these silos by providing
services from more than one sector. Some funders are interested in funding more cross-sectoral
approaches, but they are often less committed to making them happen and would rather let them
happen organically (D’Agnes, 2010). PHE projects provide value added for family planning
goals by providing:

- Greater access to men;
- Greater access to adolescent boys;
- Positive changes in the community perception of women and in women’s self-
  perception when they have access to and control of money and credit; and
- An entry point: They are ideal when packaged with other health interventions
  such as immunization and improved water quality and when part of highly valued
  Natural Resource Management/Coastal Resource Management (NRM/CRM)
  programs (Pielemeier, 2005).

And likewise, PHE projects provide value added for Natural Resource Management/Coastal
Resource Management goals by providing:

- Greater female involvement in environment/conservation activities and
  organizations;
- Increased participation of adolescents of both sexes;
- An entry point: Integrated projects can quickly and visibly respond to priority
  community demands (often health needs) and gradually gain community trust;
- Inclusion of micro-credit component may bring greater impact; and
- Results often evident more quickly in CRM settings than in NRM settings
  (Pielemeier, 2005).

This increase in access to other segments of the population can greatly advance goals of
inclusion, such as the shifting focus of family planning programs from targeting mainly women
to targeting couples and families. The goal of including couples and families in family planning
decisions is also becoming more widespread in family planning programs, even those not affiliated with PHE projects. The way PHE programming can leverage their access to other segments of the population may be replicable in single sector projects, but research would need to be done to explore this possibility.

Recent evidence from a PHE project in the Philippines shows that this integrated approach has a significantly greater impact on both reproductive health and coastal resource management indicators than the stand-alone programs or single-sector strategies (Castro, 2008). The IPOPCORM project, Integrated Population and Coastal Resource Management, has also showed that integrated approaches can be more cost-effective, with the integrated intervention costing less than the stand-alone Reproductive Health and Coastal Resource Management projects together (Castro, 2008). “Although operational research results may not always be statistically significant, the on-the-ground results have been significant enough to convince most PE/PHE practitioners that integrated programs have better reproductive, health, and conservation outcomes than single-sector programs” (W. Wilson, 2005). This is a significant shift in thinking, but has begun to spread to other areas of development, such as efforts around HIV/AIDS. While operational research results have not always been statistically significant, it is important to note that there are limits of using a measure of statistical significance when assessing the effectiveness of a program with a small-scale population (like a village with a PHE project). And while statistical significance is an important tool in evaluating programs, it is not “a smoking gun,” but rather one tool of many that needs to be used in conjunction with what is witnessed on-the-ground (Edwards, 2008).
On-the-ground Case Study: Madagascar

Case studies and research projects have been and are being done on PHE programs around the world, but they are still few in number despite the estimated 100 programs that have been implemented on-the-ground. The sparse research is partially due to challenges in evaluating multi-sector, hybrid programs. One such case study that is a success story used by USAID is a PHE program in Southern Madagascar. Important to note, though, that since the coup in early 2009, the US-Madagascar relationship has shifted dramatically. USAID is restricted from working with the Government of Madagascar, but in FY 2010, applications for funding from U.S. PVOs/NGOs (Private Voluntary Organizations/Nongovernmental Organizations) working in Madagascar will be accepted (USAID, 2010). The program in Southern Madagascar was initiated by the World Wildlife Fund (WWF) with a local partner organization, Action Santé Organisation Secours (ASOS), with funding from USAID (USAID, 2008). This PHE project “aims to address the problems in [the] Spiny Forest by building community awareness of family planning options, providing counseling and access, and simultaneously initiating sound natural resource management practices and sustainable livelihood strategies” (USAID, 2009). The program is focused on addressing the linked problems surrounding population, health, and environment by building community awareness of family planning options, providing counseling and access to services, and initiating sound natural resource management practices and sustainable livelihood strategies (USAID, 2008).

When WWF and ASOS started this project, they conducted a baseline survey and a Participatory Rural Appraisal in target villages “that helped the villages develop work plans relating to population and health priorities” and “helped to identify field agents (individuals and institutions) that would participate in networks for communication, exchange of information, and
access to commodities and services” (EHP, 2008). This was done to help ensure a sustainable flow of supplies, which is often a problem in Madagascar, even for government programs. All project activities would fall under three main categories:

1. Collaboration and partnerships to strengthen commodity chains, link to information resources, coordinate activities and promote synergies between actors – in particular those synergies that improve health, family planning and local and household economic development;

2. By mobilizing field agents and partners - raise awareness of, strengthen links and access to, and improve the quality of: family health and family planning information, reproductive health care and commodities; Communication activities integrate themes of environmental conservation into the health and population messages;

3. Increased community management of natural resources which includes: tree planting and wild-fire control, designation and management of protected areas, reviving awareness of “dina” or traditional regulations that ensure sustainable natural resource management, and promoting fuel-saving technologies in homes;

4. Promoting capacity building of local authorities to better collaborate with and coordinate efforts of community development partners (EHP, 2008).

One village participating in this project is Beahitse, where small rice and vegetable fields are the main source of sustenance and polygamy is common with men taking between two and four wives, each bearing at least seven children (USAID, 2008). While financially supporting these large families is very difficult, social norms have prevented women from discussing their desire of smaller families with their husbands. In addition, access to the nearest health center with family planning services is nearly 40 kilometers away (USAID, 2008). Large families have been the norm in Madagascar and women have traditionally been given respect for producing many children. One traditional Malagasy proverb is still widely known that encourages couples
to have seven boys and seven girls, if they are so blessed. While the average number of children has fallen significantly from 6.5 children per woman in 1980 to about 5 in 2009 and the Total Fertility Rate (TFR) for the richest fifth in Madagascar is 3.4 children per woman, it is 8.1 for the poorest fifth (PRB, 2009; CIA, 2009).

In Beahitse, women have started to “express their desire to space their children, have smaller families, and work with others to spread the PHE messages” (USAID, 2008). Access to contraceptives has become available through local villagers who have been trained to provide knowledge about reproductive health, encouraging spacing and smaller families through the use of contraception (USAID, 2008). The use of community-based distribution methods has proven very effective with sanitation and family planning information in rural areas of Madagascar. In addition, the project is implementing community-based natural resource management and agricultural activities, educating on the importance of the forest, especially for its role in maintaining water sources in this dry region (USAID, 2008). This education about resource management also includes health education with messages about how “healthy people need a healthy environment for precious water, food, and income generation purposes” (USAID, 2008). While both types of programming are present in Madagascar, this hybrid approach has shifted both the focus of programming as well as the resulting impacts on-the-ground. The value added has been seen through these programs, both in results and through programming benefits.

*Concerns with PHE Programs*

Population-Health-Environment programs continue to be implemented in biodiversity-rich areas around the world, with bilateral and multilateral funding flowing from the developed world. The funding for these programs stems from the belief that the population-environment framework provides an effective model for on-the-ground programming that respects human
rights and promotes the betterment of people’s lives and of the natural environment. Yet, there have been criticisms of the use of PHE programs. The two main concerns that are raised by James Oldham, founder and director of Las Lianas Resource Center, regard:

- The assumptions that are made to justify these links tend to blame environmental degradation on poor communities and specifically on poor women’s fertility; and
- The narrow focus on reproductive health tends to obscure the broader health needs of rural populations in the global south (Oldham 2006).

Other concerns relating to the implementation of PHE programs relate to development funding and implementation. The majority of donors have been from the developed world and such donors sometimes neglect to meet the needs of the local population in favor of providing what they think the local population needs. There are other stakeholders in this issue that raise additional concerns. Some developing country governments “resent the emphasis given to population growth as a cause of environmental degradation, when consumption in the North clearly deserves much of the blame” (Mazur, 1994). Women’s groups and feminists raise concerns that these programs could neglect to respect human rights and women’s health in the name of saving the environment (Mazur, 1994). Religious groups, especially the Catholic Church, and the pro-life movement oppose the use of abortion and “artificial” contraception, raising concerns about not only funding population-environment programs, but also about providing family planning services in general (Mazur, 1994).

Lessons Learned and Mitigation of Concerns

Some of the concerns that have been raised can be mitigated with the careful choice of programming. Oldham recommends that:

- Programs use rights-based arguments for why family planning services should be available;
• Local needs and community initiative are central to project planning (use of participatory process);
• Proper evaluations that ask the hard questions (e.g. “Are RH/FP [Reproductive Health/Family Planning] approaches safe and comprehensive and is there adequate health care available to provide screening and follow-up as well as other basic health services?”);
• Funders need to have a broad vision to allow for local needs to be met over predefined objectives; and
• Timeframes need to be adequate for the participatory process and for meaningful outcomes to occur (Oldham, 2006).

Lessons have been learned from the approximately 100 that have been documented around the world which provide opportunities for the improvement of future projects (De Souza, 2005; PRB, 2010). Programs are not as effective when the opportunity does not match the needs of the community, when the intervention is not the correct one, or when it will not be as effective as when single sector approaches are employed (De Souza, 2005). Sustainability is another issue that has plagued PHE projects, with insufficient attention paid to recurrent cost issues as well as the dependency on outside donor funding (Pielemeier, 2005). The Madagascar case study may be a good example of this dependency, although updated information about that program’s status is not yet available. Also good to note is that many of these recommendations relate to improving development work in general.

One PHE project in Kenya, the Sauri Project, has provided additional lessons learned. They have found that “strong leadership and effective management are essential to successful community-based PHE projects that must integrate a wide variety of interventions and engage multiple stakeholders” (Thaxson, 2007). They also found that cross-sectoral interventions may be initiated at different times and at different scales to meet the needs and priorities of the
stakeholders (Thaxson, 2007). Lastly, that “[l]ow-cost interventions, such as rainwater harvesting, improved cook stoves, and pit latrines, can quickly improve the health and well-being of communities and provide incentives for continued engagement in such longer-term initiatives as reforestation and immunization efforts” (Thaxson, 2007). These lessons learned provide valuable information to improve PHE programs in other regions as well. In general, human rights, local initiative and participation, systemic thinking, and adequate funding and timeframes will be vital components of effective development programs, including Population-Health-Environment programs.

Analysis

In order to better understand the shifts in funding, its impact, and the future of PHE programs, the evolution in funding of PHE projects must be examined. Philanthropic and governmental funding can have significant power over whether a specific approach becomes widely used or a technique of the past. PHE programming has continued for nearly two decades, but it has not remained constant in dollar amount, funding sources, or targeted projects. Examination of these developments should help inform our understanding of the importance of these programs as well as the future of PHE programming.

Early Funding of PHE Programming

While the concept of combining population/reproductive health services and environmental/natural resource management services has existed for decades, it was not until the 1990s when funding started to become available for projects that focused on this unique cross-sectoral approach. Since the 1990s PHE programs have been implemented around the world, capitalizing on a synergistic relationship that has been identified in the combining of programming in family planning and natural resource management in biodiversity-rich areas.
During the early to mid-1990s, several American foundations, including the Summit, the MacArthur, the Hewlett, and the Turner Foundations funded PHE programming at low levels. This private funding supported:

- An increase in the number of grantees testing PE field projects;
- An increased the number of overall field sites;
- Operations research at two Population-Environment field projects;
- Monitoring and Evaluation: data collection at other sites;
- Establishment of new leadership programs in key U.S. institutions; and
- Increased funding for programs that alerted the American public to global Population-Environment issues and the impact of U.S. consumption patterns (Pielemeier, 2005).

It was also during this period that partnerships emerged between private funders and international conservation organizations, as many of the PHE grants went to these organizations. In the early 1990s, the Summit Foundation funded the WWF to begin working on PHE, with exploration of population-related activities (Pielemeier, 2007). Over time, other conservation organizations including Conservation International (CI), the Jane Goodall Institute (JGI), and the Wildlife Conservation Society (WCS) joined WWF in receiving funding for PHE programming (Pielemeier, 2007). Foundations were drawn to this new and innovative programming area because most of them already had programming areas in population/family planning and environment. In 2000, the Packard Foundation established the Packard Population-Environment Initiative, which focused on funding projects integrating conservation and family planning at community level in biodiversity hot spots (areas with high biodiversity).

*Explaining the Decline in PHE Funding by Private Foundations*

Despite the growth of PHE programming during the 1990s, with the stock market decline after September 11th, 2001 several foundations decided to reduce or eliminate funding for their
population-environment programming (Pielemeier, 2007). Shifts in funding occurred and while many of the private funders were reducing their grantmaking in this area, the United States Agency for International Development (USAID) ramped up their grantmaking in PHE programs. USAID had been striving “to better understand the synergistic relationship between population, health, and environment” since 1993, but in 2002 it joined in funding PHE programming, infusing resources into programs that otherwise would have lost funding during this period (USAID, 2009). This trade-off of PHE support from private foundations to government requires explanation.

Some of the factors, other than the decrease in assets, that led the private funders to withdraw include:

- A preference to focus remaining resources on more traditional, core program themes, rather than cross-program funding;
- The general donor/foundation trend towards a “results” orientation with funding for programs that could provide clear benchmarks for monitoring and evaluation, and;
- A tendency to focus all foundation resources on a few specific geographic regions (place-based strategies) (Gibbs, 2003).

In addition, foundations often want to be funding in new and exciting areas. After a decade of funding in the PHE area for many of the funders, some were ready to move on to a new idea or focus. Many foundations reprioritize every five to seven years, causing shifts in focus areas and funding (Travis, 2010). This ebb and flow in funding area continues today, as MacArthur is considering renewing its focus on PHE programming (Sines, 2010). Funders often look for projects that demonstrate measurable results in a short period of time (DeSouza, 2010). PHE projects tend to see results in a longer timeframe. Changing “the hearts and minds of individuals” and measuring the impact that doing so has on improving the natural environment
takes time and is difficult to quantify (DeSouza, 2010). While these factors each play a different role in how funders make decisions about their grantmaking, each has shaped the future of PHE work internationally and will continue to shape any foundation investments in this area.

Another influence on both funding from foundations and government is the public sentiment and involvement of interest groups, although the government tends to be a greater target. Family planning programs, domestic and international, has faced stiff opposition in the United States from pro-life groups. It does not appear that this had any great influence on foundation grantmaking in PHE as all these foundations have continued to fund family planning and reproductive health work domestically and/or internationally. “Private foundations—accountable to integrated and idealized world visions rather than the demands of shareholders or taxpayers—seem uniquely suited to experiment with such cross-program collaboration” (Gibbs, 2003). It can, however, have significant impacts on government funding. During the George W. Bush administration, U.S. funding for the United Nations Population Fund (UNFPA) was withheld, relating to political interests around abortion and reproductive health. This was reversed with the inauguration of the Obama administration and increased funding for international family planning and PHE work has become the trend with the new administration. Public sentiment and popularity of a certain grantmaking area can also influence the funding of PHE. Growing focus on climate change and environmental issues has been a mixed bag for PHE. Some organizations, like National Wildlife Federation, have moved away from P-E work, which others are leveraging the ties between population growth and climate change to fund PHE projects on-the-ground. On the other hand, there may be funding opportunities through connecting PHE to climate change work.

Organizational culture, structure, and history also influence foundation’s grantmaking
decisions and priority areas. Each foundation operates independently and has its own unique situation that affects its choice of focus areas and individual grants. Organizational structure often impacts choices about PHE as many foundations have more traditional program areas and PHE spans between these silos. Program staff typically falls within one program area and there is often little to no incentive for staff to develop grants that cross those traditional divisions (Belden, 2010). According to Peter Belden, at the Hewlett Foundation this has traditionally been the case, although funds for P-E have been given when there has been a staff member with interest and dedication to the area (Belden, 2010). Foundations like Hewlett allow their program staff discretion over some of their work, allowing them to work in areas of personal interest (Belden, 2010). While this has resulted in Hewlett’s continued involvement, although limited, in P-E work, not all foundations will have a staff member with an interest in P-E linkages or PHE programs. A new director or leader can also greatly shift a foundation’s goals and programmatic focus, as occurred with the Packard Foundation (Belden, 2010). Many foundations operate on grantmaking cycles and every so many years, reprioritization and strategizing occur. At Hewlett program staff rotates every eight years, which could either allow for the exit or entrance of a programmatic focus (Belden, 2010). Organizational structure, culture, and history can offer both an opportunity and a risk for the future of PHE funding.

The shift away from this area was especially surprising for one funder. Despite having its new Population-Environment Initiative, the Packard Foundation was included in this group that saw declining assets, leading the board to decide in 2002 to discontinue the P-E Initiative (Pielemeier, 2005). Due to their substantial investments and program success, Packard initiated a phase-out plan that allowed for final grants to be awarded in 2004 (Pielemeier, 2005). While Packard fell short of their initial goal of investing between $25-$30 million in the P-E Initiative
over five years (starting in 2000), they did fund $16.2 million to organizations for PE activities between 1999 and 2004 (Pielemeier, 2005). Compared to the other funders in the field, Packard was a substantial funder that drove growth in this area. While some funders have moved away from PHE due to its longer timeline, Packard maintains its commitment to taking a longer view for areas that require it (Packard, 2010). Today, Packard continues for fund several PHE projects in Ethiopia, although they are not focusing their funding on PHE initiatives at this time (Bremner, 2010).

With the recent economic downturn in the United States and around the world, foundations were greatly impacted through reductions in the size of their endowments. Many foundations have reduced their grants, focus areas, and reduced the size of their staffs. Between 2007 and 2009, the Hewlett Foundation’s endowment shrunk by 35% and as a result, they cut two of their program areas, focusing their work and funding on a smaller number of grantees (Belden, 2010). In 2007, Hewlett provided funding to the Sierra Club, The Izaak Walton League of America, the Audubon Society, and the National Wildlife Federation for P-E work (Belden, 2010). With the changes they have undergone, they are now only funding Population Action International (PAI) and Population Reference Bureau (PRB) for work in this area (through general support grants) (Belden, 2010). It is unlikely, moreover, that Hewlett will soon increase their funding in this area, as is the case with most foundations that have worked in this area.

**Taking the Baton: USAID Funding of PHE Programming**

While private funding of PHE programming had significantly decreased by the early 2000s, a new source of revenue emerged. In 2002, USAID officially started to fund PHE programs in the field as a result of new language included in the FY02 Foreign Operations Appropriations bill (USAID, 2009). In this bill, and many subsequent, it is stated that “under the
Child Survival and Health Programs Fund some portion (unspecified) of the funds for family planning/reproductive health {should be allocated} in areas where population growth threatens biodiversity or endangered species” (USAID, 2009). This language change was added due to “discussions that certain members of the foreign appropriations committee had with certain NGO groups which convinced them of the importance of integrated programs, and the value of having official language directing USAID to fund integrated PHE projects” (D’Agnes, 2010). The decline in foundation support for PHE likely supported the NGO argument for USAID funding in this area. Whatever the circumstances, this infusion of funds allowed for the continuation of PHE programming internationally as other funders reduced or eliminated their grantmaking in this area. In fact, USAID became a significant funder of PHE programming, far surpassing the history of private funding sources.

Between 2002 and 2009, USAID (not including in-country missions) spent $26 million on population, health, and environment (PHE) activities, being a significant financial supporter for PHE activities globally (Pielemeier et al, 2007; D’Agnes, 2010). Over the past three funding cycles, the funding for this area has increased each year, with $2,577,000 in FY 2007, $2,967,000 in FY 2008, and $3,646,700 in FY 2009, but since 2008 their focus has been on capacity-building (D’Agnes, 2010). Nevertheless, they have continued to fund on-the-ground PHE projects in Kenya, Nepal, Democratic Republic of Congo, Tanzania, the Philippines, and Ethiopia, with Ghana and Zambia to be soon added to the list (D’Agnes, 2010). In-country missions are also funding in this area, which are not included in these numbers, as it is difficult to track as they have discretion over their funding. USAID has partnered with other funders, such as the Packard Foundation, to jointly fund projects and often targeted resources towards projects started by other foundations (Pielemeier, 2005). The USAID funding for PHE programs
on-the-ground is mostly dispersed to conservation organizations implementing PHE programs in biodiversity rich areas such as Conservation International in Cambodia and World Wildlife Fund (WWF) in Madagascar (USAID, 2009). The main objective of these programs is to simultaneously “improve access to family planning and related health services while helping communities manage their natural resources, with the goals both of improving people’s health and livelihood and conserving wildlife and other biological resources” (PAI, 2005).

Table 1: USAID/Washington Office of Population and Reproduction Health PHE Funding Obligations FY 2002-2007 ($ thousands).

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<td>350</td>
<td>450</td>
<td>600</td>
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<td>450</td>
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<td>320</td>
<td>202</td>
<td>272</td>
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<td>125</td>
<td></td>
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<td></td>
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<td>Population-Environment Fellows</td>
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<td>1,440</td>
<td>990</td>
<td>1,260</td>
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<td></td>
<td></td>
<td>555</td>
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<td>MEASURE/Evaluation</td>
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<td>75</td>
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<td>175</td>
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<tr>
<td>Madagascar Wildlife Conservation Society</td>
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<td></td>
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<tr>
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<tr>
<td>SAVE Phil/PESCODEV</td>
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<td></td>
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Environmental Health Program
ProSalud
Total by Year

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<th></th>
<th></th>
<th>440</th>
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<td>ProSalud</td>
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<tr>
<td>Total by Year</td>
<td>3,338</td>
<td>2,949</td>
<td>4,120</td>
<td>3,237</td>
<td>3,202</td>
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</table>

Table 1 Source: Pielemeier, 2007. Note: includes funding for both on-the-ground PHE programming and policy/capacity-building PHE work.

While funding from USAID for PHE work has been significant when compared to other PHE investments, it is quite small when compared to USAID’s total expenditures each year on health: $4.8 billion in FY 2008, with $473 million going to family planning and reproductive health (USAID, 2010).

Political Environment and USAID Funding of PHE

While this infusion of funding was a welcome addition for the PHE community, it did come at an unlikely time. In 2002, the Bush Administration was in power and would later withhold funding for the United Nations Population Fund (UNFPA) and was generally hostile towards family planning initiatives. This is an example of whereas government funding can be greatly impacted by special interests and the politics of the current administration; it is not always the case. One likely cause for this shift to have occurred was that this funding source was established by a language change to the Foreign Appropriations bill and it did not have a specified amount of funding associated with it, only that it would come from the Child Survival and Health Programs Fund. The fact that it did not have dedicated funding nor was it a large component of the bill made its inclusion all the more likely. Since the inclusion of this language and the establishment of USAID as a funder of PHE, it has shifted its funding focus to new types of PHE work.

Recent Shifts in PHE Funding

In recent years, the USAID has shifted its focus away from the funding of on-the-ground PHE projects (service providing) to the funding of more capacity-building, policy development,
and research-based work (D’Agnes, 2010). Instead of only funding organizations like World Wildlife Fund to implement service-providing projects with local partners abroad, USAID is funding PHE leadership building projects, research, and policy creation and implementation (D’Agnes, 2010). While still in the area of PHE, these projects and programs are not funding on-the-ground projects providing services, but rather are building capacity within individuals and the PHE community to do policy-work and evaluating on-the-ground PHE projects. This shift has the potential to create greater social change through political and organizational transformations. For example, succeeding at getting a nation to include PHE in their government projects could allow for a great deal more PHE projects to be implemented. Also, if individuals working in other areas of development learn about the PHE approach, they may be able to incorporate some of the core practices into their work, improving their services. Yet, a new concern has arisen.

As USAID shifts away from funding only on-the-ground programming, they are losing some of their connections to the PHE work that is happening on-the-ground. However, on-the-ground, localized programming is the foundation of their capacity building and policy work. When explaining the PHE approach in a policy context, it relies on the experience of what has been successful about PHE projects on-the-ground. As Heather D’Agnes, the Population-Environment Technical Adviser with USAID, stated, the two approaches go hand-in-hand, so having both the top level work and the on-the-ground direct service programming will be necessary for a bright future for PHE (D’Agnes, 2010). While their new focus is in this capacity-building work, USAID does continue to fund on-the-ground projects in many nations. Many foundations fund innovative projects with the hope that governments or other funders will
take them on and make them more sustainable. To an extent, this has occurred with PHE programming, although other funding approaches are being used as well.

USAID is not the only entity that has been investing more in policy level work and capacity building. Several private foundations have made recent investments in P-E advocacy work in the United States. At the same time, while USAID central may not be funding on-the-ground PHE projects, other funders—both private foundations and others—are doing so. While the day of several private funders dominating the funding of PHE activities has passed, several private funders in the United States have become involved in recent years. They include the Goldman Fund, the Charles Evans Hughes Foundation, the Prospect Hill Foundation, and Johnson & Johnson (Pielemeier, 2007). The Goldman Fund has been making grants in the area of population-environment for many years, totaling $1.305 million between 2003 and 2009 (Goldman, 2010). Most, if not all, of its grantmaking was to organizations that were working in the area of Population-Environment, but none were providing on-the-ground programming internationally. The funding was received by US nonprofit organizations working in advocacy, education, and research in the area of P-E. However, the Goldman Fund did not make any P-E related grants in their 2010 grantmaking cycle (Goldman, 2010). They are currently cutting back in all grantmaking areas, having halved their total grantmaking from $400 million to $200 million over the past three to four years (Travis, 2010). With these reductions, they have refocused on domestic grantmaking and are unlikely to recommence grantmaking in the area of P-E in the coming years despite the original interest in population and environment of Mr. and Mrs. Goldman (Travis, 2010).

The Charles Evans Hughes Memorial Foundation has made this area one of their primary program focuses (CEHMF, 2010). In 2005, the Charles Evans Hughes Memorial Foundation
supported Population Action International (PAI) with a grant for population-environment activities, but recent grantmaking information is not known (PAI, 2005). It seems unlikely that the Charles Evan Hughes Memorial Foundation will play a large role in PHE funding in the future, especially as their past funding has been limited and not for on-the-ground PHE programming.

The Prospect Hill Foundation established a new strategy that would encourage population-environment connections through their programming in their target areas of Guatemala and Mexico (Pielemeier, 2007). Recently, the Prospect Hill Foundation made a grant to World Neighbors “for reproductive health and natural resources management activities in Guatemala” (PHF, 2010). While their grantmaking in this area is not great ($35,000 for World Neighbors), they are funding on-the-ground PHE programming while most other funders are not focusing on the providing of PHE services (PHF, 2010). The future of this programming is uncertain, though, as the Foundation’s programs are currently under review.

Since 2003 Johnson & Johnson has been working with WWF on the “Healthy Communities, Healthy Ecosystems” partnership (Johnson, 2010). In 2008, Johnson & Johnson, USAID, and WWF entered into a public-private partnership to integrate health, population and environmental needs for rural communities in Kenya, Nepal and the Democratic Republic of Congo (USAID, 2008). “This three-year, $3 million global health initiative builds on the outcomes of earlier work funded by both USAID and Johnson & Johnson, which suggest higher efficiencies in aid delivery and improved results when health and environmental services are delivered in an integrated fashion” (USAID, 2008). While the amount of funding from private foundations is greatly diminished from a decade ago, continued funding from these funders is a sign that PHE programming will likely continue into the future.
Another funding source, while with minimal involvement, has been several of the United Nations agencies, including the United Nations Population Fund (UNFPA) and the United Nations Educational, Scientific and Cultural Organization (UNESCO). UNESCO has funded several PHE field projects in Western Madagascar and UNFPA has financed ten sites in the Philippines (Pielemeier, 2007). In addition, UNFPA stated in its 2008 Annual Report their work with P-E connections: “UNFPA helps governments better understand the links between population trends and dynamics and the environment” (UNFPA, 2008). As early as 2001, UNFPA was discussing linkages between population, health, and the environment (UNFPA, 2001). Recently, UNFPA has also reported that PHE efforts are particularly important in areas threatened by climate change, where women need to play active roles in adapting to changing conditions (UNFPA, 2009). UNFPA, while only providing modest funding for PHE programming, is bringing population-environment linkages and PHE programming to the public’s attention, which could be a valuable service for the future of PHE funding.

Other countries have also provided assistance through their agencies parallel to USAID in the United States. The French Foreign Ministry, the Canadian government through the International Development Research Centre (IDRC), and the development agencies in Sweden, Norway, and Denmark are providing resources for PHE work (DeSouza, 2010; Bremner, 2010). Other countries may support this work, but it is often difficult to track as it is often not identified as PHE work or is going through several organizations before reaching the on-the-ground organization.

New Funding Approaches in PHE

As funding for on-the-ground PHE programming has shifted away from large institutional sources, new funding and programmatic approaches have emerged. No longer are
PHE projects only being established by large international environmental NGOs, funded by private foundations or USAID. Today, new funding approaches have been vital for the survival of PHE work. This can even be seen in parts of USAID funding of PHE programming. On-the-ground programming is still being funded by USAID but less is coming from Washington, D.C., which is focusing on the global-level work (Bremner, 2010). According to Jason Bremner with PRB, USAID’s in-country missions are paying for service delivery by adding onto other projects, such as adding on a family planning services component to a large environmental project (Bremner, 2010). This has been happening in Rwanda, Tanzania, Malawi, and Mozambique, among other areas (Bremner, 2010). They are also helping organizations coordinate their work—the second new financing approach. An added benefit to these approaches is the increase in the sustainability in the projects. Organizations are no longer depending on one funder to renew their grant every few years; they are now able to create a more sustainable stream of funding or a partnership that will be able to sustain the projects without large amounts of dedicated funding. As sustainability was an issue that plagued many PHE projects in the past, this could be a beneficial shift.

Organizations working in the area of PHE are financing their work in diversified ways (Bremner, 2010). Two primary ways that organizations are securing funds is piecemeal (smaller grants coming from various sources) or through partnerships with other organizations. Often, when organizations are securing financing through a variety of sources, their funders do not know that they are funding PHE work. One grant may be for the environmental or natural resource management component of their work and another separate grant from another source may be for the family planning/reproductive health component of their work. There are examples of this with USAID and the MacArthur Foundation—MacArthur was not aware that
the project they were funding was actually a PHE project (they were funding the family planning component) (Bremner, 2010). While this is effective at meeting the goal of providing services to their community, it does not create a transparent kind of programming for funders or for raising awareness within the larger public. This makes tracking of PHE projects difficult for use by groups working at the capacity and policy development level. There are some cases where funding and support from local government agencies has been obtained for PHE projects, such as in the Philippines, but this is less common (DeSouza, 2010). The Philippines decentralized government and strong history with PHE programming has laid a good foundation for local government involvement. Many areas do not have this ideal situation to encourage or support this type of funding.

Similarly, some organizations are executing PHE work by partnering with other organizations that specialize in the area that they do not. For example, an organization that provides family planning services may partner with an environmental organization that works in the same region. Again, the communities are being served, often very efficiently and effectively, but it is difficult to track this work. Without knowledge of what is happening on-the-ground, the capacity and policy development work will have a difficult time making their case and accomplishing their goals of encouraging PHE and general P-E linkages. There are efforts underway to track and map these somewhat invisible projects by Population Reference Bureau, but it remains to be seen whether they can successfully be located and tracked in a manner useful for those working on policy and capacity-building activities (Bremner, 2010).

In the Carr study of WWF PHE projects, he found that “flexibility and level of support of the funding was directly related to the success of the project” (Carr, 2008; Oglethrope, 2008). The ability to cater a project to a community’s immediate needs can be advantageous in terms of
localized impact, but may not be seen as ideal by some funders if the shift does not fit within their goals or mission.

*Evolution over Time of PHE Funding Sources*

As presented in the previous sections, an evolution in PHE funding sources has occurred. While changes in funding sources are not uncommon for development work, an interesting series of funding waves has occurred for this area of programming. In the early years of PHE programming, private foundations served as the main sources for funding. By 2002, this funding had mostly dried up, while USAID entered the scene, becoming the major funder of that time. Yet, as USAID has shifted their focus away from PHE on-the-ground programming towards capacity-building and policy work, new funding approaches arose. Today, new localized and piecemeal funding approaches have become more prevalent and appear to be the future funding source for PHE. This evolution in funding sources can be seen below in the graph. Important to note, this graph is meant to show the general trends in funding and is not based off comprehensive numbers due to lack of accessible data. Instead, it is based on the previous analysis and information gathered during the research process. This visual representation shows that there have been three major waves in funding sources. While we cannot be certain of the future of funding in this area, this third wave appears to be a likely long-term approach, as it can comprise a variety of funding sources and approaches. As previously stated, this third wave can be beneficial in terms of sustainability and ability to meet the needs of the communities served.
**Evolution in PHE Programming**

As service providers make use of more diverse approaches to secure funding, there are several important impacts to recognize. Many are also not calling their work PHE, even if it would fall under the classic definition. Projects were often pegged as PHE due to the funding source calling their work PHE. As this source of funding has diminished, so has the use of the descriptor “PHE”. This has exacerbated the problem of tracking PHE work. Another impact of these new funding approaches is while the small on-the-ground organizations are successfully finding funds to execute their projects, the larger Washington, D.C.-based (and other) organizations that have historically worked in this area are having a more difficult time securing the large grants they need. Many of these organizations are large environmental nonprofits that became interested and involved in this area as they saw the added benefit and need for family
planning services where they execute their environmental projects. The trend seems to be away from large grants and large organizations working on PHE projects towards less transparent, smaller localized projects that are still accomplishing the goals of providing the services to the communities. This could be a good shift for ensuring the providing of services on-the-ground, but a difficult shift for creating social change in this area through policy change and other high-level approaches.

While many individual organizations are not labeling their work as PHE, many in the policy and advocacy community are including many kinds cross-sectoral projects into this category of PHE (DeSouza, 2010). While a general definition of Population-Health-Environment programs is used, it can encompass many kinds of integrated projects. As new issue areas emerge, the PHE net continues to grow. For example, as climate change has moved to the forefront of the environmental movement’s work, so have the connections between population change and climate change. While climate change work may not have originally fallen under the PHE umbrella, it is joining many of issue areas such as sustainable farming, poverty alleviation, HIV/AIDS prevention, and others (DeSouza, 2010). Yet, it is important to recognize that it is often the funders or advocacy organizations that are grouping work into this area. For example, some organizations like National Wildlife Federation that previously did advocacy work with P-E issues has cut that specific program but has incorporated the work into their climate change work. The exception is when an on-the-ground organization is vying for funds that are connected to one of these other areas. As funding is becoming available for climate change work post-Copenhagen, there are efforts for inclusion of the population and climate change work through PHE projects.
Shifts in funding have been one source of change for PHE programming, but there are other influences that have caused the continual evolution of PHE programming. As with most areas of development work, it has become more established over the years in terms of number of projects and lessons learned. As more projects were implemented in new areas, each project was adapted to meet the local needs of a community while leveraging their local knowledge and resources. This expansion of projects allowed for researchers to see which projects (or components of projects) were successes and failures. As mentioned in the discussion section of this paper, the lessons learned have allowed for the continual improvement of projects. It has also allowed for the ongoing development of a toolkit helping organizations establish their own PHE projects, available online at www.k4health.org (D’Agnes, 2010).

While the goal has been to establish a basic framework that can be repeatable in different settings, it will remain vital for organizations to take into account local needs and demand, local resources, and local knowledge when establishing and running PHE projects. While the PHE framework can be applied to many settings, it is most relevant to communities that are facing population pressures and environmental issues. Yet, the integrated approach of PHE can also be translated into other development areas as well. An interesting example is the integration of HIV/AIDS work with environmental work (DeSouza, 2010). As PHE work continues around the world, more lessons learned will emerge as older projects face new challenges and as brand new projects are established in new areas.

PHE projects have continued to become more established, but PHE has not necessarily followed the path that some expected. As PHE successes became apparent, many funders and advocacy organizations saw the potential for scaling up PHE projects. The toolkit efforts have attempted to contribute to this scaling up effort. PHE has expanded to new areas, but most
frequently they are only established in new areas when there is an outside impetus. This has often been when a funding opportunity is available and an organization already works in that area.

Less common, if existing at all, are PHE projects started by a local organization without the involvement of an outside funding source or organization. The projects that are happening in this way are not labeling themselves PHE, but they are applying the integrated PHE approach in their work. One example of this is the Cabbages and Condoms project of the Population and Community Development Association (PDA) in Thailand (DeSouza, 2010, PDA, 2009). While its work is not labeled PHE, PDA’s efforts with family planning/HIV/AIDS and environmental issues keep them under the PHE umbrella (PDA, 2009). What is interesting is that many of these kinds of projects are integrating many more components, such as governance, economic development, and microlending. The traditional silos are often being broken down beyond the way PHE does, incorporating a more holistic approach to social change and betterment in their communities and nations.

It is debatable whether efforts at “scaling up” PHE have been effective and there are important successes that may be preventing more widespread scaling up of PHE. With the quantity of project estimates, we have seen an increase in the number of projects, with approximately 50 projects in the first 15 years and now approximately 50 projects over the past 5 years. As projects have become more localized with their funding sources and partnerships, it has become more difficult to gain information about the existence of projects as well as their successes and failures. This lack of transparency has made it more difficult to create resources and infrastructures to help expand and scale up PHE efforts. The benefit of this shift has been the increased sustainability and stability of these projects. In order for scaling up efforts to be
successful, we must recognize this shift towards localization as a positive move and that it creates the need to gain better access to new programs and their lessons learned. This can be accomplished through different channels, one being organizations like Population Reference Bureau that work with many of the on-the-ground organizations doing capacity building and training (Bremner, 2010). Their current project working on mapping PHE is one of many ways to make these otherwise invisible PHE projects detectable. Yet, in order for these efforts to assist in scaling up goals, researchers are needed to glean the lessons learned from each project to contribute to a better replicable model. With a better model and toolkit, advocacy and funding organizations will be able to better leverage resources and convey their message of the PHE approach to new organizations and areas.

It is also worth recognizing that the concept of scaling up, despite being a popular catchphrase and path, is not the only way to create effective development programs. The relocalization of funding approaches has had significant benefits and so has the relocalization of PHE projects as they are likely to be able to better recognize and address the needs of their community. Large-scale, global projects are not necessarily the ideal. In fact, it has become more commonly believed that projects that focus on addressing local needs by leveraging local resources can be very effective. PHE is an example of an area that has seen success in introducing an exterior idea that is embraced by local organizations and governments. This has been seen in Madagascar with the incorporation of P-E connections in their government policies and plans as well as in the Philippines as the local governments have become involved in funding and running PHE projects (DeSouza, 2010).

As PHE programming has evolved, the broad goals of PHE have remained rather constant. New program areas have been introduced, methods have shifted, and players have
entered and exited, but the PHE approach is still focused on improving the lives of men, women, and children as well as their local environment. As we look to the future of PHE work, changes are expected but as long as these goals are being achieved, the PHE approach will remain relevant.

Lessons Learned, Future of PHE Programming, and Recommendations

As I have explored the evolution of PHE funding and programming over its history, certain lessons learned have emerged as well as certain trends that help inform the future of this area. PHE programming has persisted for nearly two decades and is expected to continue into the future. While PHE work will continue, it will not look the same as the programs started in the 1990’s nor the programs of the early 2000’s. Changes in funding and programming will continue to occur, reflecting the needs of communities, available resources, and development trends.

Lessons Learned

- There have been major shifts in funding sources and amounts for PHE programming over its history and there is no evidence demonstrating that these will not continue to change into the future.
- Funding dedicated to PHE has been limited over the years. While large institutional funding for PHE has declined, other funding sources have filled the void.
- Funding sources now include more localized approaches, including piecemeal funding and partnerships, which have the potential to be more sustainable funding approaches for organizations in the long-term.
- Lack of transparency and knowledge of newer PHE projects will continue to pose tracking challenges, making it difficult for organizations working on the capacity and policy development levels.
• Efforts to track PHE projects internationally would be helpful for many working in the P-E movement, especially if more extensive information is gathered about each project. This could include details about project history and methods, contact information for project, evaluation and data showing impact, and information about the local communities. This is the type of information that can be leveraged while working towards policy change or shifts in funding, while a lack of this information makes it difficult for them to make their case about PHE.

• There are opportunities for embracing broader definitions of PHE, which would allow for more funding opportunities and partnerships for work that is still accomplishing the goals of PHE but does not follow the standard PHE model. This could also be beneficial for local communities that are in need of services that fall outside of the traditional PHE model (i.e., HIV/AIDS prevention and treatment services).

• Scaling up/expansion efforts will need to take into account the lessons that have been learned through the implementation of PHE projects around the world as well as the current funding trends. Expectations for scaling up efforts should also reflect the reality of PHE projects and their localized focus. For example, even if there was the funding and infrastructure to establish PHE projects in communities in every developing nation, PHE projects may not always be the most beneficial approach to take. If a broader definition of PHE is adopted, PHE could become applicable in more contexts than otherwise.

**Future of PHE and Recommendations**

PHE programming has evolved over the past two decades and this history will shape the future of PHE projects. As with any new area of development work, it takes time for a method or type of project to establish itself through trial and error. PHE programming has seen major shifts in funding over its history; yet, it seems to be moving towards a more consistent, localized approach. Projects are becoming less dependent on grants from foundations, which can shift drastically from year to year. While more localized grants are not guaranteed to stay static, being closer to their funding source allows PHE organizations to have advance notice about funding
shifts. They are also receiving smaller grants that would likely be easier to replace from another funding source. This is not to say that PHE organizations will have no funding problems in the future. Organizations should continue to be aware of alternative funding sources, establishing relationships with other organizations or government agencies that may be able to provide financial support or other non-financial support through partnerships.

Over its history, PHE projects have expanded to many different regions of the developing world, but expansion will be less likely to occur in the future. In the past, new PHE projects were introduced to areas by organizations, like Conservation International and WWF, in areas where they already had a presence through other programming. As these organizations are no longer receiving the large grants to do PHE work, it is unlikely that they will be expanding into new regions where they have not worked before. It is more likely that they will continue to support projects that they have established instead of using limited resources to expand. The new localized funding approaches do not necessarily encourage the expansion of PHE as these funds are not dedicated for PHE work. Rather, they are just being used for the established projects. With the current funding environment expansion is unlikely, but this does not mean that it would be impossible. If major changes occur, such as a new initiative by a large funder, expansion could occur. A recommendation for a means to expansion would be for PHE networks to continue to become more established and expand to new areas, involving organizations working in the new areas. If the resources, knowledge, and motivation were there, expansion would definitely be achievable.

As PHE projects have grown in number, trial and error has produced lessons learned that have be employed to improve PHE programming. As programming continues into the future, these opportunities for improvement will remain. Substantial evaluations, made publicly
available, would help to foster this growth and improvement. PHE networks and PHE resources
made available online assist in the transfer of lessons learned, instead of the lessons learned
remaining within each individual project. Limited research and evaluations will carry on in the
future, but it would be very beneficial for more to occur. This is possible as some of the large
funders, like USAID, have shifted towards funding this kind of work, but at this time there is no
indication that there will be a dramatic increase of work in this area. Expansion of PHE
networks and resources online should be expected in the coming years as much of the initial
work has been completed, making growth much easier. Research organizations should strive to
provide more usable materials and information for those working on-the-ground. On-the-ground
organizations should make efforts to share their own lessons learned and leverage the
information that is made available to them through research organization, PHE networks, or
relationships with other PHE organizations.

PHE programming is also expected to expand its definition of PHE and its scope of work.
As community needs and funding sources shift, so will the work done by PHE practitioners. One
area that growth is especially expected is in the area of climate change. Immense resources will
be made available to the developing world and communities will increasingly feel the effects of
climate change. I expect that this will strongly encourage PHE practitioners to expand their
scope of work to qualify for these funds and to meet the needs of their communities. While this
kind of shift will cause PHE programming to look different from that of the past, PHE projects
will continue to pursue similar goals and serve their communities. If this trend does occur,
organizations should be conscious of the impacts a broader scope has on both their programming
and their funding. Ideally, PHE organizations should be intentional about their expansion, with
the goal of ensuring sustainable growth for long-term impact.
Conclusion

Population-Health-Environment programming has been implemented around the world for two decades. While PHE has persisted, many changes have occurred during this time. These shifts, above all in funding, have greatly impacted the development of this area and will continue to into the future. PHE projects are expected to continue, but will continue to change, based on the needs of the local communities, available funding, accessible information and resources, and organizational commitment. A surprising shift has occurred towards more localized sources of funding, so the future may hold additional surprises. PHE programming will continue to meet the needs of individual and communities around the world, adapting and evolving over time as needed.

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Bibliography


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http://www.populationaction.org/Publications/Fact_Sheets/FS17/Summary.shtml


http://www.pda.or.th/eng/fp.asp?Menu=01


http://www.prb.org/About/InternationalPrograms/Projects-Programs/PHE.aspx

http://www.prb.org/Countries/Madagascar.aspx

http://maps.google.com/maps/ms?oe=UTF8&client=firefox-a&ie=UTF8&hl=en&vps=1&jsv=218a&msa=0&msid=107973977648198179741.0004818d1e0fe8fc62613.

http://foundationcenter.org/grantmaker/prospecthill/grants/latin_america.html

   http://www.sierraclub.org/population/conference/


Travis, Jerry. 2010. Personal Interview. Program Associate, the Richard and Rhonda Goldman Fund.


   http://www.unfpa.org/public/publications/pid/2858


www1.usaid.gov/our_work/global.../Funding/.../rfa_2010_amendment.pdf

http://www.usaid.gov/our_work/global_health/home/Funding/fundingbydirectives.html


http://www.wilsoncenter.org/index.cfm?fuseaction=events.event_summary&event_id=143972

http://www.prb.org/Articles/2008/ethiopiaconference.aspx