

Family Planning and SRHR: A to-do list for the EU until 2020

The Needs

Investments in family planning (FP), a key enabler for sustainable development, need to be increased worldwide: according to the [EU results report 2015](#), the 'number of women using any method of contraception' declined from over 43 million in 2013-2014 to 13.2 million in 2014-2015.

Although EU institutions are key donors for FP in absolute terms, this sector represents only a very small share (0.25 %) of its overall Official Development Assistance (ODA), which puts the EU institutions ranking [22nd out of 29 OECD DAC donors](#).

Development Cooperation Instrument

Current State of Play

Since 2014, the family planning/sexual and reproductive health (FP/SRH) objective under the Global Public Goods and Challenges (GPGC) programme was given funding only once: €20 million. This represents **only 3% of the total for human development (HD) and 7% of what is earmarked for health under the Multiannual Indicative Programme (MIP) of the GPGC**.

What should happen between 2017 and 2020?

All DCI programmes have to complement each other to meet the EU's 20% benchmark funding commitment for basic social services. To have impact, the following structural changes to the DCI thematic programmes are needed:

The GPGC, with a focus on Human Development (HD):

- **Refine definition of HD** and exclude those areas that are better served by other channels
- **Health should remain the area with the highest share** of funding under HD (at least 42-47%)
- The health sector under HD should not only maintain its objective to **'Improve access to essential health commodities and SRH services'** but also ensure it is properly resourced and **receive much more than 3% of the total HD envelope or the 7% earmarked to health**
- The health sector under HD should include more diversified aid modalities, **such as for support for CSOs** through a mix of funding modalities including calls for proposals.
- Increase the percentage of **funds for gender equality and youth empowerment** under the HD programme (currently only 9-13%). Similarly, **increase significantly the financial envelope** that supports the implementation of the **Gender Action Plan II (GAP)**.

Overall GPGC:

The new strategy of the GPGC should also foresee support for **integrated approaches** that advance sustainable development. As an example, the Population, Health and Environment (PHE) approach should be further supported under this programme.

Civil Society Organisations/Local Authorities (CSO/LA) programme

- The next programme should clearly identify a percentage of **support for CSOs as partners in pro-poor services and providers in social basic services**. In this context, the upcoming strategy should also promote the role of CSOs as agents of change for gender equality
- The next CSO/LA strategy should also support **social accountability** and the role CSOs can play in promoting upward accountability

Pan-African programme

- The next MIP should **increase support to CSOs as active players in European Union-African Union (EU-AU) policy-making and to advance gender equality and women's and girls' rights, youth empowerment and health**.
- The next programme should also foresee **more decisions on Science, Technology and Innovation, particularly for** sectors that are barely covered by other channels, such as **health**
- The next MIP should support the African continent and **relevant AU policies and strategies** (eg Abuja commitment for health) **rather than just the JAES** roadmap

European Development Fund

Current State of Play

- The compiled 74 available National Indicative Programmes (NIPs) allocate only +- **14% of funds** to human development by social inclusion and climate action, far from the respective 20% benchmark.
- Health and education alone amount only to slightly more than **10% of total NIPs** (1.285 billion EUR).
- While the 10th EDF (2008-2013) contributed to approximately 30% for Population Policies/Programmes and Reproductive Health, 11th EDF commitments in 2014 and 2015 represent only 17% of overall EU contribution to that sector (as per EC annual reports).
- **28 NIPs include some reference to gender equality**, be it as part of the overall context in country or under one of the focal sectors, but fail to reflect this concern in their programmes.
- 10 NIPs affirm that gender equality will be mainstreamed, but there is no indication of eg gender-sensitive budgeting or gender elements on the NIP evaluation matrix within the sectors.
- Only 18 NIPs include details of how gender will be mainstreamed in the different focal sectors.
- **Only one ACP country specifically targets funds to gender equality**. From this analysis, the 85% target of OECD G1/G2 marker to be achieved under the Gender Action Plan II seems to significantly lag behind.
- **Approximately 60% of countries opted for CSO envelope**. But there are still 30 countries who preferred not to have a Civil Society envelope, some due to 'failed past experiences' and the 'unavailability of appropriate NSAs', which disrupts the spirit of the Cotonou Agreement (CPA) and its focus on partnership and capacity-building for CSOs.

What should happen between 2017 and 2020?

For the 11th EDF to be able to deliver in all its different objectives, the following structural changes are needed:

- **Refine what human development entails** and exclude those areas that are better served by other channels
- **Ensure that existing benchmarks are properly met**, such as 20% allocation of funds for both human development and social inclusion or to climate action.
- It is fundamental **not to divert attention away from existing priorities to growing political concerns** such as security and migration, and that the aid instruments are not politicised and used to serve only the EU's own interests. In this context, it is key to ensure that national and regional funds have 100% ODA-eligibility and at least 95% ODA-eligibility for the intra ACP funds
- Ensure that the **CPA provisions are properly implemented by ensuring population issues are always integrated in development strategies**
- Ensure the 11th EDF **integrates FP services in other programmes** that are not necessarily health-related. Also, include more earmarked funds to FP/SRH, be it through the NIPs or intra-ACP strategy
- Encourage **innovative initiatives** under the 11th EDF such as the MDG initiative
- Ensure that **health innovation, namely through collaborative research projects, is properly supported** by Regional Indicative Programmes (RIP) and intra-ACP
- Take advantage of the MTR and the first phase of implementation of the Gender Action plan to **ensure gender equality is properly mainstreamed and targeted** under all EDF envelopes with appropriate resources; this should reach the 85% target of G1/G2 markers
- **Include a commitment in the MTR for the EDF to provide the adequate financial support** to ACP and EU CSOs at local, national and regional levels to develop capacity. This commitment should be translated into broader and more diversified CS envelopes under NIPs and more opportunities for CSOs to work under the focal sectors
- **Ensure complementarity of the EDF with other programmes to guarantee an appropriate mix of funding modalities**, and adequate support to all key sectors based on the country analysis and needs, as well as the division of labour at country level.

Budget for gender equality under overall Heading 4 should be increased by 20%.

The GAP already includes a commitment to have 85% of new programmes scoring G1 or G2 on OECD-DAC Gender marker. An additional commitment focusing on targeted actions (G2) should be made so that 20% of new programmes score so.

We would also encourage setting up participative monitoring and evaluation mechanisms to ensure these funding instruments deliver in respective objectives while meeting benchmarks.