

## **Funding of population-related aid and research : UK and international perspectives / D. Seemungal.**

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# Funding of population-related aid and research

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*UK and international perspectives*



**PRISM**

Unit for Policy Research in Science and Medicine

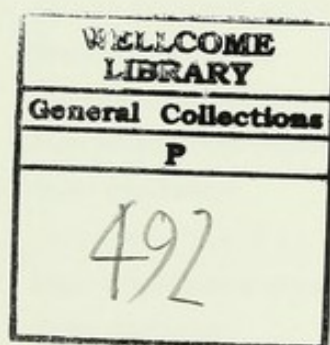


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FUNDING OF POPULATION-RELATED  
AID AND RESEARCH

*UK and international perspectives*



PRISM Report No. 5  
D Seemungal

*July 1995*

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## PREFACE

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This report summarizes the expenditure in various areas of population research and assistance, both in the United Kingdom and worldwide. It aims to inform discussion on future policies for funding research on population issues.

The project was undertaken by David Seemungal. I am very grateful to Dr Joe Anderson for his guidance and intellectual input, Dr Grant Lewison for his advice and work regarding bibliometric analyses, and my colleagues in PRISM for their advice throughout the project.

I would also like to thank Dr Jackie Rigby at the Medical Research Council and staff at the Overseas Development Administration's Health and Population Division for their assistance.



The aim of this report is to summarize expenditure in various areas of population research and assistance, both in the United Kingdom and worldwide. The report is intended to act as a quick reference source on various activities concerned with population issues. The main findings are:

- Worldwide expenditure on population-related aid and research in 1994 was estimated to be in the region of US\$4.5 billion. In 1991 the total amount committed in this field was US\$1.3 billion. However, only US\$0.73 billion was actually spent. The report emphasizes the important distinction between committed and expenditure figures and discusses the reasons why these figures are different.
- Annual global contraceptive sales are estimated to be in the region of US\$2.6 billion to US\$2.9 billion.
- It has been estimated that current worldwide expenditure on contraceptive research and development stands at approximately US\$60 million. The pharmaceutical industry accounts for approximately 42% of this amount (US\$25 million).
- The pharmaceutical industry R&D expenditure on contraceptive research is small (<3%), when compared to the industry average (16–19%) for R&D expenditure as a percentage of sales.
- The UK spent in excess of £35 million on population aid and research in 1993.
- As far as can be determined, the UK percentage of worldwide publications in population-related research is less than 10 per cent (comparable to its share in other areas of biomedical research).
- The largest UK centre for research in this field is the Centre for Reproductive Biology in Edinburgh.
- Estimates submitted at the 1994 International Conference on Population and Development, in Cairo, set the cost of achieving fairly broad reproductive health goals (including population targets) in the year 2000 at approximately US\$17 billion and US\$22 billion in the year 2015 (at 1994 prices).

## 1. INTRODUCTION

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The main aim of this report is to inform discussion on future policies for funding research on population-related issues. The report addresses the status of funding for population issues, and discusses possible future developments in this field, in two geographical areas:

- the United Kingdom,
- worldwide.

### **Background**

The world's population by mid-1994 was estimated to be 5.66 billion and growing at a rate of 1.7% per annum. United Nations projections indicate that the world's population will rise to 8.5 billion by 2025 and 10 billion by 2050. These figures are based on an optimistic scenario of birth and death rates worldwide. In light of these rather alarming figures it is understandable that social, economic and environmental issues relating to population growth have become major areas of research. In October 1993 a scientific summit of Scientific Academies on World Population was held in New Delhi in response to a growing need for an authoritative and comprehensive survey of the issue. Sixty scientific academies attending the conference signed a statement that set a target of achieving zero population growth within one generation. To achieve this, the statement 'called upon governments and international decision-makers to take incisive action and adopt an integrated policy on population and sustainable development on a global scale'.

The United Nations Population Fund (UNFPA) in its latest *State of the World Population* report, published in August 1994, called for more effort and money to be spent on research into a number of major areas such as, more effective male contraceptive methods, female contraceptives that offer protection against pregnancy and sexually transmitted diseases, family planning health services and reproductive healthcare. The report was produced in advance of the fifth International Conference on Population and Development held in Cairo, Egypt, 5–13 September 1994. Documents submitted to the Cairo meeting called for a fundamental shift in population policies worldwide, from a focus on fertility control to the promotion of reproductive health, women's empowerment and human rights.

### **Definitions**

A continuing problem encountered throughout this study was a standard definition for 'population-related issues' and, in particular, what was defined as research as distinct from assistance. For example, many non-governmental organizations found it very difficult (and, indeed, saw no reason) to identify separately expenditure on population-related issues. Also many organizations often lumped together figures for research and for assistance into total project expenditure figures, making identification of each impossible.

Faced with these difficulties, as far as the funding figures were concerned, a decision was made to define population issues as broadly as possible.

When analysing the published outputs from population-related research, a more precise definition was possible. Typically this analysis covered areas such as reproductive health, contraceptive research, family planning and demographic studies. The analysis excluded topics such as research into major diseases, for example, malaria, yellow fever, cholera and AIDS.



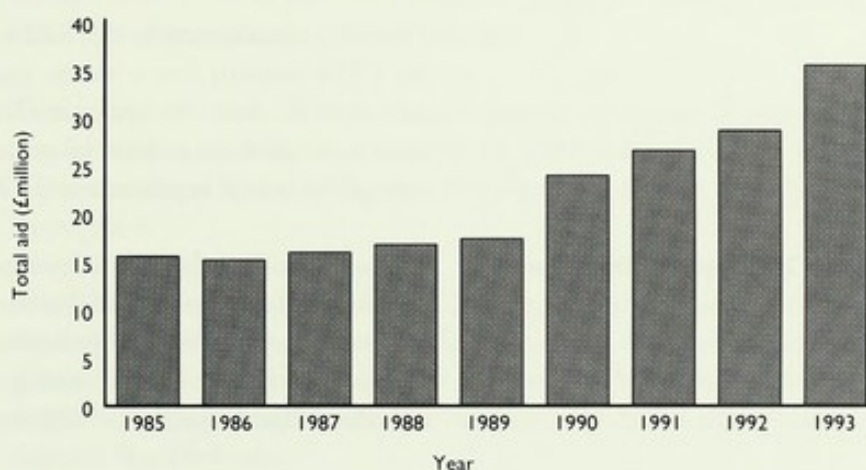
## 2. FUNDING IN THE UNITED KINGDOM

It has been estimated that the total UK public expenditure on overseas aid in 1993 was £1908 million. Of this amount in excess of £35 million was spent on population-related issues, approximately 1.9% of the total aid budget.

Figure 1 below illustrates the increase in UK aid for population-related issues from 1985 to 1993 (expenditure figures for years prior to 1993 do not include the Medical Research Council (MRC) expenditure on population-related issues, currently £3.5 million per annum). The majority of funding is via the Overseas Development Administration (ODA), which is part of the UK Government's Foreign and Commonwealth Office.

Figure 1

UK public expenditure on population-related issues 1985–1993



The 1993 figure of £35 million is made up of the following disbursements:

	£' 000s
Multilateral aid	17 397
Bilateral aid	10 148
Joint funding schemes	1 649
ODA institutional aid	648
ODA research grants	1 057
Training and administration	1 005
MRC-funded research	3 516
Other sources (e.g. Pharmaceutical industry)	(see Section 6)
<b>Total</b>	<b>£35 420 000</b>

These figures are explained in greater detail below:

### 2.1 Multilateral aid

Multilateral aid can be defined as the provision of aid by a donor country through international bodies such as the United Nations or the European Community to developing countries.

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The 1993 figure of £17.4 million for UK multilateral aid spent on population-related issues consisted of £2.75 million to the World Health Organisation's (WHO) Human Reproduction Programme, £7.65 million to the International Planned Parenthood Federation (IPPF), and £7 million to the United Nations Population Fund (UNFPA). Details of the spending of these organizations will be discussed in Section 5.

## **2.2 Bilateral aid**

Bilateral aid consists of direct grants made by donor countries to individual developing countries.

In 1993 UK population-related aid via this method was estimated to be £10.148 million. A detailed analysis of this figure could not be obtained, but the 1992 figure of £6.17 million is analysed in Appendix 1.

The UK's commitment in this field is set to rise sharply. In December 1994 the ODA reported that it was to approve new health and population projects over the next two years amounting to over £100 million. The funds were to be directed to bilateral projects, multilateral organizations and to non-governmental organizations (NGOs).

## **2.3 Joint funding schemes**

The joint funding scheme was developed to enable the UK government to get aid into areas of most need via the machinery of the NGOs. The UK government typically provides between 50% and 90% of the funding for various projects, with the rest coming from NGOs. However, for population/reproductive health projects, 100% funding is available via this scheme.

Expenditure via this route on population-related issues was estimated to be £1649K in 1993. An analysis of the 1992 expenditure of £976 million (£1 million if block grants are included) is enclosed as Appendix 2.

It must be noted that the above figure does not include spending by the NGOs outside of the joint funding scheme on population-related issues. Direct contact was made with a number of these organizations and it proved almost impossible for these organizations to desegregate spending figures, related to population issues, not included in joint funding schemes.

A list of some of the major UK NGOs involved in population-related activities is enclosed as Appendix 3.

## **2.4 ODA institutional grants**

This section refers to large block grants made by the UK government via the Overseas Development Administration (ODA) to UK academic institutions to finance research on population-related issues. The total allocation via this route in 1993 amounted to £648K. This total is analysed on page 11:



#### London School of Hygiene and Tropical Medicine

- Population and health research (£252K).
- Ageing (£98K).

#### Liverpool School of Tropical Medicine Work Programme

- Health strategies for women and infants in developing countries (£188K).

#### University of Bradford

- Population and environment (£110K).

The ODA has recently announced that new research programmes on Population and Reproductive Health have recently been agreed at the London School of Hygiene and Tropical Medicine (£0.5 million per annum over 4 years) and the Liverpool School of Tropical Medicine (£0.275 million per annum over 4 years).

### 2.5 ODA-funded research

This section relates to ODA funding of research on a range of population-related issues in developing countries. In 1993 the expenditure via this route amounted to £1057K, the 1992 figure of £713K is analysed in Appendix 4.

### 2.6 MRC-funded research

The Medical Research Council (MRC) is the only other major public body funding research into population-related issues in the United Kingdom. The council's 1992/93 annual report analysed the MRC's expenditure by scientific subject classification. The relevant population-related areas of research identified were:

	£' 000s
Fertility / contraception / abortion	3 103
Research into ageing	413
<b>Total MRC 'relevant' expenditure in 1992/93:</b>	<b>£3 516 000</b>

### 2.7 Other sources

The major source within this section is funding by the pharmaceutical industry. UK expenditure in this sector on population-related research was very difficult to determine. However, worldwide expenditure by the pharmaceutical industry on contraceptive research is discussed in Section 6 of this report.

### 2.8 Major conclusions

The major conclusions that can be made from this section are:

- A relatively small proportion (approximately 1.9%) of the overseas aid budget is spent on population-related issues. However, the major UK funding bodies (MRC and ODA) have recently shown their commitment to increase funding on research in this area.
- The majority of the funding on population-related issues is on aid, relatively few of the projects funded are research based.



Analysis of research output from population-related research is difficult. The main reason is that much of the research output in this field is characterized by large numbers of project reports and technical manuals – or what might be described as ‘grey literature’. This grey literature tends to be excluded in mainstream scientific databases; however, it must be noted that they have a great impact on health and welfare issues. Because there are no comprehensive databases containing this grey literature a systematic analysis of these publications could not be carried out.

The analysis in this section was confined to publications contained in well-indexed scientific journals included in the Science Citation Index (SCI) and Social Science Citation Index (SSCI) databases. The SCI and SSCI were analysed to identify papers published in the field of human population-related research during 1993, containing either UK or Irish addresses.

The search strategy consisted of applying a series of keyword filters (Appendix 5) to the SCI and SSCI databases. The strategy used includes topics such as reproductive health research, contraceptive research, family planning, demographic studies and education related to population. The search, however, excludes topics such as nutritional research, research into major diseases, for example, malaria, yellow fever, cholera and AIDS it also excludes basic research such as population dynamics on animal or plant systems that may be applicable to human population problems.

In the first filter all papers in relevant population journals were extracted. The second filter extracted papers with relevant keywords in their titles from the remaining journals. A third filter was used to identify papers with UK addresses. A combination of these three filters identified all population-related papers published in the UK and Ireland.

The strategy described above identified 217 UK and Irish papers in 1993. However, the system also picked up a number of irrelevant articles on subjects such as veterinary medicine or botany, as well as duplications of papers in both the SCI and the SSCI. A manual screen of these 217 papers was then used to identify and discard all non-relevant papers.

The final total was 104 papers, articles, notes and reviews (described as ‘papers’ in the rest of this section) in the defined subject area published during 1993 containing a UK or Irish institute/department in the address field. This represents a very small proportion of the annual production of UK biomedical papers, which is approximately 25 000 per annum (PRISM’s Research Outputs Database estimate).

A search using the first and second filters identified 2300 papers published worldwide in this field. On the assumption that approximately 50% of the papers would be discarded by manual screening (the figure was 48% for

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manual screening of the UK and Irish papers) then this suggests that the worldwide output in this field is approximately 1150 publications and, therefore, the UK (Irish output is small) produces approximately 9% of the total. It is likely, therefore, that the UK's research output in this field is comparable to its average for biomedical research (8–9%).

Figure 2, on page 14, is a geographic representation of the results showing centres of research by city within the UK and the Republic of Ireland. The analysis shows London and Edinburgh as being the most active cities for research in this area. In London there are a large number of institutions active in this field, whereas in Edinburgh by far the largest is the Centre for Reproductive Biology. The top institutes, in terms of number of publications include:

- The Centre for Reproductive Biology, University of Edinburgh.
- University of Manchester Hospital (Dept of Obstetrics and Gynaecology).
- Margaret Pyke Centre, London (Research mainly into family planning).
- The Radcliffe Royal Infirmary in Oxford.
- University of Southampton (Dept of Social Statistics).
- The London School of Hygiene and Tropical Medicine.
- The London School of Economics and Political Science (Population Studies Group).

Using research publications in SCI and SSCI journals, as the measure, the Centre for Reproductive Biology in Edinburgh is the most active unit in the UK in the field of human population-related research.

It has been reported that a Clinical Contraception Development Network will be based at the Centre. The network has been jointly set up by the Medical Research Council and the Overseas Development Administration, translating basic research into effective and safe contraception for use across the world. The network (with likely costs of £2.5 million over 5 years) will concentrate its research efforts, initially, into the following areas:

- contraceptive effects of antigestagens in women,
- effects of androgen/progestogene combinations in men.

The Centre also received US\$250 000 from The Rockefeller Foundation, for an initial three years, to enable ten Asian and African researchers to study in Edinburgh. The researchers will be carrying out trials on new forms of male and female contraception, both locally and in developing countries.



### 3.1 Major conclusions

The major conclusions that can be drawn from this section are:

- A major component of population-related research output is to be found in 'grey literature'.
- The UK percentage of SCI and SSCI publications in this field is approximately 9%, which is comparable to its share in other areas of biomedical research. However, the total number of papers produced in the UK and Ireland in this field is very low (104 papers), compared to the total UK and Irish annual output of biomedical papers, which is approximately 25 000.
- Population-related research is centred in two geographic regions within the UK: Edinburgh and London. Thus considerable research expertise in this field is concentrated in a relatively small number of departments.

Figure 2

**Geographical Distribution of UK and Irish Publications:**  
Analysis of 1993 papers in the field of human population-related research  
(total number of papers = 104)\*



Area of circles relates to the number of papers produced (per location).

\*This figure does not account for joint publications.

#### 4. WORLDWIDE FUNDING COMMITMENTS

It is a very difficult process to collate information on the **expenditure** and **commitment** of funds relating to population issues. Commitments are in effect amounts promised or allocated either for this year or spread over future years. Expenditure is the actual sum spent in any particular year, both types of funding categories are considered. In reality, for the reasons discussed below, the expenditure figure is always less than the committed figure. The major reasons for this disparity include:

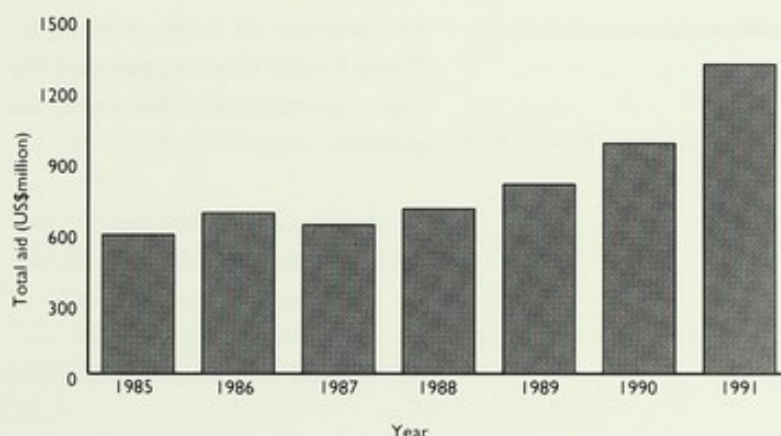
- capacity: the inability of the aid agency to take on new projects;
- implementation: the inability of the agency to instigate new projects;
- sustainability: the inability of the agency to maintain funding commitment to a project;
- donation: where donor countries do not actually deliver the promised amount.

Therefore the total funds available will lie somewhere between the expenditure and committed figures. Another major problem is the definition of what constitutes relevant expenditure. For example, technical cooperation to reduce mortality usually appears as health assistance.

In 1985 the UNFPA started a biannual compilation of data for all sources of population-related assistance. The latest published figures available from the UNFPA compilation relate to 1991, and these are the figures analysed in Sections 4 and 5 of this report.

Figure 3 below illustrates the total **commitments** to population assistance (*UNFPA Global Population Assistance Report 1982–1991*):

**Figure 3** Worldwide commitments to population-related issues 1985–1991



The 1991 figure of US\$1306 million was made up of the following major donor categories (figures quoted are commitments in US\$ millions):

	US\$ million
Developed countries	774
Multilateral sources (mainly UN bodies)	102
Private sources (e.g. Rockefeller Foundation)	76
World Bank (loans)	354
<b>Total committed:</b>	<b>US\$1306 million</b>

The various sources of funds committed for population-related issues are analysed below:

#### 4.1 Developed countries' commitments

Commitments to aid from developed countries in 1991 totalled US\$774 million, 97% of this figure was donated by 10 countries (figures quoted in US\$ millions):

	US\$ million	Percentages
United States of America	352	46%
Germany	76	10%
Japan	63	8%
Norway	54	7%
United Kingdom	47	6%
Sweden	42	5%
The Netherlands	40	5%
Canada	29	4%
Finland	26	3%
Denmark	24	3%
Other countries	21	3%
<b>Total</b>	<b>US\$774 million</b>	<b>100%</b>

#### 4.2 Multilateral commitments

The majority of funds spent by multinational organizations (such as the World Health Organisation or UNFPA) on population aid originates from donor governments. The other sources of funds for these organizations include:

- donations from developing countries,
- trust funds held by the organizations,
- interest earned from trust funds.

Multilateral commitments in 1991 were estimated to be US\$102 million.

#### 4.3 Private sources' commitments

Private sources committed approximately US\$76 million for population assistance in 1991.



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Six foundations each committed in excess of 7% of this amount and together represented 62% of commitments to global population assistance by private organizations. The following are the major organizations in this sector:

*Rockefeller Foundation* Largest source of aid committed in 1991, 15% of total, approximately US\$11.4 million. Its 1993 annual report states that US\$13 million has been approved for population sciences, out of a total annual expenditure of US\$110 million. Its four major goals in this area are:

- encouraging contraceptive development;
- stimulating private investment in contraceptive development;
- improving reproductive health services in sub-Saharan Africa and South Asia;
- stimulating population policy dialogue.

*MacArthur Foundation* Committed 12% of total in 1991. It has a World Environment and Resources Program that consists principally of support of the World Resources Institute in Washington.

*Population Council* Organizes work in the following areas: contraceptive research, human reproductive physiology, population policy, family planning, reproductive health and women's roles and status. The majority of the Council's income is from other sources, for example, the USAID aid programme. Committed 10% of total in 1991.

*Hewlett Foundation* Operates via the provision of grants to institutes working in the area of population-related issues. Committed 9% of total in 1991.

*Ford Foundation* An organization that strongly supported reproductive endocrinology and contraceptive research in 1970s, it has altered its focus to the following areas:

- supporting social science research relating to factors influencing reproductive health behaviour;
- empowerment of women;
- promoting public dialogue on ethical and legal issues of reproductive health and rights.

The Ford Foundation committed 8% of the total in 1991.

*Mellon Foundation* Like all of the above foundations it is US-based, it committed 8% of the total in 1991.



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#### 4.4 World Bank commitments

The World Bank commitments for 1991 amounted to US\$354 million. The aid is in the form of loans to individual countries, which must be repaid. The figure fluctuates widely from year to year and the committed funds represent a line of credit that the borrowing country may or may not use.

#### 4.5 Major conclusions

The major conclusions that can be drawn from this section are:

- The majority of funding in this area is for **aid**, relatively few projects funded are in population-related **research**.
- The amount committed by private sources is relatively small, standing at US\$76 million, which is approximately 6% of the global amount committed in 1991. The private sources also vary widely in the amounts committed for aid and for research.

The UNFPA estimates the present levels (1994) of expenditure on population programmes and projects is in the region of US\$4.5 billion. However, this study focuses on 1991 expenditure, the latest available published figures.

The following table is a list of the actual expenditure for population assistance in 1991 (total = US\$732 million) by category of distribution:

	US\$ million
Bilateral expenditure	287
Multilateral expenditure	249
Non-governmental organizations	196
<b>Total</b>	<b>US\$732 million</b>

The expenditure figures are explained in greater detail below:

### 5.1 Bilateral expenditure

Bilateral expenditure of US\$287 million in 1991 has, according to UNFPA estimates, shown an increase both in absolute terms and in percentage of total expenditure between 1985 and 1991. It represents direct assistance by developed countries to individual developing countries or regions (i.e. not via international UN-type agencies or NGOs).

### 5.2 Multilateral expenditure

The largest source of funding in this category is via the UNFPA which represented 26% of total expenditure by this route in 1991. The situation is slightly complicated by the fact that the other organizations in this category obtain a large proportion of their funding from the UNFPA, so in reality the 26% figure represents **direct funding**. The UNFPA, therefore, also funds many more population-related projects by indirect funding via several other organizations before reaching the final developing country recipient.

The major funding organizations (figures subject to the above caveat):

#### *United Nations Population Fund (UNFPA)*

Expenditure represents 26% of 1991 total in this category. Major areas of assistance include:

- family planning,
- communication and education,
- data collection,
- population dynamics,
- formulation and evaluation of population policies,
- implementation of policies,
- multisector activities.

#### *World Health Organisation (WHO)*

Expenditure represents 26% of 1991 total in this category. Major research projects as part of the protection and promotion of the health of specific population groups include:

- Maternal and child health and family planning project (MCH/FP).
- Database on sexuality and reproductive health of adolescents.
- Human Reproduction Research (HRP – discussed later).
- Occupational health.
- Health of the elderly.

*United Nations Children's Fund  
(UNICEF)*

Expenditure represents 17% of 1991 total in this category. Involved in many of the inter-regional programmes and projects affecting children.

*UN Department of Social and  
Economic Development (and  
regional commissions)*

Expenditure represents 17% of 1991 total in this category. Major research projects include:

- Health implications of sex discrimination in childhood.
- Study of the family-building processes in different countries.
- Development of statistical methods to assist countries in monitoring population development goals.
- Development of the United Nations Women's Indicators and Statistics Database.

*International Labour  
Organisation (ILO)*

Expenditure represents 6% of 1991 total in this category. Major initiatives include:

- development of conceptual, methodological and empirical approaches to collection of integrated statistics for use in population planning;
- extension and strengthening of population and family welfare education in the workplace.

*United Nations Educational,  
Scientific and Cultural  
Organisation (UNESCO)*

Expenditure represents 4% of 1991 total in this category. Major research projects include work on the sociocultural factors affecting demographic behaviour and their effect on population policies and programmes.

*Food and Agriculture Organisation  
of the United Nations (FAO)*

Expenditure represents 3% of 1991 total in this category. The FAO has initiated research into how population and development interact in rural fishing communities. It has also initiated a training programme to help rural youth and farmers make effective use of population education materials.

*United Nations Development  
Programme (UNDP)*

Expenditure represents 1% of 1991 total in this category. Maintains close relationship with UNFPA to provide administrative support for financial and computer services, personnel administration, travel services and processing of Governing Council documents.



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### 5.3 Non-governmental organizations' expenditure

In 1991 NGOs expended US\$196 million for population activities in developing countries. Five NGOs dominate the funding scene (the others each contributing less than 3% of the total):

#### *International Planned Parenthood Federation (IPPF)*

Represents 35% of expenditure via this route. It is the world's leading voluntary family planning organization founded in Bombay in 1952. Today it is a federation of 105 Family Planning Associations in more than 130 countries, its major projects include:

- Adolescent reproductive health projects in a number of developing countries.
- Joint publishers of the environment quarterly *Earthwatch*.
- Women's empowerment.
- Counselling and education to prevent the spread of AIDS.
- Two expert panels, The International Medical Advisory Panel and the International Programme Advisory Panel, set standards in contraceptive safety and assist in programme development.

#### *The Population Council*

Expenditure represents 19% of the total for 1991. Major projects include:

- Introduction of Norplant subdermal implants.
- Monitoring of large-scale family planning programmes.
- Child survival programmes.
- Contraceptive implants for men.

#### *Association for Voluntary Surgical Contraception (AVSC)*

Expenditure represented 9% of total in 1991.

#### *The Program for Appropriate Technology in Health (PATH)*

Expenditure represented 6% of total in 1991.

#### *Pathfinder International*

Expenditure represented 4% of total in 1991.

### 5.4 Major conclusion

The major conclusion that can be drawn from this section is:

- Again, despite the large amounts of funding available, there appears to be relatively little being applied to research, most of the funding going towards aid projects.

## 6. INTERNATIONAL ORGANIZATIONS

### 6.1 Major organizations and projects

This section looks at organizations or projects, not described in Sections 4 or 5, working in the area of research or training associated with population issues.

#### *Pharmaceutical companies*

Involvement is almost exclusively on contraceptive research and development. A recent report by the US Program for Appropriate Technology in Health (PATH) contained the following estimates related to the worldwide funding of contraceptive R&D:

Table 1

	Pharmaceutical industry	Other sectors	Total
Global contraceptive sales	–	–	US\$ 2.6–2.9 billion
Contraceptive R&D	c.US\$ 25 million	c.US\$ 35 million	c.US\$ 60 million
Contraceptive R&D/sales %	<3%	n/a	n/a
Sector average R&D/sales %	16–19%	n/a	n/a

#### *The Special Programme of Research, Development and Research Training in Human Reproduction (HRP)*

The HRP is based at the World Health Organisation (WHO) in Geneva and is co-sponsored by the UNFPA, UNDP and the World Bank. The programme was set up in 1972 to advance contraceptive research and development. In the last 20 years the majority of the support came from Sweden, the UK, Norway and a few other governments. Income for the programme has fallen from US\$23 million in 1990 to an estimated US\$20 million in 1994. There has been a growing number of groups, for example, family planning practitioners critical of the approach of the HRP. These groups argue that the HRP's research agenda is too focused on contraceptive research and development, and insensitive to health and human rights.

#### *The International Union for the Scientific Study of Population (IUSSP)*

Established in 1924, IUSSP is the leading international professional association for individuals in the field of population, with almost 2000 professionals in 124 countries.

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*School of Public Health,  
Johns Hopkins University*

Recently has converted the world's largest database on population information, POPLINE, into CD-ROM format; the database will be used by 216 organizations in 69 developing countries.

*Harvard Law School*

Published Volume 16 of the *Annual Review of Population Law*.

*International Institute for Vital  
Registration and Statistics*

Published papers on topics such as childhood mortality, prepared manuals on civil registration and monitored statistics on births and deaths registrations.

*Global Programme of Training in  
Population and Development*

UNFPA-funded programme for middle-level managers.

## **6.2 Major conclusions**

The major conclusions that can be drawn from this section are:

- Pharmaceutical industry expenditure on research and development on contraceptive research is small, when compared to the industry average for R&D expenditure as a percentage of sales.
- Despite an increase in funding available for population-related issues, there has been a decrease in funding for reproductive research, as highlighted by the fall in funding for the Special Programme of Research, Development and Research Training in Human Reproduction (HRP).



## 7. FUTURE FUNDING

Initial assessments of resource requirements for achieving reproductive health goals (including population targets) estimate that one third of the cost of major population programmes in developing countries needs to be funded via international assistance from developed countries. The Amsterdam Declaration of 1989 called for a doubling of international funding of population-related programmes. This would mean doubling expenditure in 1994 from US\$4.5 billion per annum to US\$ 9 billion per annum by the end of the 1990s. Estimates submitted at the 1994 International Conference on Population and Development, in Cairo, set the cost of four basic packages of population activities at US\$17 billion in the year 2000 and US\$22 billion in 2015. The four packages and their costs are summarized below:

Table 1

Activity	Cost in year 2000 (US\$ billion)†	Cost in year 2015 (US\$ billion)†
Family planning services, primary healthcare, education and communication activities, management information activities	10.2	13.8
Pre- and post-natal healthcare, maternal and child health information, reproductive health research including prevention and treatment of associated conditions	5	6.1
Prevention of sexually-transmitted diseases	1.3	1.5
Population data collection, analysis, dissemination and policy formation	0.22	up to 0.7 (depending on population census cycle)
<b>Total:</b>	<b>US\$16.72 billion</b>	<b>US\$22.1 billion</b>

† Estimates refer to US\$ billions at 1994 prices.

Two mechanisms for tackling population-related issues can be identified: either funding of aid or of research. These two areas are complementary and have considerable overlap, for example, in the introduction of new technologies where scientific advances are delivered by the systems funded by the aid programmes.

### *Funding of aid*

In terms of funding of aid there are a number of points to consider. Firstly, there are already a relatively large number of agencies (governmental and private) involved in direct population-related aid. Secondly, following the recommendations of the Cairo conference, aid expenditure is set to increase dramatically either directly from donor countries or via UN agencies.

At first glance this would indicate an adequate level of funding on aid programmes. However, it is not clear how much of this increase will be directed to research and population issues. Another problem highlighted in this report is the disparity between the sums of money committed and the final amount spent. This disparity arises for a number of reasons which have been discussed in section 4. For example, the committed figures are based on amounts promised by various donor countries, quite often the promised amount is not received. Another major reason for the disparity is a lack of adequate infrastructure within regions where the aid is targeted. It remains to be seen if the recommendations made at the Cairo conference will change this situation.

### *Funding of research*

The second major mechanism for tackling population-related issues is funding of research. This would include research in areas such as fertility, demographic studies and other related social sciences research. Within these major research areas a number of factors can be identified:

- Falling support worldwide for reproductive research, highlighted in the fall in income for the HRP programme (from US\$23 million in 1990 to US\$20 million in 1993).
- Lack of incentive for pharmaceutical companies to spend on contraceptive R&D – the sector spends less than 3% of annual contraceptive sales on R&D. This percentage compares unfavourably with the industry average of 16–19%.
- Current UK expenditure on aid and research in this field stands at £35 million, of which less than 20 per cent of this amount relates to research.

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In Section 3 of this report it was estimated that the worldwide output of papers in the field of population-related issues was approximately 1150 per annum. To place this figure in context, it has been estimated (G Lewison, personal communication) that the total number of publications in the SCI in 1993 was approximately 650 000 of which approximately 50% (325 000) related to biomedical research.

A recent study (Lewison and Seemungal, 1995) analysed the numbers of scientific publications in the SCI in some 18 specifically-defined sub-fields of biomedicine over a six-year period, 1988–1993. The study estimated that in 1993 cardiovascular research output was in the region of 21 000 publications; developmental biology output approximately 10 500; gerontology output approximately 2000. Thus (subject to the caveats discussed previously) in comparison to other fields of biomedicine population-related research output appears to be relatively small.



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## APPENDIX 1

**UK bilateral aid on population-related activities in 1992**

£'000s

<b>Ghana</b>	
Operations research unit technical cooperation	131
Health education project	210
Contraceptive supply	423
Monitoring	7
<b>Tanzania</b>	
Census consultancy	35
Family health project appraisal	43
Population equipment	5
Monitoring	47
<b>Uganda</b>	
Family health project appraisal	34
Monitoring	8
Population equipment	20
UNFPA project review	8
PRSD mission	12
Reproductive health – building appraisal	24
<b>Malawi</b>	
Demographic analysis	25
Contraceptive supply	135
Overseas staff aid	26
Aid for refugees	88
<b>Sierra Leone</b>	
Reproductive healthcare for Liberian refugees	24
<b>Zambia</b>	
Planned Parenthood Federation assistance	13
UK training for PPAZ	14
<b>Zimbabwe</b>	
Supply of condoms	29
<b>Nigeria</b>	
World Bank Population Council Investigator	8
Monitoring	40
<b>Madagascar</b>	
Mission gift scheme (equipment and books)	3
<b>Kenya</b>	
World Bank population project	985
Family planning services	760
Population Programme Officer	61
Monitoring	6
<b>Ethiopia</b>	
World Bank Mission Officer	8
<b>South Africa</b>	
Planned Parenthood of South Africa	80
Monitoring	4



	£'000s
<b>Bangladesh</b>	
Health and population aid	457
Maternal morbidity study	62
Neonatal project	67
<b>India</b>	
Orissa family welfare project	1541
Gujarat family welfare project	14
Office of Registrar General	75
<b>Malaysia</b>	
Population projections	100
<b>Vietnam</b>	
Family planning services corporation	147
<b>Pakistan</b>	
Population welfare – assist local activities	67
Advisers to manage health and population programme	40
Population welfare project	101
Monitoring	3
<b>Nepal</b>	
Primary healthcare project	92
UNFPA mission	2
Family planning consultancy	46
<b>Vanuatu</b>	
Family health adviser	13
<b>Fiji</b>	
Computer equipment	2
<b>Occupied Territories</b>	
Technical cooperation	11
<b>Paraguay</b>	
Post-census assignment	3
<b>Caribbean</b>	7
<b>Grand total for bilateral aid on population activities:</b>	<b>£6 166 000</b>

## APPENDIX 2

<b>Joint funding schemes between non-governmental organizations and the British government in 1992</b>	<b>£'000s</b>
<b>Action Aid</b>	
Integrated rural development project – Bangladesh	25
Women's income generation project – Ecuador	17
<b>Aga Khan Foundation</b>	
Self-employed women's association – India	11
<b>Alternative for India Development (AID)</b>	
Family planning project – India	7
<b>Africa Now</b>	
Community family planning – Gambia	7
<b>Marie Stopes International</b>	
Employment-based family planning programme – Bangladesh	41
Marketing of condoms – Ethiopia	65
Reproductive health clinic – Ethiopia	56
Contraceptive social marketing – India	41
Family planning programme – India	49
Responsible sexual behaviour project – India	5
National Youth Service – Kenya	14
Village-based family planning programmes – Lesotho	22
Family planning programme – Malawi	123
Male-orientated child spacing/education – Malawi	75
Factory-based healthcare and family planning – Mexico	65
Workplace preventative health and family planning – Nicaragua	62
Reproductive health services – Pakistan	8
Child health and family planning	8
Women's clubs training programme – Zimbabwe	1
<b>Population Concern</b>	
Family planning services for the Takhaine tribes – Bangladesh	10
Family planning health and education – Bangladesh	11
Rural women development agents, family planning training – Ethiopia	15
Contraceptive distribution – Ethiopia	36
Family planning education – Ethiopia	42
Adolescent reproductive health management training – Gambia	22
Mobile education and service unit – India	40
Women's development – India	24
Women's development – Nepal	15
Community leadership training	9
Family planning via community institutions – Pakistan	29
Women development workers training – Pakistan	12
<b>Urban Aid</b>	
Family planning project – Ghana	10
<b>Block grants</b>	
Oxfam	11
Christian Aid	28
<b>Total 1992 joint funding scheme budget for population activities: (excluding block grants = £976K)</b>	<b>£1 016 000</b>

**Major UK non-governmental organizations involved in population-related activities**

**Action Aid:** concentrates its activities on long-term development projects in developing countries, it is Britain's third largest child sponsorship charity. Total expenditure in 1992 amounted to £27.2 million.

**Africa Now:** its aid is based on a mixture of grants and low interest loans to encourage small scale projects important to local villages. Total expenditure in 1990 amounted to £0.44 million.

**CARE:** one of the largest voluntary, non-sectarian aid and development agencies. The British CARE, established in 1985, is the fastest growing aid agency in Britain with an annual income of £25 million.

**Christian Aid:** Working in over 70 countries worldwide and with no overseas staff it links directly with local churches and other organizations.

**Marie Stopes International:** dedicated to the task of family planning on a worldwide scale, operating 42 major projects in 21 countries.

**OXFAM:** a major worldwide relief agency that also has many population-related projects. Total expenditure in 1992 amounted to £65.7 million.

**Population Concern:** the international division of the UK Family Planning Association, becoming an independent charity in 1991. Its major aim is to raise funds in the UK for population and development programmes around the world.



## APPENDIX 4

ODA-funded research projects in 1992	£'000s
Methodologies for measuring maternal health in developing countries	208
Strategy to improve the health of men and their partners of the Nigerian army	124
Impact of female literacy on child health and survival	73
Marie Stopes consultancy	69
Hypertension in pregnancy	56
Reproductive morbidity in Port Harcourt, Nigeria	55
Sociocultural determinants of induced abortion in developing countries	48
Sexual awareness, lifestyles and related health service needs of young single female factory workers in Thailand	38
Cultural constraints on the adoption of modern contraception for regulating fertility in sub-Saharan Africa	16
Publications, conferences, workshops and population training	14
Demographic transition, agrarian change and women's status in Bijnor district	10
Patterns and determinants of secondary infertility	2
<b>Total</b>	<b>£713 000</b>

### Keywords used in identifying UK and Irish publications in human population-related research

#### Science Citation Index (SCI) Search:

**Filter 1:** Extract all papers from journals with journal names containing the following word stems:

reprod – fert – develop or reprod – nutr – develop

**Filter 2:** Extract all papers from journals not including filter 1 with the following keywords in their titles:

(fertility or contracept\* or (family and (planning or size)) or iud or reproductive or interpregnancy or (population and (dynamics or planning or growth)) or norplant\* or abortion\*)

Note: \* = any character or none

**Filter 3:** Address search – used to identify publications with UK or Irish addresses

north-ireland or ireland or wales or scotland or england not (wales same (nsw or hong kong)) not (scotland same new same albania) not (england same new same usa)

#### Social Sciences Citation Index (SSCI) Search:

**Filter 1:** The SSCI journal name extraction included the following word stems:

demography or eur-j-pop or fam-planning-perspect or population or pop-develop-rev or pop-bull or pop-index or pop-enviro or pop-res-policy-rev or pop-stud-j-democr or stud-fam-plann or contracept\*

Note: \* = any character or none

The SSCI filters 2 and 3 were the same as used in the SCI search.











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