

# Tulane receives \$7.2 million to continue family planning work in Democratic Republic of Congo

|  
Carolyn Scofield [cscofiel@tulane.edu](mailto:cscofiel@tulane.edu)

[View PDF](#)

Tulane University School of Public Health and Tropical Medicine has received \$7.2 million from the [Bill & Melinda Gates Foundation](#) and the [David and Lucile Packard Foundation](#) for family planning research and programming in the Democratic Republic of Congo (DRC). The ACQUAL II Project (which stands for “access” and “quality”) will build on previous grants to Tulane from these two foundations.

The DRC has the third-largest population in Sub-Saharan Africa with 77 million people. Women on average give birth to more than six children in their lifetime and cultural norms support large families. Yet in developing countries worldwide, birth rates have dramatically decreased as women and men have realized the benefits of smaller families. Family planning reduces maternal mortality, decelerates rapid population growth and alleviates the hardship of excessive childbearing.

“At some point women and men opt to have fewer children in hopes of giving their children a better life,” says Jane T. Bertrand, who holds the Neal A. and Mary Vanselow Chair, and is principal investigator of this new grant. Tulane’s work in the DRC aims to increase access and reduce barriers to contraceptive use to encourage this process.

*Jane T. Bertrand*

The new three-year grant will fund the expansion of Tulane’s community-based contraceptive distribution program throughout the capital city Kinshasa and the neighboring province of Kongo Central. In addition to adults, the program will serve

adolescents and young people, a numerically large population with tremendous needs. The new funding will also support research to test innovative strategies, such as a pilot introduction of a new contraceptive device Implanon NXT for distribution by medical and nursing students at the community level. Additionally, the program will seek to improve the quality of services, both in health facilities and at the community level.

“Most rewarding,” notes Bertrand, “is that the research conducted in this project is actually used to shape our programs for increasing contraceptive access and quality of services.”