Bridging the gaps sector to sector and research to policy: linking family planning to urban development

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ABSTRACT
There is growing science and policy interest in multi-sectoral action, but bridging the gap between family planning and urban development is challenging. This paper analyses the experience of integrating these sectors in sub-Saharan Africa via building research capacity. Family-planning researchers were supported to link with urban-development actors, one goal being to generate lessons on the process of getting their research into the policy domain. The urban governance sector’s dynamic and complex nature was a particular challenge for family-planning researchers; in future, structured familiarisation with a sector might facilitate multi-sectoral action and better enable researchers to link with the policy world.

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Introduction

Interventions that are both multi-sectoral and evidence-based are increasingly seen as ideal, but require purposive linkages to overcome multiple gaps. This paper addresses two gaps. The first is between sectors – a general lack of connection between, in this case, the family-planning (FP) and urban-development realms, leaving a paucity of multi-sectoral actions to achieve shared goals. The second is research to policy, specifically between family-planning research and urban-development policy. While the FP sector has engendered initiatives to strengthen “implementation research” and to “get research into policy and practice” (GRIPP), these have rarely ventured into the urban-development policy realm, even though rapid urban population growth is a pressing concern to policy-makers. It is useful to briefly examine each gap’s distinct trends, literature, and associated arguments. Tackling both gaps in tandem may differ from tackling them in parallel, and could have greater effects. Below, we briefly describe the importance of and trends in linking sectors in general, then turn to the specific need to link family planning with urban development. We then review efforts to link research to policy within the family-planning sector, and present an example of an attempt to bridge both gaps using a research programme in sub-Saharan Africa. We end by identifying the lessons learnt that might apply to similar endeavours.

The first gap: the need to link the family planning and urban development sectors

Multi-sectoral action refers to deliberate collaboration among practitioners or institutions of different academic, professional, or policy sectors (e.g. health, environment, or economy)
jointly achieve a policy outcome. Some uses of the term connote sectors as discrete stakeholder groups (e.g. government, civil society, and private sector) that collaborate, but we use the former concept of sectors in this paper. The main objective of multi-sectoral action is more effective use of human and financial resources to achieve shared or interdependent goals that action in a single sector cannot accomplish.

The value of multi-sectoral action has been recognised for some time, especially regarding cities. Macro-level trends that pose problems going beyond the remit of any single sector (urbanisation, climate change, population growth, resource constraints, poverty, intra-state or trans-national conflict, natural hazards, and pandemic risk, to name a few) induce multi-sectoral approaches. There is also growing appreciation of the inter-dependence of many sectoral objectives, which mirrors the fact that many of the problems that sectoral objectives seek to solve stem from multiple, intertwined factors.

Designing action in the face of such complex causality entails evidence and consensus on the multi-sectoral determinants of a desired outcome (or in other words, the right ingredients and recipe to achieve the desired results). For example, the health sector has long grappled with specifying the multi-sectoral determinants of health outcomes (Marmot and Wilkinson 1999). Multi-sectoral action might also be expected to encounter challenges of professional orientations, bodies of knowledge, resources, political attention, bureaucratic systems, and – perhaps most daunting – leaps into the unknown.

A specific example of an inter-sectoral gap is the largely unmet need to link family planning with urban development. High birth rates alongside rural–urban migration are unquestionably a key driver of urban growth and change. However, that truism has not led to routine integration of family-planning concerns into urban development debates. This gap now looms large, given the rise over the last two decades of a global agenda for sustainable development rooted in the transformative potential of cities and urbanisation (Parnell 2016). The clear case for a sound understanding of urban demography paves the way for the argument that family planning is foundational to securing urban health and, more generally, urban sustainability.

Historically, the coupling of family planning and urban policy in low- and middle-income countries (LMICs) has been weak. With the rise of post-colonial nationalism and an international development system, governments devised national family-planning programmes that linked family planning to neo-Malthusian anxieties around population and economic growth. Post-colonial population policies emphasised the national delivery of family planning alongside other health services (Sinding 2007), and rural constituencies were the priority for the extension of health services; cities were not a particular geographical priority. At the same time, urban planning was becoming divorced from its early public health emphasis in favour of a modernist ambition to promote economic development and industrialisation through large-scale infrastructure investment (Duminy and Parnell 2020). Urban family planning thus suffered from both the rural focus of health-service extension and the dilution of urban planning’s public-health element.

Family planning lost ground along with most other aspects of urban health at a time when post-independence governments were caught up in a strongly rural orientation – and then public services in general, and in cities in particular, came under threat from structural adjustment policies. Thus, despite the fact that the later decades of the twentieth century saw major shifts in overall fertility associated with growing contraceptive use and the increasing empowerment of women, there was no commensurate increase in the attention to family planning in LMIC cities.

Amid fledgling concern about the urban-health problems of LMICs during the 1980s (Harpham 1986), and in the build-up to the 1994 International Conference on Population and Development in Cairo, some researchers demonstrated an interest in family planning and fertility among the urban poor (Mamdani et al. 1993). A prime outcome of the Cairo Conference was an emphasis on the reproductive rights of women and couples to choose to use (or not) contraception. However, the concurrent growing concerns about the HIV/AIDS pandemic somewhat displaced global emphasis on and support for family planning per se. This shift in emphasis incidentally attenuated the still-
limited connections between the urban and family-planning sectors. This remained the case until the early 2000s, when the landmark *Cities Transformed* volume assembled evidence to highlight the significance of urban demographic dynamics in the developing world (Montgomery et al. 2003). It did so by highlighting that:

- A majority-urban world population was imminent;
- Almost all of the world’s future population growth would occur in the cities and towns of LMICs;
- Over half of all urban growth in LMICs was driven by natural increase rather than rural–urban migration;
- Urban population growth rates in Africa and Asia were higher than in other regions;
- The number and size of large or megacities in LMICs was historically unprecedented, although the majority of growth was occurring in smaller secondary cities and towns; and
- This growth of cities and towns would be accompanied by the urbanisation of poverty, indicating that prevalent assumptions of an urban advantage did not necessarily hold.

However, the primary effect of *Cities Transformed* was to make the case for policy attention to broad urban dynamics, rather than to the potential links between urban development and family planning. For instance, over a decade later the SDGs would come to express a global developmental concern with urban population questions but only as reinforced by other issues related to climate change and safety and security. The urban-family planning link was not foregrounded in the SDG process, in part because it was lost among other influential agendas that were emerging simultaneously. In addition, the urban-family-planning case was not clearly articulated nor mainstreamed in the urban health agenda, which has been more concerned with infectious and non-communicable diseases. Hence an opportunity was missed in the 2030 SDGs to highlight the importance of the relationship between family planning and urban development. That case is easily updated with additional facts to underscore the overall importance of family planning, reproductive health, and fertility as an urban-development priority and an overall driver of global urban change. For instance, the global population is now well over 50% urban and rising; urban populations are increasingly weighted towards more vulnerable cities whose populations moreover are youthful and growing at above-average rates; and linkages between urban health and governance are now better understood. We have reached a point where we cannot understand cities without understanding fertility, and we cannot understand fertility without understanding cities.

The moment, therefore, is opportune to revitalise an urban family planning agenda. Cities now feature far more prominently in the global research and policy space; as such, there is more of an appetite to produce and absorb information about urban family planning, including a more nuanced interrogation of what aspects of city management affect fertility and how demographic variables impact cities. Various donors have shown interest in linking urban and family-planning agendas. In addition, a recent World Bank report highlighted family planning’s potential as a cost-effective means (alongside interventions targeting female education and empowerment) to accelerate the fertility transition and drive poverty reduction in African countries (Beegle and Christiaensen 2019). The stage is set for a newly energised focus on family planning that explicitly includes urban concerns, with their distinctive spatial and subnational issues.

In renewing the case to link the family planning and urban sectors, key messages are:

- *That family planning must be a more central and visible component of the idea of a better urban future* and the achievement of SDG 11. It can do so by: improving maternal and child health while promoting the empowerment of women (Cleland et al. 2006), reducing poverty and promoting economic development (Canning and Schultz 2012), enhancing urban climate-adaptation responses and contributing to long-term mitigation effects (Bongaarts and O’Neill 2018), building resilience to external shocks and stresses (De Souza 2014), and slowing urban population growth while limiting the share of the urban population living in informal settlements (Jedwab and
Vollrath 2019). Indeed, as unmet need for family planning and unintended births remain high in urban Africa and parts of Asia, the provision of enhanced family-planning services could significantly lower fertility and reduce urban population growth rates in those regions. If family planning is excluded from discussions of what it means to have an urban sustainability and health agenda, then that agenda cannot be realised.

- **That family planning must be embedded in governance regimes at the city scale**, such that it is clear who is responsible for delivering services in cities and towns; how they are funded across the city; and who is responsible for navigating the links among supply, demand, and the infrastructures through which those links are mediated (especially when the state is only one of the service providers and there is weak regulation of private providers). While it is imperative that family planning be included as part of the wider planning and organisation of urban service delivery, to date it has fallen short of doing so for reasons including insufficient funding, a rural bias in service delivery, and a narrow focus on family planning as a health service governed at the national or regional level without regard to local specificity or spatial dynamics.

- **That revitalising urban family planning demands better data and analysis.** While service delivery is important, there are also significant technical challenges to ensuring an effective match between optimising supply, access, and uptake. There is a need for more effective local data and monitoring systems, making sure that sectoral information management and strategic city planning staff are trained properly, and that effective complementary links are created with private sector suppliers. Crucially, health-system data must link with other statistical and geospatial urban information systems.

In making the case for strengthening urban family planning, simply arguing the importance of attention to “the urban” is not enough. There is considerable diversity within and between cities. An agenda that addresses this understanding of diversity is required, which is precisely why the programme described in this paper is important: we need to develop a cohort of scholars and practitioners who recognise the implications of these realities. Before presenting the details of the programme, we review how effective the family-planning sector has been at linking research to policy.

**The second gap: the need to link research to policy in family planning**

The second gap this paper addresses is that of research to policy, as represented by the top-left quadrant of figure 1. We focus on research evidence but there are other types of evidence as well and, in a hierarchy of evidence, research is often ranked low by policy-makers due to its complexity and inaccessibility (Sumner and Harpham 2008). The programme described in this paper partly attempts to address this problem.

The family-planning field has a long record of efforts to link research to policy and programmes. The primary expression of this link is operations research and its more recent re-incarnation, implementation science, which has been defined as the “application of systematic learning, research and evaluation to improve health practice, policy and programs” (Reichenbach et al. 2016). The field is dominated by large non-governmental organisations (NGOs), sometimes working in partnership with universities.

Operations research has been conceived as the provision of information that managers and policy-makers need to improve existing service-delivery activities and plan future ones (Fisher et al. 1998). Several important implications stem from this conceptualisation’s focus on managers and policy-makers. For research to operate in this process, researchers need to demonstrate that they share with policy-makers a commitment to the programme and a desire to improve it. They have to be “inside the tent” (as the upper-left side of figure 1 represents) rather than act as critics from outside it. While some academics may see this as a threat to their intellectual independence, it merely requires that they develop an understanding of the constraints – political, moral, financial – that influence policy decisions. This is particularly important for selecting a topic or problem for investigation: as the goal of this genre of research is improvements in service delivery,
it is pointless to focus on a topic in which decision-makers have little interest, ability, or appetite to change. It follows that researchers, managers, and policy-makers should work in harness from the very start, a point stressed in most of the literature on GRIPP. And for successful partnerships to be developed, researchers need credibility and to command a degree of respect from their programme counterparts.

Research evidence has undoubtedly had a substantial impact on family-planning programmes from the very beginning. Long lists of factors that determine the likelihood that research findings will be used in policy and programme decisions have been suggested (WHO 2006). These include: the priority of the research topic relative to other problems; linkages and partnerships between the research team and stakeholders; the credibility of the research team; the generation of clear, cost-effective, and actionable recommendations; and skilful communication.

Nevertheless, even when these desiderata are achieved, it is far from true that research evidence automatically drives policy and programme changes. One key lesson of the large literature on the evidence–policy interface is that scientific evidence is only one of many considerations that influence policymakers and is often not the most important one. Personal experience, anecdotal evidence, beliefs and values, and political factors are all likely to affect decisions. Single studies rarely have an impact, while an accumulation of research over time has a greater chance of influence. Recommendations from studies that accord with beliefs and values in the policy-making arena will be viewed more favourably than those that challenge them. Admittedly, this entails a tendency for research to generate evidence that recommends incremental rather than fundamental change. In the latter case, one course of action is to enlist the support of civil-society groups, such as women’s organisations, who can effectively advocate change (FHI 2012).

The GRIPP literature suggests several ways in which researchers, even those of insufficient prestige to easily raise funds and command policy-makers’ attention, can maximise the potential for impact: become familiar with the programme and its problems; study relevant policy documents and protocols; select a topic to study that will resonate with managers; review existing data sets to establish whether secondary analysis can yield results of practical importance; invite a prestigious research mentor or collaborator to participate; involve, perhaps in the form of an advisory panel, representatives of the programme and advocacy groups with an interest in the topic; cultivate contacts in the media who might help with dissemination; and develop skills in communicating results to non-scientific audiences.

The following section describes an initiative that incorporated these approaches to linking research to policy in an attempt to enable mid- to early-career researchers in sub-Saharan Africa to influence family-planning policy, specifically in urban settings. That specificity also required the

![Figure 1. Reproduced from Jones (2011).](Image)
initiative to address an inter-sectoral gap – between family planning and urban development – and thus tackle two kinds of gaps in parallel.

**Bridging both gaps: using research to link the family-planning sector to urban development policy**

To address the challenge of linking family-planning research with urban development policy, the International Union for the Scientific Study of Population (IUSSP) recently implemented a programme to build the policy-relevant evidence base on family planning and fertility outcomes in urban areas of sub-Saharan Africa, to provide skill-building opportunities to early-career researchers to work on issues of urban family planning, and to engage with urban policy- and decision-makers. The programme’s aims are, first, to raise awareness (among urban planners, policy-makers, and programme officers at local, national, and international levels) of the contributions of family planning to sustainable urban development and addressing urban poverty, so as to put family planning on the urban policy agenda from which it has been largely absent. And second, to maximise chances that policy-makers and practitioners use the fellows’ research findings to improve local or national policy and interventions. Thus, the objectives are explicit in both filling the research-to-policy gap and bridging multiple sectors in development. The following are selected features of the approach that, combined with results reported further below, yield lessons on bridging the two gaps.

**Fostering high-quality researchers based in LMICs:** The programme considers high research quality to be a necessary if insufficient condition for policy impact, and also postulates that research capacity embedded locally is more likely to be impactful. To redress the dearth of researchers in sub-Saharan Africa on family planning in urban settings, the programme selected and cultivated a cadre of research fellows and afforded them support for research, mentoring, capacity-building, policy engagement, and communications. To make the effects lasting and promote LMIC self-sufficiency in research to policy, the selection criteria favoured dynamic young researchers who completed their graduate studies in the last 10 years and who were already employed by institutions in the region; the reasoning was that the fellows’ research would thus be of interest to their home institutions and that their new skills will be of wider value through work with colleagues, student training, project development, and so forth. Because the combination of family planning with urban governance is relatively novel in sub-Saharan African academia, and research to policy only slightly less so, repeated and expansive requests for proposals and subsequent coaching of applicants (structured and even-handed) were needed to amass a competitive selection. In all, 16 sub-Saharan Africans were awarded one- to three-year fellowships.

Training was designed to promote exchanges and a nascent network among the fellows who hail from diverse disciplinary backgrounds and work in varied institutional settings. The fellows established their own e-mail lists and WhatsApp groups to share experiences, to consolidate questions for programme leadership, and to stay connected. Thus, as a microcosm, the fellows are bridging gaps between disciplines and forming a network that can contribute long-lasting improvements to research and policy in the sub-continent. To ensure the generation of high-quality scientific research that inter-sectoral peers take seriously, the programme provides each fellow with a senior “research mentor”, who assists in reviewing data collection and analysis methods and in writing up study results, thereby strengthening the fellows’ research skills.

**Maximizing policy impact of the research:** The fellows mapped relevant policies and policy-makers as part of their research proposals, continuously engaged with key local policy-makers early in the research process, and articulated well-designed strategies to transmit findings in ways that increased their likelihood of uptake. The programme also provided multifarious research-to-policy support:

- training (by the African Population and Health Research Center / APHRC) on tools to improve policy engagement and communications such as stakeholder mapping and how to develop...
knowledge-translation tools like policy briefs, blogs, and key messages that target a non-research audience;
• orientation to a rights-based approach to family planning (as advocated in, for example, Cottingham, Germain, and Hunt 2012);
• training in policy-tracking, i.e. identifying policies in both family planning and urban development sectors, understanding the policy priorities, and identifying gaps and developments; and
• arranging for each fellow an “urban policy partner,” a counterpart to the research mentor, to help ensure that the urban-planning context under study is clear to the fellow and that she or he has introductions to relevant key officials in municipal, district, or national-level institutions.

As a complement to supporting the fellows’ pursuits, the programme engages with policy-makers and researchers at the regional and international levels, for example, the International Society for Urban Health; The Challenge Initiative (TCI), which works on urban reproductive health with mayors in 94 cities in Africa and India, including several where programme fellows work; the 2018 International Conference on Family Planning; the 2019 African Population Conference; the Africities Summit; the World Urban Forum; and the UN Commission on Population and Development, to draw their attention to the potential value to urban development of investments in family planning.

These are the main ways the programme design attempted to bridge both sectoral and research-policy gaps simultaneously. Below we consider its successes and challenges.

Successes, challenges, and conclusions

As noted in preceding sections, the programme considered from its inception both (a) the linking of the family-planning sector to the urban development sector, and (b) the appropriate weight to be placed on high-quality research in and of itself versus emphasis on policy relevance.

Linking the sectors

A major challenge arose in the recruitment of suitable fellows. The applications were almost exclusively from the field of health and demography (not urban specialists or policy analysts) so the bridge-building is perforce from one side of the family planning–urban planning sectoral gap rather than both. Perhaps the Scientific Advisory Panel should have included more experts from the world of urban planning and development, or funded postdoctoral research fellowships at population studies centres for recent top graduates of urban specialist programmes, to address this imbalance.

Nonetheless, the programme is on the right track in terms of helping fellows to link to another sector and assimilate the (urban) context in which it works, as these solicited feedback quotes from fellows indicate.3

In the future I hope to examine a) how particular modes of urban governance and infrastructure development can create better demographic and health outcomes, b) how demographic and health trends should be incorporated to enhance urban planning and governance processes at multiple scales and over multiple timeframes, and c) how interventions related to family planning and reproductive health can lead to desirable urban development, welfare, and resilience outcomes.

This project has shown just how much information can be hidden in a simple urban/rural dichotomy, as is often employed in many economic analyses. There is often the common perception that urban households are better off than rural counterparts. This generalization lacks nuance and is therefore problematic because it ignores the living conditions of the urban poor. This project emphasized the need to pay more attention to this particular demographic, particularly given existing research which suggests that the urban population will expand very quickly in the coming years.

Usually “urban versus rural” is the division in plans. Literature exists on that. There is not much literature on disparities within the urban space. In [my country’s] rural areas, the population is mostly homogenous – same
tribes, same language, same professions; in the urban space, that’s very different. In the past, I’ve worked on rural projects and people are receptive to outsiders (and their ideas). Urban people are busier, more sceptical … It’s not always a researcher’s role or skill to advocate for the use of the evidence, but with a partner who can use it, and get it into the right hands, it can be used.

Here we see the researchers starting to probe the interactions of family-planning and urban-governance phenomena, plus interrogating some over-simplified dichotomies and preconceptions. These seem solid first steps of nascent inter-sectoral research. The programme’s inputs into the scope, focus and quality of the research proposals may have helped ensure that such essential cogitation would follow.

**Engaging with policy-makers versus pure research**

About half of the fellows’ urban policy partners – a voluntary, *pro bono* role – are academics with links to urban-planning processes; most of the rest are TCI staff from the programme teams that TCI supports in many of its participating cities. (It proved difficult to identify government urban-planning experts to play this urban-policy-partner role.) The linkage to TCI, beyond supplying urban policy partners for several of the fellows, has enhanced fellows’ networking, providing an entrée to top municipal political circles (as participation in TCI typically entails mayoral-level commitment).

Fellows indicated considerable learning and change of attitudes:

[The project] has softened my initially held position that not all research needs to be aimed at stakeholder engagement. Additionally, being a firm believer in comparative advantage, I did not previously subscribe to the view that researchers needed to wade into the world of policy engagement. This project has however shown that although certain aspects of stakeholder engagement can be complicated and time-consuming, there are other simpler yet effective means of engaging stakeholders.

The value of this project was building a relationship with a policy broker … There were mutual benefits to the linkages I made as a researcher to policy actors. For example, [one government agency] wanted to know more about adolescents in the slums [I was studying], so I added that to the focus group discussions. It’s good to have other people (in policy positions) see that you value their position (and needs).

Another very important point that I gained with this project is the purpose of research. Before, I did the research to publish. And these publications had as a purpose my personal satisfaction, recognition or for a promotion at the university. Now, my vision has changed and before identifying a research topic, I ask myself the question: What is the problem I can address that can change the life of my community or the world in terms of social norms/strategies? When I write my papers, I ask myself what is the policy relevance of a result of my research and its influence on the funding allocation?

… I was aware of the value of engaging with policymakers (and practitioners), but I never actually received any specific kinds of training to do so. I found it useful to have some guidance on how best to go about that engagement. At the same time … processes and relations of governance are complex and include a much wider variety of actors and institutions: practitioners and decision-makers (as distinguished from policymakers), the private sector, consultants, political parties, civil society, and so on. Creating impact requires working strategically with key players at all stages of the research process, which is incredibly hard to do, particularly for young researchers with relatively little "clout" and smaller networks. It takes time and hard work to get to the point where, as a researcher, one’s input is valued and influential.

Granted, these testimonials describe mindset changes on the part of the programme’s fellows, and not yet actual research-to-policy impact (as indeed the last commenter concedes); but they do suggest that mindset changes are necessary and possible. The programme’s multifarious training and support for the fellows on the constellation of policy-engagement options can be seen in this feedback.

Fellows were also exposed to the complex, dynamic layers (national, regional, municipal) of governance affecting urban family planning. One fellow reported:

The national government controversially decided to take over the running of certain functions of the Nairobi county i.e. health, transport, planning and development and public works. It has appointed the Nairobi Metropolitan Services to run these functions. This move has been resisted by the county government which has refused to hand over necessary documentation. So there are currently two sets of officials claiming to be in
charge of the county ... This affects my choice of urban policy partner, because, depending on which side emerges with more control of the city, after the talks, I will need to select someone from the side that controls the running of the city.

An understanding of such urban-governance issues is essential for research-policy linkages in urban family planning. In retrospect, an analysis of and briefing on the character and dynamics of the urban sector might have helped fellows to more effectively link with it.

Conclusions

Problem-oriented research must draw from a range of intellectual and disciplinary traditions. Doing so can ensure effective research–policy interfaces by building capacity across once discrete professional and intellectual domains. Opportunities to downscale expert knowledge to the local (city) scale are also valuable to urban governance. What is less clear is how to close the gaps that mitigate against this kind of integrated engagement in areas such as family planning and reproductive health in the city – a dilemma we address by focusing on two specific knowledge/practice gaps and tracking how a large capacity-building programme approached the imperative of forging new ways to bridge the gaps.

As any lessons from linking particular sectors might apply to multi-sectoral partnerships generally, this paper will be of interest to audiences beyond those of the sectors described herein. In sum, the programme built multiple and multi-phasic mechanisms in its design to maximise inter-sectoral and research-to-policy linkages. Some proved difficult to fully implement (such as obtaining a critical mass of research project proposals from the urban-policy side, leaving the family-planning side to dominate the cadre of fellows). Some were implemented mostly as planned, and worked (the research mentors, the training on policy outreach). We conclude that there is enough knowledge and experience to train researchers how to engage and communicate with policy-makers but that the leap from one sector to another can too easily remain an unfinished bridge, especially if built from only one side. Where the latter starting point is unavoidable, we speculate that more understanding of the target sector can facilitate linkages – structured and systematic familiarisation with and analysis of its tenets, vision, strategies, methods, bodies of knowledge, stakeholders, and political economy. Inputs from political scientists might facilitate this in future, similar endeavours. An identified problem that seems to require multi-sectoral efforts to resolve can provide a shared motivation, and might enable joining the two sides of sectoral bridges in a common vision and concerted action.

Notes

1. This programme is funded by the Bill & Melinda Gates Foundation. For more information, see: https://iussp.org/en/urbanfp and https://iussp.org/en/bmgf-award-iussp-project-urban-family-planning.

2. The 16 fellows—4 women and 12 men—work in 10 countries located throughout sub-Saharan Africa. Eleven work in universities—health (7), demography (3), and economics (1); two in NGOs; two in government health departments; and one at an international agency. Financial and time constraints precluded interventions and field experiments; the fellows’ topics were thus observational rather than experimental but nevertheless had potential for influence. Some studies involve only the analysis of secondary data, while others include the collection of qualitative and/or quantitative data. Three are embedded in longitudinal data collection projects and others include interviewing key stakeholders. The study of informal settlements (slums) is the focus of most of the studies. Vulnerable groups under study include adolescents, HIV-positive women, and refugee women. For detailed information on the fellows, see https://iussp.org/en/first-Round-iussp-early-career-research-fellows-urban-fp and https://iussp.org/en/second-Round-iussp-early-career-research-fellows-urban-fp.

3. This feedback arose from either (a) written responses by fellows to programme management’s request for brief mid-term reporting on how the fellows were linking with fields with which they were less familiar and on how this project enabled them to understand the value of engaging with policymakers; or (b) verbal statements by fellows in the course of virtual trainings or review sessions, transcribed by programme management and checked with the respective fellow. The authors selected the quotes presented here on the basis of their addressing the points in question.
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