



JOINT REVIEW
OF THE
INTERNATIONAL PLANNED PARENTHOOD FEDERATION
AND THE
U. S. AGENCY FOR INTERNATIONAL DEVELOPMENT
PARTNERSHIP
EXECUTIVE SUMMARY
DECEMBER 2000

Betsy Bassan
Med Bouzidi
Isabel Stout

Amy Tsui
Ian Thomas
Keys MacManus

Submitted by:
LTG Associates, Inc.
TvT Associates, Inc.

Prepared for:
The United States Agency for International Development
The International Planned Parenthood Federation

The Joint Review of the International Planned Parenthood Federation and the U.S. Agency for International Development Partnership was made possible through support primarily provided by the United States Agency for International Development (USAID) under the terms of Contract Number HRN–C–00–00–00007–00, POPTECH Assignment Number 2000.01. The opinions expressed herein are those of the authors and do not necessarily reflect the views of USAID or IPPF.

PREFACE

The joint review of the International Planned Parenthood Federation (IPPF) and United States Agency for International Development (USAID) partnership was a remarkable process and represents an approach of real value to USAID, IPPF, and as a methodology, to the development community as a whole. The high level of participation and engagement of both IPPF and USAID in every step of the process greatly heightened the ownership of both parties to the outcome of the joint review—the key findings and conclusions—and thereby the likelihood that they will be realized. By committing to a structured but intense level of involvement by both IPPF and USAID staff throughout the joint review process, the relationship between the two organizations evolved in ways that would rarely happen in a typical assessment. As a result, both organizations have a much deeper understanding of each other's strengths and constraints, which is critical for making the future partnership more effective.

Both USAID and IPPF together conceived of the joint review and jointly invested the extensive time and resources that proved essential for its success. Participation and joint learning is time-consuming and expensive but can lead to enduring outcomes. The review team witnessed firsthand the Federation's immense value to millions of people throughout the world and helped to put into perspective concerns about areas that need strengthening. Ultimately, the experience cultivated the necessary energy and enthusiasm for moving into a constructive phase possible through the clear identification of needs and actions that emerged from the review. Whatever the future holds for USAID funding to IPPF, the key findings and conclusions and follow-on plan of action help IPPF negotiate with all its donors in best equipping it to meet the sexual and reproductive health challenges ahead.

ACRONYMS

APROFAM	Asociación Pro-Bienestar de la Familia de Guatemala
ARO	Africa Regional Office, IPPF
ASBEF	Association Senegalaise pour le Bien-Etre Familial
AWRO	Arab World Regional Office, IPPF
BEMFAM	Sociedade Civil Bem-Estar Familiar no Brazil
CA	Cooperating agency
CO	Central Office, IPPF
CTO	Cognizant technical officer
DFID	Department for International Development, United Kingdom
ENRO	European Network Regional Office, IPPF
ESEAORO	East, Southeast Asia and Oceania Regional Office, IPPF
FP	Family planning
FPA	Family planning association
FPAK	Family Planning Association of Kenya
FPLM	Family Planning Logistics and Management
FPMO	Family Planning Management and Development
G/PHN	Bureau for Global Programs, Field Support and Research, Center for Population, Health and Nutrition, USAID
GLAD	Global Advocacy, Scientific Experience, Youth and Gender, IPPF
HIV/AIDS	Human immunodeficiency virus/acquired immune deficiency syndrome
ICPD	International Conference on Population and Development
IEC	Information, education and communication
IMAP	International Medical Advisory Panel, IPPF
IMS	Integrated management system
IPPF	International Planned Parenthood Federation
JHPIEGO	Johns Hopkins Program for International Education in Reproductive Health
JOICFP	Japanese Organization for International Cooperation in Family Planning
MSH	Management Sciences for Health
NGO	Nongovernmental organization
NORAD	Norwegian Agency for Development Cooperation
PPBR	Program planning, budgeting, and reporting system, IPPF
RH	Reproductive health
RO	Regional Office, IPPF
SARO	South Asia Regional Office, IPPF
Sida	Swedish International Development Authority
SRH	Sexual and reproductive health
STI	Sexually transmitted infection
UNFPA	United Nations Population Fund
USAID	United States Agency for International Development
WHO	World Health Organization
WHR	Western Hemisphere Region, IPPF
WHRO	Western Hemisphere Regional Office, IPPF

EXECUTIVE SUMMARY

PURPOSE OF THE JOINT REVIEW

The partnership between the United States Agency for International Development (USAID) and the International Planned Parenthood Federation (IPPF) has a long history, dating back to 1970. As the current USAID grant nears completion, IPPF and USAID agreed on the value of jointly reviewing experience to date so as to make an informed decision about the future of the partnership.

SCOPE OF THE JOINT REVIEW

In the scope of work for the joint review, IPPF and USAID defined three main areas of focus:

1. IPPF's added value to its members in advocacy, programmatic leadership and innovation, institutional capacity building, and technical and logistics support;
2. IPPF's role in setting and promoting standards and in measuring the results of its work; and
3. IPPF's role as an international leader in sexual and reproductive health¹ (SRH) and its potential as a valuable partner for USAID.

In addition, the scope of work stated that the joint review will examine these three elements at the three levels of the Federation: the Central Office (CO), the six Regional Offices (ROs), and the family planning associations (FPAs). Special attention is directed towards the ROs because of USAID's limited knowledge of their role.

METHODOLOGY

USAID and IPPF agreed from the outset that the joint review was not to be an evaluation of the past but rather an analysis of the present, undertaken for the purpose of gathering the information needed to develop future options for the partnership. The two organizations also agreed that the process of joint learning would be an important element of the joint review. These agreements shaped the methodology, in particular, the need to have the review team systematically collaborate in developing the methodology, collecting and analyzing information, and articulating the key findings and conclusions. The review team included approximately 10 people from each organization, out of which tripartite teams composed of IPPF, USAID, and an independent consultant were formed to jointly conduct all interviews and collectively develop trip reports. Tripartite teams carried out almost 370 interviews with the following types of respondents:

¹ Sexual and reproductive health (SRH), the term used in IPPF documents, is used in this document as equivalent to family planning and reproductive health (FP/RH), the term most often found in USAID documents.

- Staff, volunteers, and stakeholders at the three levels of the Federation’s structure, that is, the CO, 6 ROs, and 16 FPAs (2–3 per region);
- IPPF’s donors;
- USAID cooperating agencies (CAs);
- USAID’s Bureau for Global Programs, Field Support and Research, Center for Population Health and Nutrition (G/PHN) in Washington, DC;
- Regional Bureaus in USAID/Washington; and
- USAID Missions in the field.

In addition, quantitative data were collected through a survey completed by 150 respondents representing IPPF staff at all levels and USAID staff in Washington and at the country level.

FINDINGS AND CONCLUSIONS

The findings and conclusions were developed through a highly participatory team process that was followed by a review and selection process at senior levels in IPPF and USAID. The full text of the jointly developed and negotiated key findings and conclusions is contained in appendix A.

OVERARCHING FINDINGS

There are three overarching findings that validate the partnership and provide a foundation for continued support:

- **IPPF Value and Reputation:** IPPF has many comparative advantages. It sparked a worldwide family planning movement, and it nurtures indigenous SRH nongovernmental organizations (NGOs), many of which carry out very valuable activities at the country level, often in a leadership role. IPPF works as a highly trusted partner of government, frequently able to positively influence governments in this sensitive area. IPPF provides a range of tangible benefits to its members, such as legitimacy, technical information, clinical guidelines and operating standards, core funds, and participation in an international network.
- **Setting, Promoting, and Monitoring Standards:** IPPF wants to build on its strengths and continue to tackle weaknesses. Donors and IPPF agree on the need to accelerate and institutionalize the pace of reform, in particular, in the areas of governance, resource allocation, enforcement of standards, and development of a results orientation.
- **Programmatic Leadership:** IPPF’s core work continues to be family planning. Based on its Vision 2000 Strategic Plan, it has expanded into a

broader SRH agenda and is engaged in programs with youth, human immunodeficiency virus/acquired immune deficiency syndrome (HIV/AIDS), sustainability, and advocacy. To better support its SRH agenda, IPPF and FPAs need to be more selective in identifying SRH priorities, develop strategic approaches complemented by technical support from ROs, and enhance FPA management, planning, and evaluation capacities.

KEY FINDINGS AND CONCLUSIONS

1. Governance/Volunteers

To fully realize the value of volunteers, governance reforms need to be undertaken at the country level. Boards need the infusion of new members who provide age and gender balance and bring knowledge of current SRH trends and needs. Modern board practices need to be implemented where boards are engaged at the policy and strategy levels, with general oversight and fundraising responsibilities. There is a critical need to clarify the roles of volunteers and management and to undertake training related to their functions.

2. Mission/Target Group

Given IPPF's changed operating environment—reduced funding, a broader mandate per the Cairo International Conference on Population and Development (ICPD), and heightened demand—it is pursuing the broad agenda contained in its Vision 2000 Strategic Plan, which can be tailored by ROs and FPAs to fit with regional and national priorities. However, IPPF needs to explicitly reconcile its mission of serving low-income groups with the need for FPAs to generate additional income for financial sustainability purposes.

3. Resource Allocation

The current resource allocation system directs most resources to FPAs in the poorest countries. However, the absence of clear criteria to guide allocation of resources among these priority FPAs may undermine needs-based decision-making. Resource allocation to the Secretariat (CO and ROs) relies mainly on historical precedent and other factors not based on evolving needs. IPPF needs to enforce and/or introduce a uniform, needs-based, transparent approach for allocating financial and technical resources throughout the Federation.

4. Program Leadership/ICPD Programme of Action

FPAs are initiating innovative activities with youth, men, gender, and HIV/AIDS, and are also making progress in moving from family planning to broader SRH services, but with little or uneven technical guidance and access to worldwide experience. To address this, IPPF needs to develop a strategic approach to new priority program areas buttressed by strong technical support, in particular for youth and HIV/AIDS, as well as to define a basic package of integrated SRH services and ensure that current and future contraceptive needs are satisfied.

5. Advocacy

IPPF's positive name recognition and ongoing dialogue with governments, foundations, and donors provides strong advocacy potential. Currently, IPPF makes uneven use of its advocacy potential and has lost some ground to others who are more vocal on such issues as women's empowerment, abortion, and HIV/AIDS. To regain its leadership position, IPPF needs to be proactive and treat advocacy as a program area, with a strategy and defined advocacy agenda.

6. Developing Sustainable Institutions

Resource Mobilization

Funding has declined dramatically, making sustainability a priority issue for both IPPF and FPAs. FPAs have made progress in promoting sustainability but IPPF needs to provide more support in this area through a clear sustainability strategy, access to relevant experience, and technical assistance. Financial sustainability initiatives are understaffed, suffer from inadequate marketing information, and have not been able to prevent revenue reduction in IPPF's core budget. The fact that IPPF, on the whole, is understaffed and underfunded, must be taken into account. IPPF needs to review and strengthen its marketing strategy and resource mobilization staffing. Both USAID and IPPF need to be aware of the risk of reducing support to successful, high-performing programs too quickly.

Capacity Building

- **Regional Offices:** IPPF's regional structure is an excellent way to support FPAs, allowing capacity building to be provided in the context of regional SRH needs. ROs are at the front line in building FPA capacity and supporting FPA work, but generally do not have sufficient resources to carry out these functions. ROs need to identify key FPA technical assistance requirements and develop a plan for technical assistance and staffing. Based on a clear division of Secretariat functions (possibly an area of need for review and redesign), IPPF needs to create a system to ensure technical assistance and regular support visits of RO staff to FPAs. The Africa RO needs strengthening as a matter of particular urgency.
- **USAID Cooperating Agencies (CAs):** USAID CAs represent potential sources of specialized technical assistance for all levels of the Federation. Some FPAs have benefited greatly from such technical assistance. To optimize the use of CAs, IPPF needs to be proactive in identifying technical assistance needs and access these resources in a strategic and corporate manner. USAID can facilitate this process.

7. Quality Assurance

Accreditation

IPPF has a good set of membership standards but the current system of self-certification has resulted in great variation in quality and performance among FPAs because standards are not rigorously followed or enforced. Membership standards are now being updated and a formal accreditation system is being developed. This effort should be accelerated. The enforcement of standards needs to be independent and rigorously applied.

Quality of Care

Good medical and quality-of-care guidelines exist for clinics. The International Medical Advisory Panel (IMAP) plays a strong and very useful normative role within the Federation. However, IPPF lacks a system for ensuring that these guidelines are implemented or for providing technical support to improve the quality of clinical services. IPPF needs to be rigorous in implementing medical and quality-of-care standards and guidelines at all FPA service delivery sites. To achieve this, IPPF needs to develop and fully institutionalize quality assurance systems that include routine monitoring and related technical assistance.

8. Performance Monitoring

Monitoring and Evaluation

There is no uniform approach to monitoring and evaluation throughout the Federation nor is there much capacity in this area, which undermines its ability to articulate achievements and use them for reporting, positioning, and marketing. Current monitoring efforts fall short of measuring results; reporting is biased towards FP and is unable to fully capture the range of IPPF's SRH activities. IPPF is now developing an integrated management system (IMS), which is being designed to improve the measurement of results and the range of SRH activities. IPPF should accelerate the implementation of this system, and as a matter of urgency, develop a uniform and systematic approach to evaluation that builds on the IMS framework.

Capturing and Sharing Best Practices and Lessons Learned

IPPF has created some of the best SRH responses and models. However, the Federation does not adequately document and share these models, in large part due to weak capacity in evaluation. IPPF needs to strengthen its identification and dissemination of successful approaches.

9. IPPF/USAID Relationship

There is high interest on the part of USAID and IPPF in increased dialogue and mutual engagement. IPPF and USAID should seek opportunities to exchange information on their priorities, strategies, and field experiences. Also, relationships between USAID (G/PHN and Missions) and ROs should be strengthened.

10. Expectations

Both USAID and IPPF see the value of continuing the relationship. Both parties support having any future partnership hold IPPF accountable, with clearly articulated results and benchmarks of achievement, applied equally to both core and earmarked funds. IPPF should develop a concrete plan for achieving the key actions identified by the joint review and the various ways these might be supported to provide the basis for joint consultations on the future of the partnership. The president of IPPF has requested that the six regional councils include the joint review in the agenda of their 2001 annual meeting.

STATUS AND NEXT STEPS

IPPF senior management, following its concurrence with the key findings and conclusions of the joint review in early October 2000, initiated the development of a plan of action that will set out the main reform and program activities needed to implement the key findings and conclusions of the review. At the presentation of the key findings and conclusions to IPPF's donors in late October 2000, it was agreed that the development of the action plan would take into account prior evaluations—in particular, the trilateral evaluation carried out in 1998 by the Department for International Development, United Kingdom (DFID), Norwegian Agency for Development Cooperation (NORAD), and the Swedish International Development Authority (Sida). At the presentation of the joint review's key findings and conclusions to IPPF's volunteers at their November 2000 Governing Council meeting, the president of IPPF noted the similarities of the findings and conclusions of both the trilateral evaluation and the joint review and urged action on their recommendations. The action plan will, in all likelihood, entail a funding request of such breadth and scope that opportunities will be created for a number of IPPF's donors.



POPTECH

POPULATION TECHNICAL ASSISTANCE PROJECT

1101 Vermont Ave., NW Suite 900 Washington, DC 20005 Phone: (202) 898-9040 Fax: (202) 898-9057 www.poptechproject.com