TABLE OF CONTENTS

3  Message From our CEO
4  Our Movement: A History of Persistence
6  We Won’t Go Back
8  Stories of Resilience and Success
12  Our Impact
16  Profiles of Persistence
21  Forward: A Strategy For Social Change
22  Our Supporters
24  2016 Financials
28  Board of Directors and Leadership
29  Join Us
I was born in Argentina at the height of the “Dirty War,” a period of state-sponsored violence and terrorism that lasted nearly ten years. Fear and violence was the norm and families were torn apart by exile. Some people simply disappeared.

I think about these years often as an adult: the fear and uncertainty, the helplessness, and the crushing sensation that things would never change. But eventually, they did. And each year, when many women mobilize and take to the streets of Buenos Aires seeking justice for those who disappeared, I think of the incredible power of persistencia. Persistence.

When the International Planned Parenthood Federation/Western Hemisphere Region (IPPF/WHR) and our partners began working in the Americas and Caribbean, we were met with threats, insults, and sometimes violence for even mentioning the word contraception. We were told sex education would never be a reality for young people. That we would never make progress on seemingly intractable issues like violence against women. Abortion rights. LGBTQ+ issues. And yet, we persisted.

Today, we continue to persist because women and girls deserve better. We persist because we know the fight for reproductive health and rights doesn’t end—or begin—with one person or event. We face oppositional forces each and every day in our region, forces that try to undermine the dignity and human rights of millions. We know the coming years will be tough, but we have no doubt that together, we can—and will—achieve justice for all.”

—Giselle Carino, CEO and Regional Director

Message from our CEO

“We persist because women and girls in the Americas and Caribbean deserve better, and we do it every day because the fight for reproductive health and rights doesn’t end—or begin—with one person or event. We face oppositional forces each and every day in our region, forces that try to undermine the dignity and human rights of millions. We know the coming years will be tough, but we have no doubt that together, we can—and will—achieve justice for all.”

—Giselle Carino, CEO and Regional Director
Despite being imprisoned for their unwavering belief in women’s rights in their own countries, Margaret Sanger (United States), Elise Ottesen-Jensen (Sweden), and Dhanvanthi Rama Rau (India), campaign for women’s rights globally. Together they create the International Planned Parenthood Federation (IPPF).

Contraception is taboo in the Americas and Caribbean and largely rejected by local governments. International Planned Parenthood Federation/Western Hemisphere Region (IPPF/WHR) is established to pioneer contraceptive programs in the region.

IPPF hosts the first large international meeting devoted to family planning in Latin America, bringing together organizations from 87 countries around the world. Almost every country in Latin America has a family planning association—17 of these organizations now receive government support.

IPPF/WHR establishes the Caribbean Family Planning Affiliation, a network of family planning groups, and the only organization in the Caribbean devoted entirely to sexual and reproductive health.

Youth outreach becomes a focus across the region. Profamilia (Dominican Republic) introduces peer-led contraception distribution networks, and ten Caribbean countries form “Under-Twenty Clubs” to reach adolescents through media channels.

IPPF/WHR helps secure the Cairo Programme of Action, a landmark United Nations agreement that calls for comprehensive access to sexual and reproductive health and rights to ensure sustainable global development.

IPPF/WHR begins a multi-country project to address staggering rates of unsafe abortion in the region.

Colombia legalizes abortion if the woman’s life or health are in danger, in cases of rape or incest, or if the fetus is unviable. Soon after, Mexico City and Uruguay legalize abortion during the first 12 weeks of pregnancy.

The Zika virus spreads across the Americas. IPPF/WHR launches a regional campaign to protect the health and rights of women and families affected by Zika. IPPF/WHR expands its network to include 45 partners in 41 countries, providing more than 30 million services.

President Trump reinstates the Global Gag Rule, slashing nearly $9 billion for family planning, HIV/AIDS, maternal and child health, malaria, and global health security. Meanwhile, after years of organizing, IPPF/WHR, APROFA (Chile), MILES (Chile), and a coalition of activists defeat Chile’s total abortion ban, winning the right to abortion in three cases. We persist.
**Forward.** It’s the only direction women and girls can afford to go, which is why we stand by our values and will continue to fight for evidence-based programs and policies that make a powerful impact in the United States, across Latin America and the Caribbean, and the world. As reactionary forces threaten to unravel decades of progress for gender equality and the fulfillment of human rights, we will protect the gains, resist the backlash, and chart a way forward for women and girls right now—and for generations to come.

The Trump Administration has tried to dismantle women’s rights in the United States, but this isn’t just about the U.S.: it’s about the unprecedented assault on women’s health worldwide. When the Trump administration reinstated the Global Gag Rule only three days after taking office, IPPF/WHR boldly refused to sign the order, and joined activists to denounce the Gag for what it is—a dangerous policy that jeopardizes women’s lives. Nevertheless, the unprecedented expansion of the rule now affects nearly nine billion dollars in US funding—that’s more than 15 times the amount from prior Gag orders.

The women’s rights movement in our region has made immense progress, introducing a broad agenda for peace, social democracy, and equal rights. But we know what it means when a politician threatens to “punish women” for their bodily autonomy. We know because women in El Salvador are imprisoned due to the country’s total ban on abortion. We know because among the 25 countries with the highest rates of femicide in the world, 14 are from Latin America and the Caribbean. We know because we’re determined to change all of this.

The obstacles are real. The laws are cruel. But every day across the region, there are glimmers of hope. Activists are organizing—and recently, one of the most draconian bans on abortion in Chile was lifted in limited circumstances. Our clinics and mobile health units are reaching more and more people with quality, accessible healthcare. Young people are raising their voices and demanding their rights, and we are doing everything we can to support them.

In our region alone, 23 million women want to use modern contraception, but don’t have access to it. About 50 percent of pregnancies are unplanned. And despite some strides in women’s health, at least 760,000 women are treated for complications of unsafe abortion per year.

We will not compromise our values nor be bullied into an ideologically-driven approach to women’s health and rights. We will not be silenced. We will persist.
Venezuela: Finding Hope in Times of Crisis

Amid Venezuela’s turbulent political and economic crises, access to contraception and reproductive health care is out of reach for the majority of women and young people. Reports of women fleeing the country to give birth are frequent. The lack of medical supplies and trained personnel has resulted in a sharp spike in infant mortality—the number of pregnant women who died due to preventable complications increased by nearly 65% in 2016.

In a country where food is a luxury item and power shortages are commonplace, our local partner PLAFAM is a beacon of hope for women and youth. With financial and technical support from IPPF/WHR, PLAFAM has been able to purchase contraception internationally, and make sure they arrive in a timely and safe manner. PLAFAM then provides health education and contraception at heavily subsidized prices well below those seen in private clinics or clandestine markets. In the first few months of 2017 alone, PLAFAM provided 12,000 implants at three clinics in Caracas.

“Every day, we open our clinic doors to find hundreds of women lined up for contraceptives,” said Belmar Franceschi, PLAFAM’s Executive Director. “IPPF/WHR works with us to ensure that we can continue to provide care and contraception to Venezuelan women and youth when they need us most.”

Central America: Reproductive Rights Pivotal to Fighting Zika

While some governments in the region have declared that the epidemic is over, the Zika virus continues to spread. Weak public health systems and inadequate access to water and sanitation continue to render millions—especially poor and rural women—at risk of infection.

Faced with ongoing uncertainties surrounding the virus and a lack of political will, IPPF/WHR launched a program to fortify the response to Zika in El Salvador, the Dominican Republic, Guatemala, and Honduras. We worked closely with our local partners and other organizations to train health providers to deliver quality Zika-related health services, counseling, and support so that clients who come to clinics for routine care now receive up-to-date information on the best prevention strategies and associated risks of Zika. This work is complemented by outreach staff who visit community markets, homes, large workplaces—and even military academies—to provide information and distribute condoms.

Because of their extensive reach, reputation, and expertise, our local partners have begun to change how governments combat the epidemic. By helping create and roll-out national prevention and care protocols centered on sexual and reproductive health—a major improvement over the initial government responses that focused on mosquito control—our partners are fostering a comprehensive and sustainable response to the epidemic.
Mexico: Preventing Violence with Research and Sex Education
IPPF/WHR was one of the first organizations in the region to create a comprehensive response to gender-based violence in healthcare settings. Drawing on our extensive experience, we helped MEXFAM create internal protocols to detect violence and provide treatment, counseling, care, and referrals to women who have experienced violence. This work was complemented by intense and specialized training for counselors, as well as the development of partnerships with organizations that provide housing, legal, and other support services.

It is challenging—44% of Mexican women report experiencing partner violence.

In 2016, IPPF/WHR, the London School of Health and Mental Hygiene, and MEXFAM devised a joint research initiative to better understand effective strategies to prevent violence in urban high schools. The research initiative seeks to gain insight into how comprehensive sexuality education shapes young people’s attitudes about gender and the acceptability of various forms of violence. Thanks to this research, we are confident that we will be able to fill important gaps in existing practices and better understand young people’s experiences with relationships, violence, and gender norms.

The Caribbean: Coming Together to Push Progress Forward
Recognizing the rising tide of oppositional forces in the Caribbean, executive directors from our Caribbean associations banded together to counter the opposition and push progress forward. They organized and created the Caribbean Coalition on Sexual and Reproductive Health and Rights in 2016, a joint initiative to unite advocacy efforts among local partners.

IPPF/WHR provided funding and capacity building to jumpstart the Coalition. Through this planning process, Coalition members worked side-by-side with regional office staff to hone the Coalition’s focus, goals, and strategic advocacy targets.

The Coalition started by advocating for the adoption of comprehensive sexuality education in schools, an essential building block for progress. This enhanced regional advocacy coordination has led to more visibility for its members, invitations to participate in high level intergovernmental meetings, and partnerships with major UN agencies and international health bodies.

There has also been some progress at the national level. In Jamaica, our local partner FAMPLAN was awarded a contract to review the country’s national health and life education curriculum. Using our standards for quality sexuality education, FAMPLAN provided feedback to ensure the inclusion of topics such as consent, gender equality, and contraception. As FAMPLAN continues to work with the Jamaican government, other coalition members are learning from—and potentially replicating—FAMPLAN’s experience.
Impact figures reported from January 1, 2016-December 31, 2016.

OUR IMPACT

PEOPLE
7,503,912
people provided with life-saving care
- 61% of individuals were from vulnerable and underserved communities
- 78,396 new users of modern contraception
- 36% of services provided to youth

SERVICES
30,444,305
sexual and reproductive health services
- 2,283,708 unintended pregnancies averted
- 387,169 unsafe abortions avoided
- $259 million direct healthcare costs saved

ADVOCACY
53
progressive advocacy achievements
- 11 wins for providing youth friendly services
- 9 wins for contraceptive access
- 8 wins for abortion access

CONTRACEPTIVES DISTRIBUTED BY METHOD

- 35,231,467 Condoms (male and female)
- 8,508,273 Oral Contraceptive Pills
- 5,432,128 Injectables
- 1,624,556 Emergency Contraception
- 746,648 Intrauterine Devices (IUD)
- 607,911 Other
- 334,031 Implants

Total Items = 52,485,014
SEXUAL AND REPRODUCTIVE HEALTH SERVICES DELIVERED BY TYPE

- **Total Services**: 30,444,305
  - **Contraceptive Services**: 30%
  - **Cervical Cancer Services**: 10%
  - **Abortion Services**: 6%
  - **HIV/AIDS Services**: 4%
  - **Gender-Based Violence Services**: 3%
  - **Sexually Transmitted Infections Services**: 13%
  - **Other**: 17%
  - **Gynecology**: 17%
Debora Diniz
Co-founder, Anis: Institute of Bioethics, Human Rights and Gender

When I was much younger, I proudly considered myself a feminist. I was a good student, full of good intentions, but in reality—I knew more about the library than the harsh reality of daily life.

When I became a feminist in the world, I saw firsthand the challenges that women face, what they live through, and began to understand what needed to change to foster a more just, equal, and democratic society.

Determined, I co-founded Anis, an institute dedicated to bioethics and women’s rights in 1999. In 2004, we petitioned Brazil’s Supreme Court to allow abortion in cases of fetal anencephaly—the absence of a major portion of the brain, skull and scalp. I remember the anguish of pregnant women with unviable fetuses during the long wait for justice, and the agitation and frustration I felt towards a policy that I knew is right. The political struggle can be slow, tedious, and frustrating—but eight years later, we won the court case.

Today, the fight for abortion rights continues in Brazil, where Anis has petitioned the Supreme Court to allow for abortion access in cases of Zika and during the first 12 weeks of pregnancy. Since the virus hit my country, I have met countless women who gave up their lives to care for Zika-affected children, women who still can’t access contraception, women who do not know that Zika can be transmitted sexually. It’s an uphill battle, but working in partnership with IPPF/WHR staff reminds me that we are on the right path, the just path, and that we are not in it alone.

Khadijah Moore
IPPF/WHR Youth Network Member

Growing up, most of my peers understood very little about their bodies, and even less about sex. Sexual activity was common, and the little we learned in school—if we learned anything at all—was about biology.

I had heard about Dominica Planned Parenthood Association from friends and cousins, and was curious. Soon, I wanted to get involved. For the first time, I was provided with tools: comprehensive understanding about sex, relationships, contraception, and how you can protect yourself. Learning about these issues was eye-opening, but a question nagged at me: How many other young people like me didn’t have this information?

I decided it was my turn to make a difference, and at the age of 15, I began volunteering at the association as a youth advocate. Since then, I joined the IPPF/WHR Youth Network and now work side-by-side with others from the region. The work isn’t easy. Ultimately what we’re doing is challenging longtime stereotypes, inequalities, and taboos around sexuality. But I’m in it for the long haul because I see the possibilities: a Dominica where youth and adults can converse openly about sex and sexuality without fear of discrimination; a Caribbean where youth advocates work hand-in-hand with their governments to design programs and services geared to the real-life needs of young people. Most of all, I imagine a world of opportunity and happiness for all young people, and I know that by working hard today, we will create a better future.
Lucella Campbell  
Senior Program Advisor, IPPF/WHR

I grew up in St. Lucia, a small island in the Caribbean, and the only country in the world named after a woman. As a young girl, I remember seeing people throw fruit at family planning promoters who held meetings on the market steps. Family planning was so taboo it was socially acceptable to publicly humiliate them.

Today, family planning is openly advertised and widely practiced. And while we’ve made so much progress, there is still more to do to challenge taboos that sweep sex and sexuality under the carpet, so that we can celebrate them as central to the human experience. I am hopeful that the Caribbean Coalition on Sexual and Reproductive Rights, recently formed by IPPF/WHR’s Caribbean partners, is a major achievement that will serve to move that agenda forward.

In my 29 years with IPPF/WHR, I have come to appreciate the value of partnership and organizing. Two decades ago, I initiated the Under-Twenty Clubs in the Caribbean, which facilitated youth involvement in our member associations’ efforts to better serve youth. Today, with the leadership of young people and our partners’ staff, it has evolved into the Youth Advocacy Movement (YAM), and it is making a huge difference across the region. This is best reflected in the words of a YAM member who said, “If it were not for YAM, I might have ended up in jail like so many of my friends. Instead, here I am—the President of YAM, Belize.”

I’ve also learned that even in the darkest of times, progress is always possible. Our Haitian partner, Profamil, emerged from the ashes of the devastating earthquake in 2010, and is a striking example of that. We mobilized and provided critical services in the tent cities even while Profamil had lost two clinics and Haiti was reeling. Regardless, we persevered.

These experiences have been life lessons. It’s important to take the first step because you never know what the end result will be. So, start something—no matter how small it may seem. Bring people along with you, and never give up.

“IT IS OUR HOPE THAT YOU WILL NEVER FORGET TO CARRY THE LIGHT TO THE DARKEST CORNERS OF THE WORLD, WHERE HELP IS NEEDED MOST.”

—DR. ELISE OTTESEN-JENSEN  
CO-FOUNDER, IPPF
In 2016, we embarked on a bold new seven-year strategic plan. Our strategy responds to social, political and demographic trends, including economic inequality, discrimination against women and girls, the rise of the largest ever generation of young people, and opposition that threatens further gains in human rights.

**OUR VISION**
All people free to make choices about their sexuality and well-being, in a world without discrimination.

**Outcome 1**
**Champion Rights**
Galvanize commitment and secure legislative, policy, and practice improvements
Engage women and youth leaders as advocates for change

**Outcome 2**
**Empower Communities**
Enable young people to access comprehensive sexuality education and realize their sexual rights
Engage champions, opinion formers and the media to promote health, choice and rights

**Outcome 3**
**Serve People**
Deliver rights-based services including safe abortion & HIV treatment
Enable services through public and private health providers

**Outcome 4**
**Unite and Perform**
Enhance operational effectiveness and double national and global income
Grow our volunteer and activist supporter base
TO OUR 10 MILLION ACTIVISTS, 48,000 VOLUNTEERS AND 16,000 DONORS:

WE ARE BOLDER AND STRONGER BECAUSE OF YOU.

For more than 60 years, we have fought against discrimination, hate, and bigotry. And while that road has not always been easy, we have persevered. We have defied the odds and done the unthinkable because of the unwavering commitment of our donors, volunteers, and activists.

Your support got us through a tough year with the reinstatement of the Global Gag Rule—an executive order that has been greatly expanded under the new U.S. administration—and other executive orders that have shaken us to our core. So many of you signed our petition denouncing the Gag, marched with us in Washington, rushed in donations, called our office, reached out on social media, shared rallying cries to keep fighting—and ultimately, mobilized for women across the Americas and Caribbean.

In countries around the world, women have gone through the gut-wrenching experience of fighting for basic guarantees to safety and bodily autonomy. Through all of it, you have stood with them to create a movement that is broader, bolder, and stronger than ever.

Thank you for being part of this community. You have our deepest gratitude.

WHY WE PERSIST: VOICES OF OUR SUPPORTERS

“...because every person gains from having a confidential space to address their sexual, reproductive, and health concerns free from judgment and receiving information to make informed decisions based on their unique lives.”

“...because women should have control over their lives without political interference.”

“...because every woman has the right to control her own body.”

“...because lifting up women doesn’t mean tearing men down; elevating women elevates society.”

“...because every fight to advance human rights, including sexual and reproductive rights, is a step towards a better community and a better world.”
2016 Financials

Total Operating Support and Revenue

- **18%** Support from IPPF Central Office
- **61%** Institutional Donors (Foundations and Government)
- **18%** Private Contributions and Bequests
- **3%** Investments and Other

**Total:** $47,175,976

Total Expenses

- **89%** Program Services
- **8%** Fundraising
- **3%** Management and General

**Total:** $33,158,449

Program Investments by Strategic Plan Outcome

- **26%** Institutional Development and Volunteer Engagement
- **12%** Advocacy and Engagement
- **10%** Sex Education and Public Opinion
- **52%** Deliver and Enable Services

**Total Investment:** $29,308,689
### STATEMENT OF ACTIVITIES

**Year ended December 31, 2016 (with summarized financial information for the year ended December 31, 2015)**

<table>
<thead>
<tr>
<th>OPERATING ACTIVITIES:</th>
<th>2016</th>
<th>2015</th>
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</thead>
<tbody>
<tr>
<td><strong>Operating support and revenue:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Operating contributions and grants:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IPPF/London</td>
<td>$7,902,011</td>
<td>$7,886,323</td>
</tr>
<tr>
<td>Foundations</td>
<td>$417,189</td>
<td>$418,057</td>
</tr>
<tr>
<td>Government and inter-government grants</td>
<td>$27,782</td>
<td>$27,857</td>
</tr>
<tr>
<td>Bequests</td>
<td>$3,998,178</td>
<td>$4,289,607</td>
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<tr>
<td>Private contributions</td>
<td>$3,727,134</td>
<td>$3,949,653</td>
</tr>
<tr>
<td><strong>Total operating contributions and grants</strong></td>
<td>$11,651,512</td>
<td>$12,152,648</td>
</tr>
<tr>
<td><strong>Total operating support and revenue</strong></td>
<td>$11,651,512</td>
<td>$12,152,648</td>
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</table>

<table>
<thead>
<tr>
<th>NET ASSETS (with summarized financial information as of December 31, 2015)</th>
<th>2016</th>
<th>2015</th>
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<tr>
<td><strong>Net assets</strong></td>
<td>$15,975,437</td>
<td>$15,975,437</td>
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<tr>
<td><strong>Total</strong></td>
<td>$15,975,437</td>
<td>$15,975,437</td>
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| STATEMENT OF FINANCIAL POSITION

**December 31, 2016 (with comparative financial information as of December 31, 2015)**

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<th>Assets</th>
<th>2016</th>
<th>2015</th>
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<td>Cash and cash equivalents</td>
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<td>Grants and contributions receivable, net (note 5)</td>
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<td>Loans receivable and other assets (note 8)</td>
<td>$120,462</td>
<td>$1,073,851</td>
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<td>Investments (notes 3 and 7)</td>
<td>$23,805,965</td>
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<td>Interest in the IPPF WHR Fund (note 8, 9, and 10)</td>
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<td>$11,516,965</td>
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<td>Property, plant, and equipment, net (note 4)</td>
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<td>$56,478,557</td>
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<td><strong>TOTAL ASSETS</strong></td>
<td>$77,153,079</td>
<td>$94,154,682</td>
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<thead>
<tr>
<th>Liabilities and Net Assets</th>
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<th>2015</th>
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</thead>
<tbody>
<tr>
<td>Liabilities:</td>
<td></td>
<td></td>
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<tr>
<td>Accounts payable and accrued expenses</td>
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<td>$3,999,907</td>
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<tr>
<td>Grants payable</td>
<td>$794,640</td>
<td>$4,957,267</td>
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<tr>
<td>Deferred revenue</td>
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<td>$1,451,475</td>
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<tr>
<td>Charitable gift annuities payable</td>
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<td>$812,538</td>
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<tr>
<td>Amounts held for IPPF/London for Cape Verde and APROHAM Guatemala MA (notes 3 and 7)</td>
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<td>$15,975,437</td>
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<tr>
<td><strong>TOTAL LIABILITIES</strong></td>
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<td>$18,750,955</td>
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<tr>
<td><strong>Unrestricted</strong></td>
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<tr>
<td><strong>Temporarily Restricted</strong></td>
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<td>$400,260</td>
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</table>

<table>
<thead>
<tr>
<th>Net assets, end of year</th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Net assets, end of year</strong></td>
<td>$24,925,150</td>
<td>$30,433,652</td>
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</table>

1 Total amount of a multiyear restricted grant is recorded in year 1 per US Generally Accepted Accounting Principles (US GAAP).
2 Includes fees on various investment activities, including charitable gift annuities and fees related to stock payments on multiyear restricted grants where the revenue may have been recorded in a different year.

For our full financial statements, visit: ippfwhr.org/financials

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**For the year ended December 31, 2016**

<table>
<thead>
<tr>
<th>Unrestricted</th>
<th>Temporarily Restricted</th>
<th>Total</th>
<th>Total</th>
</tr>
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<tbody>
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| Liabilities: | | |
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| Grants payable | $794,640 | $4,957,267 | |
| Deferred revenue | $1,451,475 | $1,451,475 | |
| Charitable gift annuities payable | $812,538 | $812,538 | |
| Amounts held for IPPF/London for Cape Verde and APROHAM Guatemala MA (notes 3 and 7) | $15,975,437 | $15,975,437 | |
| **Total liabilities and net assets** | $94,154,682 | $97,153,079 | |
| **Unrestricted** | $23,915,652 | $25,244,551 | |
| **Temporarily Restricted** | $50,478,577 | $52,884,491 | |

For our full financial statements, visit: ippfwhr.org/financials
We defy the odds and achieve the unthinkable because of people like you—but we need you with us more than ever. Join us today to take a stand for women and girls around the world.

Make a Gift Today
When you make a gift to IPPF/WHR, you can choose which giving vehicle best suits your philanthropic goals and boosts your tax savings. Gifts to IPPF/WHR are tax-deductible to the fullest extent allowed by law.

To make a secure gift online visit ippfwhr.org/donate.
To give by mail, make your check payable to “IPPF/WHR” and send it to:
IPPF/WHR
Development Office
125 Maiden Lane, 9th Floor
New York, NY 10038
To make a gift of stock, through wire transfer, or to inform us of a gift through your donor advised fund, contact us at 212-214-0278 or donate@ippfwhr.org.

Make a Planned Gift
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Take Action
In countries around the world, women have gone through the gut-wrenching experience of fighting for basic guarantees to safety and bodily autonomy. Through all of it, supporters and online activists have stood with them to create a movement that is broader, bolder, and stronger than ever. Add your voice to the movement by signing up for emails and action alerts at ippfwhr.org/action.

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International Planned Parenthood Federation/Western Hemisphere Region is a leader in the movement for sexual and reproductive health and rights in the Americas and Caribbean. We work with 45 partner organizations in 41 countries that share a common mission: to ensure universal access to sexual and reproductive healthcare, promote sex education, and fight for sexual and reproductive rights.