What is Integrated Population-Health-Environment?

Population, Health and Environment (PHE) is an integrated community-based approach to development. PHE projects acknowledge and address the complex connections between families, their health, and their environment. They emphasize bringing conservation and reproductive health services to communities that both need and want them—particularly those who live outside the reach of any healthcare system, and on the edge of some of the world’s most endangered natural ecosystems.

Research demonstrates that one in five people live in the world’s biodiversity “hotspots”—areas with little access to basic government services like health and education. Some of these areas can also be classified as population and climate change hotspots, characterized by high rates of population growth, high projected declines in agricultural production and low resilience to climate change. Hotspots have high levels of unmet need for family planning, meaning many women of reproductive age want to prevent pregnancy but lack modern contraception. Today, 222 million women have unmet need for family planning.

PHE projects aim to simultaneously improve access to health services and manage natural resources in ways that improve livelihoods and conserve critical ecosystems. These projects have demonstrated that implementing a comprehensive and integrated strategy that builds upon existing synergies between health, family planning, and addressing the environment is more efficient than implementing separate programs to address each of these needs.

Why integrate PHE?

- **People do not lead their lives in silos.** A family living in a small agricultural village often faces unsustainable fishing, poor agricultural production, and lack of land. These challenges are compounded by a growing number of families and dwindling resources. After a day collecting the food and water needed for daily life, women have little time or energy to devote to seeking health services for themselves or their children. The programs that reach these communities should be integrated and address their multiple needs simultaneously. PHE projects have reached tens of thousands of men and women living in remote, biodiverse areas—saving them time and improving their access to food, water, sanitation, health, and education services.

- **It is cost-effective.** Research in the Philippines found that the integrated model out-performs single-sector population, adolescent health, or environment programs. Integrated PHE programs had a significantly higher positive impact at a lower total cost in both reproductive health and coastal resource management indicators than single-sector approaches. This is due, in part, to the fact that multiple project interventions can be planned, implemented and monitored using common management plans and evaluation systems.

- **Reach new audiences.** With integrated messaging, programs are able to recruit a greater number of men to family planning efforts and more women and adolescents to conservation efforts. In Ethiopia, husbands in a PHE project were four times more likely to support use of family planning than husbands in a reproductive-health-only program. A global analysis of more than 50 integrated projects conducted by the World Wildlife Fund found that these programs not only lead to an increase in family planning use in underserved areas, but also increase goodwill with the community and improve the effectiveness of conservation projects.

- **Make large scale impact.** Integrated programs and services benefit individuals, but they also reap benefits at national, regional, and international levels. Improved demographic trends and conservation efforts in biodiverse areas are critical to ensuring long-term prospects for sustainable development.
History of U.S. engagement in promoting PHE

For the past 10 years, USAID has been a key supporter of integrated PHE projects globally. Since the 2002 U.S. Congress’ Foreign Operations Appropriations Act, USAID has spent more than $34.5 million on PHE programs in 20 countries through the Bureau for Global Health’s Office of Population and Reproductive Health. Appropriations legislation has encouraged USAID to implement family planning and reproductive health programs in areas where biological diversity is threatened and species are endangered. Although Congress has never specified a funding level for these activities, in recent years USAID has allocated more than $4 million annually to fund such projects and to explore population-environment linkages.

During the past decade, USAID has partnered with large international NGOs and U.S. universities such as the World Wildlife Fund, Conservation International, Population Reference Bureau, FHI360, University of Michigan, and Johns Hopkins University. USAID’s PHE programs have also supported local partners around the world and engaged private donors such as the Packard, MacArthur, and Summit Foundations to leverage funds and bring work to scale.

Policy Recommendations

- **Expand support by non-health sectors.** Research shows that conservation programs benefit from providing family planning interventions in tandem with their work. However, only 15 percent of the funding over the past 10 years was received from bureaus or offices other than USAID’s Office of Population and Reproductive Health. By expanding support from other bureaus, such as the Bureau for Economic Growth, Education and Economics or Bureau for Food Security; offices including Office of Health, Infectious Diseases, and Nutrition and its Office of Energy, Environment, and Climate Change; and missions, integrated PHE programs can be strengthened.

- **Strengthen the evidence base and reach new audiences.** The limited studies on the benefits of PHE are quite compelling. It is crucial to demonstrate the benefits of this programming to new audiences in order to effectively and strategically build and replicate PHE globally. Research should be prioritized and invested in to ensure best practices are documented.

- **Scale-up PHE programs.** PHE programs have been inherently small-scale, fulfilling the needs of communities in the world’s most remote and biodiverse regions. As we look forward to the next 10 years of USAID’s program, it is critical for PHE efforts to focus on building capacity of national governments to address this work, ensuring sustainability and scale of PHE programs.

**USAID BALANCED PROJECT**

“Building Actors and Leaders for Advancing Community Excellence in Development”

From 2008 to 2013, the BALANCED Project aimed to improve the well-being of people living in critical watersheds and coastal areas who depend on fragile ecosystems for their food, income, and livelihoods. The project included seed grants and training to environmental groups to develop family planning and reproductive health programs, improve monitoring and evaluation, and increase advocacy and outreach. BALANCED supported regional PHE networks, technical advisor fellowships, development of PHE toolkits, and policymaker outreach. Ultimately, the program trained 2,000 people from 72 organizations and eight countries in South Asia and East Africa on how to start or run community-level integrated programs. These projects resulted in increased access to family planning and more environmental awareness in several ecologically vulnerable areas.

**Endnotes**