Poverty and Health Equity within USAID’s Global Health Framework

Presenter’s Name

Date

Note: USAID is currently developing its Global Health Initiative, and as such, its strategy for addressing poverty and health equity is being updated. Once complete, this presentation will be updated accordingly.

Photo credits: ©iStockphoto.com/Randy Plett Photographs/ Vikram Raghuvanshi Photography/ Bartosz Hadyniak
Global Health and Development Objectives

Foreign Assistance Goal
Help build and sustain democratic, well-governed states that respond to the needs of their people, reduce widespread poverty, and conduct themselves responsibly in the international system.

Investing in People
Help nations achieve sustainable improvements in the well-being and productivity of their populations through effective and accountable investments in education, health, and other social services.

Health
Contribute to improvements in the health of people, especially women, children, and other vulnerable populations, in countries of the developing world through expansion of basic health services, including family planning. Strengthen national health systems and address global issues and special concerns, such as HIV/AIDS and other infectious diseases.

FP/RH Element
Expand access to high-quality family planning (FP) services and information and reproductive health (RH) care to reduce unintended pregnancy and promote healthy reproductive behaviors.
Poverty & Health Equity Global Leadership Priorities (GLP) Strategic Approach

- Build on USAID’s advantage and expertise in supporting FP/RH programs to improve reach to the poor and underserved.
- Articulate the role for FP and RH as inputs to sustainable development.
- Identify key issues the Bureau of Global Health (GH)/Office of Population and Reproductive Health (PRH) can address through policy and programs.
- Strengthen resources that GH/PRH can contribute through technical and financial agreements.
Better Health Contributes to Economic Growth

- Poor health depresses economic growth.
- Sustained health improvements stimulate economic growth—in “the virtuous cycle.”
- Disparities in health between urban and rural or poorest and wealthiest residents threaten the sustainability of health improvements.
- Poor health impedes poverty reduction.
Poverty Reduction Is Critical

Lack of knowledge
Restricted access to services
Low ability to pay

Poverty

Impaired cognitive development
Lowered productive capacity
Reduced capital for investment

Poor Health
Association between Fertility and Poverty

Percentage of Population Living on <$2 a Day in Developing Countries, 2007

FP/RH Operational Plan Guidance

Goals (2008–2012)

• **Aggregate**: In 40 countries, the modern contraceptive prevalence rate (MCPR) will increase 1% a year.

• **MCPR**: 25 countries with an MCPR of 10%–50% will achieve a 1% increase in MCPR annually.

• **Equity (Fairness)**: 10 countries with an MCPR between 30% and 50% will each achieve a 1% increase in MCPR annually in the two poorest wealth quintiles (poorest population groups).

• **Graduation**: Five countries will graduate from FP/RH assistance in this same period.
Poverty and FP/Maternal Health: Opportunities for Technical Assistance

- Data Collection, Analysis, and Dissemination
- Policy and Advocacy
- Health Systems and Financing (Public/Private)
- Service Delivery and Outreach
- Contraceptive Security and Graduation
- Monitoring and Evaluation