

Annual Report

2011 Highlights



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The International Planned Parenthood Federation is a global service provider and a leading advocate of sexual and reproductive health and rights for all. We are a worldwide movement of national organisations working with and for communities and individuals.

We work towards a world where women, men and young people everywhere have control over their own bodies, and therefore their destinies.

A world where they are free to choose parenthood or not; free to decide how many children they will have and when; free to pursue healthy sexual lives without fear of

unwanted pregnancies and sexually transmitted infections, including HIV.

A world where gender or sexuality are no longer a source of inequality or stigma. We will not retreat from doing everything we can to safeguard these important choices and rights for current and future generations.

The IPPF European Network is one of IPPF's six regions.

IPPF EN includes 40 member associations in as many countries throughout Europe and Central Asia.

Dear readers,

We are happy to share with you some highlights of our work in 2011. As you may know, in September 2011 IPPF welcomed the new Director General Mr Tewodros Melesse, and a change in leadership always means some new directions for an organisation. IPPF has a Strategic Framework focusing on the 5 A's (advocacy, access, adolescents (youth), abortion and (HIV) AIDS. This Framework is still in place until 2015 but these have now been reformatted under what we call the 'Three Change Goals': Unite, Deliver and Perform. **Unite** is all about advocacy and promoting sexual rights as human rights in the forthcoming global sustainable development framework or in other words – whatever the international community decides will be the successor of the Millennium Development Goals that come to and end in 2015. **Deliver** is built around our task of improving access to sexual and reproductive health information and services to ensure that as many women and couples as possible are able to plan

their families and have healthy and happy sexual lives. **Perform** is all about the way the Federation is conducting its business, based on advanced technology and systems that ensure impact, accountability and transparency.

You will notice that we have built our report around these Change Goals to give you a flavour of how this will be taken on board by the Regions and the Member Associations.

The elections for a new Regional Executive Committee (the board of the IPPF European Network) in June 2011 also brought some important changes, with 6 out of 9 members being new. We are extremely happy that for the first time we have a representative of Central Asia because it is very important that this, for most people less known part of IPPF's Europe Region, also has a voice in its governance. We also continue our groundbreaking work with the young people and I am happy to see that YSAFE is

strong and thriving, and that our young people are fully integrated in the work and governance of the Region and have become excellent advocates.

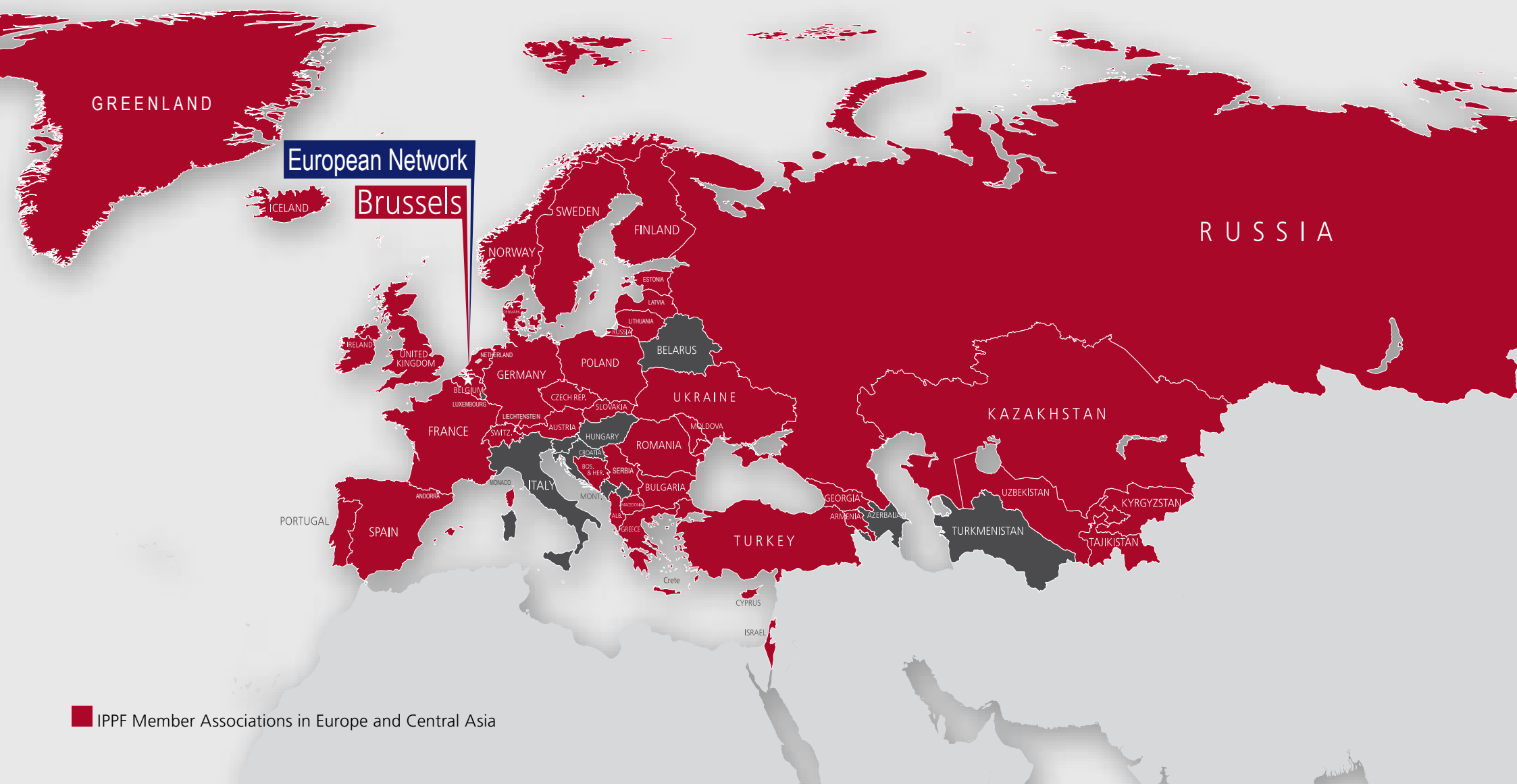
There are interesting and significant times ahead of us. Soon UNFPA will launch its global survey to governments to see what progress has been made in regard to their commitments on the Plan of Action of the International Conference on Population and Development (ICPD, 1994). On 11 July this year we will see the launch of the Family Planning Summit led by UKAID and the Bill and Melinda Gates Foundation. We are extremely happy that family planning is on the agenda again and we can only hope that governments will react positively to this initiative by recognizing the benefits of family planning for sustainable development and by allocating sufficient resources to ensure that their populations can have access to a wide range of modern contraceptives and other reproductive health commodities.

We have opted to keep the Annual Report short and sweet which means of course that we cannot do justice to all the activities our staff and volunteers have undertaken. IPPF would not be able to be as effective as it is without their constant support and the belief of our donors in the work we do. Therefore big thanks to all who contributed to our success.




Vicky Claeys,
Regional Director

The IPPF European Network Region



IPPF EN Member Associations¹

FULL MEMBERS

ALBANIA

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ESTONIA

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1. Membership list dated May 2012.

2. UN technical reference "The Former Yugoslav Republic of Macedonia"

UNITE



A global movement fighting for sexual rights and reproductive rights for all

What makes IPPF unique is that it is a Federation of independent grass roots civil society organisations around which women and men voluntarily organize themselves to respond to their local needs. As an international non-governmental organisation promoting human rights, social justice, democracy and sustainability, IPPF offers support to improve the sexual and reproductive health of populations as well as the tools to build up a strong civil society that has the potential to express their views and hold governments accountable for their promises and commitments.

Today, IPPF European Network (EN) is highly respected by a number of key European partners and stakeholders for its level of expertise and its holistic approach to a broad spectrum of issues linked to sexuality.

The IPPF EN Regional Office (ENRO) continues to play a strong role in building the capacity of Member Associations to participate in both domestic and international advocacy efforts. This includes working with strategic partners and other civil society organisations (CSOs), international organisations and parliamentarians to ensure the respect of

sexual rights and reproductive rights for all.

The wealth of knowledge and the diversity of experience of the 40 Member Associations that make up the IPPF European Network provide a solid base for learning, sharing and coordinating action.

Increasing Civil Society Participation and Government Accountability

Since 2008, the IPPF Regional Offices of Europe and Western Hemisphere Region (WHR) have teamed up with Member Associations in 11 countries in Latin America, Eastern Europe and Central Asia to increase the transparency and accountability of governments in regard to their promises to ensure universal access to reproductive health by 2015¹. Funded by DFID (UK Aid), the "Joining Forces for Voice and Accountability" is a five-year initiative focused on improving the ability of IPPF Member Associations to play a proactive role with other CSOs in influencing public policy around Sexual and Reproductive Health and Rights (SRHR).

In 2011, The Regional Office provided Member Associations with training in advocacy, monitoring and evaluation and coalition building following the political mapping that took place in 2010, as a first step, to enable Associations to assess the political situation in their respective countries.

As a result of this and earlier capacity building efforts under the project, the Member Associations of Albania, Bosnia & Herzegovina, Moldova, Kazakhstan, Kyrgyzstan and Tajikistan now lead SRHR-focused networks in their countries and represent civil society in key bodies or governmental coordination mechanisms to provide input on various aspects of government transparency and accountability, including government funding of SRHR programmes.

Addressing the unmet need for family planning in development cooperation

The IPPF EN Regional Office continued to fulfill its role as lead partner of 'Countdown 2015 Europe', a Consortium made up of 16

SRHR organisations, including 10 IPPF Member Associations, with strong track records of successful advocacy on the national level and with the European institutions. The group aims to increase European donor support for reproductive health and family planning in development cooperation through both policies and funding.

Since the end of 2010, the Countdown 2015 Europe has placed specific focus on reducing the unmet need for family planning as an essential component of sustainable development. In this new and exciting phase, the Consortium worked in partnership with CSOs from the global South, combining evidence

and experience from around the globe to formulate advocacy arguments for increased EU support to family planning. This resulted in the development of an advocacy toolkit including fact sheets and testimonies to build the case for family planning. The toolkit explores the linkages between family planning and some of the most pressing issues faced in current international discussions such as population dynamics, the environmental and climate change challenges, the economic crisis and the decline in funding for sexual and reproductive health services. It also illustrates how family planning programmes have a strong and central role to play in other development issues,

"Successful advocacy can happen when there is a team that is able to resist the opposition, that has a single purpose and the understanding and belief that you can change the quality of life for many people in your country, especially young people's health."

Galina Chirkina, RHAK Executive Director, Kyrgyzstan

¹ 2015 is the date set out in the United Nations Millennium Declaration for reaching the Millennium Development Goals (MDGs), in particular, MDG5 to 'improve maternal health' with targets 5A: Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio and target 5B: Achieve, by 2015, universal access to reproductive health.

including human rights, gender, education, maternal and child health.

Countdown 2015 Europe advocacy toolkit and fact sheets are available from www.countdown2015europe.org

Advancing the advocacy and fundraising capacities of the global South

One of the core principles of the Paris Declaration (2005) and the Accra Agenda for Action (2008), is that recipient-countries have ownership of their development processes. Therefore, access to donor resources will be increasingly at national levels and within sectoral or overall budget support and less at the regional and international levels.

In light of this new context, the IPPF Europe and Africa Regional Offices launched AMACSI, a joint initiative that began in January 2011, to (1) strengthen the advocacy and resource mobilization capacities of IPPF Member Associations of Cameroon, Senegal and Zambia and (2) to increase advocacy efforts with the African, Caribbean and Pacific (ACP) institutions to enhance policy support and funding for SRHR in the ACP countries.

So far, the IPPF Member Associations of Cameroon, Senegal and

Zambia have developed concrete advocacy and resource mobilization plans targeting their national governments and EU delegations in order to influence the policy priority setting, with the objective of including SRHR in their next Coun-

try Strategy Papers". The latter will provide the strategic framework for providing Community assistance in-country between 2014 and 2020.

In parallel, the IPPF EN Regional Office strengthened its relations with

the ACP Ambassadors, the ACP Secretariat and the EU institutions in an effort to gain increased political and financial support for SRHR.

An important achievement was the Regional Director's intervention at a

meeting of the ACP Sub-Committee on Sustainable Development which lead to the inclusion of recommendations by the ACP Committee of Ambassadors (one of the key bodies in the ACP/EDF decision making process) on the need to

IPPF EN's participation in 2011 key meetings and events:

- **April 11-15**, representatives of IPPF ENRO, YSAFE, 'Countdown 2015 Europe' and Member Associations of Albania and Bosnia & Herzegovina participated in the 44th session of the UN Commission on Population and Development, New York
- **April 29-30**, IPPF ENRO participated in the regional technical meeting: "Reducing Health Inequalities in Eastern Europe and Central Asia" organized by UNFPA EECARO in Istanbul, Turkey
- **May 24-28**, IPPF ENRO organized a 2-day Regional HIV competencies workshop during the regional European HIV conference: "HIV in the Europe Region – Unity and Diversity" organized in Tallinn, Estonia
- **June 8-10**, UN High Level Meeting on HIV/AIDS, New York
- **June 20**, the Reproductive Health Supplies Coalition (RHSC) Annual Meeting, Addis Ababa, Ethiopia
- **October 13**, The Regional Office attended the EuroNGOs Annual General Meeting, Warsaw, Poland
- **October 26-27**, IPPF EN participated in the UNFPA/WHO joint resource workshop on Roma Health, in Istanbul
- **October 31**, IPPF EN Senior Advocacy Advisor made an intervention on the role of Girls and Family Planning in a world of 7 billion, at the Info Point of the European Commission
- **November 8**, IPPF EN Regional Director chaired a meeting for the Centre for Parliamentary Studies on Sexuality Education in Brussels
- **November 22**, IPPF European Network, the Countdown 2015 Consortium and Marie Stopes International organized a cocktail reception at the European Parliament where IPPF EN Programme and Advocacy Director spoke on the specificity of the unmet need for Family Planning.
- **November 28**, Countdown 2015 Europe Coordinator participated in a panel discussion and YSAFE representatives ran a poster session at the International Conference on Family Planning in Dakar, Senegal
- **On World AIDS Day**, IPPF EN, along with other SRHR and HIV organisations, organized a public event at the European Parliament.
- **December 7-8**, IPPF EN took part in the meeting: "Family Planning and Contraceptive Security: Taking Stock and Looking Forward" and presented the results of its study on understanding obstacles to the use of modern contraceptives at the premises of the UNFPA EECARO, in Istanbul.



AMACSI participants' tour of the EU institutions, Brussels, March 2011

support SRHR and inviting the ACP Council of Ministers to take note of the necessity for ACP governments to invest in women's health and promote the inclusion of MDG5 in national strategy documents.

This significant breakthrough is no accident – it is also the result of the ongoing coordination of advocacy that has delivered results over the past 10 years.

Young people – the advocates of today and the future

One such example of actions that will ensure the future sustainability of our advocacy work is the creation of strong pools of young SRHR advocates, enabling European and African future young generations to be heard

in international arenas where policies are decided.

Our young advocates have also inherited skills from the Dutch government-funded project 'Youth Link', a joint SRHR youth movement created together with the European Youth Forum (YFJ) and designed to improve the advocacy and communication capacities of YSAFE and YFJ members to speak at major regional meetings, addressing youth issues.

In 2011, YSAFE participated in high level events such as the Commission on Population and Development (CPD) in New York, the High Level Meeting (HLM) on Youth in New York, the UNFPA regional youth meeting in Istanbul, the Catholic World Youth Days in Madrid, the

Youth Change Makers workshop in Warsaw and the Family Planning Conference in Dakar.

IPPF EN young volunteers also gained advocacy skills and experience under SAFE II, a 3-year project (2009-2012) launched by IPPF EN and co-funded by the European Commission.

SAFE II sets out to provide an overall picture of the patterns and trends across the region in order to develop new and innovative ways to reach young people with SRHR information and services, and to inform, support and advance policy development. The project aims to improve the sexual health and rights of young people in Europe and has a strong, mainstreamed component on youth participation.

The mid-term evaluation of the project showed that this has proved to be an empowering process for the young people involved.

A global movement fighting for sexual rights for all

IPPF is dedicated to promoting and defending sexual rights as human rights and to ensure that they are

fully recognized in international and national Human Rights instruments.

IPPF ENRO continued to work with the Institutions of the European Union, particularly the European Commission, as well as with the Council of Europe (CoE) and civil society groups such as Amnesty International with whom we advocated around the CoE Convention on Violence against Women.

The Regional Office is also proud of the excellent results obtained by the Member Associations of Ireland (IFPA) and Lithuania (FPSHA) who actively took part in the Universal Periodic Review (UPR) process together with The Sexual Rights Initiative². The UPR is the United Nations mechanism whereby all 192 UN Member States are allowed to examine the human rights records of their fellow nations once every four years.

The IFPA highlighted the ways in which the criminalization of abortion in Ireland violated women's and girl's rights to health, privacy, life, freedom from cruel and degrading treatment, and non-discrimination. The FPSHA drew attention to the obligation of Lithuania to respect, protect and fulfill the rights of adolescents to sexual and reproductive health including

through evidence-based sexuality education and access to health services.

Both submissions, along with their intensive advocacy efforts, resulted in forceful recommendations from UN member states on these issues.

At the review of Ireland's human rights' obligations, six countries: France, Denmark, UK, Slovenia, Spain, and the Netherlands made recommendations to Ireland in relation to the restrictive abortion regime in Irish law. They also called for firm timelines for the implementation of the judgment of the European Convention and Human Rights in the case of A, B and C v Ireland³.

According to the Executive Director of IFPA, "although none of the recommendations on abortion were accepted, the Minister for Justice made a commitment to address the A, B and C judgment in an 'adequate and comprehensive' manner and to 'meet our obligations under the Convention on Human Rights'."

Ireland's human rights record will be reviewed again under the UPR in 2015 and the IFPA will report on whether the Minister for Justice has honoured his commitment.

² The Sexual Rights Initiative is a coalition of organisations, including IPPF working to advance sexual rights at the UN Human Rights Council.

³ In cases brought against Ireland by three women - A, B and C - the European Court of Human Rights made a unanimous decision on 16 December 2010 that abortion, in certain circumstances, should be legalized in Ireland.

DELIVER



Access for all to reduce the unmet need for sexual and reproductive health services

In a number of countries of Eastern Europe and Central Asia, the use of modern contraceptive methods such as the hormonal pill and intrauterine device (IUD) is alarmingly low.

According to the UNFPA State of the World Population 2011 report¹ there are 5 countries in our region (Albania, Armenia, Bosnia and Herzegovina, the Republic of Macedonia² and Serbia) where the average percentage use of modern contraception is lower than the average in the *least-developed* countries³ in the world, and there are 15 countries where the levels are lower than the average percentage use of modern contraception in the *less-developed* regions⁴.

Figures also show that a large proportion of women in many

countries of the Eastern Europe-Central Asia region are trying to avoid pregnancy using traditional methods such as periodic abstinence and withdrawal.

In Albania, the majority of currently married women (59 percent) rely on traditional methods of contraception to delay or prevent a pregnancy; this is more than five times the proportion (11 percent) who use modern methods of contraception⁵.

In 2011, the IPPF EN Member Associations of Armenia, Bosnia and Herzegovina, Bulgaria, the Republic of Macedonia, Kazakhstan and Serbia together with a partner organisation in Azerbaijan undertook a qualitative analysis of behavioural patterns and cultural norms influencing contraceptive access and utilization.⁶ The study was managed

and coordinated by the IPPF EN Regional Office with funding from the UNFPA Global Programme to enhance Reproductive Health Commodity Security.

According to study findings, the use of modern methods of contraception in these middle-income countries is influenced by the following factors: perception of modern (hormonal) contraception as harmful; poor counselling; lack of government commitment to contraceptive security; cost; and a limited range of contraceptives available on the market, so restricting client choice.

The outcomes of the study will be presented at a High Level Meeting to be held in 2012. The recommendations will hopefully result in the development of an

“The doctor says withdrawal is better than the IUD as the IUD is not suitable for women under age of 32.”

A young woman from Azerbaijan; extract from “Key Factors influencing contraceptive use in 7 middle-income countries”

action plan for the Member Associations to work together with their governments to improve the situation.

Reaching young, poor and vulnerable people

As part of IPPF’s ‘Global Comprehensive Abortion Initiative’ (GCAI), IPPF EN Regional Office continued to provide technical support and capacity building to its Member Association of Kyrgyzstan to

deliver high-quality abortion-related services. The Member Association also benefited from the introduction and implementation of an electronic clinic management information system (eCMIS) to improve the overall clinic performance and quality of care for the provision of services.

As a result, RHAK, have now firmly established themselves in their country as expert providers and enablers of comprehensive abortion care.

¹ UNFPA, State of the World Population, 2011

² UN technical reference “The Former Yugoslav Republic of Macedonia”

³ Least-developed according to standard UN designation

⁴ According to UNFPA, State of the World Population, 2011, Less-developed regions comprise all regions of Africa, Latin America and Caribbean, Asia (excluding Japan) and Melanesia, Micronesia and Polynesia

⁵ According to latest DHD Survey

⁶ “Key Factors influencing contraceptive use in 7 middle-income countries” is available from IPPF EN website via: <http://www.ippfen.org/en/Resources/Publications/Key+factors+influencing+contraceptive+use.htm>



Participants of the IPPF EN
HIV Competencies Workshop,
Tallin Estonia, 24 & 28 May 2011

The Kyrgyz Member Association provided several trainings on medical abortion and manual vacuum aspiration as well as on pre- and post-abortion counselling, training a total of 97 healthcare specialists from 10 partner clinics and 20 various healthcare organisations.

One of the most significant results of RHAK's training sessions has been the number of partner clinics which have moved to using safe abortion techniques such as manual vacuum aspiration and medical abortion, whereas previously most abortions were performed using dilatation and curettage, contributing to the high level of post-abortion complications.

Of particular note was the increase in the number of clients in RHAK's clinics in Bishkek (the capital city) and Karakul. At the end of 2011, the number of women provided with comprehensive abortion care services increased by 160% compared to the first semester of 2011. Post-abortion contraception was accepted by between 92% and 99% of clients who received an abortion or treatment for incomplete abortion during the same period.

Strategies which proved successful in increasing access to safe abortion services and contraceptive services during this period include:

- reducing user fees or exempting clients who are poor, marginalized and/or socially excluded
- working with local youth groups in order to increase referrals to RHAK services

Increasing voluntary counselling and testing services for HIV/AIDS

Unlike most other IPPF Regions, the number of people dying from AIDS-related causes continues to rise in Eastern Europe and Central Asia. The HIV epidemic claimed an estimated 83,000 lives from AIDS-related causes in 2010 – 11 times more than the estimated 7,800 deaths in 2001⁷.

Only 23% of people eligible for antiretroviral therapy in Eastern Europe and Central Asia were receiving it in 2010⁸. A substantial percentage of people living with HIV are not yet diagnosed and there are crucial

countries like Russia that still lack sufficient government involvement.

The Regional Office organized a workshop prior to the European HIV Conference where the Member Associations of Albania, Bosnia and Herzegovina, Bulgaria, Estonia, Kazakhstan, Latvia, the Republic of Macedonia, were able to exchange best practices and research findings in the field of HIV/AIDS prevention and treatment. Special attention was given to HIV related stigma and discrimination and how to build national support groups and networks for people living with HIV. IPPF EN was the only organisation to bring young people to the Conference. The Regional Office took the opportunity provided by the Conference to highlight the sexual and reproductive rights of people living with HIV.

Among the most notable achievements drawn from IPPF annual global indicators data that were presented during the workshop is the strengthening and expanding of sexual and reproductive health services to young people in Albania with a five-fold increase in

⁷ Global HIV/AIDS Response-Progress Report 2011 http://www.unaids.org/en/media/unaids/contentassets/documents/unaidspublication/2011/20111130_UA_Report_en.pdf

⁸ UNAIDS Data Tables 2011 http://www.unaids.org/en/media/unaids/contentassets/documents/unaidspublication/2011/JC2225_UNAIDS_datatables_en.pdf

“IPPF EN initiated the development of new approaches to improve the sexual and reproductive health and rights of persons with disabilities.”

the number of condoms distributed to youth between 2009 and 2011.

IPPF Member Association of Albania (ACPD) has been working effectively to offer solutions to HIV/sexually transmitted infections (STIs) prevention under their youth friendly services project in their Tirana, Vlora and Shkodra centres. The increase in distribution of condoms is related to the high number of activities ACPD organized in school settings. ACPD paid particular attention to the involvement of previously unreached groups such as young people living with HIV and young Roma people. ACPD also introduced and provided for the first-time screenings for STIs in their three centres as part of a much larger initiative to ensure that clients receive integrated STIs/

HIV and sexual and reproductive health services.

Addressing the SRHR needs of people with disabilities

IPPF EN initiated the development of new approaches to improve the sexual and reproductive health and rights of people with disabilities. Five Member Associations in the Region exchanged best practices in addressing the sexual and reproductive health needs of people with disabilities. The IPPF Member Association of Israel, for example, received funding from the Innovation Fund (as mentioned hereafter) to continue to provide peer education training to physically and sensory disabled professionals, qualifying them to deliver sexual and reproductive health rights workshops to adolescents with disabilities.

IPPF Innovation Fund

In 2011, the IPPF Member Associations of Israel, Sweden, Poland, the Netherlands, UK Northern Ireland carried out projects funded by the IPPF Innovation Fund which either ended in 2011 or are still ongoing:

- **Israel**

IFPA has been implementing a project on identification and prevention of sexual assault of adolescent youth with physical and sensory disabilities.

- **Sweden**

RFSU informs politicians and other key decision-makers who have a role in the response to HIV and/or criminal justice about the international debate on HIV and criminalization in order for them to question and review the current restrictive Swedish legislation criminalizing HIV.

- **Poland**

TRR assessed the needs and provision of sexual and reproductive health and family planning services for refugees in Poland. This also included the provision of services, counselling and trainings for refugees/immigrants.

- **The Netherlands**

Rutgers/WPF implemented a project entitled “Totally Secsy...!, Comprehensive Sexuality Education & services for chronically ill or disabled young people, care providers and parents”

- **UK Northern Ireland**

The UK Family Planning Association (FPA) Northern-Ireland Branch has been working to secure reproductive rights for women, openly challenging the UK abortion law which has never been extended to Northern Ireland.

The Innovation Fund was established by IPPF in 2005 as an internal funding mechanism to promote ground-breaking initiatives around the five strategic priorities (the Five As). The Innovation Fund encourages and supports the Member Associations to try new approaches and ideas that push the boundaries of their usual programme.

PERFORM



Working towards a relevant and accountable Federation

IPPF European Network has continued to invest in the long term development of sustainable Member Associations actively promoting sexual and reproductive health and rights.

A core mission of the European Regional Office is to build the organizational capacity of its Member Associations which includes the promotion of exchange visits between Associations.

Organizational learning and evaluation

Judging from the yearly performance-based assessment of grant-receiving Member Associations, it has become obvious that Member Associations are no longer in need of technical expertise merely in the areas of sexual and reproductive health and rights but also in areas such as management and finance. This is also very much a consequence of the increased demands on civil society to deliver results and ensure impact, accountability and transparency.

Within this context, the Regional Office organized capacity building through training in management and leadership for a group of Executive Directors from the Member

Associations of Albania, Bosnia & Herzegovina, Georgia, Kazakhstan, the Republic of Macedonia, and Tajikistan, following on from a similar training session organized at the end of 2010 for another group of Executive Directors from grant-receiving Member Associations.

The Regional Office is also actively seeking innovative ways to decentralize the opportunities for organizational learning by “matching” Member Associations with common interests and sharing experience between those with the expertise and those who are interested to learn. Following previous assistance provided in 2010, the Member Association of the Republic of Macedonia (HERA) went on a study visit to the Member Association UK FPA Northern-Ireland branch to learn more about their project on improving access to sexual and reproductive health and rights for people with learning disabilities. The Member Association of Bulgaria (BFPA) provided technical assistance to the Associate Member of Serbia (SRH Serbia) to improve the latter country's policy with regard to health mediation for the Roma community.

This approach of ‘MA to MA’ assistance has now been evaluated

and the results show that the initiative is the most successful when the Member Association that benefited from the learning integrates the specific programmatic tool or focus area in the organisation's overall programme and commits time and resources to allow the new skills to have an effect. Overall, there has been a positive result which still continues to contribute to improved programmatic results of the Associations involved.

IPPF ENRO also produced an important monitoring and evaluation toolkit for advocacy activities within the framework of the DFID (UK Aid)-funded project “Joining Forces for Voice and Accountability” involving 6 Member Associations from Central and Eastern Europe and Central Asia. The toolkit aims to support Member Associations in their efforts to effectively map out and evaluate progress in their advocacy work. This user-friendly guide has also been translated into Russian. By using this toolkit, Member Associations have reinforced their logical frameworks, improved their daily practice in monitoring and evaluation of advocacy activities and strengthened the quality of their reports.



IPPF EN Accreditation review team in Samarkand, Uzbekistan, October 2011
From left to right: Carine Vrancken (volunteer), Sarah Wong (Accreditation Advisor) and Shirin Rashidova (UARH Programme Coordinator)

IPPF's accreditation system

In 2011, the Member Associations of Albania, Bosnia and Herzegovina, Bulgaria, Denmark, Georgia, and Sweden were approved by the Governing Council for reaccreditation. Accreditation reviews were conducted for Armenia, Austria, Greece, Hungary, Latvia, Poland, UK and Uzbekistan.

The accreditation process is intended both as an accountability tool

and as a moment for reflection, improvement and learning. The membership standards ensure that work is carried out to essential standards and that the principles the Federation stands for are upheld.

Experienced, knowledgeable and dedicated people are the most important part of IPPF's accreditation system. The review team consists of volunteers from peer Associations and IPPF Secretariat staff. We are thankful for the time and commitment that our volunteers give

“The process of accreditation gives an Association a chance to ‘stand still’ and look at its own work. It gives time and space for reflection, consideration and evaluation. During our stay in Uzbekistan, I was overwhelmed with admiration for the enthusiasm and courage of the personnel and volunteers of the Association. I was inspired by their creativeness and strategic way of working in a difficult environment. Their perseverance and strength can only make me humble.”

Carine Vrancken- Sensoa (Belgium), a 2011 volunteer

to sharing their experiences with others.

System Strengthening

The increased demand for indicators means that the collecting of reliable data is extremely important.

As part of IPPF’s Global Comprehensive Abortion Care Initiative (GCACI), the clinics belonging to the Member Associations of Albania and Kyrgyzstan were equipped with the electronic Clinical Management Information System (CMIS). This open source medical practice management system is being used in different Regions of IPPF to institutionalize client-centred recording and filing and allows the recording of data on services and/or products provided for each client’s visit.

One of the main aspects of the system is that it can easily generate reliable data reports. When generating reports on a regular basis, Member Associations and their clinics will be able to use the findings as a management tool at clinic or Member Association level to improve performance and quality of care.

Global Indicator Survey and Statistics

The Global Indicators (GI) programme was initiated in 2004 to monitor the implementation of IPPF’s strategic framework (2005-2015) and to identify areas where future investment is needed. Thirty Global Indicators were identified and are measured annually. Member Associations are asked every year to complete an online survey and a service statistics module to feed into IPPF’s GI data.

The Regional Office uses the survey and service statistics results to identify where technical assistance is needed. The data also feeds into the performance reviews of the Member Associations, the results of which are taken into consideration for resource allocation. The data is also used by Member Associations to improve programmes and performance, for resource mobilization and for advocacy.

In 2011, key achievements within our Region include:

- 784,141 sexual and reproductive health services provided to young

people by 19 Member Associations delivering services. This means that slightly more than half of all services delivered were provided to clients under 25 years of age.

- 45 per cent of Member Associations have at least 20 percent young people on their governing board.
- A total of 42 successful national policy initiatives and/or positive legislative changes occurred in support of sexual and reproductive health and rights to which Member Associations have contributed.

According to service statistics data, the Member Association of Kyrgyzstan ranked third among the top providers of abortion-related services in the European Network. They stepped up their service delivery by providing 53 percent more abortion-related services than in 2010. The Kyrgyz Member Association also reported a notable increase in the number of poor marginalized, socially excluded or underserved clients: from 60% in 2010 to 80% in 2011.



IPPF EN Regional Executive Committee Members

Presided by Joanna Dec, Poland, the elected members of the Regional Executive Committee (REC) are (from left to right):

Lene Stavngaard, Vice President

Foreningen Sex & Samfund, Denmark

Luize Ratniece, Youth Representative

Latvijas Ģimenes Planosanas un Seksualas Veselības Asociācija 'Papardes zieds' (LAFPSH), Latvia

Iurii Arian, Youth Representative

Societatea de Planificare a Familiei din Moldova (SPFM), Moldova

Joanna Dec, President

Towarzystwo Rozwoju Rodziny (TRR), Poland

Rakhima Nazarova

Uzbek Association on Reproductive Health (UARH), Uzbekistan

Gabriel Bianchi

Slovenska spoločnosť pre plánovanie rodicovstva a výchovu k rodicovstvu (SSPRVR), Slovak Republic

Kristina Ljungros

Riksförbundet för Sexuell Upplysning (RFSU), Sweden

Bert van Herk, Treasurer

Rutgers WPF, The Netherlands

Kelly Mackey

Irish Family Planning Association (IFPA), Ireland

Regional Office Staff

Vicky Claeys
Lucy Cady
Ron Amey

REGIONAL DIRECTOR
Executive Assistant
Administrative Assistant

Christian Vandamme

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ADMINISTRATION**

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Halil Karatas
Paul Yang
Kristos Argiro

Senior Finance Advisor
Senior Finance Advisor
Bookkeeper
Senior IT Advisor

Elizabeth Bennour

Eef Wuyts
Irene Donadio
An Huybrechts
Marie-Agnès Lenoir
Irene Hernandez
Elena D'Urzo
Gina Wharton
Ariane Vaughan

**DIRECTOR ADVOCACY AND PUBLIC
AFFAIRS**

Manager International Advocacy
Senior Advisor, Public Affairs
Senior Advocacy Advisor
Senior Communications Advisor
Resource Mobilization Advisor
Advocacy Officer
Advocacy Officer
Administrative Assistant

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Soizick Martin
Marieka Vandewiele
Karolien Dekkers
Sarah Standaert
Sarah Wong
Andrea Rotondo
Jakub Skrzypczyk
Jola Skubiszewska

DIRECTOR PROGRAMME
Senior Programme Advisor
Senior Programme Advisor
Programme Advisor
Programme Advisor
Accreditation Advisor
Accreditation Officer
Ysafe Intern
Administrative Assistant

Financial Statement 2011

The IPPF European Network (IPPF EN) financial statement provides a summary of the 2011 income and expenditure of the Regional Office in Brussels.

The IPPF EN is a network of 40 Member Associations in as many countries throughout Europe and Central Asia. These Associations are financially autonomous and report independently. Their accounts are therefore not included in this statement.

1. Income

The total income of the IPPF EN Regional Office amounted to € 5.89 million.

The sources of Income:

- € 1.84 million from IPPF HQ in London mainly generated by contributions from Governments
- € 3.84 million restricted grants from various donors
- € 0.21 million from other income, mainly exchange gains and interest.

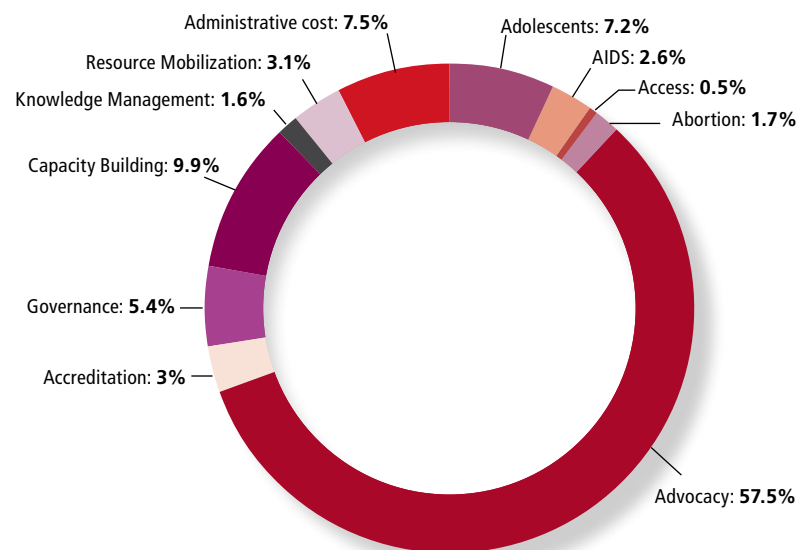
2. Expenses

The total expenses of the Regional Office amounted to € 5.85 million, broken down as follows:

- € 1.83 million indirect costs including salaries, rent, consultancies, governance and technical assistance to Member Associations
- € 3.84 million costs related to restricted projects and
- € 0.18 million other charges, mainly exchange losses and bank charges.

These expenses can be broken down by IPPF Strategic Priorities and Supporting Strategies as follows:

Split of 2011 Actuals by Strategic Priorities



In 2011 the 16 grant-receiving countries were:

Albania, Armenia, Bosnia and Herzegovina, Bulgaria, Georgia, Kazakhstan, Kyrgyzstan, Latvia, Lithuania, Republic of Macedonia, Moldova, Romania, Russia, Tajikistan and Ukraine.

- Support to Uzbekistan was provided through UNFPA.

3. IPPF EN Member Associations

IPPF provided core funding to 16 Member Associations in the Region for a total amount of € 1.02 million (\$ 1.36 million).

Thanks to

IPPF EN wishes to thank the following donors for their generous support:

- The Bill and Melinda Gates Foundation
- The European Commission
- DFID (UK Aid)
- UNFPA (United Nations Population Fund) EECARO
- UNAIDS (Joint United Nations Programme on HIV/AIDS)

Thanks to our volunteers

In 2011, IPPF EN was a member of the 'European Year of Volunteering 2011 Alliance', an open, informal and growing group of European networks active in volunteering and which used EYV 2011 to say:

"THANK YOU": Celebrating and recognising the efforts and contribution of volunteers throughout Europe.

In 2011, former YSAFE chair person and long-time active member Daniel Kalajdjieski (from the Member Association of the Republic of Macedonia) won the IPPF Youth Award for his outstanding work.



*Daniel Kalajdjieski,
IPPF Youth Award 2011*

"As a volunteer-based organisation, volunteers are central to IPPF and to our future. We believe volunteers are essential to any NGO or civil society group as it is often the only way to raise the voice of the public and to ensure that NGOs are formulating the needs of society and not just their own needs as organisations."

Vicky Claeys, IPPF EN Regional Director

Cover photo:

FPFE/Alberto Vicente/Spain. Photo graciously provided by Alberto Vicente/FPFE for the purpose of this publication. This photo was part of a photographic competition and exhibition entitled "Focus on health and reproductive rights" organized by IPPF Member Association, FPFE, in 2011 as part of a 3-year project (2010-2012) on the theme of Sexual and Reproductive Rights.

Inside photos:

- P 6 IPPF EN/ Felix Nedelcu/YSAFE volunteers at IPPF EN Regional Council 2011, Gent, Belgium
- P 9 IPPF EN/Marie Lenoir/AMACSI tour of the European Parliament, March 2011
- P 10 IPPF EN/Malin Palm /Board Member of RHAK and Clinic Manager, Karakul, Kyrgyzstan
- P 12 IPPF EN/participants at IPPF EN HIV Competencies Workshop, Tallin, Estonia, May 2011
- P 14 IPPF EN/Felix Nedelcu/IPPF EN Regional Council 2011
- P 16 IPPF EN/Sarah Wong/Accreditation review visit, Uzbekistan

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