

September 12, 2008

Ms. Ann Mette Kjaerby
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APPG on PD & RH
Room 563 Portcullis House
House of Commons
Westminster
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UNITED KINGDOM

Hearings by the All-Party Parliamentary Group on Population, Development, and Reproductive Health on the Subject of Maternal Morbidity

Dear Ms. Kjaerby,

Thank you for the recent letter to World Bank President, Robert Zoellick, from Baroness Jenny Tonge, and Christine McCafferty, MP, inviting him to submit written evidence to the All-Parliamentary Group Hearings into Maternal Morbidity in early December.

Mr. Zoellick has asked me to reply on his behalf to reiterate the World Bank's belief that strong population and reproductive health policies are central to equitable and lasting development; and that these policies are central to improving maternal and child health, to meeting the 'unmet needs' of women in the developing world, while significantly reducing the unacceptably high numbers of mothers who die in pregnancy or delivery.

The Bank's commitment to population issues is embedded in the Program of Action of the International Conference on Population and Development (ICPD 1994) which is clearly articulated in its Health, Nutrition, and Population Strategy of March, 2007.

The Bank acknowledges the importance of its contribution to the achievement of the Millennium Development Goals, 5 and 6, and has made the inclusion of these goals among its corporate priorities. The Bank supports Population and Reproductive Health (Pop/RH) through lending/grants, policy and analytical work and the Development Grant Facility (DGF). In addition, complimentary investments in health systems-strengthening also strengthen access to Pop/RH services.

Lending:

Bank Pop/RH Projects Currently Under Implementation and in the Pipeline

- The Bank currently has **90 projects with a Pop/RH component under implementation. The total amount for these projects is \$965 million, with \$930 million in loans and \$35 million in grants.**

- Between April 2007 and to date the Bank has approved **17 projects with a Pop/RH component**. (\$77 million in loans and \$ 14 million in grants). Of these, nine projects are in Africa, three in South Asia, three in East Asia, and one each in the Middle East and North Africa and Latin America and Caribbean regions.
- In addition there are **23 projects with a Pop/RH component in the preparation phase**. These will total \$326 million in loans and \$ 15 million in grants. The majority of these projects is in the Africa Region.

Policy Work

- A discussion paper '*Population issues in the 21st Century: The role of the World Bank*' was issued in 2006 in preparation for the 2007 HNP sector strategy. The report highlighted the issue of high fertility rates in some developing countries and made the case for expanding support to family planning and other RH programs for the poor, adolescents and other vulnerable groups. The report called on the Bank to undertake intensive analytical work to understand the determinants of sustained high fertility, addressing unfavorable socioeconomic factors which influence household behaviors, and ineffective reproductive health services. This report has been widely disseminated both inside and outside the Bank.
- Additional policy reports in 2007/8 have included '*Obstetric Care in Poor Settings in Ghana, India, and Kenya*,' and '*Fertility Regulation Behaviours and Their Costs: Contraception and Unintended Pregnancies in Africa and Eastern Europe and Central Asia*.'
- As a follow-up to the above report, new analytical and policy work on population and fertility "*Addressing the Neglected Millennium Development Goal: an Analysis of the Determinants and Implications of Sustained High Fertility*" is underway to assess global and regional progress towards the achievement of MDG-5, specifically by analyzing various determinants and implications of sustained high levels of fertility in selected countries. A primary objective of this work is to reposition the debate about high fertility in the global health agenda. The Bank team is consulting development partners, NGOs, and academia to ensure wide ownership on the scope, methodology and outcomes of the study. The work will be done in two phases- and the deliverables from Phase I will be available in FY09.
- In 2008, Economic Sector Work (ESW) was completed on **Population and Development in Mali and Ethiopia**, to inform the policy dialogue and evidence-based policy reforms required to address implementation bottlenecks in these two high-fertility countries.
 - **The Mali ESW on Population and Development (*Le Mali face au défi démographique*)** makes the case for addressing high fertility levels. The

main arguments used are: the formation of human capital, in particular in education and health; the issue of population pressure on ecosystems including urbanization; and lower fertility levels and their corresponding beneficial impact on the health outcomes of mothers and children. The Prime Minister of Mali has recently mentioned the demographic challenge, a clear sign that traditional views on population in Mali are changing toward a better recognition of the consequences of rapid population growth. The report will be used as a major tool in the Bank policy dialogue in Mali.

- **The Ethiopia ESW *Capturing the Demographic Bonus*** has greatly helped consolidate the ongoing policy shift in Ethiopia toward more proactive population and reproductive health interventions. This is apparent in the ongoing large efforts to scale-up reproductive health services, including family planning.

I am sending these recent publications by mail for the APPG to examine for the purposes of its December 8-9 Hearings on Maternal Morbidity.

Grants through Development Grant Facility (DGF):

- **The Population and Reproductive Health Capacity Building Program (PRHCBP)** is a Development Grant Facility financed program. The PRHCBP funds activities in Population and Reproductive Health. The program provides resources directly to NGOs/CSOs, with the objective to build the capacity of organizations and agencies working in population and reproductive health (RH), leading to healthier behavior at the individual and community levels, reducing the impoverishing effects of poor reproductive health, and improving reproductive and maternal health outcomes
- Between 1999 and 2008 a total of US\$18.32 million has been allocated to PRHCBP, an average of US\$1.8 million per year. The annual allocation has been \$2.2 million through 2005 and thereafter has remained at \$1.2 million/year to date.
- Grants have been awarded to a total of 159 NGOs since the beginning of the program with an average of 17-18 grants made per year in the period 1999-2007.
- The DGF also supports the Human Reproduction Program (HRP) at WHO. This is a special program to support and evaluate international research and development related to human reproduction, with particular reference to the needs of developing countries. The World Bank initiated its support to this program in FY 88. UNFPA, UNDP, WHO and the Netherlands are the other sponsors of this program. The annual allocation for this has been \$2 million through 2008.

I hope that this submission gives the APPG a useful overview of the World Bank's commitment to ensuring that population and reproductive health is front and centre of its efforts to help partner countries achieve equitable and sustainable development. Please let me know if we can be of further help to the APPG's Hearings on Maternal Morbidity.

Sincerely,

A handwritten signature in black ink, appearing to read 'Joy Phumaphi', with a stylized flourish at the end.

Joy Phumaphi
Vice President
Human Development Network