THE POWER OF ADVOCACY
AN IMPACT REPORT FROM ADVANCE FAMILY PLANNING

APRIL 2022
RECOMMENDED CITATION
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Launched in 2009, the Advance Family Planning (AFP) initiative was grounded in a straightforward yet powerful idea: that effective advocacy is as essential to increasing access to and use of quality contraceptive information, services, and supplies as other interventions. We knew that lasting change required a new way of doing advocacy. There needed to be a shift away from short-term, fragmented advocacy initiatives toward something owned and sustained by country leaders.

Paramount from the outset was ensuring that those closest to the issues drive priorities and solutions. To create the conditions for sustainable progress, AFP’s partners mobilized political, religious, and business leaders; funders; civil society members; journalists; and service providers to elevate the value of family planning and advocate for its inclusion in their countries’ policies and budgets.

Execution required clear, achievable strategies. And thus, the Specific, Measurable, Attainable, Relevant, and Time-bound (SMART) Advocacy approach took shape, as we adapted the well-known management framework to family planning so that champions could effectively persuade those in power to act.

Early on, AFP recognized that decision-makers at lower levels of government in Africa and Asia held more power than ever before to make budgetary and programmatic decisions that affected family planning. Therefore, meeting the need for family planning meant cascading advocacy efforts at the state, county, district, and even village levels.

Over time, incremental shifts began to transform the family planning policy and funding landscape. This path is lined with nearly 3,000 hard-fought advocacy achievements that potentially benefit more than 190 million women of reproductive age.
The story of progress, however, is much bigger than any advocacy “win.” Underlying AFP’s impact is a rich and multi-layered story—representing successes from a vibrant collective of family planning champions working at all levels of power, including in government, civil society, health care, and the private sector. The hard work and commitment of individual advocates and decision-makers, as well as large and small coalitions, have generated momentum that will continue long beyond the lifespan of the AFP initiative.

As AFP draws to a close in 2023, the advocacy work is not finished. Local, national, and global family planning leaders and champions will carry forward what we started under the AFP partnership, but only if support for the work persists from the community and from committed, visionary donors.

This report demonstrates the power of—and underscores the need for—enduring investment in advocacy.

### Our Goal & Objectives

**Galvanize sustained financial investment and political commitment to expand access to voluntary, high-quality family planning information, services, and supplies.**

1. Mobilize more funding for family planning
2. Strengthen family planning policies and policy implementation
3. Grow the number of individuals and organizations using SMART Advocacy for family planning and other issues
4. Foster investments and policy changes that can be sustained over the long term

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**AFP by the Numbers**

- **2,835** advocacy achievements since 2009 across Africa, Asia, and Latin America
- **$169.7 M** mobilized since 2012
- **303** organizations across 42 countries using SMART Advocacy
- **197 M** women of reproductive age potentially benefiting from AFP advocacy
- **30** countries and 417 advocacy working groups at AFP’s height
- **$4.98 M** in small grants awarded through the Opportunity Fund
When AFP launched in 2009 at the first International Conference on Family Planning in Uganda, the family planning movement was on the cusp of change. The community understood that meeting family planning needs in low- and middle-income countries would benefit the health of women, men, and families. Family planning’s record on reducing unintended and high-risk pregnancies, abortions, HIV, and other sexually transmitted diseases and advancing socioeconomic conditions and gender equality was well established.

At the time, however, commitments to family planning had lost political traction in the donor community, and it was glaringly absent in global health and development frameworks such as the Millennium Development Goals. Most countries had supportive family planning policies but lacked implementation. And family planning funding was largely not a priority in country budgets, despite high rates of unintended pregnancy and maternal mortality.

Frustrated by the slow pace of change, passionate and committed family planning advocates came together to set a bold agenda through the AFP initiative. Our first AFP partners recognized there were local and national champions who, if given the opportunity, tools, and resources, were poised to transform the funding and policy environments for family planning. These were advocates who were driven to improve health and development indicators and people’s lives.
The capacity built, knowledge and skills gained [through AFP] helped strengthen my confidence as an advocate because of deeper understanding of my roles and responsibilities to contribute to the change desired…"

—Yusuf Nuhu, Pathfinder International, Nigeria

As the foundational work for the initiative was taking hold, the 2012 London Summit on Family Planning further galvanized the community to work together in new ways. The resulting Family Planning 2020 partnership brought renewed purpose and a broad, aspirational goal to guide AFP’s work. Advocates and governments alike could now coalesce around countries’ own commitments and leverage new and increased investments from donors.

Since then, AFP partners have fostered an enabling environment for family planning for individuals, communities, and countries and cultivated a culture of advocacy and accountability—the cornerstone of resilience. When the COVID-19 pandemic emerged, this progress faced a grave threat. As AFP advocates fought to protect family planning as an essential service, they revealed that their power lay in their adaptability and decade-long relationships.

As the landscape evolves and political will waxes and wanes, the need for sustained, strategic advocacy investment persists. As captured in this report, AFP demonstrates that focused, collaborative advocacy has impact and is vital to building resilience in the face of future shocks—whatever form they may take.
To build a more robust, integrated approach to advocacy, the AFP initiative set out to make a strong case for family planning across sectors.

In a core group of countries, with a foundation of local leadership and collaboration, we provided a platform to incubate ideas, pilot approaches, find solutions, and share knowledge and expertise.

Positioning family planning as a multisectoral development issue required the support and engagement of many stakeholders. AFP therefore helped establish local and national advocacy working groups of individuals best equipped to move an issue forward. Often, government officials keen on realizing their country’s family planning commitments joined AFP’s advocacy efforts as allies, messengers, and champions, sharing their expertise about policy change and program implementation.

Three key factors underpinned AFP’s approach:

1. Through its convening power and strategic inclusion of governments, civil society, and the private sector, AFP helped create long-term changes in policies and funding across sectors.

2. Rigorous, ongoing monitoring of progress and results made the case that advocacy is a strategic priority alongside service delivery, research, and other programs.

3. AFP’s geographic depth and breadth demonstrated that focusing on where decisions are made delivers results across a variety of country contexts—from those with a history of strong family planning programs to ones where support is still nascent.
At the heart of AFP’s approach is the SMART Advocacy framework. Adapted from well-established strategic decision-making concepts, tools, and best practices, SMART Advocacy focuses on achieving discrete, vital policy or funding decisions in the near term, leading to a broader goal. Advocacy wins accumulate and build on each other over time, creating momentum for continued progress and inspiring sustained advocacy.

The power of SMART Advocacy is that it enables advocates to anticipate opportunities and respond quickly and decisively, while leveraging partner resources and integrating new evidence. Disciplined, purposeful, and results-driven, SMART Advocacy centers on decision-makers. At the same time, it is flexible, allowing champions to change course as situations change. In short, it was—and continues to be—a game changer in family planning advocacy.
As AFP evolved, we added strategic initiatives to advance adolescent and youth access to contraceptives, expand self-care through methods like subcutaneous injectable contraception (DMPA-SC), and harness the power of journalists through media advocacy. We also initiated a small grants program—the Opportunity Fund—to respond rapidly to locally identified advocacy needs in additional countries.

While representing influential organizations in their own right, our partners also drew on AFP’s affiliation with the Johns Hopkins Bloomberg School of Public Health to strengthen their case for action on family planning. The initiative also benefited from the scientific lens that the Bill & Melinda Gates Institute for Population and Reproductive Health brought to the practice of advocacy.

Through this multi-pronged strategy, AFP steadily and methodically built a new paradigm for family planning advocacy that has delivered on its promises. These results, lessons learned, tools, and resources are not “owned” by AFP. They are a public good—ready to be taken forth by advocates to continue building momentum and creating impact.

Guiding Principles

At the heart of the initiative are seven core principles that guide our work. These are the values that have helped shape a cohesive family of advocates out of many dispersed individuals.

1. **Locally driven.** Local champions set priorities and lead strategies.
2. **Focused.** Our efforts target decision-makers who influence family planning funds and policies.
3. **Evidence-based.** Advocacy supported by the most up-to-date, proven data compels action.
4. **Collaborative.** An inclusive, consensus-building process leverages the resources of others.
5. **Influential.** Those closest to the issues are the most powerful advocates.
6. **Accountable.** Strong performance-monitoring frameworks help us measure and learn from progress and setbacks.
7. **Sustainable.** Advocacy results are more durable when local processes, organizations, and systems incorporate advocacy capacity.
THE IMPACT

Grounded in evidence and connected to an inclusive international network of scholars, practitioners, and people in power, AFP has shaped an ambitious agenda. Over time, this locally evolving approach has driven investments and improvements to help individuals and couples effectively plan for and prevent pregnancy.

More Funding Mobilized

AFP partners significantly increased financial investment in family planning, while establishing a bedrock of skilled advocates equipped for continued growth. Between 2012 and 2021, AFP mobilized $169.7 million in domestic funds for family planning—with 2021 funding levels in AFP countries reaching nearly 10 times that of 2012.

Today, 329 government units in AFP countries are allocating financial resources for family planning (compared to 11 at the start of AFP)—nearly 30 times what it was just eight years ago.

Governments in AFP geographies show a strong commitment to sustaining funding. Of 329 geographies that allocated funds in 2020-21, 98% (322) allocated funds for at least two years and 85% (281) for three or more years.
Applying the SMART approach to our advocacy work helped remove 17 restrictions limiting access to reproductive health services for women and girls.... [The] SMART approach helps us keep on track and motivated even in the most challenging and restricted environments.”

—Bethan Cobley, MSI Reproductive Choices, United Kingdom

$169.7 Million Mobilized for Family Planning
2012–2021
### Family Planning Funds Mobilized by AFP in 12 Countries
2012–2021

<table>
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<th>Country</th>
<th>National</th>
<th>Subnational</th>
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<td>$3,311,180</td>
<td>$25,716,831</td>
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<tr>
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<td>~</td>
<td>$11,694,571</td>
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<tr>
<td>Indonesia</td>
<td>~</td>
<td>$12,795,224</td>
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<tr>
<td>Kenya</td>
<td>~</td>
<td>$10,135,609</td>
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<td>Nigeria</td>
<td>~</td>
<td>$8,379,361</td>
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<tr>
<td>Pakistan</td>
<td>~</td>
<td>$23,652,454</td>
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<tr>
<td>Senegal</td>
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<td>Tanzania</td>
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<td>$44,382,933</td>
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<td>Uganda</td>
<td>$5,881,542</td>
<td>$3,875,384</td>
<td>$9,756,926</td>
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<td>Zambia</td>
<td>$9,026,687</td>
<td>$142,268</td>
<td>$9,168,955</td>
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<td><strong>Total</strong></td>
<td><strong>$83,745,884</strong></td>
<td><strong>$84,081,642</strong></td>
<td><strong>$167,827,526</strong></td>
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AFP partners accomplished thousands of advocacy achievements. A subset are featured below.

**Global/Geneva:** The World Health Organization includes family planning in its guidance on task sharing for maternal, newborn, and child health.

**Global/DC:** The World Bank World Development Report adds reproductive health as an area of emphasis.

**Colombia:** Rionegro, Colombia adopts recommendations for youth-friendly services in its health and development plan.

**Democratic Republic of the Congo:** New national public health law includes family planning provisions that, for the first time, legalize women’s and girls’ rights to access and use contraception.

**Francophone West Africa:** Burkina Faso, Côte d’Ivoire, Senegal, and Togo include young people in costed implementation plan development processes.

**Nigeria:** Lagos State issues a policy directive mandating family planning services be completely free of charge.
Zambia: Government includes family planning in its Universal Health Coverage benefits package

India: 42 districts in six states establish 1,118 family planning counseling corners

Indonesia: 10 focus districts and their villages mobilize US $17.8 million for family planning activities from 2009 through 2019

Bangladesh: Government approves a first-of-its-kind public-private partnership with dedicated funding to provide family planning services in hard-to-reach areas

Uganda: Five districts allocate dedicated funds or make youth-friendly service improvements

Tanzania: Nation’s largest private health insurance company covers family planning services

Kenya: National government allows pharmacists and pharmaceutical technologists to administer contraceptive injectables
More Individuals and Organizations Use SMART Advocacy

AFP partners and collaborators using SMART Advocacy transformed their advocacy and policy landscapes. They embraced the approach as their own, further driving its adaptation, spread, and influence. As a result, 303 organizations across 42 countries are creating change with SMART Advocacy today.

Two-thirds of these organizations are local nongovernmental organizations (NGOs). One-third are international NGOs, seven of which (Amref Health Africa, Johns Hopkins Center for Communication Programs, Jhpiego, International Planned Parenthood Federation, MSI Reproductive Choices, Pathfinder International, and Population Council) have fully integrated SMART Advocacy into their operations. With a formidable footprint—more than 18,000 staff in 128 countries—these organizations are well positioned to multiply the SMART Advocacy approach and ignite further impact.

As more advocates across sectors recognize the power of SMART Advocacy, AFP has seen its application grow to a range of issues beyond family planning and reproductive health, including safe surgery, universal health coverage, gender-based violence, and more. This ripple effect is part of the enduring legacy of the AFP initiative.
A Focus on Youth

By building the advocacy skills of young people, and advocating alongside and in collaboration with youth and adolescents, AFP saw more policy and funding decisions integrate the priorities of young people. As a result, more young people gained access to contraceptive information and services, and more youth-led organizations became experts in strategic, evidence-based advocacy.

"I am a better advocate than I was before. ... Advocacy is no longer abstract, but an effective approach that I use in my line of work. I have conducted SMART trainings for partners and my colleagues, who believe that this advocacy approach will make their work much easier than it has been before.”

—Precious Mutoru Kerunga, Population Services International (PSI) Uganda
From the outset, AFP partners knew that the need for family planning funding and policy change would be everlasting, but the initiative would eventually end. Therefore, self-sufficiency was incorporated in every advocacy effort, focusing on how policy and funding gains could last and working groups could continue independently.

Our data show that once governments allocate funds for family planning, they are likely to continue to do so after AFP-funded advocacy efforts end.

We followed 76 geographies after they phased out of direct support from AFP and found that:

- **75% (57)** of AFP-engaged governments that allocated funds for family planning continue to do so for one year following phase-out.

- **Half (37)** of these governments continue to make allocations after two years.

- In 2020-21, **two-thirds (50)** of 76 phased-out geographies made allocations totaling **$970,000**.

- Of the 50 phased-out geographies that made allocations, **40% (19)** increased their allocations, despite pandemic-related constraints.

As further testament to AFP’s coalition-based approach, the majority of advocacy working groups established or strengthened under AFP remain active. In the 58 phased-out geographies where continued monitoring of advocacy activities was possible, more than half (53%) report having active working groups.
Media Advocacy: Keeping Family Planning Visible During COVID-19

Particularly after the onset of the COVID-19 pandemic, the media were an essential resource for AFP. Journalists were some of the only eyes and ears allowed into communities, and those engaged in AFP media advocacy played a pivotal role in keeping family planning at the forefront of health priorities.

AFP-trained journalist champions worked tirelessly to keep sexual and reproductive health issues visible, including putting their own safety at risk by continuing to report on stories in communities and health clinics. Media coverage resulted in advocacy gains including the following:

In Tanzania, following media reports of congested health clinics and mixed messages by service providers in May 2020, Kagera and Dar es Salaam regional medical officers sent directives instructing that all maternal and child health services, including family planning, must continue to be provided with adherence to safety measures.

In Kakamega County, Kenya, advocates, journalists, and government officials developed a new initiative—telephone hotlines, an idea initially shared in the media advocacy WhatsApp group—to link women in need of essential services with officials who could grant curfew passes. The journalists highlighted the initiative in a story on NTV, broadcast nationwide.
When assessing the impact of AFP, it is not enough to consider the number of advocacy successes, dollars mobilized, sectors and partners engaged, or geographies covered. As impressive as those numbers are on their own, taken together they demonstrate the value of advocacy and advocates in enabling health systems to meet individuals’ family planning needs.

Still, without ongoing dedicated funding for advocacy and engagement with those in power, these achievements remain vulnerable to setbacks. Only with advocacy expertise and well-functioning partnerships will we be able to weather crises, remain agile, adapt to changing demands, and ensure that innovations can reach the people who need them.

“When we first mentioned that we wanted to strengthen post-abortion family planning in the forum, everyone had a lot of ideas, but were slightly confused on how to begin the process.... [SMART Advocacy] helped us define our goal with the SMART objective, and using that we could plan on what we wanted to do.”

—Dr. C. K. Verma, District Basti, Uttar Pradesh, India

Beyond the Numbers

When assessing the impact of AFP, it is not enough to consider the number of advocacy successes, dollars mobilized, sectors and partners engaged, or geographies covered. As impressive as those numbers are on their own, taken together they demonstrate the value of advocacy and advocates in enabling health systems to meet individuals’ family planning needs.

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The result of this collaboration is that more government and corporate decision-makers now commit greater domestic resources, improve access through all cadres of the health workforce, and increase support for quality service delivery and informed choice for a range of contraceptive methods.

The advocates and leaders involved in realizing these results are experts in budget mobilization, policy negotiation, and expenditure tracking. They continue to build on the more than 2,800 advocacy wins, embodying our seven principles and growing the SMART Advocacy approach that has been the foundation of AFP’s progress.

The AFP initiative began with high hopes for what the partnership could achieve. We have clearly demonstrated that a sustained, multi-year, global advocacy initiative for family planning works. We have proven that advocacy is a vital tool that can be leveraged strategically to drive inclusive, supportive government, donor, and institutional action and accountability at all levels.
Throughout the AFP initiative, we have remained committed to understanding and sharing lessons learned. Here, we share the most salient.

Trust Country Advocates to Lead

Donors have long expressed the desire to shift ownership of programs to the Global South. But the transition has been slow. AFP demonstrates that our country counterparts are well placed to identify advocacy opportunities, build strategic plans, and create lasting change. Supporting local leadership will fully realize the power of advocacy in family planning, reproductive health and rights, and other development priorities.

Advocacy Outcomes Grow with Long-Term Investment

AFP benefited from the opportunity to mature over a long period; however, the initiative will end during an increasingly uncertain time for family planning. An emerging emphasis on universal health coverage and broad, integrated reproductive, maternal, newborn, child, and adolescent health frameworks offer both opportunities and risks. As family planning is so often deprioritized or forgotten among less-controversial issues, protecting gains and preventing backsliding require ongoing support.

Country-level advocates need the same long-term, durable investments to weather changing policy and financing environments and continue to build their advocacy community. Even as commitments and resources waver, advocates are ready and able to overcome these challenges with the right support.

Collaboration Creates Change

Dedicated advocates with the desire for change underlie all of our accomplishments. AFP was instrumental—from communities to capitals to the global stage—in convening the right people at the right time to coalesce efforts and accelerate progress. Whether revising outdated policies or incorporating innovations, change is made possible and is faster when advocates and decision-makers work together, not in isolation. SMART Advocacy offers a proven approach to do this.
Through all the milestones reached and lessons learned, the bedrock of AFP’s progress has been the belief that everyone deserves access to quality, voluntary contraceptive information, services, and supplies.

Even with the accomplishments of AFP and other advocacy efforts, family planning remains controversial and out of reach for many. More and better investment in a holistic approach to family planning remains urgent, not just during the COVID-19 pandemic, but also once the immediate threat passes.

**Persistent advocacy and a connected community are essential to ensure that the funding, policies, and infrastructure are in place to enable women and couples to realize their fertility intentions and fulfill their reproductive health needs and rights.**
ACKNOWLEDGMENTS AND PARTNERS

The AFP initiative is, at its essence, a partnership of dynamic, committed, expert individuals, organizations, governments, and the private sector.

Every person or entity involved has made unique and invaluable contributions that strengthened the collective work and expanded AFP’s impact. The AFP team is deeply grateful for and humbled by their unwavering tenacity and commitment to this work.

We are also indebted to our funders for tirelessly championing and supporting this initiative: the Bill & Melinda Gates Foundation, the David and Lucile Packard Foundation, the William and Flora Hewlett Foundation, and two anonymous donors.

Throughout AFP’s existence, major global milestones such as the International Conference on Family Planning (2009, 2011, 2013, 2016, 2018), the 2012 London Summit on Family Planning, the 2017 London Summit, and the Nairobi Summit on ICPD (2019) provided crucial platforms for collaboration and momentum.

Together, we shared learnings, iterated on ideas, and helped each other navigate obstacles. Perhaps most importantly, those convenings renewed our commitment during moments of inevitable fatigue.

At the heart of AFP’s work and its impact is each country leader, staff and working group member, and others who contributed in large and small ways. You carried the work, and you will continue to realize impact in the future.
AFP Partners and Subgrantees

AdvocacyNigeria
African Women’s Development Fund (AWDF)
Amani Foundation
Association of Voluntary Actions for the Society, Bangladesh
Bill & Melinda Gates Institute for Population and Reproductive Health, Johns Hopkins Bloomberg School of Public Health
Équilibres et Populations (EquiPop)
Fanikisha Foundation
Foundation for Reproductive Health Services India
Health Promotion Tanzania (HDT)
International Planned Parenthood Federation
International Planned Parenthood Federation Western Hemisphere Region
IntraHealth
Jhpiego
Johns Hopkins Center for Communication Programs
Johns Hopkins Center for Communication Programs, Indonesia
Johns Hopkins Center for Communication Programs, Tanzania
Johns Hopkins Center for Communication Programs, Uganda
Kyenki Foundation
Marie Stopes Bangladesh
MEXFAM, Mexico
MSI Reproductive Choices
Ollwi Community Organization
PAI

Palladium (formerly Futures Group International)
Partners in Population and Development, Africa Regional Office
Partners in Population and Development, Secretariat
PATH
Pathfinder India
Pathfinder International
Pathfinder Nigeria
Planned Parenthood Federation of Nigeria
Population Foundation of India
PROFAMILIA Colombia
PROFAMILIA Dominican Republic
Reproductive Health Uganda
Réseau Siggil Jigéen
SERAC Bangladesh
She Forum Africa
Shina Foundation
Sushilan, Bangladesh
Tanzania Communication and Development Center (TCDC)
Tanzania Men as Equal Partners in Development (TIMEPiD)
Tanzania Youth and Adolescent Reproductive Health (TAYARH) Coalition
Team Associates, Bangladesh
Tulane International
Uganda Family Planning Consortium (UFPC)
United Nations Association
Yayasan Cipta Cara Padu
Zanzibar Nurses Association (ZANA)
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Action Et Developpement (AcDev), Senegal
Afia Sante, DRC
Alliance for Reproductive Health Rights (ARHR), Ghana
Alliance Nationale des Jeunes pour la Sante de la Reproduction et la Planification Familiale (ANJ-SR/PF), Senegal
Amref Health Africa
Association Centrafricaine pour le Bien-Etre Familial (ACABEF), Central African Republic
Association des gestionnaires du Développement (AGD), Mauritania
Association for the Advancement of Family Planning (AAFP), Nigeria
Association Mauritanienne pour la Promotion de la Famille (AMPF), Mauritania
Association Mauritanienne SOS Femmes Rurales (AMSFR), Mauritania
Association YOUTHLEAD, Togo
Balanced Stewardship Development Association (BALSDA), Nigeria
Centre for Reproductive Health and Education (CRHE), Zambia
Centre for the Study of Adolescence
ChildFund Zambia
Child in Need Institute, India
Christian Advocacy for FP in Africa (CAFPA)
Coalition for Health Promotion & Social Development (HEPS), Uganda
Community Health and Research Initiative (CHR)
Ewang’an Nadede Advocacy Initiative (ENAI)
Faith to Action Network, Uganda
Family Care International, Burkina Faso
Family Care International, Mali
Family Health Advocates in Nigeria Initiative (FHANI)
Family Planning Association of India
FHI 360 Uganda
Forum for Family Planning and Development (FFPD), Philippines
Forum for Safe Motherhood, Pakistan
Fountain of Hope, Kenya
Groupe de Recherche, d’Action et de Formation en Épidémiologie et en Développement (GRAFED), Benin
HEPS Uganda
Hope Foundation for Development (HOFODE)
Impact Health Organization, South Sudan
IntraHealth Tanzania
Ipas Africa Alliance
Ipas Bungoma, Trans Nzoia
Jhpiego Guinea
Jhpiego Philippines
Jhpiego Uganda
JSI Benin
Kenya Red Cross Society
Kisumu Medical Education Trust (KMET)
Kisumu SRHR-UHC Alliance
L’Association Togolaise pour le Bien Etre (ATBEF), Togo
Love Matters India
Management Sciences for Health, Burkina Faso
Management Sciences for Health, Madagascar
Marie Stopes Burkina Faso
Marie Stopes Ghana
Marie Stopes Kenya
Advance Family Planning (AFP) aims to increase financial investment and political commitment needed to enable all women and girls, regardless of where they live, to access quality, voluntary family planning. Based in the Population, Family and Reproductive Health Department of the Johns Hopkins Bloomberg School of Public Health and led by the Bill & Melinda Gates Institute for Population and Reproductive Health, AFP and its partners advocate to expand access to lifesaving contraceptive information, services, and supplies.
We would like to acknowledge our communications consultants Mozaic Consulting and Pixelittle for their support in producing The Power of Advocacy: An Impact Report from Advance Family Planning.

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