



USING OUR GLOBAL REACH

In 2015, 225 million women will not have access to contraception globally, resulting in 74 million unplanned pregnancies, ill health and over 500,000 maternal deaths. Maternal health is currently far off track and universal access to sexual and reproductive health remains a distant reality for many of the world's poor, marginalized and vulnerable women, men and young people.

To enable 120 million more women and girls to use contraception by 2020, IPPF is doing its part by:

- increasing family planning services to save the lives of 54,000 women, averting 46.4 million unintended pregnancies and preventing unsafe abortion
- tripling the number of comprehensive and integrated sexual and reproductive health services annually, including 553 million services to adolescents

OUR 2013 SERVICE RESULTS AT A GLANCE



59.9m contraceptive services provided



8 out of 10 people we serve are poor and vulnerable

12.1m couple years of protection



LEADING SERVICE PROVIDER

For over 60 years, IPPF has been at the vanguard in delivering comprehensive voluntary family planning services and is the leading global service provider for sexual and reproductive health. We are a grassroots organization, directed by and responding to the needs of the communities that we serve. Our uniqueness is firmly underpinned by the following factors:

- IPPF is recognized as an exceptionally cost-effective organization for universal access to sexual and reproductive health by a benefit-cost assessment carried out by the Copenhagen Consensus Center.
- Providing contraceptive services continues to be the mainstay of the work of many of our Member Associations. We deliver over 136 million sexual and reproductive health services – contraceptive counselling services and non-contraceptive services – to 60 million people every year. In 2013, we reached 7,734,957 new users.
- We are a consortium of 161 autonomous Member Associations that work through an extensive network of 60,277 service delivery points located in communities, clinics and outreach services.
- Our strength is in our global reach. Half of our services are provided to young people under 25. Eighty per cent of the clients we serve are poor and vulnerable; without IPPF, these clients are unlikely to have received services.

NEW APPROACHES AND METHODS EXTEND CHOICE

IPPF is expanding the range of delivery channels to take services to under-served communities. Our 60,000 service delivery points ensure enhanced access to services from different levels of service providers and different distribution channels. We introduce new contraceptive methodologies to meet the needs of under-served communities and address the known barriers to voluntary family planning service uptake of vulnerable populations.

- Reproductive Health **Uganda** is working in partnership with PATH to pilot Savana Press – a self-injection method – with clients receiving services at two urban family planning clinics in Gulu District, with a focus on provision to young people. The research will be instrumental in understanding the appeal of the concept of home and self-injection among younger women, and determine whether women can self-inject Sayana Press competently in an unsupervised setting.

New technologies extend contraceptive choice.

- Family Guidance Association of Ethiopia is building the capacity of health extension workers to remove Implanon. adding to their existing implant insertion skills. By mobilizing community leaders and local media to report and stimulate debate about family planning rights and choice, over 2,000 clients opted for implants, 51 chose the intrauterine device and 28 opted for a permanent method.
- Using mobile services across eight districts, Family Planning Association of **Nepal** has increased access to implants among disadvantaged groups such as Muslim communities, the Yadav, Janajaties and Kurmi of the Tarai region. Uptake of long-acting reversible contraception among poor and vulnerable groups in these remote areas has been disproportionally low in Nepal. However, in six months, the Member Association provided 1,421 implants and trained 34 service providers.
- Association Togolaise pour le Bien-Etre Familial in **Togo** is a key partner of the Ministry of Health and has made important contributions to the national family planning programme through its innovative community-based injectables approach. The Member Association's achievements – recognized both within Togo and across Francophone Africa – include an 83 per cent increase in couple years of protection from four methods in



Reaching disadvantaged groups in Nepal.

INNOVATIVE SPOTLIGHT ON YOUNG PEOPLE

Much of our global youth work is cutting edge. In 2013, we provided over 66 million sexual and reproductive health services to young people under the age of 25. Our Member Associations devise innovative, imaginative and engaging strategies to reach young people and to meet their needs. In many countries, IPPF Member Associations have the convening power to work with government agencies including ministries of health and education – to ensure that young people can access the services they need.

- Rahnuma-Family Planning Association of Pakistan is expanding its network of peer educators by implementing an innovative peer provider model to support provision of family planning services including contraception and counselling. The Member Association focuses on reaching marginalized groups of young people. Youth peer providers with a minimum school qualification of class 12 (average age 17–18 years) provide services both inside and outside the Member Association's clinics – they bring vigour, energy and enthusiasm to their work. The benefits of a peer provision model include expanding services to hard-to-reach young people, reducing the stigma associated with contraceptive services and increasing access to voluntary family planning.
- Salvadoran Demographic Association in **El Salvador** relies on trained peer educators to provide contraceptives at community level, including injectables, and to make clinic referrals. Peer educators continue their educational work, but are also trained to provide other services which do not require visiting a primary care facility, and to make referrals when relevant. Peer educators work like any other community health worker – they receive a stock of contraceptives (condoms, pills and injectables) at a subsidized price which they can offer in their communities, they receive skills training to provide the services and they are monitored regularly by the Member Association's staff.
- Family Guidance Association of **Ethiopia** works with government-run youth centres, linking much of its community-based outreach work to government health posts and health centres. The Member Association manages nearly 80 service delivery outlets and was the first organization to introduce community-based family planning distribution: family planning commodities are supplied to over 700 community-based distributors. Bringing services to community level has proved to be very effective in reducing geographical, social, cultural and economic barriers to accessing contraceptive services, especially among young people.



of our services are provided to young people under 25 years old













STRENGTHENING HEALTH SYSTEMS

IPPF is building a strong civil society response to strengthen national health systems. Member Associations are part of the grassroots movement in their respective countries. They play a critical role not only as service providers within the health system, but also as a significant contributor to strengthening the health system by disseminating new guidelines and technologies, building the capacity of other peers working within the health system, and advocating for supportive policies.

Since 2013, IPPF's Catalytic Fund is increasing access to sexual and reproductive health information and services in 42 focus countries. Member Associations are provided with one-off investments to kick-start service growth up to 2020 and beyond. Examples of projects include investment in the commodity supply chain in Afghanistan; training communitybased providers and strengthening the referral system in India; and expanding the package of services to include cervical cancer screening and treatment in Egypt.

- Rahnuma-Family Planning Association of **Pakistan** is increasing access to voluntary family planning services through social franchising with private practitioners in peri-urban and rural areas. This cost-effective strategy has enabled 30 private practitioners to provide additional reproductive health services.
- Family Planning Association of **India** has cultivated a strong partnership with the government at national, state and local levels, reaching the most under-served communities. The Member Association operates family planning centres throughout the country, providing comprehensive family planning and reproductive health services. These include outreach units working through satellite clinics located in slums or rural areas, and outreach teams, including community-based distributors, who work directly with the community.

EXPANDED RANGE OF RIGHTS-BASED SERVICES



IPPF ensures choice and quality as the starting point for our clients. Through our Member Associations, we provide services using a wide range of service delivery points including static clinics, outreach services through community-based distributors and mobile clinics, private physicians, social marketing outlets, pharmacies, government clinics and other agencies.



We are actively delivering our rights-based **Integrated Package of Essential Services**, a package that is recognized by the World Health Organization. The principles of the Integrated Package of Essential Services are simple: to serve the most pressing needs of our clients. Member Associations deliver a minimum package of services that are appropriate for all clinics, including primary clinics.





• delivering a quality assured, client oriented, rights-based and integrated package of sexual and reproductive health services



offering affordable and accessible services that focus on those who are poor or vulnerable
 ensuring contraceptive and sexual and reproductive health commodity



• creating partnerships to strengthen health systems and ensure sustainability



• promoting and advocating for supportive policies to deliver sexual and reproductive health services, including family planning services



Increasing community-level family planning services in Kenya.

UGANDA'S COSTED IMPLEMENTATION PLAN: FAMILY PLANNING AS A HUMAN RIGHT

In November 2014, the Government of Uganda launched a US\$200 million official Costed Implementation Plan to reduce the unmet need for family planning from 40 per cent to 10 per cent, and to increase contraceptive prevalence by 50 per cent by 2020. The Costed Implementation Plan is a strong national family planning strategy to reach women, men and young people with high quality voluntary family planning services and information, and explicitly pledges to protect and fulfil human rights in the provision of voluntary family planning services.

Reproductive Health Uganda has been instrumental in working in partnership with government, donors, multi-lateral and other civil society organizations in formalizing the Costed Implementation Plan. The Member Association was part of the team working throughout the

entire process to develop the Plan, and also led a youth group and a service delivery group to provide critical input. The new Plan reflects the commitment of high level family planning leaders. Reproductive Health Uganda is offering technical support to the Ministry of Health to translate rights-based commitment into action. In 2015, the Association will focus on moving the Plan's agenda forward, coordinating civil society organizations, working with donors and implementing the Plan at district level. The next 18 months will focus on creating and implementing the Ministry-led, unified national action plan to operationalize human rights within family planning in Uganda. This will be the first time that a country has comprehensively applied this rights-based approach in a Costed Implementation Plan.

INFLUENCING AND MOBILIZING FOR SUPPORTIVE POLICIES

IPPF is the global and regional convener and mobilizer of civil society organizations that advocate for public, political and financial commitments to voluntary family planning. Through our advocacy, we influence and support enabling environments to increase high quality, affordable sexual and reproductive health services and for governments to be accountable for the pledges that they made at the 2012 London Summit on Family Planning.

• Through successful advocacy, the Family Planning Association of **Nepal** celebrated the first-ever Family Planning Day on 18 September 2014. Nepal's Health and Population Secretary, the Minister of Health and Population, and the National Planning Commission inaugurated the Day

which has helped put family planning back on the priority list.

- Association de Bien-Etre Familial

 Naissances Désirables of the

 Democratic Republic of Congo

 collaborated with local networks to
 convince the government to allocate
 its first-ever funding for purchase of
 contraceptives in 2013. Previously,
 contraceptive procurement depended
 solely on donor support.
- Tonga Family Health Association delivered technical input to revise the national youth strategy. Through extensive advocacy, the Member Association secured a specific objective on sexual and reproductive health for young people.

WHO WF ARF

The International Planned Parenthood Federation (IPPF) is a global service provider and a leading advocate of sexual and reproductive health and rights for all. We are a worldwide movement of national organizations working with and for communities and individuals



Successful government engagement enables our Member Association to deliver high quality family planning services.

ACCOUNTABILITY

IPPF Member Associations regularly hold their governments to account by ensuring that citizens know their rights, by monitoring and tracking that people's rights are being delivered, and by supporting constructive engagement among citizens, services and government officials to address barriers and challenges. IPPF is also using evidence from policy and financial expenditure tracking to hold European donor governments accountable to international family planning commitments. The Countdown 2015 Europe Consortium, led by IPPF European Network, has been gathering data on policy and financial expenditure tracking since 2009 in 12 European donor countries. Countdown 2015 Europe is unique in actively and routinely using the data it collects to increase donor accountability and transparency, so that civil society has the most recent data available to hold governments (for example, Ireland and Finland) accountable for their international family planning commitments.



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