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THE FORD FOUNDATION PROGRAMME OF SUPPORT FOR POPULATION  
WITH SPECIAL REFERENCE TO AFRICA

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"Throughout Africa death rates have been declining for a generation or more whereas birth rates continue to be higher than in any other major region of the world. The primary source of the decline in death rates has been government and private agency programmes to increase sanitary measures, curb the spread of epidemic diseases, and improve the nutritional status of the public. Parallel steps to bring birth rates more in line with lower death rates are just beginning to develop.

"Because death and birth rates in the past were more or less at the same level, these conscious efforts to improve the health and well-being of the people have brought about situations that are entirely new.... For the first time in African history large numbers of births are no longer necessarily an asset to the family unit or to the larger community....

"In many countries in Africa economic growth is, at best, barely keeping ahead of population growth. The faster population grows, the slower the rate of increase in per capita income, and if the economy is growing no faster than the population, then, of course, there can be no improvement at all in per capita income.

"Even if the rate of population growth is not as high as that of economic growth, it does nevertheless produce a serious brake on economic development. For one thing, an important, but little appreciated, effect of high fertility and low mortality is a serious imbalance in the number of children relative to the number of adults. In most of Africa up to 45 or 50 per cent of the population consists of children under 15 years of age. These young children are, of course, consumers of what working adults produce. With this large proportion of the population constantly expanding at from 2 to 3 per cent per annum, a doubly heavy burden is placed on the economy to feed, clothe, house, educate, keep healthy, and, eventually, to find jobs for so many young consumers while the number of producers, relatively speaking, is rather small. Ironically those countries in Europe and North America that are wealthy enough to be able to afford such a burden are the very ones that, because of low fertility and low population growth rates, do not suffer from this problem.

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Much of the first part of this paper is based on material from Oscar Harkavy et al., Ford Foundation Strategy for Population Work, Demography, Vol. 5, No. 2, 1968, a special issue devoted to "Progress and Problems of Fertility Control around the World".

"This high burden of dependency that occurs when the population is growing rapidly brings in its wake other serious disadvantages. So long as large amounts of capital must be constantly poured into the expansion of social services such as schools and hospitals, these funds can neither be used for improving the quality of existing services nor for more productive investments that provide a higher rate of return and hence a faster rate of economic expansion. Industrialization, for example, is a very expensive process and will be greatly slowed down if the necessary funds are, instead, being channelled into less productive uses -- economically speaking. Perhaps the most serious aspect of this vicious circle is that under conditions of rapid population growth the demand for jobs is high and rapidly increasing just when the capital for creating new jobs is very scarce, partially as the result of the growing demand to invest it in basic social services such as housing, health, and education."

From Family Planning : The Inter-Professional Approach, Government of Kenya (Ministry of Cooperatives and Social Services and Ministry of Health), 1970, (in press).

Since 1952 the Ford Foundation has devoted \$125 million to research, training, and action programmes intended to solve population problems around the world. Although other funding agencies have allocated increasingly large amounts to this field in recent years, this is still probably a larger sum than that provided by any other single governmental or private agency. This paper outlines the basis for this deep concern with population problems and the strategies we have followed in our attempt to help solve them. These approaches also characterize much of our work in population in Africa although thus far this support has been a very minor part of our total population programme. The final part of the paper summarizes in some detail our grants in Africa and discusses the future directions our aid might take in this continent.

#### Basis of Ford Foundation Concern About Population

The Foundation's Trustees and Officers believe that the quality of life is being threatened in many parts of the globe by excessive rates of population growth and that one of the great challenges to mankind is the problem of balancing the human population with the capacity of the economy and the environment to support it. From this concern it follows that the Foundation's commitment to improving human welfare obligates it to give priority to helping nations reduce the rate of population growth. This assistance is, however, just one small part of our development assistance, for we firmly believe that family planning must accompany—not substitute for—development work in agriculture, education, industry, and public administration.

Summary of Ford Foundation World-wide Programme of Support for Population

The Foundation's support for population began very modestly in 1951. By 1957 our annual level of support was around one million dollars, and by 1963 it reached the ten to twenty million dollar level, at which it has more or less remained since then. In recent years these commitments have amounted to about 6 per cent of the Foundation's total annual outlays.

About two-thirds of this support for population activities has gone to American institutions although the activities supported by these grants have largely been intended to help solve population problems in developing countries. Only during the past five years has the Foundation begun a modest programme of selective grants to assist family planning work in the United States. This programme has focussed on research and demonstration activities that promise to lead to improved ways of delivering family planning services.

The Foundation's most substantial commitments to population overseas have been in Asia, particularly assistance for national family planning programmes in India and Pakistan. Next in magnitude is our programme of grants, largely in reproductive biology, to European institutions.

Somewhat more than half of the Foundation's commitments to population have been for research and training in reproductive biology. The balance has been divided between training and research on other aspects of population and family planning, assistance to family planning programmes, and support for information dissemination. During the past decade the Ford Foundation has been a major force in three areas of population work: research and training in reproductive biology; the establishment and development of university population centres in the United States; and technical assistance to population programmes in developing countries.

In population, as in the case of its assistance in other fields of development, the Foundation is both a grant-making and an operating agency. In addition to a professional staff of six in its New York headquarters Population Office, the Foundation directly employs some twenty to twenty-five overseas population advisors. Currently there are five such direct-hire population specialists in Africa located in Accra, Cairo, Lagos (2), and Nairobi. In addition, also about twenty-five professionals are employed overseas by the Population Council and university population centres in Foundation-supported projects.

During the past eight years the resources being devoted to population work by other funding agencies have increased tremendously. In planning the Foundation's future involvement in this field, we are very naturally examining the financial resources and comparative advantages of these other organizations. We believe that there is still

insufficient money available from other sources to permit substantial reduction of our support for reproductive biology research or university population centres. In fact, we believe that our long experience in several areas, particularly reproductive biology, is a cogent reason for our continuing and, if possible, expanding support in these areas. The availability for the time, at least, of large sums from bilateral assistance agencies to support family planning programmes reduces the need for large-scale Foundation support in this area. Here, too, however, we feel that we have accumulated considerable experience, and hence the Foundation is likely to continue taking various initiatives among donors and providing specialized consultation to policy makers.

### Reproductive Biology

During the 1940s and 1950s the work of scientists and health specialists led to impressive victories over many infectious diseases, but unfortunately very little attention was being paid to reproductive biology, the scientific field in which advances were sorely needed to deal with one of the major consequences of this conquest of disease--unprecedented population growth. Since 1959 the Foundation has committed over \$70 million to work in reproductive biology. Grants to more than 70 research institutes and universities in the United States, Europe, Asia, Latin America, the Middle East, and Africa have promoted a renaissance in this long-neglected field of scientific investigation.

When we entered this field in 1959, it offered few attractions to able, young scientists so our initial interest was primarily focused on means to draw more scientific attention to the theoretical and applied problems of fertility control. Our first grants, therefore, were designed to bring talented personnel into the field, and this interest in training continues to be an important element in our work in reproductive biology. In recent years the Foundation has been supporting annually about 100 pre- and post-doctoral fellows in reproductive biology from abroad, in American and European research centres.

To increase the commitments to research in this field, the Foundation's staff systematically searched for investigators whose work, with additional financial inputs, might contribute to a better understanding of human reproduction and its regulation. These researchers were encouraged to widen the scope of their activities and to collaborate with fellow scientists working on related problems elsewhere. Foundation-supported research has resulted in the publication of nearly a thousand scientific papers covering every major facet of the field.

Most of our grants have supported fundamental research and training programmes, rather than applied research. As the basic knowledge in reproductive biology has increased, the Foundation has, however, begun to provide support for highly applied research and development activities--to

improve intrauterine devices (IUDs), to develop new and simpler techniques of male and female sterilization, and to test methods of fertility control for males.

As a growing cadre of competent investigators has entered the field of reproductive biology or has increasingly oriented work toward problems of fertility control, advances are no longer being held back seriously by the lack of competent and interested personnel. The new problems being faced by the Foundation and other agencies are how to provide better organizational structures and how to increase financial inputs as rapidly as this pool of manpower can adequately use them. We have no doubts that this field continues to require considerable assistance. The best modern contraceptives—the IUD and the pill—are highly effective, but experience has revealed side effects and problems of administration, which definitely have limited their value. Among other things is the fact that they both require extensive medical intervention and supervision. The most promising new method—administration through various routes of low-dose progestins—has encountered several difficulties. Only a few additional methods of any potential merit are on the horizon, and indications are that they may not meet the criteria for successful contraceptive agents. Hence the development of better methods is mandatory. No one new method is likely to be developed that will be easily and consistently used and acceptable to all people everywhere. The base of fundamental knowledge in reproductive biology must be constantly expanded and refined to undergird applied efforts that must, in turn, constantly seek an improved contraceptive technology.

#### Population Studies

Foundation grants totalling over \$14 million have gone to a dozen university centres in the United States for training and research in population. As a result, many demographers have been trained and are now involved in designing and evaluating family planning programmes; schools of public health have initiated training programmes for family planning administrators; and behavioural scientists are studying problems of family planning education and communications and factors in the social and cultural environment that effect fertility and contraceptive practices. With our support some investigators are beginning to think about methods of persuading and inducing families to reduce the number of children they desire. These centres have trained many of the individuals now holding responsible positions in family planning programmes, census offices, and universities in the developing countries.

### Family Planning in the United States

Since 1966 a few grants, totalling somewhat more than \$2 million, have been made in support of family planning work in the United States. While most American families obtain the needed advice and supplies from private physicians and commercial sources, at least 4 to 5 million have been estimated to need publicly-assisted family planning services. This is rightly a responsibility of Government at various levels, but the Ford Foundation has attempted to help lead the way by supporting experimental programmes and technical assistance work intended to improve the delivery of services or to catalyze support from other sources.

### Population Programmes in Developing Countries

Indirectly, through such intermediaries as the Population Council, or directly, the Ford Foundation has supported population or family planning activities in more than 25 countries in the developing world. This assistance has totalled nearly \$24 million since the first such grant was made to the Government of India in 1959. This is in addition to the substantial support for research and training institutions in Australia, Europe, Israel, Japan, and the United States whose work is related to the developing areas.

The concentration of Foundation support in the form of advisory personnel and money has been heaviest in India and Pakistan, where Government programmes have been supported for a decade. Assistance in most other countries have been initiated in the past four or five years. In Asia and Africa (especially North Africa), the Foundation has concentrated in assisting family planning action programmes with a secondary interest in training and research; in Latin America, where efforts to reduce the rate of population growth are only just beginning to be accepted as part of national policy, our support has emphasized the study of population problems and reproductive biology. Of the Foundation's assistance directly to institutions in the developing countries, roughly 60 per cent has gone to Asia, over 20 per cent to Latin America, and less than 20 per cent to Africa, which has, in turn, received only about 3 per cent of our total support for population since 1952. We believe, however, that this is a very significant, albeit small, part of our aid in this field. The remainder of this paper summarizes our population programme in Africa.

### Programme of Support for Population in Africa

As elsewhere, the Foundation's concern about population problems in Africa developed out of its commitment to assisting the developing countries improve the quality of life for their people. Our study of the problem has convinced us that African countries now or will soon

face population problems very similar to--but eventually more severe than--those in other developing regions.

It is largely on the basis of an analysis of the sort quoted at length at the beginning of this paper that the Foundation has decided that its support for population programmes in Africa represents a crucial contribution to the insistent desire on the part of the people to improve their standards of living. The Foundation's assistance in population has generally followed a pattern in each country: (1) Initially its stress has been on documentation and training to enable national leaders and key professionals to understand better the detrimental effect that population growth is having on the ability of their nation to reach its social and economic goals; (2) After a commitment has been made to a population policy, the Foundation's assistance has focused on promoting the development of a strong, well-administered action programme through training, research, and consultation in a variety of fields.

The Foundation's support for population work in Africa from 1963, when the first grant was made, through April 1970 totals \$3,574,100. Actually the full amount involved is larger than this as some population assistance has been taken from funds designated for more general categories of development aid. A full listing of the grants and other actions specifically designated for population and family planning may be found in the appendix to this paper. This list contains essential data on each grant such as the recipient, brief purpose, date, and amount. In addition, the grants on this list have been divided into three basic categories; they are, with the percentage of the total devoted to each, technical assistance to family planning programmes (63%), training and research in population and family planning (31%), and research in reproductive biology (6%).

Grants for population and family planning activities have been provided to government ministries, universities, or private organizations in Algeria, Kenya, Morocco, Nigeria, Tunisia, and the United Arab Republic. Consultants or advisors have been provided to various bodies in these and other countries including Ghana. Travel or Study Fellowships varying in length from several days to several years have been provided to nationals of all the countries listed above and from at least the following additional countries: the Gambia, Liberia, Senegal, Tanzania, and Upper Volta. Indirectly, through the Population Council and various training programmes in Europe and the United States, trainees from these and countless other African nations have been the beneficiaries of Foundation support.

In terms of total funds granted, the Foundation's office in Cairo has been most active of any in Africa in the population field. A high level decision was reached in the United Arab Republic during 1965 to institute a national family planning programme, which was then launched early the next year. In support of this programme grants totalling



\$1,319,500 have been made by the Foundation to several government ministries and to three universities. This is about 35% of all our support in Africa for population to date. Our office in Tunis has provided a somewhat smaller sum, \$1,252,660 for population work in the Maghreb, primarily in support of the national family planning programmes in Tunisia and Morocco. The commitments in population made thus far by our offices in Lagos, serving West Africa, and in Nairobi, serving Eastern and Southern Africa, are, respectively, \$954,000 and \$48,000.

All four Foundation offices in Africa are considering additional grants and other commitments during the remainder of the current fiscal year or during fiscal 1971. Planning budgets for the next sixteen months call for a total additional outlay for population of as much as \$1,213,000. This indicates, if anything, an increasing commitment to this area on our part, for this implies an annual rate of expenditure for this and next fiscal year of about \$750,000, which is about 15 per cent above the previous five years' average of roughly \$650,000. To a large extent this increasing level of funding is a result of the rapidly developing interest and capacity in Tropical Africa to use funds in population and family planning.

Due to two fundamental differences in circumstances, our emerging programme of support for population work in Tropical Africa is likely, however, to be considerably different from what we have been doing in North Africa. First, the capacity in Tropical Africa (particularly Eastern and Southern Africa) to absorb our assistance is still somewhat less developed in comparison with North Africa even as of five or more years ago. For instance, no university in Eastern or Southern Africa has yet identified a national trained in demography to serve with its teaching and research programmes in population. Secondly, during the intervening years since we made our first grants in population in North Africa, a number of other donors have developed interests and specialized capacities in this field.

For these reasons, in Tropical Africa we do not in general foresee ourselves providing any of the following: (a) core support for large-scale institution building operations; (b) funds for large-scale basic research programmes; (c) support for census work and demographic research; and (d) operational support for ongoing family planning programmes. We do not, of course, think that these are necessarily of lower priority than what we do propose doing. The human resources are clearly not available for more than a very limited number of large-scale institutions, and in our view the funds available from other sources are more than ample to meet the capacity to absorb such assistance. Other agencies have more competence than do we in census work and demography, and these, too, are areas requiring substantially more funds than we have available. Several other agencies specialise in providing

fundings for the ongoing service programmes of voluntary family planning agencies. As these programmes gain official acceptance, they clearly and properly become the responsibility of regular government funding.

The Foundation's main advantages in population work relate to its administrative flexibility and decentralized decision making and to its wide network of contacts working in this field around the world. Hence, we are able to specialize in such things as: (a) sponsoring ad hoc, tailor-made training or travel fellowships to visit relevant programmes in other parts of the world; (b) providing specialized consultants with relevant experience gained while working for us elsewhere; and (c) making other, generally small, grants of other kinds where maximum impact or value requires the immediate availability of funds. As a private Foundation, we have one other major advantage and that is that we need not meet the impatient demands of donors or constituents at home for immediate results. Therefore, we have the potential, often denied others, of supporting research or other activities the payoff from which may not materialize for a number of years. For the same reason, we are frequently freer to support innovative projects that are venturing into uncharted, and hence uncertain, areas.

#### Examples of Ford Foundation Population Grants in Africa

In conclusion, perhaps the nature and scope of our support can be best illustrated by brief reviews of our programmes of assistance in different parts of the continent. For this purpose I have chosen Kenya, Morocco, Nigeria, and the United Arab Republic.

Kenya: Because of the Foundation's substantial role in assisting the Ministry of Economic Planning and Development in its planning activities, Foundation-supplied economists have been very instrumental over the past six years or more in documenting the economic and social implications of the rapid rate of population growth in Kenya. In 1965 the Government invited the Population Council to send an advisory mission to examine the population problem in detail and to make recommendations for Governmental action. A member of the Foundation's population staff participated in that mission. In the next several years the Foundation's support for population activities in Kenya was largely indirect through our large general purpose grants to the Population Council, which has, in turn, provided advisors and other assistance in demography and family planning since 1966. By 1967 the Ministry of Health was prepared to initiate a training programme for its medical and paramedical personnel. A modest grant of \$48,000 was made by the Foundation that year in support of this programme. Since then, using more general categories of funds, the Foundation has been and will undoubtedly continue to provide small supportive grants, study fellowships, and short-term consultants. Several social science and marketing research projects under the auspices of the University and of the Family Planning

Association are about to be initiated with Foundation support. Additional assistance in the area of training has been requested by the Ministry of Health. Since mid-1968 the Foundation has had a regional population advisor stationed in Nairobi.

Morocco: The Foundation's initial support for population in Morocco was its 1966 grant of \$322,000 to the Ministry of Public Health. This grant provided the services of a medical advisor and a health educator, selected equipment, training fellowships, and assistance with research and evaluation. The services of the Population Council were utilized to provide this advisory assistance and to manage other parts of the grant. As the potential of other, large-scale assistance has developed, the Foundation has begun to reassess its future role in support of population activities in all three Maghreb countries. In 1969, to increase its flexibility in meeting this changed situation, the Foundation provided the Population Council with a regional grant for North Africa of \$220,000. Of this, \$30,000 was specifically designated for Morocco to continue providing the services of a public health advisor. In addition, regional funds are available, as required, for short-term consultants in demography, statistics, and mass communications and for training fellowships. These fellowships are intended for training demographers, economists, etc. in universities and research institutes as well as in Government. To phase out its direct support to the Ministry of Public Health in Morocco, in early 1970 the Foundation made a small grant of \$41,000 to the Ministry for various items, largely in the area of communications equipment for the national programme.

Nigeria: The Foundation's initial support for population work in Nigeria was through a 1966 grant, supplemented in 1969, to the University of Lagos College of Medicine for a research and training project in family health. Funds were provided for staff salaries and laboratory equipment. Arrangements were made with the Johns Hopkins School of Hygiene and Public Health in the United States to provide technical assistance. Under the direction of a sociologist, a team of interviewers has conducted longitudinal studies of various demographic and health matters including attitudes towards family planning. Experiments have been conducted to improve clinic attendance and to determine the most productive manner of using field workers. The clinical services, supported largely from other sources, have been used for a modest amount of training. In reassessing the Foundation's role in supporting population and family planning activities in West Africa, our office in Lagos has begun to turn increasing attention to the approaches discussed above, viz., ad hoc training programmes and observational tours, provision of specialized consultants, preparation and distribution of technical literature, and opportune small grants to fill in significant lacunae identified by Foundation staff. A full-time regional population advisor and his assistant have been posted to the Lagos office of the Foundation since mid-1969.

The United Arab Republic: There had been a fairly long history of scattered private family planning efforts in the U.A.R. when the Foundation began supporting work in this field, but these programmes were having little effect on the serious population pressures about which Government was becoming increasingly concerned. Our initial grant, in 1965, was to the Ministry of Foreign Cultural Relations in support of research, pilot action projects, and training activities in family planning under the aegis of the Departments of Public Health and of Obstetrics and Gynaecology in the Universities of Cairo and of Alexandria. With the exception of a small part of this first grant, all of our grant funds have been designated for hard currency costs--fellowships, travel awards, equipment, and supplies. In 1968 the University of Alexandria was given an additional grant of \$151,000 to enable it to continue research and training activities initiated in 1965. Also in 1968, the Foundation gave \$236,000 to the Social Research Centre of the American University in Cairo in support of a new, broad programme of training and research in population, which, in turn, was intended to provide Government with greater understanding of the social and cultural context of fertility and family planning. In early 1966, Government had initiated a national family planning programme, and in that same year the Foundation provided the Ministry of Economy and Foreign Trade with \$243,000 to pay for needed equipment and overseas training. The Foundation also began to supply the services of a resident public health advisor, but with the outbreak of hostilities in June 1967, the family planning programme came to a virtual standstill and this advisor was reassigned elsewhere. More recent developments appear very promising for the ultimate success of the Government's programme. Compared with Tropical Africa, the U.A.R. has an outstanding network of health services and sufficient staff to get family planning services to the people. The public is very receptive, and strong support exists at the highest levels. The Foundation's total commitment to population and family planning work in the U.A.R. stands at \$1,319,500. If requested, we are prepared to provide additional assistance. Currently the Foundation has a population advisor assigned to its Cairo office.

As this brief review of our programmes of support in four very different countries shows, the Foundation endeavours to orient the level and nature of its support to the local situation. Due to its highly decentralized approach, it is able to assume a flexible posture and be, we hope, fully responsible to local needs and opportunities. We are pleased to have been able to provide a number of countries with assistance at the critical moment of the launching of their national population programmes. We look forward to being of similar assistance elsewhere, but also to being of continuing help to countries in which such promising starts have already been made.

May 28 1970

APPENDIX

Summary of Ford Foundation Population Grants in Africa  
(through April 1970)

1. Technical Assistance to Family Planning Programmes				
Date	Grantee	Description	Amount	Term
1963	Republic of Tunisia Ministry of Health and Social Affairs	Establishment of a pilot family planning programme	\$ 200,000	2 years
1965	Government of the United Arab Republic, Ministry of Foreign Cultural Relations	Pilot action projects and training in family planning under Departments of Public Health at Cairo and Alexandria Universities (part of total grant; cf. under section 3 below).	139,500	2 years
1965	Foundation-Administered Project	Programme specialist and consultants in support of above grant (part of total project; cf. under section 3 below).	98,000	2 years
1966 1970	Kingdom of Morocco, Ministry of Public Health	Development of a national family planning programme	322,000 41,000	2 years 6 months
1966 1969	University of Lagos Medical School (Nigeria)	Support for the establishment of an experimental family planning programme	380,000 50,000	3 years 2 years
1966	Republic of Tunisia	Assistance for launching a nationwide programme	324,400	2 years
1966	Government of the United Arab Republic, Ministry of Economy and Foreign Trade	Support for national family planning programme	243,000	2 years
1966	Foundation-Administered Project	Programme specialists and consultants in support of above grant	245,000	2 years
1969	The Population Council, Inc.	North African regional programme in family planning with special reference to Morocco and Tunisia	220,000	2 years
TOTAL:			\$ 2,262,900	

## 2. Training and Research in Population and Family Planning

<u>Date</u>	<u>Grantee</u>	<u>Description</u>	<u>Amount</u>	<u>Term</u>
1965 1967	Foundation-Administered Project	Support of programme specialists and consultants to aid the Government of Algeria in reorganizing and improving the system of vital registration	53,200 30,000	2 years 1 year
1967	Republic of Algeria	Survey of family planning knowledge, attitudes and practices in Algeria	62,000	1 year
1967	Republic of Kenya, Ministry of Health	Training of rural health workers for the National Family Planning Programme	48,000	1 year
1968	The American University in Cairo (U.A.R.)	Population research programme in the U.A.R.	236,000	3 years
1968 1969	Foundation-Administered Project	Regional West Africa family planning training activities	274,000 250,000	2 years 2 years
1968	Government of the United Arab Republic	Family planning training and research at Alexandria University	151,000	3 years
TOTAL:			\$ 1,104,200	

## 3. Research in reproductive biology

1965	Government of the United Arab Republic, Ministry of Foreign Cultural Relations	Research and training in reproductive biology in Departments of OB/Gyn at Cairo and Alexandria Universities (part of total grant; cf. under section 1 above).	154,000	2 years
1965	Foundation-Administered Project	Programme specialists and consultants in support of above grant (part of total project; cf. under section 1 above)	53,000	2 years
TOTAL:			\$ 207,000	
GRAND TOTAL:			\$ 3,574,100	