

Improvement Analysis IPPF – International Planned Parenthood Federation October 2018

Responsible stewardship for the environment (C4)

The report states that IPPF's programmes and services do not have any inadvertently adverse environmental impacts as they are carefully planned health services. All Member Associations are required to reduce harmful impacts in line with IPPF's [Membership Standards](#), and to provide evidence of compliance to the Governing Council – however, there is no guidance in the Standards as to how to do this, or any targets which members should aim for.

Some good practices from members are provided, including waste disposal initiatives and the Swedish member deciding to undertake an annual environmental certification.

In the previous report, information was provided on greenhouse emissions of the Central Office, and it was stated that carbon management and reporting software would be implemented across all Secretariat offices, allowing for consolidated reporting as well as the development of key performance indicators. The Panel would like an update on this in the next report, as well as information about whether Member Associations also track their emissions. Are there any initiatives to reduce emissions by, for example, reducing air travel; or to compensate for emissions through carbon offsetting?

What other initiatives are in place across the Secretariat and wider federation to reduce environmental impact? The previous report had mentioned energy-saving, recycling, and reducing paper wastage.

Key stakeholders and how they are identified (D1)

IPPF's key stakeholders include their employees, volunteers, clients, activists, donors, and governments. The report did not however explain how stakeholders are identified.

The previous report had stated that IPPF's five core values (social inclusion, diversity, passion, volunteerism, and accountability) guide decision-making with respect to key



stakeholder groups. The Panel repeats its request for more information about how this works in practice – what are the actual processes for identifying and selecting stakeholders? Is stakeholder mapping/analysis undertaken when initiating a project or campaign? Is there a policy or any guidance on stakeholder identification?

Reaching out to those impacted or concerned by your work (D2)

The report states that IPPF uses a range of media and strategies to communicate with those interested in their work, and that 140.7 million people were reached in 2017 – an impressive 25% increase from 2016. IPPF targeted high profile media platforms such as the BBC and Al Jazeera, but still reached over half of its audience through offline means such as publications, public events, and drama.

In future reports, the Panel would also like to hear how IPPF reaches out to affected populations and other key stakeholders such as governmental authorities. An example is provided of sensitization sessions regarding child marriage with communities in Malawi. Are there systems or processes guiding engagement with stakeholders throughout programmes or campaigns, from planning and implementation to feedback and monitoring? Does IPPF employ any particular methods to appeal to particularly vulnerable or marginalised people, or on the other hand to community leaders who might initially be opposed to IPPF's work?

Stakeholder engagement in strategic planning and decision making could also be addressed under this section of the report in future.

Evidence regarding the root causes of the problems you address (F1)

The report states that IPPF uses data from reputable government, private, civil society and sexual and reproductive health sector sources when designing advocacy and policy positions. Well-researched positions are said to increase the effectiveness of IPPF's initiatives.

However, the Panel repeats its request from its previous feedback letter to provide more information on the actual process by which advocacy and policy positions are developed. Which stakeholders are consulted? Are positions reviewed periodically? How is corrective action taken when necessary?

The Panel suggests IPPF refer to CARE International's [Advocacy Handbook](#), which details their advocacy planning and implementation process, as an example. CARE identifies problems and their root causes using tools such as problem trees, conducts contextual analysis and ongoing research to stay abreast of any changes to the issue, and considers other actors and CARE's added value in addressing the issue.