From population control to reproductive health and rights: a donor’s journey

The John D and Catherine T MacArthur Foundation’s population and reproductive health program, 1986–2019

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Introduction

In 2015, the John D and Catherine T MacArthur Foundation (hereafter Macarthur) announced the end of its Population and Reproductive Health (PRH) grant-making program and began to design strategies for exiting the field. The program ran from 1988 to 2019 and provided US$372 million to civil society organisations. In 2020, the Foundation issued a PRH History and Narrative Assessment (written by Dipa Nag Chowdhury, one of the authors of this paper) that describes the program’s scope and impact based on research and interviews with staff and grantee partners. Here, staff involved in the exiting phase reflect on lessons learned over the program’s lifespan.

MacArthur’s PRH program funded sexual and reproductive health and rights (SRHR) policy-related advocacy, research, national and cross-country mobilisation, and thought leadership globally and in four countries: Brazil (1991–2001), India (1994–2019), Mexico (1992–2019), and Nigeria (1994–2019). Grant-making budget ranged from US$12–14M in total annually. The program had three distinct phases — expansion: setting up offices and creating initial strategy (1986–2000); focus on maternal mortality and young people’s reproductive and sexual health and rights (2000–2015); and exit (2015–2019). An international advisory group of experts and advocates designed the overarching program strategy which was adjusted to each country. Cross-country learning included staff discussions of country developments, grants, and trends, and exchange visits for grantee partners that strengthened program cohesion, facilitated change, inspired creativity, fostered relationships among thought leaders, and encouraged learning between local and global work.

MacArthur’s program was simultaneously a result and a fomenter of changing paradigms in the field — perhaps most significantly, the shift from population control to women’s health and rights. The program’s name change from World Population Program to Population and Reproductive Health in 1994 showed a readiness to embrace reproductive health concepts while maintaining a connection with population growth concerns. Today, in the context of more diverse voices, a shift toward reproductive justice gathers momentum in some countries, moving further from “population” programs. In line with the rights-based approach, there is significant work emerging on empowerment, agency, and autonomy, particularly regarding reproductive and sexual choices and young people. The PRH program supported projects that advanced these concepts, such as networking, leadership, and advocacy projects for young people.

But advances in SRHR are uneven worldwide, and the field has always faced challenges and...
setbacks. Beyond our program, the field will continue to adapt as people increasingly recognise the impact of other fields on women's rights and wellbeing, such as the climate crisis; racism, discrimination, power, and colonisation; health emergencies such as COVID-19 and their aftermath; governance; closing civic space; migration; insecurity and violence; and other pressing issues.

Within this context, we, staff of the PRH program charged with the unenviable task of bringing it to an end, share here our thoughts about adjusting, implementing, and closing a program in the hope that it may be useful to others. Collectively, our tenure spans from 1999 to 2020. We acknowledge and are grateful for the vision of those who came before us, recognising that our perceptions are influenced by the early days of the program but more heavily weighted to the last 20 years.

Lessons learned
Trust and reputational assets augment a donor's financial contributions. Those developed early on will become a lasting asset

Our first lesson about the crucial importance of setting up carefully comes from before our time when MacArthur began the program in the 1980s and 90s by developing networks and supporting locally led in-country work. The approach of supporting individual leaders chosen by local committees, engaging a wide range of disciplines and perspectives, taking care to avoid duplicative funding or well-resourced activities or institutions, establishing a reputable International Advisory Group, and hiring local staff helped establish trust in MacArthur as a partner that shared the mission and vision of the field. This approach established a lasting culture that sought a true learning partnership between Foundation staff and grantees – promoting honesty (including about problems and failure issues), an aperture to constructive criticism of MacArthur’s practices, and flexibility at MacArthur when projects required extensions or mid-course corrections. This in turn enabled MacArthur to support work that at the time was considered “risky”, such as advocacy, abortion, emerging HIV prevention strategies for sex workers, in-school sexuality education, the impact of religious fundamentalism on women’s rights, and the role of men in reproductive health decision-making.

Each country had different challenges. Work in Nigeria, for example, required a nuanced understanding of foreign donor activities in the context of what became the final years of dictatorship. MacArthur narrowly defined its work and supported early projects that focused on women’s wellbeing. Hiring local staff with academic and public service backgrounds lent credibility to the country offices because they built from communities of practice with which they were deeply familiar and understood local nuances, including political sensitivities and oppositional tactics. These lessons may prove useful today in the context of rising authoritarianism and populism, and the resulting shrinking space for civil society.

Global frameworks provided a useful umbrella for strategy, while strengthening grantee partners and focusing grant oversight on strategy-level objectives fostered effectiveness, agility, and creativity

Global frameworks were key to the program’s strategy. Funding prior to the UN International Conference on Population and Development (1994) and the First World Conference on Women (1995) was catalytic in enabling women’s groups to shape their outcome. Later, the Millennium and Sustainable Development Goals (2000 and 2015) provided the umbrella strategy; here, too, the Foundation supported advocacy and research to improve upon the drafting, refinement, and implementation of these frameworks. Country-level sub-strategies ensured local ownership and relevance and kept the program alive, for example, using the frameworks to lift the rights of indigenous women in Mexico, adapt to religious diversity in Nigeria, or work with tribes and communities facing caste-based discrimination in India. Grant oversight focused on broad objectives, and partners were empowered to course correct when needed. This kept the Foundation and grantee partners engaged in the global debate.

Recognising that funding is only one way that donors can contribute to advancing fields, the program also strengthened CSO partners by providing technical assistance in monitoring and evaluation, reporting and grant writing, strategic planning, financial management, and scaling up. MacArthur grants management and legal staff guided grantee partners’ financial and administrative staff on complex expenditure responsibility requirements, US fiscal requirements, and lobbying or political activity restrictions.
Well-placed but small investments can contribute to significant changes

MacArthur’s program budget of roughly $12 million per year shared across four portfolios represents a modest investment when aiming to influence large countries and a field, but it had impact thanks to strategic projects by partners with strong connections to constituents and changemakers. In the program’s early days, a larger number of smaller grants contributed to movement building by including diverse players, perspectives, and fields, and by strengthening institutional capacity. Later, when MacArthur focused on two topics, multi-year grants became the norm and were valuable to grantees for planning purposes. Grant sizes increased, averaging around $200–300k over three years for country-level work. Funds were set aside for strategic grants that opened or deepened new fields of thought. This enabled MacArthur to be an early supporter of, for example, reproductive health services in humanitarian settings; citizen budget accountability strategies applied to reproductive and sexual health; methodologies for scaling up pilots or small interventions; accountability activities organised by and for young people to audit access to youth-friendly services; and task-sharing and task-shifting practices to improve quality of care, including work with midwives. Relatively small grants enabled these ideas to grow, some eventually becoming standard practice.

Careful curation, management, and investment in grantee partner meetings and cross-country exchanges can produce lasting impact

Annual country-level grantee partner meetings built trust, facilitated information sharing, and fostered collaboration without requiring it. Limited meeting size (generally two people per organisation) enabled deeper conversations; topics were sourced from partner interests and needs. Thought leaders were invited whose work was relevant to the field yet outside grantees’ usual contacts; for example, a political scientist might discuss implications of upcoming elections on women’s rights, or a jurist might address proposed laws that would restrict sexual rights. These meetings strengthened shared purpose, exposed groups working locally to big-picture thinking, and larger groups to local level nuances and challenges.

Exchanges between India, Mexico, and Nigeria helped accelerate progress. Staff visits to country offices improved program cohesion and grantee partners learned about the Foundation’s work in other countries. Grantee partner exchanges enabled organic learning: participants could solicit funds for follow-up visits with additional individuals whose participation or buy-in was needed for successful idea transference. These exchanges had lasting impact, including, for example, input into the Nigerian national policy on task sharing and accountability in maternal health that built from work in India.

One of independent philanthropy’s strongest assets is its freedom to embrace innovation. But when innovation proves effective, it must be taken to scale. Donors and practitioners need to do more to make that happen

The PRH program invested in promising pilots with an eye to seeding new solutions. In maternal mortality prevention, well-documented pilots such as clinic translators or strategies to control eclampsia contributed to today’s conclusion that “we know what to do to prevent maternal death, we just need to do it”. To leverage limited funding, the program invested in methodologies for scaling up that continue to evolve today. Application in MacArthur countries was not always successful, as civil society and government faced policy and leadership changes, barriers to cross-institutional decision-making, and limited resources, but early funding clarified the need to invest in scaling up and seeded a new field of expertise and communities of practice beyond reproductive health.

Today the field has tools to plan for large-scale implementation when designing small-scale projects. Donors and practitioners need to do more to facilitate scaling up, including supporting carefully designed monitoring, evaluation, and learning strategies, and empowering and connecting smaller CSOs.

Legal work challenges the status quo and can offer long-term solutions. Yet organizations that have pioneered these approaches can struggle to raise funding

In India, Mexico, and Nigeria, MacArthur supported legal documentation and litigation that generated progress in accessing justice, set precedents, and contributed to greater recognition of national and international laws that protect women’s rights. This increased visibility of
violations and synergy with human rights professionals educated women about their rights, raised awareness among health providers of their own and their patients’ rights and responsibilities, and promoted government accountability. However, these strategies take time and are often perceived as unwanted systems challengers by government and healthcare providers. Donors that prioritise government engagement may be uncomfortable calling out poor practices, including rights violations and obstetric violence. In some cases, organisations that lost MacArthur funding were unable to replace it. More flexible funding formats, as well as a solid commitment to rights that includes allocating funding for legal work, could advance both the human rights and SRHR fields.

Change is constant at donor agencies. More and new conversations among donors and grantee partners about this can help build a stronger, more resilient, more diversified field

Program review is healthy but can be frustrating for the field and can complicate coordinating with other donors. Donors should dedicate time, money, and reputational assets to exiting well. By the time MacArthur’s PRH program was slated to end, the Foundation had finalised guidance for exiting. This enabled staff and grantee partners to design final programs, in contrast to just a few years earlier when the youth work ended more abruptly. The country offices designed two- or three-year exit strategies: midwifery in Mexico, quality of care in India, and task sharing in Nigeria. Today, the Foundation’s PRH grantee partners continue to grapple with ongoing challenges, and sustainability of the advances made is by no means guaranteed. More can be done to understand the impact not only of exiting, but of exit strategies themselves, on fields of work, on long-term partners in civil society, on leaders in the field, and on the people who were impacted by these programs.

The development of national philanthropy around the world will decentralise and change the current models of work

Philanthropy will change as countries develop national sectors, as, for example, in India today. International donors must contend with the interests of local philanthropists who may not agree with sexual and reproductive rights. Philanthropy is diversifying in the United States, too, including donor-advised funds, and new expressions of organised civil society such as social impact businesses or collectives will bring new perspectives and shape the field’s future for better or worse. This will require new partnerships and networks, open minds and strategies, power sharing, and, where new philanthropy is antagonistic to SRHR, increased budgets and resolve. Donor collaboratives can bolster broader strategies. As space shrinks globally for meaningful civil society participation, the future of the field as we know it is uncertain.

Final thoughts

As we look back on the history and results of MacArthur’s PRH program, we are struck by its cyclical nature. Our collective past provides more lessons than those we list here; these lessons provide important input as the field designs new strategies. In the 1990s, the program sought to decentralise and decolonise, and to take power away from hegemonic structures that excluded and violated women’s human rights. This was manifest in going against the norm of established philanthropy at the time by hiring local staff to lead country operations, empowering local advocacy and research leaders and engaging them to advise staff and mentor younger and less experienced partners, relying on the International Advisory Group for major decisions, and funding fledgling local NGOs with little expertise in grant seeking and reporting and helping them meet standards for financial management and reporting. This was followed by a period of grant-making that sought to measure qualitative and quantitative results to determine the value of individual investments and the program itself, and highlighted interventions “known to work” while also seeking innovation. Both phases rendered important advances, first in shifting how the world thought about population policy, and second in showing that with political will and even modest funding, reproductive health could be improved and deaths averted. Were the PRH program to continue today, it would do so in the context of changes in philanthropy stemming from social unrest and calls for social justice that are difficult to measure, yet elementary in the path to a fairer world.

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