

## Making the Case for U.S. International Family Planning Assistance (Report Launch)

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## Edited Transcript—Duff Gillespie

Let me preface by indicating that everybody in this room, I suspect, knows that ideology usually trumps evidence. And so what I'm going to talk about today is what is the evidence that we presented in the report? But also talk about some things that aren't in the report about some of the challenges we have, many of those challenges that people in this room, daytime job, is actually trying to meet those challenges. So in the question and answers I'm sure we'll benefit from some of the questions and observations for people that are the real advocates in this area.

And lastly let me just say what a pleasant experience it is to see a lot of familiar faces, and I do look forward to talking with all of you later on.

Okay, very briefly, and some of you have actually probably had a chance to read the report and other have heard presentations by me or some of the other former directors. I'm going to through, allow this pretty fast to get to the sort of the new part. It is evidence-based effort, we focused on very narrow area, increasing funds per USAID family planning program. That was are comparative advantage, knowing the USAID's program. Very importantly, we don't see this as a standalone advocacy effort, it's very much seen as part of a larger effort that, again, many of you are heavily involved in, and it's funded by the Packard and the Gates foundations.

Those have been mentioned, the fab five we refer to ourselves in private conversations, and during the writing of these reports, we refer to each other in private other things, too, but I can't -- consensuses was always not that easy to get to him. Actually there was a surprising amount of little acrimony.

A lot of you were actually consulted about this effort before it took place, and those consultations really led to the second bullet here. Don't try to do something that we're already involved in, play to your strength. Do something that gives whatever you're trying to



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We highlighted, and we'll get back to this, Africa, because while the numbers are huge in South Asia, here is where the problem really for the next decades is going to be, and development in general and populations specifically, and I think one of the things that we frequently characterize Africa as Africa, and obviously Africa is a very complex continent with many variations to it, but that there is unmet need, very high unmet need, and a number of very important, critical countries in Africa. So even in Africa, where there is a high desire fertility, there is also a very high unmet need. That chances have shown -- programs have shown that if you can't make good quality voluntary services, they will impact the used.

The other thing that we are concentrating on, perhaps more than we would have, say ten years ago, is family planning as an investment. Just as a footnote, almost everything we have in the report is actually drawn from research that was supported by USAID. And we ought to -- a great deal of actually pride, not that we were every involved personally, but to be associated with an organization that basically has accounted for the evidence-based, not just for the United States but for the world in this area, and one of the studies that they did was look at 29 different countries and looked at what an unmet need investing in family planning, and if you fulfill the unmet need, what would be the return on investment in a variety of NDGs? And you can see it's about a one to four ratio that holds up from one country to another, but it basically shows that this is a very good investment for development, not just for areas of health.

The other area that is an example of USAID strength is the importance of having a contraceptive mix in high quality services. And there's not as much research on this as I thought there would be, and we looked for more evidence, but this is pretty convincing, and based on experience that many of us have had oversees, we know that this is the case. When you add new contraceptives or improve your contraceptive mix to make it more accessible, you do have an additive impact on the number of use because you are addressing your services to a wider variety of needs found in your population.

So we're talking about increasing services, but also increasing the quality and the method mix of services. So we put all this together, and unlike some of the other estimates made, we start working with the 52 countries that USAID was in at that time, made a number of assumptions which are described in the appendix, drew on the work of other people, and seemed like all things have to do with costs es



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bipartisan support on the hill, so we were at least able to find sort of a stable figure that would do the work of people like Craig here, were able to keep the figures at least up there.

But then look what happened, surprise surprise, George W. Bush gets elected and the budget goes up and the request level goes up. What in the world was going on here? And what you have here is the influence of people in this room, people within the agency, people within the State Department, most importantly Colin Powell, who basically said we're going to keep this level up. He left after the first term and it went back down again, an area that Condi Rice is not all interested in, and you begin to see the increase of funding, which now would be up here someplace. It's not shown on this.

So what's the cautionary tale, there? It's a very important cautionary tale. A change in leadership at the highest level does not automatically translate into a budgetary and programmatic reality. And indeed people who may not be that well known outside of the government, I mean Tim Worth is known very much from all of us and people in Colorado, pr4obably many of them still, but outside of that area, within the beltway he's not that well known, but he personally was responsible for getting this spike that took place. We don't know who those people are going to be in the administration at that level. But they will be important and once they are identified by who they are, we need to get information to them and to cultivate that position. Because I think that without support at that level, and with so much competition for scarce resources for other good things, it's not like this is the only issue that deserves more funding and we can go quickly down a list and come up with lots of worthy areas that had been underfunded for the last eight years or so are totally neglected.

Now, so we got the evidence and let's see what's going to happen. So I kind of went through. This isn't everything that's happened, but you can see it's kind of mixed starting off with Rick Warren being -- and that means negative.

I still can't figure that one out, and I don't want to talk about it too much, because it makes me so mad, but he did it, and I was pleased that Warren gave a horrible invocation, but it was not a good harbinger for things -- possibly not a good harbinger for things to come. But next to -- it would have been a shock if he didn't do this, there was, as many of you know, a debate when he would do it, but very little doubt that he did. He, by the way, is President Obama. But he did, and I thought his statement on UNFPA was particularly strong, and welcome. I put this as a plus or minus, it was just sort of a blip, and that unless you got PAI's newsletters, you probably wouldn't have even noticed it, that the day after -- or several





days after the Mexico City Policy was rescinded, there was a bill on the Senate to, in effect, make the Mexico City Policy a law, which was defeated soundly, but still got, I think it was 33 -- I think I got all the -- not all the -- I think it got 33 votes, or 36 votes.

And the reason I put it up there was that many people think that the ideological battles or the cultural wars are, you know, going into the background. I don't think they are. I think they're very much alive. And one of the big disappointments was when the President asked the leadership in the house to take out a rather innocuous language that would make it easier for poor women to access family planning service under Medicaid. It basically just expanded -- or made it easy to expand the eligibility criteria. And, you know, he did that for reasons I honestly don't know, but the idea behind it seems to have been this effort to have a broad, bipartisan effort, the stimulus package. Well, that failed miserably because he isn't getting that and indeed didn't get any votes for this particular package of the house republican side.

On the plus side, something to represent what Crawly did from New York, got a discount pricing for clinics at Universities and Planned Parenthood facilities. These two are both on domestic. There are some other examples that I won't go into, I'll talk about one later that -- but the point is that the -- it's not all plusses, green plusses, there's lots of mixes in here, even though the democrats and the pro-choice people have clear majorities in both houses.

So we got the increase -- I should explain this -- we got an increase of 80 million or so in the International Family Planning Budget, a lot of people were pleased by that, some people were ecstatic by that. I'm happy about that, but I'm not as ecstatic.

[break in audio]

-- reasons besides it being a relatively small amount of money, if you look at where the money's coming from, this is basically money from the child's survival -- that should be a -- Global Health Child Survival. And so that's the money that what most people typically think of as foreign assistance money for health. That's the money that USAID has a fairly degree of control of where it will be spent and what it should be spent on after you get through congressional earmarks. Then you go to ESF, that's the money that goes to, among other places, Egypt, and that pretty much says the money is going to go to those countries whether they need it for family planning or they don't need it, it's going to go to those countries. This is department of state, and that's for UNFPA.





This is for -- what is that? That's UNFPA -- no this is UNFPA. This is UNFPA, this is -- this is UNFPA and this is Europe and Eurasia. So these two combined are UNFPA, and the reason why this is at -- it's coming from this. But there's an earmark on congress saying that that goes to the UNFPA.

So basically this is what there's some discretionary control over in terms of how USAID will use them [unintelligible] we use it. And that makes it the increase over the 435 level, actually relatively modest, and rather than an 18 percent increase, it makes it about nine or ten percent.

Now, so basically this is not enough money to get the job done. Now one of the things that happened that I didn't put up on the list of plusses and minuses, because it's a little bit out of it, but again, more of these cautionary tales -- and that is there is an authorization bill on internal health, which doesn't have any family planning and even though one of the sponsors of it is a champion of family planning, the reason I put this up was that this was -- and there's at least one person that was at the meeting in this room, and you may want to embellish this - I don't have the -- I wasn't at the meeting. But this was a gallop poll that was done very recently, and it went through those actions that the President had taken and asked people what do you think about that? Favorable or not favorable? And at the bottom, if you can see it, is to allow funding for overseas family planning groups that provide abortions, a very inaccurate description of the Mexico City Policy, but it got a relatively low 35 percent versus up in the 70s.

Now the reason I mention this is that it does suggest we got some communication problems with the general public, but also suggests that even those individuals who are strong advocates for family planning, still kind of fear [unintelligible] of toxic issues. So that if you're trying to promote something in another area, maternal health, it's best to keep it clean of lightning rods which will strike as a result of opponents to family planning. I'm actually not sure that analysis is wrong. But what is wrong is that it means our work is really cut out for us because if our champions are adopting that position, think of what those that are indifferent or hostile. So we have some work cut out.

Now, U.S. leadership is more than the U.S. government. But I do think that the economic crisis is actually going to make USAID's program even more important and the need for the start Department of State, especially with Secretary Clinton, whoever the USAID administrator is, the career people such as Scott, really need to establish, and again, the





importance of population for economic development purposes, for health purposes, for rights purposes. Now one of the reasons I think it is, is because the foundations have been relatively hit relatively hard. Packard and Hewlett, both are cutting back on their programs, and those two organizations have been after Rockefeller and Ford left the field, basically, some years ago. Those have been two foundations which had been pretty generous, but also visible in their support for not just family planning but also abortion.

And their visibility was not only through some of the people that were involved with the program, but also by those organizations that they supported, who are quite vocal. In fact, Joe Speidel is pretty much responsible for a lot of the advocacy work that's now going on Europe, making some investments. I remember years ago when he was at Hewlett, to help them mobilize a commitment to international family planning in Europe.

The Buffett -- Susie Buffett Foundation is quite generous, but also very quiet. And the other use of the term, and prefers to be called the anonymous donor, and while they have been cut, rather much by the downturn, they still would be a major player, and I'm not quite sure what their budget planning is, but I think it's still going to be around 300 or so million, hopefully in that ballpark a year. While Hewlett is probably in the 50 area and Packard is going to be in the low 30s or maybe even lower.

So that leaves us with, you know, the foundation, and the annual letter that he wrote, that is a very interesting letter, which you can get on your Web page if you haven't seen it yet, covers reproductive health, only it doesn't talk about that per se, it's under something called child survival, I think, or child health. It's pages four to six and I probably could recite it for you word by word, but instead of that I'll show you this one part here, and you can just read it yourself, but basically, Bill -- it said that he and Melinda had sort of an epiphany and realized that while he started off with a very high emphasis on reproductive health, they realized that if they could reduce infant child mortality, that the desire to family size would plummet and eamily ply sizw





-- humbly point out that he didn't get quite it right, and that, you know, we were concerned. So why are we concerned? Not just because he didn't get it right. Think of the impact Bill Gates has had in international health. So it's not that they're ignoring this area. In fact I'll go get a couple of figures later on. It's that the opportunity missed to have him take on this as he has for childhood immunization, for malaria, for HIV/AIDS, for vaccine development. It would be huge. And one of the things I fantasize about, I guess my social life has gone to hell -- is having, you know, Hillary Clinton, Bill Gates, some other national leaders on the podium someplace saying we feel this is a critical development issue.

So the disappointment isn't so much that he's not doing anything in this area. It's that he can

