



Western Hemisphere Region

From choice, a world of possibilities

strategic plan
2010-2015

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International Planned Parenthood Federation, Western Hemisphere Regional Office

Strategic Plan for 2010 to 2015

The International Planned Parenthood Federation, Western Hemisphere Region (IPPF/WHR), is a recognized leader in the international movement to ensure access to sexual and reproductive health care, including family planning, as a human right for all people. Working for 55 years toward this mission, IPPF/WHR pioneered the introduction of family planning services in Latin America and the Caribbean and developed innovative and effective strategies for meeting the sexual and reproductive health needs of young people and adults, urban and rural populations, and the poor. Today IPPF/WHR continues to respond to the tremendous need for contraceptive services, while also addressing a range of issues that have an impact on women's sexual and reproductive health, such as HIV/AIDS, gender-based violence, and unsafe abortion.

In partnership with its 40 Member Associations (MAs) across Latin America and the Caribbean, IPPF/WHR currently provides more than 30 million services a year. Of these, some 13 million are for contraception. Fifteen years ago, at the International Conference on Population and Development, 179 governments agreed to ensure universal access to family planning services by 2015, yet today many people across the region still lack access to contraception. Addressing this persistent need for high quality contraceptive services is of particular concern to IPPF/WHR and continues to be a major priority moving forward.

In the last five years, IPPF/WHR adopted the programmatic priorities of the global IPPF known as the 5 'A's: Access, Adolescents, STIs/HIV/AIDS, Abortion and Advocacy. The "supporting strategies" of Institutional Strengthening and Sustainability and Resource Development were developed to underpin the 5 'A's, because they are essential to the continuity and expansion of programs and services. Working within the framework of the 5 'A's has helped IPPF/WHR and MAs in the region to focus their work clearly on priority areas for the Federation. In particular, the 5 'A's framework has brought a renewed emphasis on the issues of advocacy and abortion, while strengthening the efforts to reach adolescents, address STIs/HIV/AIDS and provide access to high quality sexual and reproductive health services. At the same time, the compartmentalization of the 5 'A's as separate program areas has obscured the inherent synergies among all of the 'A's'. Fulfilling the agenda in each of the programmatic priorities necessitates a coordinated effort to integrate all of these issues in a unified, holistic approach to sexual and reproductive health.

In envisioning its work for the next five years, IPPF/WHR reaffirms its commitment to the strategic framework of the IPPF and the goals of the 5 'A's, while also seeing an important opportunity for integrating all of the 5 'A's within a holistic approach to sexual and reproductive health care. To this end, the Strategic Plan for 2010-2015 is organized around **three Integrated Strategic Areas** that orient all of IPPF/WHR's work toward its highest priorities, as follows:

- Ensuring universal access to sexual and reproductive health
- Promoting sexual rights and reproductive rights
- Strengthening the IPPF/WHR network

To some extent, the IPPF Western Hemisphere Regional Office (IPPF/WHRO) and MAs are already working with this integrated approach, as a natural outcome of addressing the complexity of SRH issues and the needs of specific populations. For example, IPPF/WHR's programs for adolescents include HIV/STI prevention, abortion-related issues, and advocacy for youth rights. Efforts to make abortion-related services more accessible have by necessity included a strong advocacy component around unsafe abortion as a public health issue and to improve legal norms. And increasing access to SRH has required improved technical and logistical coordination, as well as strengthened management processes. Indeed, the supporting strategies of Institutional Strengthening and Sustainability and Resource Development contribute in both direct and indirect ways toward the broader goals of the Federation.

In the Strategic Plan for 2010-2015, IPPF/WHR will use the Integrated Strategic Areas as a frame for all the work under the 5 'A's and their supporting strategies, thereby fostering greater integration among programs from the earliest stages of program planning through evaluation and the institutionalization of lessons learned. At the same time, IPPF/WHR hopes to emphasize the larger context for all of its activities, so that staff at all levels have a clear picture of how they are working together toward the ultimate purposes of the Federation.

IPPF/WHR's Vision

IPPF/WHR envisages a world in which all women, men and young people have access to the information and services they need; a world in which sexuality is recognized both as a natural and precious aspect of life and as a fundamental human right; a world in which choices are fully respected and where stigma and discrimination have no place.

What we Believe

We believe that sexual and reproductive rights should be internationally recognized as human rights and therefore guaranteed for everyone. We encourage individuals, women in particular, to take control of their reproductive lives. We promote equality between men and women, aiming to eliminate gender biases, especially those that threaten the well-being of women and girls. Above all we promote choices.

IPPF/WHR's Mission

The mission of IPPF/WHR is to:

- Improve the quality of life of individuals by campaigning for sexual and reproductive health and rights through advocacy and services, especially for poor and vulnerable people;
- Defend the right of all young people to enjoy their sexual lives free from ill-health, unwanted pregnancy, violence and discrimination;
- Support a woman's right to choose to terminate her pregnancy legally and safely; and
- Strive to eliminate sexually transmitted infections and reduce the spread and impact of HIV/AIDS.

Integrated Strategic Areas

Universal Access to Sexual and Reproductive Health

All people, particularly those most in need, have access to high quality SRH services and technologies.

IPPF/WHR's commitment to ensuring that all people in the region have access to high quality sexual and reproductive health services is the cornerstone of its work. Having built a strong and extensive network of clinics and service providers across the region during half a century, in recent years IPPF/WHR has placed particular emphasis on reaching the most underserved people, especially youth and the poor. Latin America and the Caribbean face the highest income inequalities in the world, and SRH inequalities are even more pronounced than those of income. In several countries, unmet need for family planning among the poorest segments of the population is five times greater than among the richest. Furthermore, motherhood among poor adolescents is increasing in many countries across the region; this trend contributes to a widening gap between social classes through the generational transmission of poverty.

For IPPF/WHR, universal access implies an integrated and rights-based approach to high quality SRH, where clients of all ages receive services that correspond to their specific needs, taking into account the complexity of SRH issues that each client faces and how these interrelate. This entails ensuring the availability of the full range of contraceptive options and modern reproductive health technologies. It also includes counseling and services for STI/HIV prevention and referrals for treatment for people living with HIV, screening for gender-based violence (GBV), and abortion-related services for women facing unwanted pregnancies. Through this approach, IPPF/WHR seeks to ensure that all clients at MA services, regardless of age, sexual orientation, gender, socio-economic status or cultural background, will receive accessible, affordable, and friendly services.

In tandem with the work with MAs, IPPF/WHR also has an important advocacy role to play at the national, regional and international levels. By using the language of "universal access" as one of the overarching Strategic Areas, IPPF/WHR places itself firmly within the global agenda first laid out at the International Conference on Population and Development and later reaffirmed with a target in the Millennium Development Goals. IPPF/WHR uses this as leverage to hold governments in the region accountable for their international commitments to achieving universal access to SRH,

paying special attention to the epidemiology and risk factors that affect maternal mortality in the region.

IPPF/WHR's priorities toward achieving universal access are reflected in the following strategic impacts:

1. IPPF/WHR MAs provide high quality, integrated, rights-based, comprehensive SRH and HIV/AIDS services, especially to youth and the poor.
2. Unsafe abortion in Latin America and the Caribbean (LAC) is reduced by ensuring access to contraception and to abortion-related services.
3. Governments in the region more fully meet their commitments to achieving universal access to SRH.
4. IPPF/WHR and MAs fully incorporate a gender and rights perspective in all of their work, contributing toward women's empowerment.

Sexual Rights and Reproductive Rights

The sexual rights of people as outlined in IPPF's Declaration on Sexual Rights, and their reproductive rights, are respected, protected and fulfilled.

In 1995, IPPF introduced the Charter on Sexual and Reproductive Rights, thereby providing a global framework for the work of the Federation "as a tool to increase the capacity of MAs to undertake effective human rights advocacy within the field of sexual and reproductive health." This document was followed by a series of publications aimed at advancing rights-based programming, leading up to the IPPF Declaration on Sexual Rights.

The IPPF Declaration on Sexual Rights is a landmark document that marks its commitment to sexual rights as human rights and places them at the heart of IPPF's vision. IPPF/WHR is dedicated to this rights-based approach in all of its work and has taken action to ensure that sexual rights are respected at all levels of the Federation, so that employees and clients at MAs are treated with respect and appropriate care, free from any form of stigma or discrimination, particularly discrimination based on gender, sexual orientation, age, sexual history or health status.

Respecting sexual rights implies more than merely the absence of discrimination; rather, it entails the full recognition of sexuality and pleasure as integral aspects of being human that are to be celebrated and enjoyed within the context of respecting and protecting the rights of others. Integrating this level of awareness within services requires an ongoing effort to create an open environment for discussing and addressing sexuality and pleasure.

One of the most pressing challenges to sexual rights in Latin America and the Caribbean is the lack of recognition of young people as sexual beings and of their right to live healthy, pleasurable sexual lives. Across the region there is a scarcity of comprehensive sexuality education (CSE) programs for youth; those programs that do exist often focus on biological reproduction and abstinence. IPPF/WHR believes that all adolescents and youth have the right to information and services and should receive quality, comprehensive sexuality education that incorporates concepts of gender, rights and positive sexuality, teaches concrete skills to prevent STIs/HIV and pregnancy, and fosters the ability to make informed and empowered decisions.

In order to improve respect for, the protection of, and the fulfillment of sexual rights and reproductive rights, over the next five years IPPF/WHR will work toward the following key strategic impacts:

5. All clients at IPPF/WHR MAs have their sexual rights respected, free from discrimination based on sex, sexuality or gender.
6. Sexual rights are better recognized at national, regional and international levels.
7. Reproductive rights and women's rights are better recognized and fulfilled at international, regional and national levels.
8. Young people throughout the region have increased access to comprehensive sexuality education (CSE).

The IPPF/WHR Network

All Member Associations and the Regional Office are sustainable, well-managed, well-governed and able to achieve IPPF's mission.

The structure of a federation allows IPPF/WHR and MAs in the region to work toward common goals, while respecting the local context of each country and the richness of differing perspectives and approaches. While there may be differences in terms of activities, all MAs are expected to share the underlying philosophy of the Federation and apply the same standards of governance. The strength of this network is what enables IPPF/WHR to have a significant impact at national, regional and international levels on both sexual and reproductive health care services and policy.

An important role of IPPF Western Hemisphere Regional Office (IPPF/WHRO) is to ensure that all members of the Federation adhere to key principles of the mission and meet the standards of quality in governance, management and services for which the IPPF is known. IPPF/WHR provides ongoing and targeted technical assistance to MAs in the region to bolster their advocacy and management capacity at all levels, including financial planning and reporting, commodities procurement and warehousing, fundraising, information systems, and evaluation.

The IPPF/WHRO also works with MAs and their boards of directors to implement good governance practices and build a base of volunteers who have the skills to support and advocate for sexual and reproductive rights. Engaging volunteers is crucial to the governance and well-being of IPPF. A new "Policy on Volunteers and Volunteerism" adopted by Governing Council in November 2007 reflects this emphasis on the role of volunteers.

The wealth of experience and expertise in MAs is an asset that can contribute to the growth of the entire Federation, and to this end IPPF/WHR seeks to facilitate and strengthen the exchange of technical and management expertise through South-to-South collaborations among MAs. IPPF/WHR recognizes that many Member Associations in the region have developed their own expertise in a number of areas. This is particularly true in the area of financial sustainability, but also is true in programmatic areas, such as providing services that are youth-friendly, meeting the needs of women who are victims of gender-violence, and others.

In building the strength of this network over the next five years, IPPF/WHR seeks to generate the following strategic impacts:

9. IPPF/WHRO and MAs are financially and programmatically
10. sustainable.
IPPF/WHRO and MAs are learning organizations that share technical
11. expertise, including through South-to-South partnerships.
IPPF/WHRO and MAs have effective management and communications
12. systems that ensure accountability, transparency and evaluation of results.
IPPF/WHRO and MAs have strong governance structures and procedures.

IPPF/WHR'S Strategic Plan 2010-2015

Strategic Area 1:

Universal Access to SRH

All people, particularly those most in need, have access to high quality SRH services and technologies.

STRATEGIC IMPACT 1:

IPPF/WHR MAs provide high quality, integrated, rights- based, comprehensive SRH and HIV/AIDS services, especially to youth and the poor.

OBJECTIVE 1.1: Strengthen the quality, integration and comprehensiveness of HIV/AIDS and SRH services, including contraception, provided by MAs.

Lines of Action:

- Implement quality of care improvement and assurance mechanisms, including mechanisms for monitoring accreditation standards.
- Ensure that all services provided by MAs are youth-friendly.
- Ensure that MA services are non-discriminatory, non-stigmatizing and appropriate to the needs of diverse populations.
- Create one center of excellence in Latin America and one center in the Caribbean that demonstrate best practices in clinic management information systems¹, expand implementation of management systems that meet best practice requirements and, where appropriate, introduce electronic health record modules.
- Ensure client access to a wide range of contraceptive services and products through expanded distribution channels.
- Ensure client access to under-utilized and/or new reproductive health technologies.
- Support MAs to develop, test and implement models for integrated care, including services and referral linkages that address unwanted pregnancy, HIV/STIs, GBV and cervical cancer.
- Develop a comprehensive approach to providing cervical cancer prevention and treatment, including visual inspection, PAP tests, and HPV testing and vaccine.
- Assist MAs in implementing evidence-based models for HIV/STI-SRH integration.

OBJECTIVE 1.2: Improve access to SRH and HIV/AIDS services for underserved populations.

Lines of Action:

- Scale up successful models for serving the poor, including through mobile health units.
- Explore and implement models for reaching people living with HIV (PLHIV) within SRH services.
- Develop partnerships to reach underserved populations, including at-risk youth at greater risk and people of diverse sexual orientations and gender identities.

Expected results:

- 100% of service-providing MAs provide IPPF/WHR “Essential Services²” either directly or through appropriate referrals.
- At least 70% of WHR MA clients are poor, marginalized, socially-excluded and/or underserved.
- Through MA Community Based Distribution (CBD) and mobile health units (MHU), 30% increase in SRH services and 5.88 million contraceptive items provided.
- 20% increase in number of MA HIV- and STI-related services, including counseling, provided in total and to youth.
- 20% increase in number of MA SRH services provided in total and to youth.
- At least 6 MAs have implemented best practices for clinic management information systems.

STRATEGIC IMPACT 2:

Unsafe abortion in LAC is reduced by ensuring access to contraception and to abortion-related services.

OBJECTIVE 2.1: Increase access to high quality, comprehensive care for preventing and responding to unwanted pregnancy, especially among underserved groups.

Lines of Action:

- Build MA clinic capacity to provide a harm reduction approach to unwanted pregnancy, options counseling, post-abortion care, referrals, and legal abortion.
- Adapt the harm reduction model for use by community promoters.
- Develop MA capacity to provide youth-friendly abortion services.
- Implement a model to integrate safe abortion options and GBV counseling.
- Ensure access to a wide range of contraceptive services and products.

Expected results:

- 20% increase in MA abortion-related services, including counseling provided in total and to youth.

STRATEGIC IMPACT 3:

Governments in the region more fully meet their commitments to achieving universal access to SRH.

OBJECTIVE 3.1: Increase governments' accountability to their commitments to SRH.

Lines of Action:

- Advocate for government allocation of adequate resources for SRH.
- Advocate to ensure women's access to contraception services and products, including emergency contraception, misoprostol, and other RH technologies.
- Promote stronger and permanent spaces for political and technical dialogue among governmental bodies and SRHR organizations, in partnership with other NGOs working on SRHR.

OBJECTIVE 3.2: Increase governments' commitment to and action on the development of stronger service integration and linkages between HIV and SRH efforts.

Lines of Action:

- Advocate, in international and national fora, for stronger governmental commitment to strengthen the linkages between SRH and HIV/AIDS and to address the feminization of HIV/AIDS in the region.
- Support MAs in their efforts to strengthen the linkages between SRH and HIV/AIDS at the national level through participation in the Country Coordinating Mechanisms and other national level bodies.

OBJECTIVE 3.3: Advance governments' implementation of SRH and HIV prevention and services.

Lines of Action:

- Provide technical guidance and practical tools to assist governments in fulfilling their obligations to implement high quality, integrated, rights-based SRH and HIV prevention and services.
- Support MAs in advocacy efforts aimed at creating and improving norms and protocols that ensure access to safe abortion.
- Encourage and enable governments to replicate and scale up MA models of service delivery.

Expected results:

- At least 20 countries in the region demonstrate an improvement in at least one of the following Millenium Development Goals (MDG) indicators: contraceptive prevalence rate, adolescent birth rate, and unmet need for family planning.
- 10 MA models or tools for service provision are adopted by governments in the region.

STRATEGIC IMPACT 4:

IPPF/WHRO and MAs fully incorporate a gender and rights perspective in all of their work, contributing toward women's empowerment and access to services.

OBJECTIVE 4.1: Strengthen MA capacity to provide services aimed at empowering women to make choices about pleasurable sexuality and reproduction.

Lines of Action:

- Elaborate, test and implement models for counseling and service provision that address gender, rights and pleasurable sexuality.

OBJECTIVE 4.2: Increase the capacity of MAs to provide routine gender-based violence (GBV) screening and services to clients.

Lines of Action:

- Adapt IPPF/WHR's model of GBV service provision to include sexual violence.
- Document and disseminate IPPF/WHR's model for addressing GBV within SRH services.

OBJECTIVE 4.3: Strengthen MA capacity to work with men in SRH and HIV/AIDS issues.

Lines of Action:

- Partner with organizations that have expertise in male involvement in SRH and HIV/AIDS to building MA capacity to work with men.
- Promote outreach activities to increase men's awareness and participation in SRH and HIV/AIDS issues.
- Encourage MAs to implement activities that engage men as partners in promoting gender equality, opposing GBV, and reducing the spread and impact of HIV/AIDS.

Expected results:

- 100% of MAs have gender-focused policies and programs³.
- 20% increase in GBV services⁴ provided.
- At least a 50% increase in the number of MAs that have a dedicated program that involves men and addresses their needs.

Strategic Area 2:

Sexual Rights and Reproductive Rights

The sexual rights of people, as outlined in IPPF's Declaration on Sexual Rights, and their reproductive rights are respected, protected and fulfilled.

STRATEGIC IMPACT 5:

All clients at IPPF/WHR MAs have their sexual rights respected, free from discrimination based on sex, sexuality or gender.

OBJECTIVE 5.1: Integrate the IPPF Declaration on Sexual Rights into MA programs and services.

Lines of Action:

- Support MAs' implementation of the Declaration on Sexual Rights by providing financial support, ongoing training to staff and volunteers, and tools, among other activities.
- Collaborate with organizations experienced in sexual rights to develop approaches that emphasize pleasurable sexuality.

Expected results:

- 100% of MAs have disseminated the IPPF Declaration on Sexual Rights among volunteers and staff (accreditation check 3.4.1).
- 100% of MAs have mechanisms in place for ensuring clients' sexual rights are respected⁵.

STRATEGIC IMPACT 6:

Sexual rights are better recognized at national, regional and international levels.

OBJECTIVE 6.1: Strengthen the MA and RO capacity to advocate for sexual rights.

Lines of Action:

- Support MAs in designing and implementing advocacy initiatives to promote the recognition of sexual rights.
- Partner with organizations and campaigns promoting sexual rights.

OBJECTIVE 6.2: Increase the political commitment of governments toward the recognition of sexual rights.

- Promote the Declaration of Sexual Rights at international and regional fora and through diverse media.
- Advocate for the inclusion of language on sexual rights in relevant international documents and development debates.

Expected results:

- At least 16 MAs have worked towards achieving a specific policy or legal change related to at least one principle of the IPPF Declaration on Sexual Rights.
- Sexual rights are recognized in preparatory documents leading to the 2015 international agenda for population and development.
- At least 10 positive mentions of the IPPF Declaration on Sexual Rights each year in the media and/or international and regional fora.

STRATEGIC IMPACT 7:

Reproductive rights and women's rights are better recognized and fulfilled at international, regional and national levels.

OBJECTIVE 7.1: Strengthen the participation of the RO and MAs in advocacy initiatives that aim to increase political and financial support for women's empowerment and rights.

Lines of Action:

- IPPF/WHR Regional Office advocates for a stronger UN Gender Equality Architecture.
- Collaborate with the women's movement to advance women's empowerment and rights.
- Foster young women's leadership.
- Increase attention to women's rights in HIV/AIDS policies and commitments including resource allocation, given the feminization of HIV/AIDS in Latin America and the Caribbean.

OBJECTIVE 7.2: Increase governments' political and financial commitment to reproductive rights, particularly access to contraceptive services and products, safe and legal abortion, services for victims of GBV, and preventing maternal mortality.

Lines of Action:

- Collaborate with other organizations to promote political and legal reforms to increase access to legal abortion.

- Support strategies to change the laws in countries where abortion is illegal or restricted.
- Advocate for the recognition and fulfillment of the reproductive rights of everyone, especially of young people.
- Support MAs to advocate for the development of norms and protocols associated with sexual violence.
- Advocate for the incorporation of access to contraceptives and safe abortion into maternal mortality reduction programs and policies.

Expected results:

- A strong⁶ UN women's entity exists.
- At least 50 successful national policy initiatives and/or positive legislative changes in support of SRHR to which the MAs' advocacy efforts have contributed.

STRATEGIC IMPACT 8:

Young people throughout the region have increased access to comprehensive sexuality education (CSE).

OBJECTIVE 8.1: Improve and expand MA CSE programs and curricula, with a gender and rights approach.

Lines of Action:

- Support MAs in designing and implementing CSE projects that ensure the integration of the IPPF Declaration on Sexual Rights.

OBJECTIVE 8.2: Increase political commitment to CSE.

Lines of Action:

- Advocate for CSE by playing a strong leadership role at the international level and by working with governments for implementation of CSE nationally.
- Build the capacity of youth to advocate for CSE.

Expected results:

- At least 8 MAs include all elements of the IPPF/WHR Comprehensive Sexuality Education checklist within their educational curricula.
- 12 governments implement the 'Prevent with Education' Ministerial Declaration approved in Mexico City in 2008.

Strategic Area 3:

The IPPF/WHR Network

All Member Associations and the Regional Office are sustainable, well-managed, well-governed and able to achieve IPPF's mission.

STRATEGIC IMPACT 9:

IPPF/WHRO and MAs are financially and programmatically sustainable.

OBJECTIVE 9.1: Strengthen MA capacity to generate income from operations in order to further the IPPF mission.

Lines of Action:

- Facilitate South-South TA and consultancies to support MAs in implementing income-generating strategies, including marketing, pricing, cost accounting, and willingness-to-pay studies.
- Support MAs in developing mechanisms for cross-subsidizing programs and services.

OBJECTIVE 9.2: Strengthen the capacity of the RO and MAs to carry out effective resource mobilization efforts both locally and internationally.

Lines of Action:

- Maintain and diversify the RO donor base, particularly to generate support for under-funded areas.
- Assist MAs in resource mobilization by disseminating information about funding opportunities in the new development aid architecture; making donor connections; and providing targeted TA.
- Ensure effective project budgeting and compliance with donors' financial requirements by the RO and MAs.
- Encourage MA boards to participate in resource mobilization and advocacy.

OBJECTIVE 9.3: Improve donor, government and civil society organization knowledge and perception of the importance of the work of IPPF/WHRO and MAs at national and international levels.

Lines of Action:

- Ensure systematic and effective RO and MA presence in relevant media and events.
- Implement mechanisms for permanent media monitoring and analysis.
- Disseminate information about the impact of RO and MA work.

Expected results:

- At least 12 MAs increase their local income by at least 15%.
- 15% increase in the five-year average (2010-2014) of MAs' non-IPPF international income compared to the five-year average from 2005-2009.
- 10% annual increase in Regional Office revenue raised.
- At least 10% annual increase in positive media mentions of IPPF/WHR.

STRATEGIC IMPACT 10:

IPPF/WHRO and MAs are learning organizations that share technical expertise, including through South-to-South partnerships.

OBJECTIVE 10.1: Increase management and programmatic learning among MAs and the IPPF Regional Office.

Lines of Action:

- Design and implement an enhanced and expanded South-South program that includes mechanisms for assessing successful MA strategies; funding strategies; soliciting TA; following-up on TA; and monitoring and evaluating the program.
- Develop tools, templates and publications that target specific audiences with programmatic and technical information.
- Facilitate information-sharing among all levels of the IPPF, including by exploring new technologies for learning.
- Develop mechanisms for strengthening internal communications and institutional learning at the RO level.

Expected results:

- At least 60% of MAs receive assistance through the South-to-South program.
- At least 75% of South-to-South interventions are reported by MAs as producing concrete results for their MA.

STRATEGIC IMPACT 11:

IPPF/WHRO and MAs have effective management and communications systems that ensure accountability, transparency and evaluation of results.

OBJECTIVE 11.1: Strengthen systems for ensuring that MAs are able to procure SRH commodities efficiently, effectively and at the lowest prices.

Lines of Action:

- Strengthen ICON's understanding of and ability to meet MAs' procurement needs, including ensuring access to essential commodities such as dedicated emergency contraception, misoprostol, and products that enhance sexual pleasure.

- Explore the feasibility of additional SRH supply and procurement options and procedures, including by facilitating South-South TA.
- Liaise with MAs and ICON to facilitate contraceptive forecasting, procurement and documentation for product importation.

OBJECTIVE 11.2: Strengthen management accountability, transparency and efficiency of the RO and MAs.

Lines of Action:

- Support MA compliance with management standards through the accreditation review.
- Promote fluid and transparent communications between RO and MAs around processes and criteria for decision-making, including on issues related to funding opportunities.
- Ensure best practices in organizational and financial management.
- Implement more efficient information management, communication and data collection systems at MAs, including Enterprise Resource Planning systems, data collection technologies, and RO remote collaboration technology.

OBJECTIVE 11.3: Strengthen the capacity of the RO and MAs to use data for project, programmatic and institutional decision-making.

Lines of Action:

- Reduce the burden of MA and RO data collection by streamlining and triangulating reporting formats.
- Facilitate analysis and use of financial, commodities, service statistics and other institutional data for decision-making.
- Develop capacity of MA and RO project teams to use monitoring and evaluation to strengthen programs and services.

Expected results:

- At least 70% of MAs receive their Annual Program and Budget (APB) contraceptive shipment in the 1st quarter of each year.
- At least 70% of MAs are satisfied with IPPF procurement function.
- At least 50% of MAs improve their rating on the IPPF/WHR management index⁷.
- 100% of MAs have unqualified annual external audits.
- At least 65% of MAs prepare quarterly financial reports for the MA Executive Director showing MA-wide figures of budgeted and actual revenues and expenditure, with variances identified and explanations provided (accreditation check 5.4.2).
- At least 80% of MAs use evidence from monitoring and evaluation activities (such as service statistics) to inform decision-making at

- both program and policy level (accreditation check 8.2.1).
- 9 MAs have integrated management systems that ensure timely accounting, logistic and programmatic information that facilitate cost and productivity analysis.
- Use of at least 3 new technologies implemented to support organizational learning and collaboration by the Regional Office and MAs.

STRATEGIC IMPACT 12:

IPPF/WHRO and MAs have effective, efficient and transparent governance structures and procedures, and a strong volunteer base.

OBJECTIVE 12.1: Increase effectiveness and diversity of volunteer base.

Lines of Action:

- Ensure continued participation of youth and other relevant audiences on boards and foster meaningful participation that addresses power differentials.
- Develop an induction process for boards that covers issues related to the roles and responsibilities of boards, including advocacy and fundraising, financial oversight, mechanisms for facilitating meaningful participation among diverse board members, and information designed to increase commitment to IPPF's mission and strategic framework.
- Implement and scale up a model for strengthening the volunteer base, including the recruitment of new volunteers, volunteer development on SRH issues, participation in Regional Councils and other capacity-building opportunities.

OBJECTIVE 12.2: Strengthen governance systems at regional and MA levels.

Lines of Action:

- Support MA compliance with governance standards through accreditation review and implementation of the Code of Good Governance.
- Provide TA to MAs on specific governance issues, including the relationship between the board and ED, conflict resolution and role clarification.

Expected results:

- At least 80% of MAs have taken steps to create a diverse board membership reflecting the country context (accreditation check 1.2.1).
- 100% of MAs have at least one board member under the age of 25 at the time of election (accreditation check 1.7.3).
- 100% of MAs have at least 50% women on the board of directors (accreditation check 1.7.2).
- At least 70% of all MA board members have participated in an IPPF/WHR induction process.

Notes:

- [1] Best practices in clinic management information systems (Practice Management) ensure secure and efficient administration of clinic revenue, supplies, schedules, and service contract management; with respect to Electronic Health Record systems, best practices provide for client-centric systems that improve continuity and quality of care by facilitating the provider's real-time entry and analysis of client profile, clinic history, diagnostic, and lab data.
- [2] The Regional Office team will develop a list of "Essential Services" to be assessed through analysis of the service statistics data and information related to referrals in the State of the MA questionnaire. An MA will be considered to provide a service if they report service data through the service statistics module or provide adequate evidence through the State of the MA questionnaire that systematic referrals are taking place to an appropriate provider; evidence regarding referrals will be further verified in site visits and in the accreditation reviews.
- [3] For this and all following expected results expressed as a proportion of MAs, the denominator is 25 MAs, representing all current grant-receiving MAs that will be individually accredited during the Strategic Plan period.
- [4] Includes gender-based violence and domestic violence counseling and screening services.
- [5] This indicator will be measured through an index of questions on the State of the MA Questionnaire asking about the mechanisms employed by MAs to inform clients of their sexual rights, such as posters, leaflets, descriptions of services, counseling protocols, client history forms, policies against discrimination, etc.
- [6] A strong entity would combine the existing UN women's entities (UNIFEM, OSAGI, and Division on the Advancement of Women), merging their disparate normative and operational functions into one agency. This entity also would garner adequate financial and human resources to function effectively.
- [7] IPPF/WHR management index is assessed by a multi-disciplinary team of regional office staff as part of the annual Member Association Analysis Process (MAAP). The index includes the following criteria: proposals are well-developed; MA conducts monitoring and evaluation activities competently; reports are submitted on time; reports are of high quality; MA maintains adequate human resources; senior management is effective; Executive Director exhibits good leadership skills; MA implements sound sustainability strategies; MA has a well-thought-out strategic plan; MA uses financial information for decision-making; MA has a functioning commodities tracking and forecasting system; and, Board-Executive Director relations are effective.



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