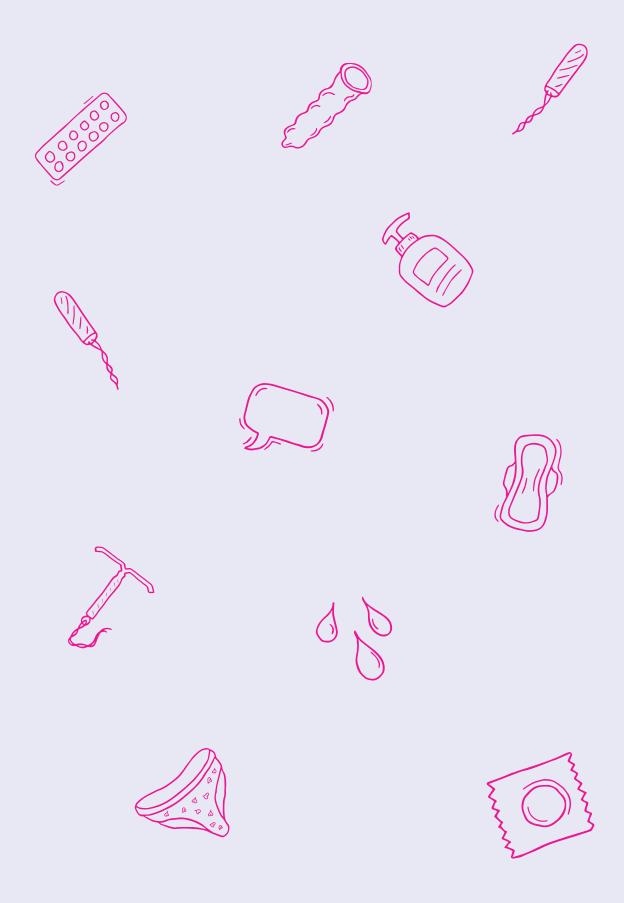




# Come Together

IPPF Strategy 2028



### **Foreword**

For 70 years IPPF has championed and delivered quality services, comprehensive information and advocated for just laws so that more people in more places under more circumstances may realize their sexual and reproductive health and rights (SRHR). Started with an act of international solidarity between activists from just a handful of countries, IPPF has since grown into a broad and diverse community of services providers and advocates that stretches around the Earth. Our very existence manifests just how the demand for dignity in sexual and reproductive health and rights is universal to people the world over.

But that world is changing rapidly. Tough challenges must be confronted – the toxic legacies of longstanding racism, sexism and homophobia, for example; the deepening impacts of the climate crisis, violence, and inequalities; the escalating consequences of new technologies, population displacements, and habitat destruction. Wherever such dynamics impact people's lives, IPPF knows enjoyment of SRHR is impacted too. Whenever people confront humanitarian crises, we know their SRHR are thrust into crisis too. Whoever is subject to prejudice, bigotry, or exclusion, has their access to SRHR also eroded. We know that the worst consequences of those injustices are borne by young people in the poorest of communities, in the toughest of places, facing the fewest opportunities.

To be impactful in a world of change, IPPF must change too. That is what Strategy 2028 is all about: changing IPPF so it is well equipped to uphold SRHR for those who are left out, locked out or left behind. Our Strategy 2028 sets out a familiar path but in a new direction over far tougher terrain to that clear destination. We will walk that path shoulder to shoulder with young people, and with individuals and communities bearing the full brunt of stigma and prejudice. At each step, we will defend, protect, and celebrate safety, pleasure and wellbeing in sex and reproduction. At every turn, we will denounce powers and authorities who, through policy, practice, and law, undermine dignity and human rights in those intimate realms. And, as IPPF, we will be accountable for who we are, what we do and how we do it.

That is our Strategy 2028. It is with immense pride that the IPPF Board of Trustees shares this strategic itinerary with you. We very much hope you will travel this road with us – in your own realities, communities, and contexts. Let's do that together. Let's come together, for sexual and reproductive dignity for all – for each and every one of us, to the exclusion of none of us, in the interests of all of us.

Kate Gilmore

**IPPF Board Chair** 

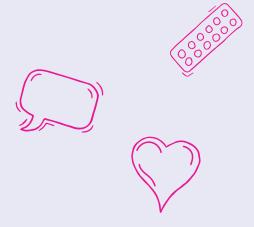
### <u>About Strategy 2028</u>

IPPF is a federation made up of over 120 independent member associations. The membership is diverse. PPFA, in the USA, has a budget of more than USD 1 billion and an impact to match. In the Pacific Islands, working at the frontlines of the global climate crisis, some member associations operate with no more than a couple of staff. All contribute and work to cater for rights that are universal, a need that is large and for people whose care is not provided elsewhere.

The federation is a powerhouse. IPPF member associations are the leading civil society providers of contraception in 89 of 120 countries. And in 64 of those 89 countries, IPPF is the only large-scale international provider. Collectively, member associations delivered more than 1 billion cumulative services between 2016 and 2022. Every year, the federation spends USD 2.2 billion to provide services and to advocate for rights. The Secretariat accounts for seven per cent of all funding, the rest is raised nationally by member associations in a range of ways.

The journey to design Strategy 2028 took two years and was done under the authority of the IPPF Board and led by its Strategy, Policy and Investment Committee. Thousands of people from all corners of the world took part. It was a transformative and enriching design process that included new research, in-depth roundtable discussions, national consultations, regional forums and an award-wining international youth campaign. The strategy is the collective product of all who came together to shape it.

**Come Together** is written simply to be understood widely. It is informed by young people who want more inclusive and accessible language. The strategy aims to demystify Sexual and Reproductive Health and Rights (SRHR) and to speak in



direct terms about the federation and its strategic ambitions. It speaks in a collective voice that recognises IPPF's diversity as well as its sense of solidarity and shared mission.

The structure of the strategy is also simple. It has four pillars. Three pillars face outwards to the world and one faces inwards to the federation. Each pillar contains a goal and three pathways. The pathways are the actions we need to prioritise to achieve our goals. The pathways are accompanied by sets of change commitments. The pillars and pathways bring focus and direction. But they are not mutually exclusive. Throughout the strategy, linkages bridge and weave across the different pillars and pathways. None exists in isolation. Core IPPF areas such as gender, youth, humanitarian, or rights cannot be fitted into a single pillar. They run across the strategy.

Come Together builds on IPPF's previous strategy, but it is also a departure from it. The biggest change is the commitment by member associations and the Secretariat to focus resources on reaching people who are being excluded and marginalised with quality and people-centred care. Come Together further commits IPPF to shaping laws, policies and norms through feminist action and international solidarity. Thirdly, Come Together commits to nurturing the federation, addressing shortcomings and adding new impetus for real and lasting impact.

"IPPF member associations are the leading providers of contraception in 89 of the 120 countries where we operate. In 64 of those countries, they are the only large-scale multi-country providers."

### **Come Together**

We are a global federation. We are 120 independent organisations and a secretariat. We **come together** for sexual and reproductive health and rights – providing care and promoting human rights. As organisations and individuals, we are committed to the health of our countries and populations. In small island states and across continents, our work has meaning and impact. Our outreach and clinics are embedded in the communities we come from and the societies where we live. That matters. It is at the heart of the difference we make.

The world we live in is changing and fast. New generations are born and grow up in a world of cyber technologies, mass communication and innovation. Some gains are made, some rights for some are realised. But the world is complex, and gains are fragile. We see and feel, and millions live with, the devastating impacts of humanitarian crises, COVID, climate change, macho politics and structural injustice. Not in the future. Right now. Wealth gaps are growing, within and between already deeply unequal societies. Sexual and reproductive rights are under attack: the rights of women; LGBTQ+ rights. And the impacts are real – felt by billions of people.

Action is urgent. Action at scale and with purpose. In our 70-year history, IPPF has been brave and sometimes angry. We have delivered. We have stood for justice and equality. In this new era, we commit to more daring and feminist action that secures choices about our bodies, sexual lives, and well-being. Everyone should enjoy a pleasure-filled and healthy sex life and a life free from violence, shame or criminalisation. We know love is love. And we come together in support of women, youth, and people who are marginalised and excluded. Through the care we deliver, the actions we take, and the solidarity we foster.

And we do not stand alone. Our work is deeply intertwined with the struggles for human rights, climate survival, social justice and equality. This is why our federation will come together with sectors and actors, to transform the communities and countries we live in. For the better. To help shape the new world that is being formed. It is our commitment.

<sup>1</sup> Suitters, Beryl, "Be Brave and Angry: Chronicles of the International Planned Parenthood Federation" (IPPF, 1973).



"Never forget why we are working. To serve people. Women, men, LGBTQ+ young people, marginalised people."

Alice Ackermann, Mouvement Français pour le Planning Familial







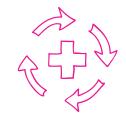
# Transforming our world

### **Gender Equality**

"On its current trajectory, it will now take 135.6 years to close the gender gap worldwide."<sup>2</sup>

#### **Person-Centred Care**

"There is a need for tailored approaches to address gaps in sexual and reproductive health care at the country level."<sup>3</sup>



"Health-care facilities around the world must strive to be the safe spaces that LGBT+ people desperately need."<sup>4</sup>



### Contraception

"The proportion of women with unmet need for family planning stands currently at 10 per cent, a proportion that has remained unchanged since 2000".5

#### **Abortion**

"Six out of 10 (61%) of all unintended pregnancies, and 3 out of 10 (29%) of all pregnancies, end in induced abortion."

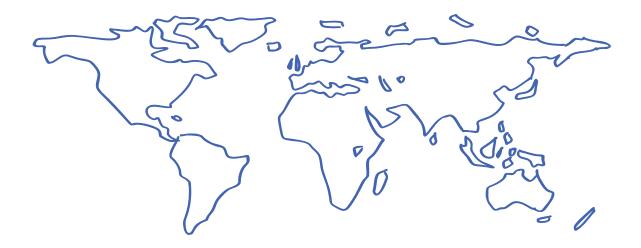




#### HIV

"Two out of every seven new HIV infections globally in 2019 were among young people (15–24 years)."

- 2 World Economic Forum, Global Gender Gap Report 2021: https://www3.weforum.org/docs/WEF\_GGGR\_2021.pdf
- 3 Guttmacher Institute, 2022, https://www.guttmacher.org/article/2022/03/new-evidence-unintended-pregnancy-and-abortion-150-countries-shows-importance
- 4 Lancet Global Health, 2022: https://www.thelancet.com/action/showPdf?pii=S2214-109X%2822%2900001-8
- 5 UN Department of Economic and Social Affairs, "Family Planning and the 2030 Agenda for Sustainable Development": https://www.un.org/en/development/desa/population/publications/pdf/family/family/familyPlanning\_DataBooklet\_2019.pdf
- 6 Lancet Glob Health. 2020 Sep; 8(9):e1152-e1161. doi: 10.1016/S2214-109X(20)30315-6.
- 7 UNAIDS, HIV and Young People, 2021: https://www.unaids.org/sites/default/files/media\_asset/young-people-and-hiv\_en.pdf



#### **Humanitarian**

"In 2022, 274 million people will need humanitarian assistance and protection – a significant increase from 235 million people a year ago."8



"Women and girls living in humanitarian contexts continue to be among those most affected by gender inequalities, such as limited access to decision-making processes, education, work, and gaps in sexual and reproductive health services."

### **Demographic Changes**

"[Today's Youth is] the most diverse generation in terms of ethnicity, race, sexuality and gender identity."<sup>10</sup>

"By 2050, the number of persons aged 65 years or over globally will ... surpass the number of adolescents and youth aged 15 to 24 years."

"By 2030 two-thirds of IPPF Clients will live in countries where inequalities have increased, with a growing proportion of inequality increase attributed to the climate crisis." 12



<sup>8</sup> UNOCHA, Global Humanitarian Overview 2022 (Abridged Report): https://reliefweb.int/report/world/global-humanitarian-overview-2022-abridged-report

<sup>9</sup> UNOCHA, Global Humanitarian Overview 2022: https://gho.unocha.org/trends/humanitarian-crises-continue-exacerbate-gender-inequalities

<sup>10</sup> University of Cape Town and Oxford, "Sexual and Reproductive Health Rights in 2030: https://ippfstrategy2028.org/wp-content/uploads/2022/01/Research-Report\_IPPF-Future-Clients.pdf; Gallup, 2021: https://news.gallup.com/poll/329708/lgbt-identification-rises-latest-estimate.aspx

<sup>11</sup> UN World Population Prospects 2019: https://population.un.org/wpp/Publications/Files/WPP2019\_Highlights.pdf

<sup>12</sup> University of Cape Town and Oxford, "Sexual and Reproductive Health Rights in 2030: https://ippfstrategy2028.org/wp-content/uploads/2022/01/Research-Report\_IPPF-Future-Clients.pdf

### **Expand Choice**

Boost safe abortion & infertility care

Integrate HIV into SRHR package

Expand contraceptive choice

### **Widen Access**

Reach marginalised communities

Deliver youth-centred care

Grow crisis settings preparedness & care





### Advance Digital & Self Care

Invest in digital health interventions

Dignity in self-care

### CENTER CARE ON PEOPLE

GOAL: QUALITY PERSON-CENTRED

CARE TO MORE PEOPLE,

IN MORE PLACES

### **Chart our Identity**

Draft federation charter

Renew our brand

Build our culture



# NURTURE OUR FEDERATION

GOAL: REPLENISH AND NURTURE THE FEDERATION FROM A COMMON VALUE BASE AND UNLEASH OUR COLLECTIVE POWER FOR GREATER IMPACT



Challenge discrimination

Embrace gender & sexual diversity

Youth structures & leadership

### **Grow our Federation**

Find new members

Modernise systems & grow skills

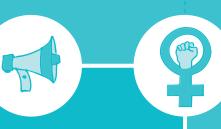
Mobilise resource & diversify income

### **Ground Advocacy**

Connect advocacy at all levels

Amplify community voices

Monitor commitments



# MOVE THE SEXUALITY AGENDA

GOAL: SOCIETAL AND LEGISLATIVE CHANGE FOR UNIVERSAL SEXUAL AND REPRODUCTIVE RIGHTS

### **Shift Norms**

Prevent sexual & gender-based violence

Take intersectional & feminist action

Share winning narratives

### **Act with Youth**

Bring youth voices to the fore

Advance comprehensive sexuality education

Engage & influence on social media

### SOLIDARITY FOR CHANGE

GOAL: AMPLIFY IMPACT BY BUILDING BRIDGES, SHAPING DISCOURSE, AND CONNECTING COMMUNITIES, MOVEMENTS, AND SECTORS



### **Support Social Movements**

Connect capacity

Amplify messages

Re-grant to movements



### **Innovate & Share Knowledge**

Grow the IPPF centers & funds

Communicate learning

Incubate ideas & tech



### **Build Strategic Partnerships**

Collaborate across sectors
Build alliances & consortia
Host & support community
groups & networks

Scan the QR code to read the Come Together strategy:

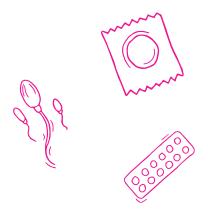
### Center Care on People

### Goal: quality person-centred care to more people, in more places

Care is about health and wellbeing. It is also about quality and equality. It is about rights. Care determines how we live and even whether we live. Care is healthcare. It is psychosocial care, and the commodities and services we provide. Care is our greatest asset and contribution. It is delivered by care and outreach workers under canopies, in tents, in offices and in clinics. With contraception at the core, we deliver all aspects of SRHR care. We deliver to all who need it and we prioritise those who are most marginalised and excluded.

In the next six years, we will **come together** to build up our person-centred care model. From experience, we know that care is better when it is tailored to people. And as people, our circumstances and needs differ. Not everyone needs the same care, or to receive it in the same way. Not everyone has access to or can afford care. Person-centred care is about having voice, choice and access. It is about agency to make informed decisions. It is about safety and trust. To **Center Care on People**, we will follow three pathways:





Critical pathways	Expand Choice	Widen Access	Advance Digital & Self Care
	Boost safe abortion & infertility care	Reach marginalised communities	Invest in digital health interventions
Priority actions	Integrate HIV into SRHR package	Deliver youth-centred care	Dignity in self-care
	Expand contraceptive choice	Grow crisis settings preparedness & care	

"A lot of people and allied institutions want inclusion, but as a goal in the future. But we live right now. Can we not assume that we are all in the same world and on the same planet and we have the same worth as human beings?"

Mauro Cabral, Founding Director of GATE, Argentina

### **Expand Choice**

Choice matters. In our bodily autonomy. Or the choice to have an abortion, or which contraceptive best fits our needs in our contexts. That is why we will strive to provide the fullest possible range of integrated, affordable, and quality SRHR care. We will expand our offer to serve people in their diversity and at all stages of the lifecycle. This means expanding our contraceptive range and going further in our infertility and abortion care. It means accelerating the integration of HIV and SRHR care and covering sexual health needs. Where we cannot cater for a choice, we will develop formal links with partners and providers that can.

#### **Our Commitments**

By 2028, we will have met essential quality care standards at all our core facilities and have offered the full range of care, including infertility, contraception, abortion and STI/HIV, as part of an essential minimum package.

By 2028, we will have expanded our national contributions for contraceptive services in 89 countries where IPPF is the main or sole provider.

By 2028, we will have diversified our service delivery models, by doubling self-care, telehealth, and other person-centred strategies, including peer provision and home visits in all IPPF MAs/CPs.

### **Widen Access**

All over the world, systemic barriers or failures stand in the way of the right to health. Entire communities of people carry the weight of oppression and discrimination. This is not acceptable. This is why we will prioritise safe and quality care for people who are excluded and marginalised. We will focus on youth, and seek to involve them in design and delivery of care. We will cover the SRHR needs of older people whose care is often neglected. We will involve and provide care for LGBTQ+ communities. Our care will push against barriers and navigate through them where they persist. Humanitarian crises, caused by man or nature, leave tens of millions of people without SRHR care. This is preventable. We will build our capacity and readiness to offer lifesaving SRHR care in humanitarian crises. And we will stand prepared to meet the many challenges to SRHR posed by COVID and future pandemics.

#### **Our Commitments**

By 2028, our services will be open, accessible, and respectful of sexual diversity, with more member associations providing services to LGBTQ+ communities.

By 2028, we will have expanded our focus on younger people who face specific risks and discrimination, resulting in an increase in the proportion of our clients aged 10–19. In addition to prevention of unintended pregnancies, we will have scaled up youth-centred services including emergency contraception, abortion care, post-exposure prophylaxis and sexual and gender-based violence.

By 2028, we will have doubled our reach in humanitarian crises and ensured a rapid life-saving humanitarian response within 72 hrs in all high-risk countries.

### **Advance Digital & Self-Care**

Medical technologies are developing faster than ever. In an age of internet and telecommunications, care and care platforms are undergoing profound change. Many, especially new generations, prefer virtual interactions to human ones, also in the care they receive. Technology can be a means of cutting costs, increasing affordability and broadening reach. Laying a foundation for the future of care, we will partner with experts to invest more in digital health interventions, and integrate them into our broader care package. We will promote self-care options that expand choice and help people to own their care. We will do this in addition to, and not in place of, our existing care. Through our digital communication channels, we will boost the reach of information and resources. We will take IPPF to people where they are.

#### **Our Commitments**

By 2028, we will have built and implemented a common framework for digital health interventions in collaboration with recognised international experts in the field. We will be leading voices negotiating with local governments in developing guidelines and policies enabling greater access to and utilisation of SRHR digital health interventions and self-care in settings where these are currently restricted.

By 2028, we will see a high increase in new clients receiving care through our telehealth and facilitated self-care platforms.

By 2028, our broader care will have effectively linked care users, especially those who are marginalised and discriminated against, to community support platforms, activist groups and to each other.

"During an emergency, youth are not just beneficiaries of a humanitarian response. Engage us on how we can take action. See us youth as partners, work with us."

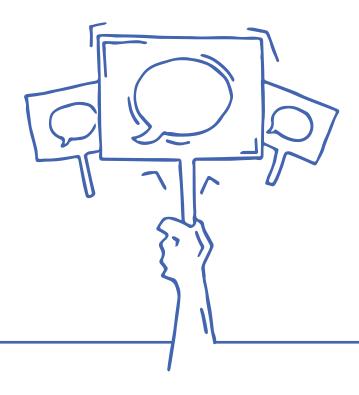
Louria Paragon, Family Planning Organisation of the Philippines

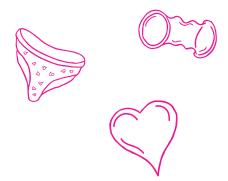
### **Move the Sexuality Agenda**

### Goal: Societal and legislative change for universal sexual and reproductive rights

Sexuality is about more than sex and sexual attraction. It is about who we are, and about who makes decisions about our bodies or how we should live our lives. Sexuality is about love, pleasure, well-being.<sup>13</sup> It is also about morality, equality, health. Many of the problems we face as societies are linked to views about sexuality that are divisive and damaging. To make sexual and reproductive rights truly universal, we must move the sexuality agenda forward: shape opinions, inform policies, stir emotions.

In the next six years, IPPF will **come together** for sexual and reproductive rights. We will uphold human rights norms and challenge the toxic norms that strip away our dignity. We will work towards a more inclusive, intersectional, and feminist world. We will agitate, excite, build common ground, and develop new messages that resonate with people in their lives. To **Move the Sexuality Agenda forward**, we will follow three critical pathways:





Critical pathways	Ground Advocacy	Shift Norms	Act with Youth
Priority actions	Connect advocacy at all levels	Prevent sexual & gender-based violence	Bring youth voices to the fore
	Amplify community voices	Take intersectional & feminist action	Advance comprehensive sexuality education
	Monitor commitments	Share winning narratives	Engage & influence on social media

"We ask IPPF to bring Sex Workers to their large advocacy platform, so we can bring our lived realities to the table. Help sex workers to discuss their issues and give direction on what they'd like to see."

Grace Kamau, African Sex Workers Alliance

<sup>13</sup> Zaneva M, Philpott A, Singh A, Larsson G, Gonsalves L (2022) What is the added value of incorporating pleasure in sexual health interventions? A systematic review and meta-analysis. PLoS ONE 17(2): e0261034. https://doi.org/10.1371/journal.pone.0261034

### **Ground Advocacy**

IPPF promotes the universality of sexual and reproductive rights at all levels, from community activism to intergovernmental advocacy. We advise governments and inform policy. And, we hold them accountable for fulfilling national commitments. Our advocacy is grounded in our diversity and our unwavering belief in human rights. We will continue to work to our strengths. We will create spaces and opportunities to engage and link across divides. We will amplify community voices at advocacy forums, bringing lived experiences and fresh ideas to policy conversation. Holding true to our principles and our dedication, we will challenge the colonial and discriminatory laws that drive us apart. We will speak out for choice and inclusion.

#### **Our Commitments**

By 2028, more governments and international institutions will respect, protect and fulfil the sexual and reproductive rights of all.

By 2028, more countries will have liberalised abortion care and eliminated barriers to implementation.

By 2028, governments that define essential healthcare packages will have included and funded critical SRHR interventions within them.

### **Shift Norms**

Moving the needle on sexuality requires more than policy changes. Changes in societal values and social norms are necessary too. Through community dialogue and transformative feminist action, we will address damaging social and gender norms that hold back women and girls all over the world. Addressing sexual and gender-based violence is a priority. Working with men and boys to transform masculinity is too. Together, we will grow tolerance, inclusion and acceptance of sexual diversity and rights. We will defend hard-won human rights norms and pull down barriers. We will communicate strategically and develop winning narratives to reach the undecided in the political middle. We will further our use of digital platforms and tools to reach new audiences. We will gather more evidence and use "big data" to shape our positions and communications.

#### **Our Commitments**

By 2028, more governments and institutions will have implemented, laws policies and protocols to prevent and appropriately respond to sexual and gender-based violence.

By 2028, there will be an increase in societal support for the prevention of sexual and gender-based violence, access to abortion and promotion of gender equality.

### **Act with Youth**

Young people are key drivers of change. As the most diverse generation the world has ever known, youth movements are intersectional and, in a digital age, observe few borders. We will work with youth to shape and deliver change agendas. We commit to going further on comprehensive sexuality education: expanding best practices and advocating for supportive legal frameworks. While continuing our offline work, we want to explore new digital avenues too. Hundreds of millions of young people get their information about sex and sexuality on-line. We will improve the quality of sexuality information on social media platforms and link better to care.

#### **Our Commitments**

By 2028, an increased number of adolescents recognise pleasure and the conditions necessary for clear, free, informed and meaningful consent as the foundation to safe, positive and equal relationships.

By 2028, more governments and education providers will have integrated comprehensive sexuality education into education policies, curricula and programmes, so that more young people are empowered with the information they want on sex, sexuality, care and equal relationships.

By 2028, a measurable positive shift in attitudes will have taken place amongst healthcare workers on providing respectful care to young people and people excluded from their communities.

By 2028, young social media influencers across the world will be inspiring conversations and answering questions on topics regarding sex and gender that are taboo or little discussed in our societies.

"Feminist grounding drives us, as MAs, to remove obstacles that pollute and stifle love and make it hard for so many to breathe. It drives us to be a disruptive force, rejecting gender injustices and marginalization of LGBTQ+ persons who are denied their human rights."

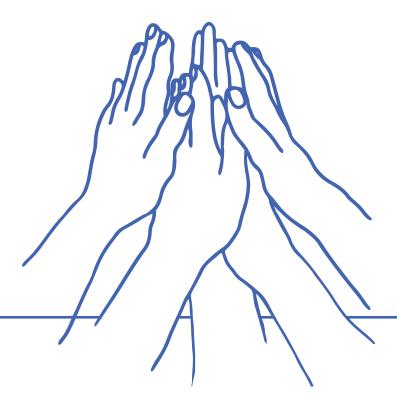
Patricia Sheerattan-Bisnauth, Caribbean Family Planning Association

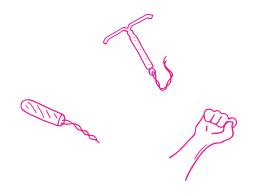
### **Solidarity for Change**

Goal: Amplify impact by building bridges, shaping discourse, and connecting communities, movements, and sectors.

From climate change to COVID or inequality, the problems faced in the world are many, complex and interconnected. As a sector, we are often treating symptoms and rarely the root causes. Global development agendas – such as the Sustainable Development Goals and Universal Health Coverage – underline the need for international collaboration. No sector can solve its problems alone. Only through solidarity can we hope to persevere.

In the next six years, IPPF will **come together** to build more bridges and forge greater alliances and partnerships. Working with our allies, we will define shared goals and action. We will support movements where they are, and on their terms. Together, we will showcase the best of civil society action and find inspiration in each other to create new ideas and innovation. To unleash the power of **solidarity for change**, we will follow three pathways:





Critical pathways	Support Social Movements	Build Strategic Partnerships	Innovate & Share Knowledge
Priority actions	Connect capacity	Collaborate across sectors	Grow the IPPF centers & funds
	Amplify messages	Build alliances & consortia	Communicate learning
	Re-grant to movements	Host & support community groups & networks	Incubate ideas & tech

"Leaders of today will not be facing the climate changes of the future to the same extent as the youth will"

Maria Jose Cisneros-Cáceres, Ohhh! Foundation

### **Support Social Movements**

All through history, social movements have been a means of affecting political and social change. Today they are as important and needed as ever. They are emerging, all over the world, in response to regressive political agendas. They refuse the future they are given. They are fighting back. In a digital age, they are often organic and without hierarchy or formal structures. They use social media or other digital means to connect, organise and expand their influence and impacts. IPPF commits to increasing our support for intersectional social movements that work in support of SRHR and for women and girls. We will not gate-keep or claim spaces. We will join and amplify messages to uphold human rights and tackle inequalities. We will leverage our network and voice to reinforce political calls to action. We will prioritise the protection of human rights defenders from opposition attacks.

#### **Our Commitments**

By 2028, narratives and media developed by grassroots partners and movements, and amplified by IPPF, will have had a political impact, and influenced public opinion.

By 2028, our providers, activists and other human rights defenders will have been protected from violence and harassment, and been linked with rapid response mechanisms.

### **Build Strategic Partnerships**

IPPF is built on partnering, solidarity and sharing. That is in our DNA. We depend on our relationships with each other, and with our donors, partners and allies. And they on us. Strengthening national health systems from within, we will co-ordinate and collaborate with our governments, private sector and sister organisations. Together we will fill gaps and meet need. Together we will set platforms for greater impact through strategic collaboration, within our sector and outside of it. We will organise forums, promote discourse and share strategic insights and intelligence. Where needed, we will host and support community organisations and interest groups. We will help set long-term foundations to grow.

#### **Our Commitments**

By 2028, IPPF and its partners will have delivered effective cross-sector campaigns positioning common agendas and priorities on intersecting issues, such as climate change, gender equality, and Universal Health Coverage.

By 2028, we will have deeply rooted partnerships and collaborations with intersectional movements everywhere we are present.

### Innovate & Share Knowledge

The SRHR sector is driven by learning and evidence. And our federation generates a wealth of data, research and insights about SRHR. But the power of knowledge lies in sharing it. We will prioritise communicating our data and research with our partners and allies. And we will seek to learn from them. The IPPF Centers & Funds will grow and take on greater roles in engaging with the world. In our countries, and as a federation, we will co-host meetings, seminars and conferences to deepen the dialogue. And we will invest in our culture of learning and innovating. We will explore ways to incubate new ideas and technologies that improve outcomes and better lives. We aim to decolonise research in IPPF by basing more of our research in the global south. We will build links with southern academia and thought leaders: to disrupt the sector's main flow of information, to expand the conversation and knowledge base.

#### **Our Commitments**

By 2028, the federation will have published a critical mass of evidence in recognised journals and influential media outlets that will influence policies and shape better SRHR practice.

By 2028, in a conscious effort to decolonise IPPF and our research agendas, we will have firmly established member association-led centers of learning, and our research and knowledge will be driven primarily, if not exclusively, from the global south.

By 2028, we will have funded and incubated innovations that transform implementation of SRHR programmes.

"There is a lack of trust and respect for local communities... You don't know the communities; you don't know what is important to them. We have to flip how we do funding and find feminist frameworks that work in terms of global health."

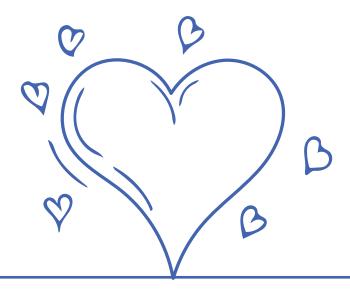
Dr Tlaleng Mofokeng: UN Special Rapporteur on the Right to Health, South Africa

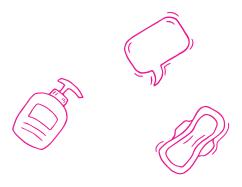
### **Nurture our Federation**

Goal: Replenish and nurture the federation from a common value base and unleash our collective power for greater impact.

IPPF was formed by eight brave national family planning organisations in 1952. In the 70 years since then, we have left our mark on the world. We continue to bridge social, cultural and political contexts from a shared belief in the universality of SRHR. We can be unwieldy and sometimes even divergent. But that is also a source of our power, our energy. It is what makes us IPPF.

In a world characterised by division and hatred, IPPF will grow from a place of love and inclusion. It will be nurtured. Over the next six years, we will **come together** to adapt the federation to a changing world. As we do so, we will re-examine and affirm our common values. Refining our look and feel to be seen widely and in the right places. We will find more kindred spirits to help **nurture our federation** with new members. We will build our mutual capacity. We will address our colonial legacies, improving related policy and practice. We will build better systems and supportive cultures for volunteers and staff. To **Nurture our Federation**, we will follow three critical pathways:





Critical pathways	Chart our Identity	Grow our Federation	Walk the Talk
	Draft federation charter	Find new members	Challenge discrimination
Priority actions	Renew our brand	Modernise systems & grow skills	Embrace gender & sexual diversity
	Build our culture	Mobilise resource & diversify income	Youth structures & leadership

"If our political clarity is not good on the inside, then it will not be on the outside."

Noelene Nabulivou, Gender Activist, Fiji

### **Chart our Identity**

As member associations, we will renew our commitment to IPPF and reconnect with our shared values. We will develop, jointly, a new membership charter to set out the values that we hold in common and the ethos that drives us forward. We will renew our brand to better signal who, collectively, we are: a federation with members at the heart, supported by a vibrant Secretariat, channelling national and international solidarity together.

#### **Our Commitments**

By 2028, members, driven by the rights and needs of those they serve, will be actively leading in the Federation's strategy development, implementation and review, sharing technical and programmatic expertise, power and talent to build a global movement for change.

Within the first year of our new strategic period, IPPF will build, develop and agree a shared expression of the values that link us together in the form of an IPPF charter.

By 2025, our common brand will be recognised as an expression of the universality of sexual and reproductive health and rights and of the global solidarity of our federation. Member Association names and brand proudly carry IPPF's kitemark.

### **Grow our Federation**

As a federation, our membership expands and contracts. That is normal. In the next strategic period, we will grow the federation, in the places where we are needed most. We will grow where there is high unmet need but also where there is policy influence. New members add experience, ideas, reach and energy. As members and the Secretariat, we will build skills and safeguard our staff and volunteers. Modernising systems, structures and governance are vital for our growth. They keep us frank and effective. We will keep on streamlining and building efficiencies. Growing in an uncertain funding landscape requires diversification, entrepreneurship, and financial discipline. We have learned much about financial sustainability and social enterprise. We will move from knowledge to practice and help fully resource our work.

#### **Our Commitments**

By 2028, we will have expanded our presence globally in selected countries with high SRHR needs; high unmet need for family planning, maternal mortality rate, adolescent pregnancy, gender inequality and countries with significant political priority.

By 2028, the federation will use modern and effective systems that link us and equip us to perform better, especially our core operational systems. Systems will be simplified and developed to strengthen performance, share impacts and learning outcomes globally and build our capacity.

By 2028, at all levels of the federation, we will have multiple models and pathways for sustainability with diversified funding sources, galvanising domestic financing.

### **Walk the Talk**

The federation must live by the values it holds. That is fundamental. We are deeply committed to breaking down the interconnected forms of discrimination and racism within IPPF and beyond. We will continue to push for gender equality and respect for sexual diversity, embedding intersectional and gender-transformative approaches in the way we work. Youth leadership is essential. It requires continuous investment and effort. We will avoid tokenism and build capacities. We will plan leadership transitions and invest in the continued contribution of young adults to the federation and to SRHR. Their passion feeds the future.

#### **Our Commitments**

By 2028, we will be recognised as a champion for anti-racism with an intersectional approach to non-discrimination and equity. We will reflect this in the balance of power between global north and south in our decision-making and resource mobilisation.

By 2028, the numbers of women in leadership across the federation will increase and we will increase the number of projects designed and implemented with affected communities.

"We need to go beyond an individual commitment. We need an institutional commitment that raises awareness, provides guidance and generates knowledge. We need internal culture change. Diversity begins at home."

Marta Royo, Profamilia Colombia

### **Annex 1**

## <u>Alignment with global</u> <u>agendas and strategies</u>



<sup>1</sup> https://sdgs.un.org/goals

<sup>2</sup> https://www.nairobisummiticpd.org/commitments

<sup>3</sup> https://www.guttmacher.org/about/strategic-framework



### **Annex 2**

### **Results Framework**

### CENTER CARE ON PEOPLE

Expand Choice
Widen Access
Advance Digital & Self Care

- 1. Proportion of [service providing] MAs/CPs providing IPES-plus AND meeting quality standards.
- 2. Number of clients served by type of services and model of care (including Digital Health Interventions (DHIs), facilitated self-care) with focus on adolescents and young people, people in humanitarian settings and other marginalized and excluded people.
- 3. Number of services provided by type 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.
- 4. Aggregated proportion of MAs'/CPs' contribution to the national SRH services provided in their countries.

# MOVE THE SEXUALITY AGENDA



Ground Advocacy
Shift Norms
Act with Youth

- 5. Number of successful policy initiatives and legislative changes in support or defence of SRHR.
- 6. Shifts in perception and attitudes in relation to gender equality and inclusion across the Federation and the communities we serve.
- 7. Quality, reach and impact of CSE, youth-centred care, and progress in youth engagement in the Federation.

### SOLIDARITY FOR CHANGE



- 8. IPPF's contribution in supporting social movements and defending activists.
- 9. Number of intra- and inter-sector campaigns delivered by the federation in support or defence of SRHR, through a diversity and decolonization lens.
- 10. Proportion of research and evidence initiatives generated by MA-led centres of learning that are from the global south.

### NURTURE OUR FEDERATION





- 11. Proportion MAs/CPs receiving less than 50% of their income from one single donor.
- 12. Overall Secretariat Efficiency Score.



"We say in India, if you have a bigger heart you will find more room for people to stay in your house. We can say the same for IPPF, with a bigger heart we can welcome more service users at the gold standard of care."

Abhina Aher, IPPF Board

