

A conversation with Dr. Yilma Melkamu and Emma Bakhle, June 21, 2017

Participants

- Dr. Yilma Melkamu – Director, Programmes Division, International Planned Parenthood Federation
- Emma Bakhle – Manager, High Value Partnerships, International Planned Parenthood Federation
- Josh Rosenberg – Senior Research Analyst, GiveWell
- Chelsea Tabart – Research Analyst, GiveWell

Note: These notes were compiled by GiveWell and give an overview of the major points made by Dr. Melkamu and Ms. Bakhle.

Summary

GiveWell spoke with Dr. Melkamu and Ms. Bakhle as part of its investigation into funding opportunities in the family planning space. Conversation topics included the International Planned Parenthood Federation's structure, priorities, monitoring, and innovation program.

Structure and work of International Planned Parenthood Federation (IPPF)

IPPF is a federation of locally owned, independent civil society organizations (Member Associations) operating in 164 countries. The majority of Member Associations receive grant funding from IPPF but many also mobilize other sources of funding.

IPPF focuses on providing integrated¹ sexual and reproductive health services including family planning services, through a distribution network that includes Member Association-owned static clinics and through mobile clinic and community outreach. It also implements programs focused on advocacy, empowering communities, and building institutional capacity.

In 2016, IPPF delivered 152.9 million sexual and reproductive health services in countries with low or medium human development. Of these, 62.9 million were family planning services, an increase of 13 million since 2014.

IPPF targets funding and services to areas where the unmet need for contraception is high or to populations that are especially underserved, such as young people, people with low incomes, and people affected by crisis. About 80% of its services go to poor and/or marginalized groups.

¹ http://www.who.int/healthsystems/technical_brief_final.pdf

Measurement of outcomes

IPPF Member Associations use available national and sub-national data including the Demographic and Health Surveys and data from research institutions and governments for programming.

IPPF collects data on services provided and other key indicators from each Member Association service delivery unit which is fed through regional offices to headquarters in London. These service statistics data are used to monitor progress and set priorities. IPPF conducts regular data quality assessments which entail regional or country-level staff attending clinics, independently checking data and providing feedback. IPPF's Annual Report² reports the aggregate numbers of services IPPF member associations provided based on this data, following data cleaning.

IPPF promotes evidence-based programming and innovations supported by research. For instance, IPPF's in-house innovation program collaborates with universities to test new service delivery or community mobilization approaches. The tested approaches are selected from member association proposals following a competitive process. Examples of active projects include:

- testing how social media and mobile technology can increase uptake of contraception by young people,
- testing an approach to improve access to safe abortion services in humanitarian settings, and
- testing approaches to engage men and boys in sexual and reproductive health.

All GiveWell conversations are available at <http://www.givewell.org/conversations>

² <http://www.ippf.org/resource/ippf-annual-performance-report-2016>