

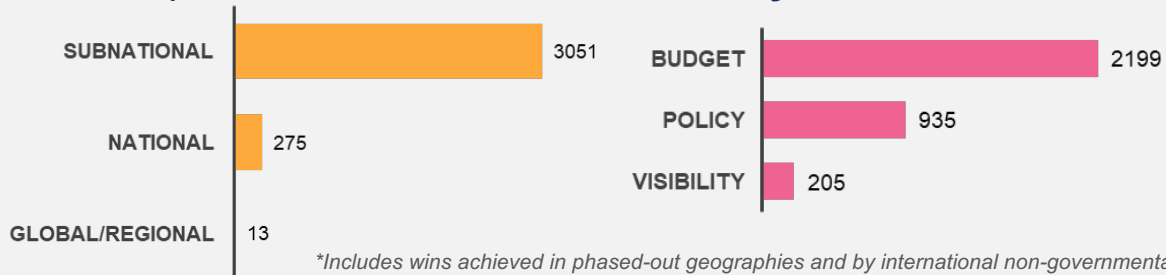
# ADVANCE FAMILY PLANNING EFFECTIVE ADVOCACY SECURES POLICY & FUNDING GAINS

Three foundations—Bill & Melinda Gates Foundation, David & Lucile Packard Foundation, and William + Flora Hewlett Foundation—invested nearly US \$100 million to mobilize and sustain effective family planning advocacy, amplify the voices of advocates, and diffuse advocacy best practices between 2009-2023.

Advance Family Planning (AFP) achieved new advocacy wins, protected funding and policy gains, honed the SMART Advocacy approach, and seeded a community of practice over the last 13 years. AFP's experience suggests a high likelihood of advocacy and funding for family planning continuing, but sustainability of this momentum will require dedicated funding for advocacy.

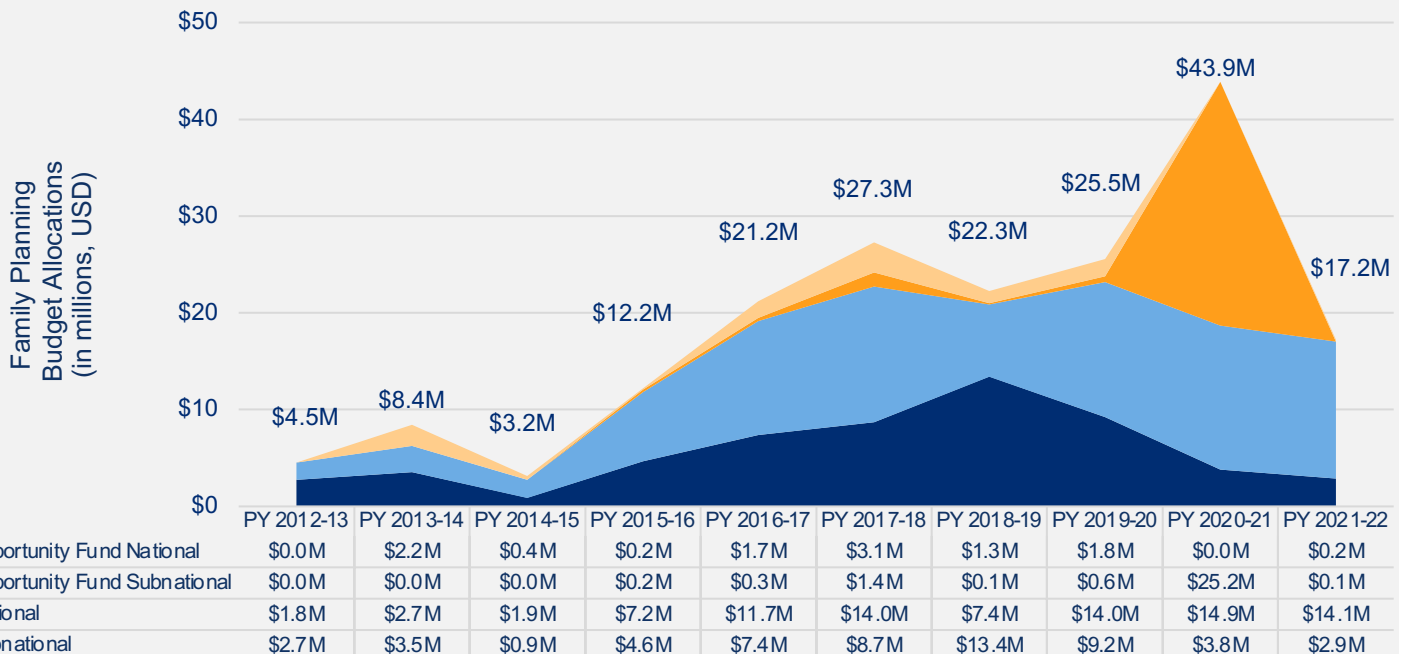
## ADVOCACY ACHIEVEMENTS

AFP partners achieved **3,454 advocacy wins\*** since 2009



Advocates strengthened more than 935 policies; this includes passing new and implementing existing policies.

AFP mobilized US **\$185.7 million\*\*** in funding for family planning since 2012



\*\*Confirmed as of February 2023 and includes active, phased-out, and Opportunity Fund geographies

## ADVOCACY PARTNERS

Most project staff were based in focus countries in Africa and Asia. AFP was managed by a small team based at the Johns Hopkins Bloomberg School of Public Health in Baltimore, Maryland.

### AFP Lead Partners

<b>Global</b>	Bill & Melinda Gates Institute for Population and Reproductive Health, Johns Hopkins Bloomberg School of Public Health PAI (Opportunity Fund)
<b>Bangladesh</b>	Marie Stopes Bangladesh
<b>Democratic Republic of Congo</b>	Tulane International
<b>India</b>	Foundation for Reproductive Health Services – India; Jhpiego, India; Pathfinder International; Population Foundation of India
<b>Indonesia</b>	Johns Hopkins Center for Communication Programs, Indonesia; Yayasan Cipta Cara Padu
<b>Kenya</b>	Jhpiego, Kenya
<b>Nigeria</b>	Pathfinder International, Nigeria
<b>Tanzania</b>	Johns Hopkins Center for Communication Programs, Tanzania
<b>Uganda</b>	Partners in Population and Development, Africa Regional Office Reproductive Health Uganda

### AFP Francophone West Africa Partners

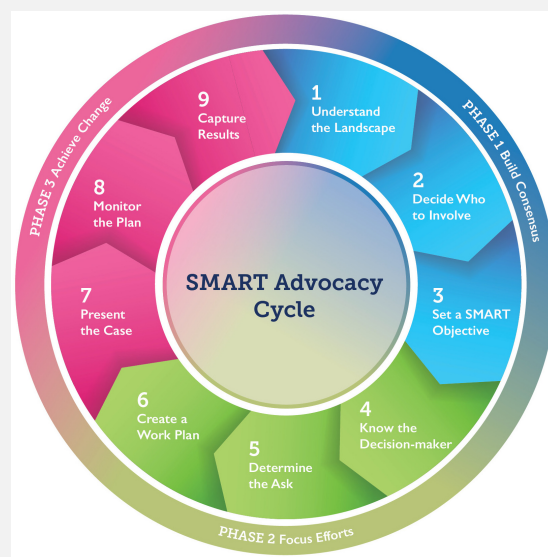
<b>Regional</b>	Pathfinder International
<b>Burkina Faso</b>	Equilibres et Populations; SOS Jeunesse et Défis (SOS/JD)
<b>Côte d'Ivoire</b>	ONG Mission des Jeunes pour l'Éducation, la Santé, la Solidarité et l'Inclusion (MESSI)
<b>Senegal</b>	SOS Jeunesse et Défis (SOS/JD); Alliance Nationale des Jeunes pour la Santé de la Reproduction et la Planification Familiale (ANJ-SR/PF)
<b>Togo</b>	YouthLead

## HONED SMART ADVOCACY

SMART Advocacy is a process by which coalitions develop Specific, Measurable, Attainable, Relevant, and Time-bound (SMART) advocacy objectives to effectively persuade those in power to act.

Refined over 13 years, SMART Advocacy is now used in a variety of health and development issues—from family planning to gender, HIV, and safe surgery.

The approach integrates monitoring, evaluation, and learning as well as an objective-centered media advocacy approach and communications.



### A COMMUNITY OF SMART ADVOCATES

**115** Small grants awarded via the Opportunity Fund to over 72 local organizations

**309** Organizations in at least 42 countries using SMART Advocacy

**677** Individuals with the capacity to use and diffuse SMART Advocacy

**6** INGOs mainstreaming advocacy, with 17,980 staff in 81 countries

# SUSTAINABILITY INDICATORS

## Locally-driven advocacy increases the likelihood that advocacy achievements are sustained

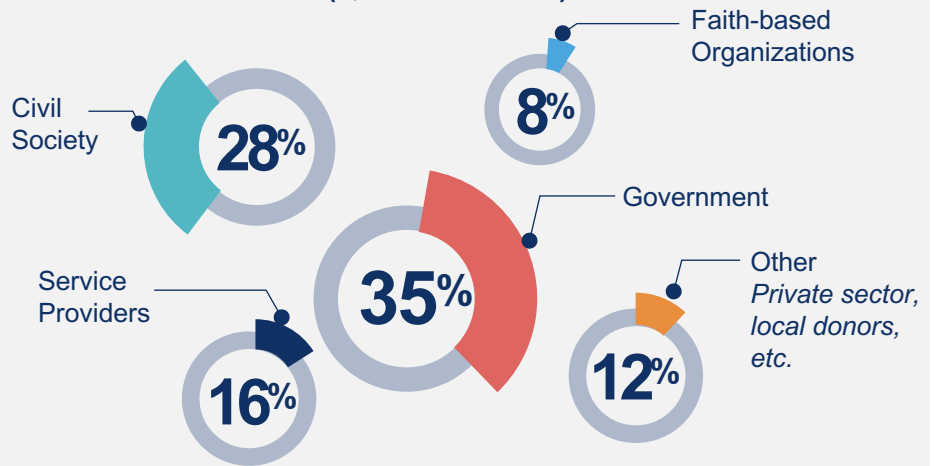
**326** AFP advocacy working groups

**320** Formalized (98%)

**303** Active for 3+ years (93%)

**296** Received domestic funding support (91%)

### Sectors represented in AFP advocacy working groups (2,557 members\*)



\*As of January 2023

## ADVOCACY DIFFUSION AND CAPACITY STRENGTHENING



### Sustained Advocacy Wins

- Between 2019-22 geographies phased-out from the AFP project continued to achieve advocacy wins, most of them budget allocations.
- Media advocacy was instrumental in protecting family planning during COVID-19. Visibility wins in the last three years accounted for 50% of all visibility wins to date.



### Durable Local Ownership of Family Planning Funding

- Since 2012-13, we've tracked a 41-fold increase in the number of government units making budget allocations for family planning.
- In 266 geographies, governments reallocated family planning funding for three or more years.
- Where comparison data was available, 39% of the geographies making allocations in 2021-22 maintained or increased their budgets.



### Continued Advocacy Activities

- Among the 79 phased-out geographies where tracking was possible, nearly 60% of the advocacy working groups remained active.
- Mainstreaming INGOs continue to hold advocacy facilitations virtually and in-person and integrate advocacy within current and future grants.
- SMART Advocacy diffusion continues at all levels—from global to local.

## LESSONS LEARNED

### DEVOLUTION IS A GAME CHANGER

- More policy and funding decisions happen at the subnational level.
- Advocates should continually assess the local environment for opportunities to catalyze action.

### ADVOCATE FOR POLICY IMPLEMENTATION

- Policies passed do not always result in policies implemented.
- Advocates can help decision-makers reach their goals by taking action, such as funding or regulatory change.

### EVIDENCE IS NOT ENOUGH

- Decisions are not made on evidence alone.
- Advocates should tie messages grounded in evidence to a decision-maker's personal beliefs and objectives.

### LOCAL OWNERSHIP IS HERE TO STAY

- Donor funding priorities are slowly shifting to directly support local organizations.
- Dedicated unrestricted funding would allow local organizations to set priorities and strengthen their capacity.

### MONITOR ADVOCACY OUTCOMES

- Limited funding is dedicated to monitoring advocacy outcomes.
- Increased funding to evaluate advocacy's impact would help attribute progress to advocacy efforts.

## KEEPING GLOBAL HEALTH ON THE DEVELOPMENT AGENDA

Donor funds for health are flat. Except for a spike in funding for COVID-19, the United States' funding allocation for health has remained at about \$11 billion for the last ten years. Stagnated funding levels are the norm among governments. Many African and Asian governments devote no more than a low single-digit percent to health in their national budgets. Even in the poorest of countries, out-of-pocket payments are still the major source of health financing. Few indicators suggest this will change dramatically without increased investment.

There is also a scarcity of attention among the world's leaders who are distracted by the consequences of climate change and the persistence of armed conflict. Global health is not a priority among persons in power. However, the AFP experience has shown that at all levels of government, sustained advocacy can generate funds for and motivate leaders to prioritize health.

We believe there are advocates everywhere who, if given the financial support they need, can increase financial and political commitments to health. Now, there is a network of over 677 SMART Advocates who stand ready to help organizations hone their advocacy capacity. The SMART Advocacy website (<https://smartadvocacy.org/>) provides the advocacy tools in multiple languages and expedites communication among advocates.

There is no doubt, investing in advocates is critical to realize national and global commitments to health.

## FOR MORE INFORMATION

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