

**Board of Trustees**  
**20-21 June 2024****Refers to**  
**agenda item 3.0****Agenda Item: 3.0 Annual Performance Review****Summary:**

2023 was the first year of implementing Come Together: IPPF Strategy 2028, including a new set of performance indicators to track progress against each of the pathways. An overview of the 2023 results is presented here including a table with full Results Framework data on page 4. More detail is provided in the accompanying slide deck.

In the first year of the Strategy period, IPPF MAs have continued to perform well while facing continued global and national opposition to SRHR, funding challenges and humanitarian emergencies. Reporting on several new indicators provides insights into challenges, achievements and new approaches to align with the Strategy.

**Action Required:**

- For the Board to note the report and attached presentation.

Globally, clients served by IPPF remained stable at 71.4m in 2023. However, this masks gains in some areas and declines in others. For example, responding to the global rise in emergencies - conflicts and climate disasters - MAs reached 12.5m clients in humanitarian settings continuing an upward trend from 6.1m in 2021 and 10m in 2022. There were significant gains in Pakistan, Morocco and DR Congo, jointly accounting for 2.0m additional clients. However, there were declines in several large service providing MAs, including Nigeria, India and Ethiopia, which accounts for 2.8m fewer clients. Additionally, there was no reporting from the former MA in Bangladesh<sup>1</sup> which contributed 1.16m clients in 2022.

The number of services provided also remained relatively stable with a decrease of 2% (4.5m services) from 226.9m in 2022 to 222.4m. The global decrease was driven by 10m (-38%) fewer services provided in Nigeria, IPPF's largest service provider, due to political disturbances linked to national elections which disrupted clinic operations. Additionally, a total of 6.6m services were 'lost' from affiliates who are suspended (Namibia), were expelled (Bangladesh) or whose partnership with the Federation ended (Zimbabwe and Myanmar). However, the global decrease is offset by gains in several countries including Sudan, Pakistan and Cameroon which jointly contributed an additional 11m services. Notably, self-care services for abortion increased by 49% to 21k, with total abortion-related services up 17% to 5.9m - reflecting the strategic focus on people-centred care by expanding the range of service delivery approaches. At the same time, the performance against our updated integrated package of essential

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<sup>1</sup> The MA in Bangladesh was expelled from IPPF in 2023. Hence, its data is not included in the 2023 results.

services (IPES+) shows the need for further accompaniment to MAs to enable them to meet IPPF's strategic commitments.

MAs in the Africa region contributed 41% of total SRH services delivered, while the Arab World region delivered 32% and South Asia 11%.

MAs contributed to 115 policy and legislative changes in support or defence of SRHR and gender equality in 2023. The most common thematic area among advocacy wins was access to SRH services (24 wins), followed by promoting SRH (22 wins), preventing sexual and gender-based violence (12 wins) and promoting gender equality (12 wins).

The new indicators reflect the move away from delivering a high volume of services to a more deliberate focus on reaching and engaging with people and communities who are excluded and marginalized. 45% of services were provided to young people aged 10-24, and 85% of clients were classified as being from poor and marginalised groups. Further analysis will be included next year as MAs continue to strengthen systems to generate more information on client profile.

For the first time, IPPF tracked public campaigns in support or defence of SRHR to which MAs or the Secretariat made a significantly contribution. In 2023, 48 campaigns were reported by 20 MAs. Campaigns were focused on a broad range of topics including child marriage, sexual and gender-based violence, access to abortion care and awareness of cervical cancer. 31 of the campaigns involved partnering with other organisations, of which 12 worked with organisations from outside the SRHR sector.

Marking a new monitoring approach for IPPF, qualitative research studies were conducted to assess three new indicators (see Box 1) with participation from 12 MAs/CPs, which jointly represented all IPPF regions. Interviews were also conducted with Secretariat stakeholders focusing on the thematic areas of the three indicators. The baseline studies aimed to provide insights on current approaches (including innovations) being employed, and the enablers and barriers faced by MAs in advancing their work in these areas.

**Box 1: Indicators assessed via qualitative studies**

**Indicator 6:** Shifts in perception and attitudes in relation to gender equality and inclusion across the Federation and the communities we serve.

**Indicator 7:** Quality, reach and impact of CSE, youth-centred care, and progress in youth engagement in the Federation.

**Indicator 8:** IPPF's contribution in supporting social movements and defending activists

Useful insights were obtained from the studies despite limitations on the depth and breadth of data collection due to a short time frame to conduct the research. Two more rounds of research will be conducted during the strategy period with more time allowed to ensure a broader sample and stronger involvement of MAs. High-level results are provided in the attached slide deck. The full studies will be available in June.

The Come Together Strategy commits us to deepen the evidence base on SRHR, and to decolonize research by basing more research in the global south. As such,

we are tracking the proportion of research and evidence initiatives generated by MAs with a focus those led by MA from the global south. In 2023, MAs from nine countries led on research/evidence initiatives initiated by the Secretariat. Five of these were from MAs in the global south (Colombia, Togo, Ghana, Sri Lanka, Mauritania). These initiatives focused on a range of topics including abortion self-care, comprehensive sexuality education and winning narratives on SRHR.

Indicators 11 and 12 in the Results Framework contribute to monitoring progress against the Nurture our Federation Pillar of the Strategy. Indicator 11 tracks the proportion of MAs/CPs receiving less than 50% of their income from one single donor. In 2023, 66% MAs (out of 56 for whom data was available for this indicator) met this benchmark. This provides a useful baseline of the proportion of MAs who are less dependent on a single funding source. Better understanding the funding make-up of MAs will support strategies and approaches to work with MAs on strengthening financial self-sustainability.

Indicator 12 is made up of 10 components which aim to monitor the efficiency of the Secretariat (Box 2). In 2023, we are reporting on components 1, 7, 8 and 9. KPIs for the remaining components will be shared in the APR, and from 2024, we will report on the full indicator.

**Box 2: Indicator 12 components**

1. **Total number of MAs or CPs in top 25 countries with lowest HDI/ highest SRHR unmet need: *unchanged between 2022 and 2023 at 86% coverage***
2. HR systems strengthening
3. Finance systems strengthening
4. IT systems strengthening
5. Data management systems strengthening
6. Learning systems strengthening
7. **Proportion of MAs/CPs with 80% or more static clinics with Clinic Management Information systems including client-based electronic health records: *up from 83% in 2022 to 89% in 2023;***
8. **Proportion of unrestricted Secretariat income allocated to youth-led programming/interventions: *TBC***
9. **Overall financial resource mobilized: *no change from 2022***
10. Progress in anti-racism and anti-discrimination programme of action

Results Framework: The Come Together Strategy Results Framework is composed of 12 indicators. Indicators 1, 6, 7, 8, 9, 10, 11 and 12 are new indicators which are being reported on for the first time. New indicators are marked with a \* in the table below.

| Pillar                    | Indicator  | MAs reporting  | 2023 result   | 2022 result | % change |
|---------------------------|--|--|---|-------------|----------|
| Center Care on People     | 1. *Proportion of [service providing] MAs/CPs providing IPES-plus AND meeting quality standards  | 109  | 4%  | n/a         | n/a      |
|                           | 2. Number of clients served by types of services and model of care (including DHIs, facilitated self-care) with focus on adolescents and young people, people in humanitarian settings and other marginalized and excluded people.     | 109  | 71,431,400  | 71,546,413  | -1%      |
|                           | 3. Number of services provided by type of services and model of care (including DHIs, facilitated self-care) with a focus on adolescents and young people, people in humanitarian settings and other marginalized and excluded people. | 109  | 222,428,995   | 226,907,307 | -2%      |
|                           | 4. Aggregated proportion of MAs'/CPs' contribution to the national SRH services provided in their countries  | MAs provided 10.8% of contraception (across sample of 13 countries); MAs provided 3.9% of abortion services (across sample of 52 countries). |   |             |          |
| Move the Sexuality Agenda | 5. Number of successful policy initiatives and legislative changes in support or defense of SRHR.  | 44   | 115   | n/a         | n/a      |
|                           | 6. *Shifts in perception and attitudes in relation to gender equality and inclusion across the Federation and the communities we serve.  | 4 MAs + global   | Study completed – high level results in accompanying slide deck |             |          |
|                           | 7. Quality, reach and impact of CSE, youth-centred care, and progress in youth engagement in the Federation.   | 4 MAs + global   | Study completed – high level results in accompanying slide deck |             |          |
| Solidarity for Change     | 8. *IPPF's contribution to supporting social movements and defending activists.  | 4 MAs + global   | Study completed – high level results in accompanying slide deck |             |          |
|                           | 9. *Number of intra- and inter-sector campaigns delivered by the Federation in support or defence of SRHR, through a diversity and decolonization lens.  | 20   | 48  | n/a         | n/a      |
|                           | 10. *Proportion of research and evidence initiatives generated by MA-led centres of learning that are from the global south.   | 9  | 56%   | n/a         | n/a      |
| Nurture our Federation    | 11. *Proportion of MAs/CPs receiving less than 50% of their income from one single donor.  | 56   | 66%   | n/a         | n/a      |
|                           | 12. *Overall Secretariat Efficiency Score.   | n/a  | Data TBC  | n/a         | n/a      |