

# Annual Report

2023-2024

# Who We Are

The International Planned Parenthood Federation (IPPF) is a global healthcare provider and a leading advocate for sexual and reproductive health and rights. The IPPF East & South East Asia and Oceania Region (IPPF ESEAOR) is part of this worldwide Federation with members of national organisations working with and for communities and individuals across 23 countries in ESEAOR.

**23** Member Associations and Collaborative Partners (2024)

**53,291** volunteers (2024)

**8,377** service delivery points across ESEAO (2024)

**1** Regional Office & **1** Sub-regional office for the Pacific

## ACKNOWLEDGEMENTS

A big thank you to the staff and volunteers of IPPF ESEAOR Member Associations and the regional secretariat for their contributions to this report.

The overall production and coordination of the report were led by Natassha Kaur, with support from Ipsita Dwivedi, under the overall supervision of Gessen Rocas.

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Front cover photos were contributed by the Family Planning Organization of the Philippines (FPOP), Florence Lee, and Hannah Maule.

## NOTES

Throughout this report, the term “Member Association (MA)” refers to both IPPF Member Associations and Collaborative Partners.

Please note that due to rounding, the numbers presented may not always add up to the totals provided. Percentages are based on exact figures and may not total 100%.

\*The photographs used in this publication are for illustrative purposes only; they do not imply any attitude, behaviours or actions on the part of any person who appears in them.

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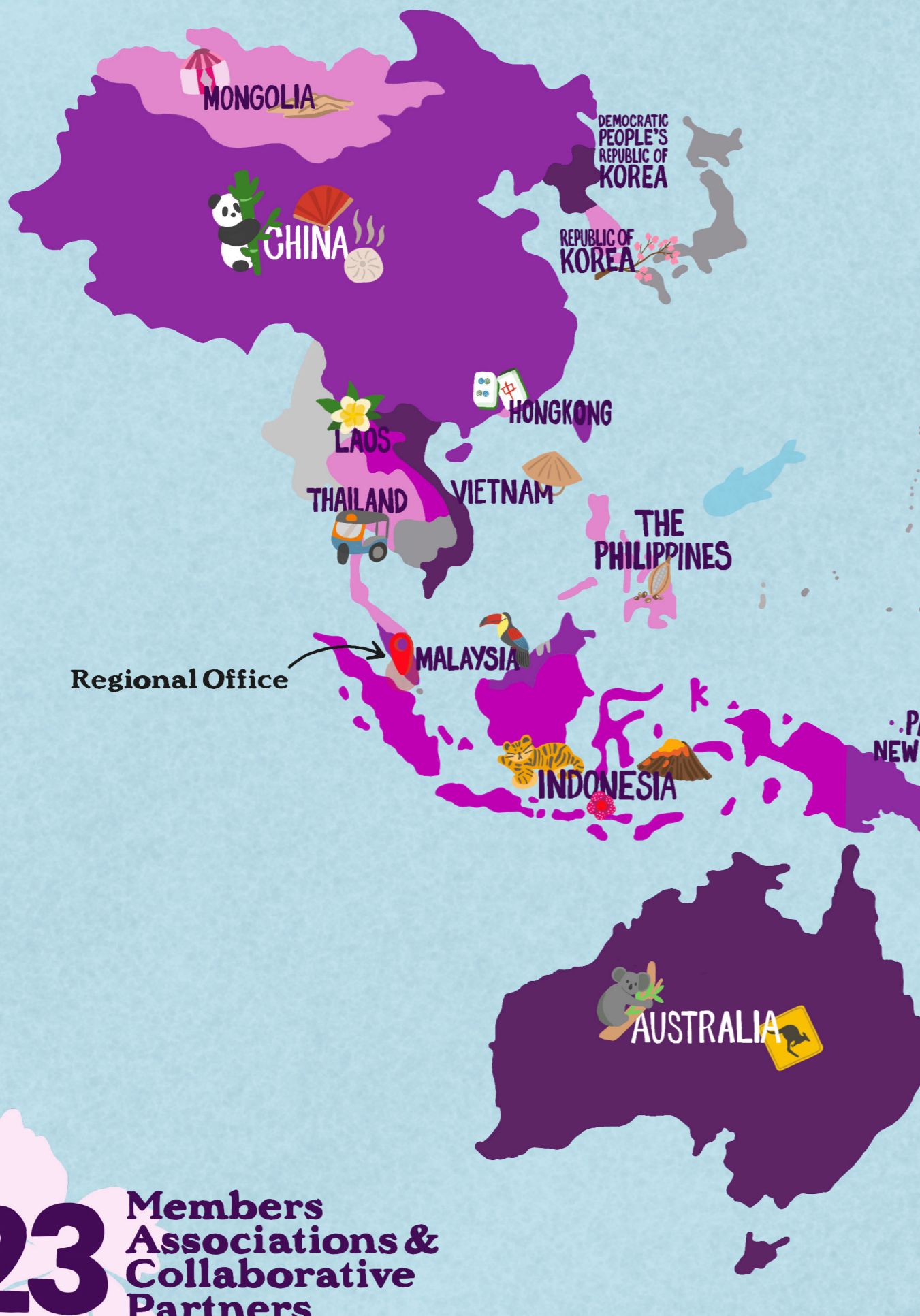
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# IPPF

East & South East Asia and Oceania Region

Regional Office

Sub-Regional Office  
for The Pacific

**23** Members  
Associations &  
Collaborative  
Partners



Credit: IPPF ESEAOR / Florence Lee / Regional Youth Forum



## Message from the Regional Director

The past few years have shown us that we are operating in an increasingly hostile environment. Civic spaces are shrinking, and we see a disturbing rise in authoritarianism and populism, coupled with efforts to reinforce patriarchal systems that seek to control our bodies and lives. These forces seek to roll back progress, erase lived experiences, and silence those already at the margins. We are witnessing heightened repression of freedoms and targeted attacks on those who speak up, particularly women, LGBTQI+ people, and other marginalised communities.

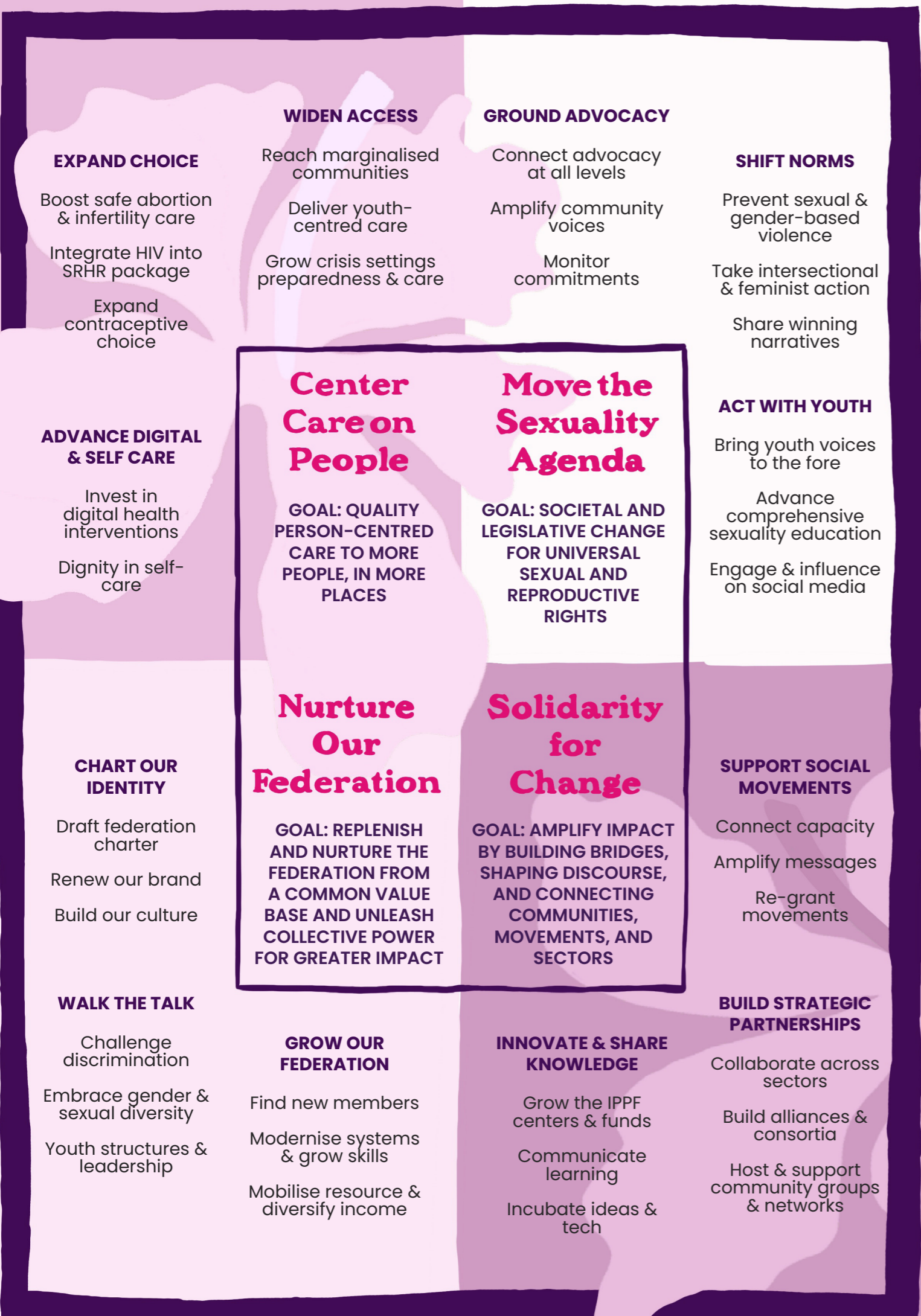
As a Federation, IPPF ESEAOR remains unwavering in our commitment to Sexual and Reproductive Health, Rights, and Justice (SRHRJ). We are grounded in the knowledge that bodily autonomy is non-negotiable and that the right to live with dignity, make decisions freely, and access care without fear or shame is universal.

Despite broader operational challenges and shifting priorities, 2024 marked a year of resilience, collaboration, and adaptation across the region. IPPF ESEAOR Member Associations (MAs) delivered over 13.4 million SRH services across 24 countries and made a strategic shift to increase the number of community-based service delivery points. Over 42% of all SRH services were accessed by young people under 25, affirming our commitment to inclusive, non-judgmental service delivery.

IPPF ESEAOR MAs continue to advance access to safe abortion, the full range of contraceptive methods, fertility care, and support across the life course, including for ageing populations. We will widen access to HIV prevention, treatment and care, shift norms around SGBV and FGM, and strengthen SRH services in humanitarian settings. We centre our work on care and those most often excluded, including LGBTQI+ communities, people who use drugs, sex workers, and young people.

We also recognise the existential threats shaping our world: The climate crisis, digital surveillance, state violence, sexual and gender-based violence, and the rising suppression of dissent. These crises intersect and amplify one another, making our work even more urgent - and our solidarity more vital. These forces may try to isolate and intimidate, but we are not alone, and we will never stand alone. In this moment, we draw strength from our communities and our collective purpose. Together, we will continue to stand for bodily autonomy and agency and the sexual and reproductive health, rights and justice for all people.

**Tomoko Fukuda**  
Regional Director



## IPPF's Strategy and Results Framework

In 2023, the International Planned Parenthood Federation (IPPF) set out on a bold new journey with the launch of its six-year strategy, *Come Together*. At its heart, this strategy is a call to collective action: A shared vision of a world where sexual and reproductive health and rights are not just protected but fully realised for all.

Built on four interconnected pillars, *Come Together* is both outward- and inward-looking. It recognises that real change must happen not only in the world around us but also within our own structures and ways of working. Each pillar carries a clear goal and is guided by three strategic pathways, setting out the Federation's commitments through to 2028.

IPPF's key themes of gender equality, youth leadership, human rights, equity,

and the urgency of humanitarian response are embedded across all pillars and strategies, forming the foundation of our work as a global healthcare provider and a leading advocate for sexual and reproductive health and rights (SRHR).

The four pillars of *Come Together* include:

### 1 CENTER CARE ON PEOPLE

At its core, this pillar is about delivering high-quality, person-centred sexual and reproductive health care. The focus is clear: To reach the most marginalised, offer integrated and affordable services, and put the needs of people first.

### 2 MOVE THE SEXUALITY AGENDA

Change cannot take place without bold advocacy. This pillar is about pushing boundaries and challenging harmful norms, shaping policy, and defending rights through feminist action and solidarity, especially in partnership with young people.

### 3 SOLIDARITY FOR CHANGE

No movement thrives alone. This pillar strengthens IPPF's international and regional alliances with, and support, for grassroots movements. It also aims to foster innovation and encourage knowledge-sharing through research.

### 4 NURTURE OUR FEDERATION

The work begins at home. This inward-facing pillar is about transforming our organisation by modernising systems, nurturing youth and women leaders, and actively confronting discrimination within the organisation.

Together, these pillars form a clear, actionable roadmap. *Come Together* is not just a strategy; it's a commitment to collective action and a reimagining of what is possible for sexual and reproductive health, rights and justice.



Credit: IPPF/ Hannah Maule/ Indonesia



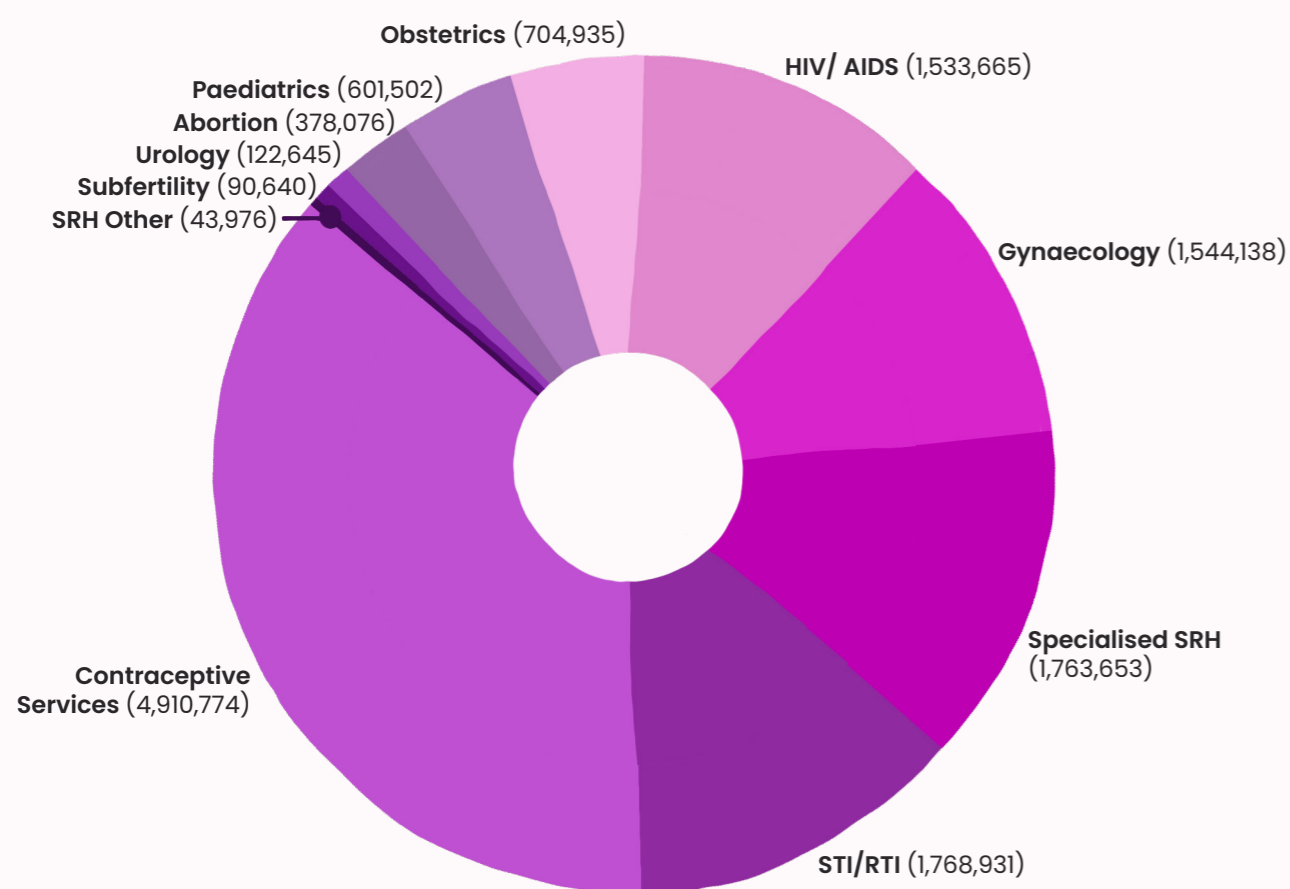
In 2024, IPPF ESEAOR delivered 13,415,605 SRH services across 8,377 delivery channels, with 71% provided to female clients. However, there is a 21% decrease compared to our performance in 2023. This is primarily driven by challenges in collecting service data from non-MA managed service delivery points in Vietnam and Cambodia, as well as a decrease in mobile and outreach service delivery in the Philippines precipitated by the phase-out of pandemic-related programmes.

The disaggregation of SRH per service category shows a high proportion of contraceptive services, followed by STI and Specialised SRH services.

**4.1 million** people reached

**1 in 3** people reached were under 25

**3 in 5** people reached identified as poor & marginalised



**GRAPH 1: DISAGGREGATION OF SRH SERVICES PER CATEGORY, 2024**

IPPF ESEAOR delivered nearly half a million contraceptive services. Contraceptive care prevented an estimated 355,883 unintended pregnancies and averted 48,535 unsafe abortions, saving an estimated GBP16 million in direct costs to health systems.

Couple years of protection (CYP), the estimated protection from pregnancy provided by each contraceptive item distributed over a one-year period, was **658,823** in 2024.

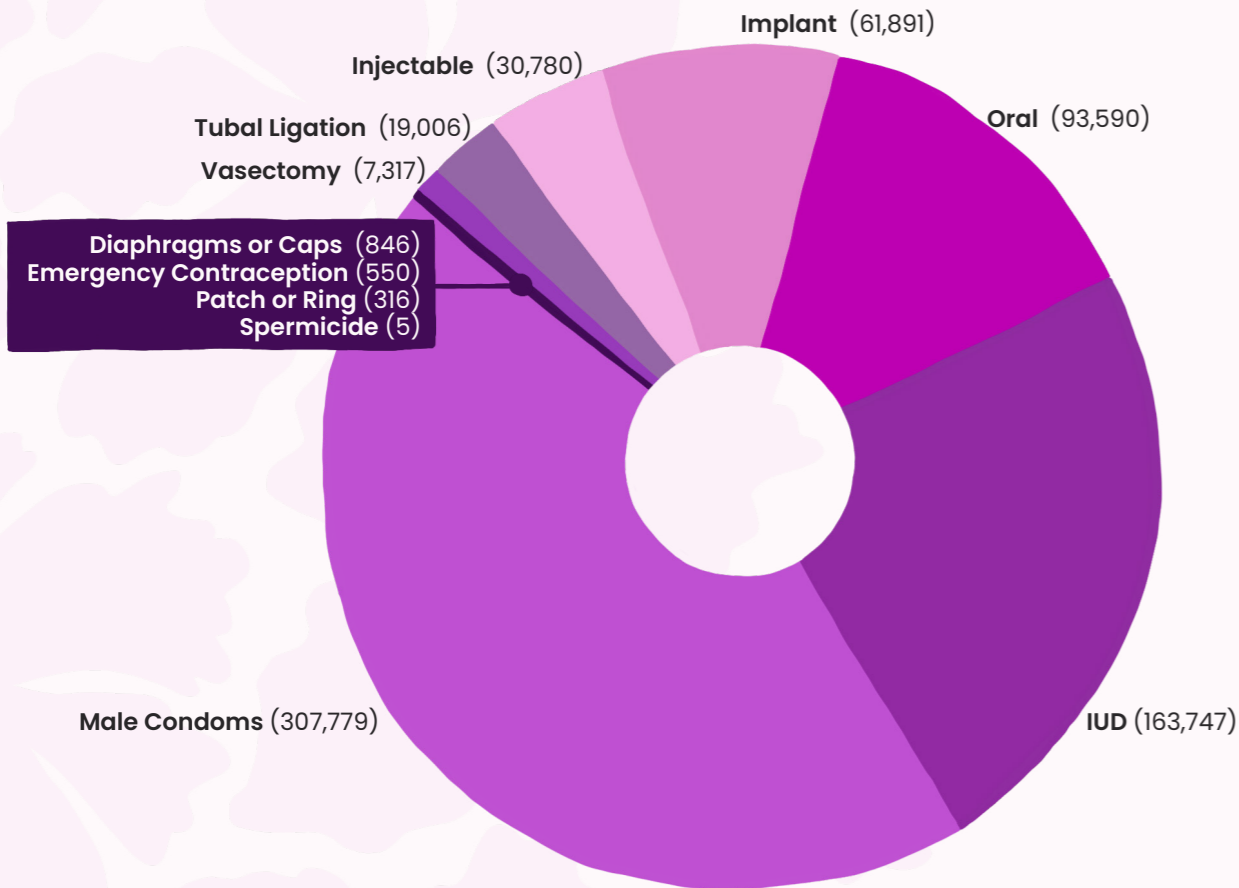


**TABLE 2: COUPLE YEAR PROTECTION (CYP) per MA, 2024**

Member Association	CYP Total
Australia	12,339
Cambodia	46,501
China	229,526
Democratic People's Republic of Korea	88,903
Hongkong	25,626
Indonesia	33,995
Lao PDR	17,728
Malaysia	4,713
Mongolia	2,393
New Zealand	52,355
Philippines	37,301
Republic of Korea	4
Thailand	8,395
Vietnam	111,955
Cook Islands	294
Fiji	362
Republic of Korea	1,101
Papua New Guinea	7,532
Samoa	671
Solomon Islands	2,540
Tonga	168
Vanuatu	1,371
<b>Total</b>	<b>685,823</b>

Data not available for Tuvalu and Marshall Islands

Despite the differences in contraceptive use among MAs, condoms are the leading choice, representing 45% of all methods offered in 2024. This is followed by intrauterine devices (IUDs) and oral contraceptives, making up 24% and 6%, respectively.



**GRAPH 2: COUPLES YEAR PROTECTION (CYP) BY CONTRACEPTIVE METHODS MIX, 2024**

In 2024, we strengthened our commitment to expanding SRHR by reaching significant milestones in cervical cancer screening, fertility care, addressing female genital mutilation, broadening contraceptive options, and advancing transhealthcare.

**PATHWAY 1: Expand Choice**

**1,768,931** STI/ RTI services (2024)

**376,052** abortion-related services (2024)

**Charting a Path Forward on Fertility and Ageing**

East Asia, Southeast Asia, and the Pacific are home to some of the world’s lowest fertility rates. East Asia is grappling with population decline, as seen in Hong Kong’s TFR of 0.8, far below the 2.1 replacement level. Countries like Vietnam and Thailand are also experiencing sharp drops in fertility. Meanwhile, the region is seeing a significant rise in the number and proportion of older adults, fuelled by longer life expectancy and persistently low fertility rates.

The Family Planning Association of Hong Kong (FPAHK) hosted a three-day workshop on Fertility and Ageing, bringing together 30 participants from 10 Member Associations (MAs) and experts from organisations like FP2030, the Vienna Institute of Demography, and the University of **Hong Kong**. This event marked a significant milestone as the first IPPF initiative focused on fertility and sexual and reproductive health (SRH)

issues related to an ageing population. It provided a unique platform to understand demographic shifts and collaborate on how IPPF can best adapt and respond.

The workshop explored low fertility trends and the sexual and reproductive health (SRH) needs of ageing populations, with a focus on policy responses, innovative service models, and advocacy strategies.

Discussions centred on the impact of declining fertility, challenges in elderly SRH care, and gender disparities. MAs developed action plans for 2025–2026, integrating solutions into their programmes. The workshop’s outcomes included country-specific action plans, advocacy recommendations, and commitments to capacity-building initiatives. These will inform the creation of a Regional Fertility and Ageing Learning Hub, co-led by the Family Planning Association of Hong Kong (FPAHK), Family Planning Alliance Australia (FPAA), and the Planned Parenthood Association of Thailand (PPAT).





### PATHWAY 2: Widen Access

Transgender individuals in the **Philippines** face significant barriers to accessing SRH care due to stigma, insufficient provider training, policy gaps, and the lack of an inclusive healthcare infrastructure. As a result, self-medication, especially with gender-affirming hormones, is a common but unsafe practice. In response to this urgent need, the Family Planning Organisation of the Philippines (FPOP) Iloilo Chapter launched Mango Clinic (Managing Affirmation and Gender Optimisation) – the first trans health-focused clinic in the Visayas region.

Developed in partnership with the Philippine Professional Association for Transgender Health (PPATH) and drawing on insights from Thailand’s Tangerine Clinic model, Mango Clinic was created through extensive community consultations and collaboration with trans-led groups. It embodies a health system design model that centres the lived experiences and priorities of transgender communities. The clinic offers comprehensive care, including HIV services, PrEP and PEP, mental health support, and gender-affirming hormone therapy that is rooted in safety, inclusion, and empowerment. It also features integrated, trans-inclusive SRHR services, including the country’s first Estradiol Monitoring Machine to safely

manage hormone therapy.

Youth-friendly services were provided through mobile outreach clinics, community centres, and youth hubs in areas like Chiang Dao and Mae Ai (**Thailand**), Goroka and Lae (**Papua New Guinea**), and Honiara (**Solomon Islands**). These services included contraception, STI prevention, menstrual health support, and SRHR counselling. Creative and digital strategies were also employed. In **Samoa**, youth-led drama clubs and speech competitions raised SRHR awareness in culturally relevant ways, while young people in **Malaysia** and the **Cook Islands** used social media and podcasts to broaden their reach. In **Indonesia**, mobile apps and tech-based leadership tools have empowered adolescents and enhanced access to information.

### PATHWAY 3: Advance Digital & Self-Care

#### Digital Health Innovation Bridging SRH Access Gaps

IPPF ESEAOR piloted a digital health intervention (DHI) model under the *Responding with Essential SRHR Provision and New Delivery Mechanisms* (RESPOND) programme, funded by the Australian Government’s Department of Foreign Affairs and Trade (DFAT) through the Indo-Pacific SRHR COVID-19 Surge Response (C-SURGE) initiative. During COVID-19 lockdowns, IPPF ESEAOR MAs adopted smartphone apps to deliver SRH services and information to communities. In **Indonesia**, the Indonesian Planned Parenthood Association (IPPA) partnered with UNICEF to launch the Oky app, designed to provide engaging, positive information about menstruation. By July 2024, the app had been downloaded over 300,000 times in Indonesia.

### Humanitarian

IPPF has continued to play a critical role in humanitarian response, supporting Member Associations (MAs) to deliver lifesaving sexual and reproductive health (SRH) services in crisis and post-crisis situations. In 2024, IPPF expanded its global humanitarian reach, with MAs delivering essential SRH services with the support of both restricted and unrestricted funding to 14 million clients that year. The Australian Government’s Department of Foreign Affairs and Trade (DFAT) has supported this work in the region through IPPF’s Sexual and Reproductive Health Program in Crisis and Post-Crisis Situations (SPRINT) Initiative since 2007.

With additional support from the New Zealand Ministry of Foreign Affairs and Trade (MFAT), the Sexual and Reproductive Health in Emergencies in the Pacific (SRHiEP) programme aims to improve access to life-saving sexual and reproductive health and rights services for crisis-affected populations, embracing their diverse needs through the implementation of the Minimum Initial Service Package (MISP) for reproductive health in emergencies.

#### Securing SRHR Commitment in Global Disaster Risk Reduction Framework

IPPF ESEAOR secured a major regional advocacy victory by successfully including Sexual Reproductive Health in Emergencies (SRHiE) and sexual and gender-based violence (SGBV) as key components of gender-responsive, inclusive disaster risk governance. This inclusion is part of the Gender Action Plan (GAP), which supports the implementation of the Sendai Framework for Disaster Risk Reduction 2015–2030.

Launched in March 2024, GAP now includes Objective 9, ensuring access to SRHR services and the prevention and response to gender-based violence (GBV)

Implemented in the Cook Islands, Kiribati, and Tuvalu, SRHiEP focuses on strengthening MAs service delivery capacity during stable periods, ensuring they can effectively provide SRH services in times of crisis.

**The SPRINT initiative enabled IPPF ESEAOR Member Associations (MAs) to respond to seven humanitarian crises in four countries between 2023 and 2024, reaching 65,728 people, including 45,438 people with SRH services. The initiative also worked extensively to strengthen the enabling environment, improve national capacity, and support emergency preparedness.**

IPPF’s internal funding mechanism, Stream 3, supported two key humanitarian interventions in the region. In ESEAOR, Stream 3 supported the northern Thailand floods response, reaching 6,591 people, and the Lewatobi Laki-Laki volcanic eruption response in Indonesia, where 10,422 people were reached.

in disaster contexts. This achievement reflects IPPF’s ongoing advocacy during stakeholder consultations. The humanitarian team played a key role in shaping the policy dialogue, contributing to the Asia-Pacific Disaster Risk Reduction (DRR) Gender Stakeholder Group. They also provided critical support to the Gender Observatory and Help Desk at the Asia-Pacific Ministerial Conference on Disaster Risk Reduction (APMCDRR) in the Philippines in October 2024. These efforts amplified SRHR priorities within disaster risk reduction frameworks and strengthened regional coordination for gender-responsive humanitarian action.



Credit: IPPA, Indonesia

### Crisis Preparedness and Care

Nine IPPF ESEAOR MAs across the Pacific, Indonesia, and the Philippines have been actively involved in crisis preparedness and response through the SPRINT and SRHiE initiatives. In 2023, Thailand joined the effort, focusing on the displaced populations from Myanmar now living in camps in Mae Sot province. A core aspect of preparedness is strengthening MAs' capacity, systems, access to supplies, and coordination with other key actors. In 2024, a Pacific Training of Trainers on the SRH

Minimum Initial Service Package (MISP) was held to build a regional pool of trainers, ensuring faster access to MISP services during crises. In Indonesia, MISP training reached vulnerable groups, including persons with disabilities, sex workers, and individuals from diverse SOGIESC. This training helped the Indonesian Planned Parenthood Association (IPPA) better understand the specific challenges faced by these communities, prompting the development of a tailored SRH kit to meet their specific needs in 2024.

### Reproductive Health Support for Displaced Populations in Thailand

Since December 2021, conflict in Kayin State, Myanmar, has forced around 10,000 residents to flee Laykaykaw and nearby villages, causing numerous civilian casualties and disrupting local communities. This has led to widespread displacement, with many Myanmar nationals crossing into Thailand in search of refuge. These new arrivals join nearly 90,000 refugees who have been living in Thailand's nine refugee camps since the mid-1980s.

The Planned Parenthood Association of Thailand (PPAT) is the only local reproductive health organisation authorised by the Ministry of Interior

to provide sexual and reproductive health (SRH) services in these camps. PPAT also serves as a referral centre for health services, particularly for survivors of sexual and gender-based violence, with a focus on reproductive health for the displaced population along the border. Between November 2023 and February 2024, PPAT reached 3,945 individuals and provided 3,899 SRH services as part of a response funded by SPRINT. Given the ongoing crisis, the Japan Trust Fund provided additional funding to support the displaced population, focusing on reducing SRH-related mortality and morbidity, as well as addressing SGBV, HIV, and STI prevalence in Tak Province's border regions.

### Vanuatu Earthquake Response: Delivering Critical SRH Services Amidst Crisis

On 17 December 2024, a powerful earthquake struck Vanuatu, causing widespread disruption to people's lives and essential services just days before Christmas. The Vanuatu Family Health Association (VFHA) responded swiftly, prioritizing critical care, particularly Sexual and Reproductive Health (SRH) services through the Minimum Initial Service Package (MISP). Lina, a registered nurse with VFHA, was among the first responders. In addition to providing SRH care, she also attended to many individuals in need of general medical support.

"I focused on providing both SRH and non-SRH services because I noticed that people were also coming for non-SRH services. As a clinician, I offer services using the knowledge gained from the MISP training", Lina shared.

"In Vanuatu, our culture sometimes limits women and young girls' access to SRH services," Lina said, adding that these barriers were even more pronounced during disaster response.

The earthquake forced the closure of VFHA's main office. As the new location was unfamiliar to the community, there was a temporary drop in service access.

"...with the new location, not many people know where we are at now... we're letting people know that VFHA is still providing services and we have people slowly coming in more numbers," Lina said.

Despite the challenges, Lina and her team stayed committed to providing essential care to pregnant women and others in need, recognising the critical role of SRH services during disasters.

## Indonesia Cianjur Earthquake Response: Mobilising SRH Services and Essential Supplies

In November 2022, a 5.6 magnitude earthquake struck West Java, Indonesia, causing landslides that buried villages near Cianjur. Over 22,000 houses were destroyed, displacing 58,000 people.

The Indonesian Planned Parenthood Association (IPPA) quickly assessed needs, gathered public donations, and distributed 90 dignity kits as part of their initial response. The response, funded by IPPF's Stream 3 wrapped up in July 2023, successfully reaching

17,682 individuals, including marginalised groups like LGBTQ+ communities, people with disabilities, and youth. MAs' strong partnerships with other stakeholders have been key to ensuring cost efficiency in emergency responses. IPPA utilised these partnerships to mobilise life-saving supplies, ensuring continued access to sexual and reproductive health (SRH) services. Americare and the Indonesian Midwives Association provided essential medical supplies and equipment, while IPPA secured dignity kits from UNFPA.

### Strengthening Local Capacity in Post-Earthquake Indonesia.

The Indonesia earthquake response highlighted the challenges of recovery, as damaged health facilities needed more time for restoration. In response, the local government requested a three-month extension of IPPA's efforts. This extension helped maintain SRH services at a tent and included training for local traditional birth attendants (TBAs).

In West Java, TBAs hold significant influence and trust within their communities. Through collaboration between TBAs and IPPA, 63 safe deliveries were supported during the response. By enhancing the capacity of TBAs and linking them to the public health system, the aim was to support recovery while preparing local actors like the TBAs, for future crises.



Luci, 24, moved to the village of Batu Bala in 2016, after marrying her husband, whom she met during visits to her aunt. It was, as she puts it, "love at first sight." Just three months after their wedding, Luci found out she was pregnant. Now, with two children, she and her husband dream of expanding their family but have chosen to wait. Financial pressures and environmental challenges have led them to delay their plans for more children, focusing instead on providing the best life they can for the ones they have.

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The family currently lives in a borrowed house near a school, which became available after the original owner was displaced by flooding. Though their home is elevated above floodwaters, they still face the constant stress of having to evacuate to higher ground. "It's exhausting," Luci said, as she juggles preparing meals and caring for her children.

With her husband often working away from home, Luci runs the household on her own. Despite the challenges, she was able to access contraception through a mobile clinic set up by IPPA at the local primary school.

That's why we must wait." Her story reflects the challenges and resilience of families facing climate risks, limited housing, and it underscores the critical importance of accessible reproductive healthcare.

## Responding with Essential SRHR Provision and New Delivery Mechanisms (RESPOND) Programme

### RESPOND PHASE I

Between 2021 and 2024, IPPF and MSI Reproductive Choices jointly implemented the Responding with Essential SRHR Provision and New Delivery Mechanisms (RESPOND) programme across 22 Asia Pacific countries. Funded by the Australian Government's Department of Foreign Affairs and Trade (DFAT) under the Indo-Pacific SRHR COVID-19 Surge Response (C-SURGE), the initiative provided high-quality, equitable SRH services and reliable information on SRHR and COVID-19 to populations most affected by the pandemic.

IPPF ESEAOR MAs in Indonesia, Cambodia, the Philippines, Lao PDR, Papua New Guinea and eight (8) Pacific Islands and Countries (Kiribati, Tonga, Tuvalu, Samoa, Solomon Islands, Fiji, Vanuatu, Cook Islands) were successful in:

#### Delivering Quality and Equitable SRH Services Through Established Channels

The focus of RESPOND Phase I was to restore and maintain access to SRH services during the COVID-19 pandemic through existing delivery points, including clinics, mobile units, and outreach services, in remote communities. IPPF ESEAOR MAs became crucial partners for governments, providing services that they couldn't offer. Outreach services, already in place with many MAs, were especially important during COVID-19 lockdowns and travel restrictions. In the Pacific, access to quality SRH services in remote areas was limited, and government capacity to meet community needs was low, even before the pandemic.

In **Samoa**, the Samoa Family Health Association (SFHA) delivered vital outreach services under RESPOND Phase I, including STI testing and treatment, a key public

**Between 2023 and 2024, because of RESPOND Phase I, IPPF ESEAOR MAs delivered approximately 1.6 million SRH services to 450,006 clients in 12 countries across South East Asia and the Pacific, preventing an estimated 24,847 unintended pregnancies and 10,428 unsafe abortions.**

health issue. SFHA was one of the few providers reaching remote communities, with a MoU from the Ministry of Health, as public services became overwhelmed by the COVID-19 response.

In **Fiji**, the Reproductive and Family Health Association of Fiji (RFHAF) expanded their mobile outreach to provide SRH services to hard-to-reach areas and communities at high risk of SGBV, STIs, and HIV. In collaboration with the Ministry of Health and Medical Services (MoHMS) and the Ministry of Youth and Sports, RFHAF targeted high-risk groups, including young people, due to high adolescent pregnancy and STI rates. Their strong partnership with MoHMS allowed them to integrate into the national COVID-19 response, extending their reach to remote communities, even travelling by sea for days to deliver services. We found that our collaboration with local government nurses was key to successful coordination and case identification.

#### Expanding Cervical Cancer Screening Services in Solomon Islands and Lao PDR

The Solomon Islands Planned Parenthood Association (SIPPA) expanded cervical

cancer services at the Auki clinic under RESPOND, partnering with the government to reach remote communities in Malaita province in the Solomon Islands.

In Lao PDR, cervical cancer screening using Visual Inspection with Acetic Acid (VIA) was expanded to remote communities in Luang Namtha and Bokeo provinces

through government-associated clinics. Under RESPOND Phase I, the Promotion of Family Health Association of Lao PDR (PFHA) trained 245 government healthcare providers to conduct VIA screenings. These trained providers have screened over 700 women, leading to a 25% increase in early detection rates.

Ms Phengsy, a 38-year-old midwife from Viengsavang Village in the Kmu tribe, has become a cornerstone of cervical cancer prevention in her community. Trained by the Promotion of Family Health Association of Lao PDR (PFHA) in the use of Visual Inspection with Acetic Acid (VIA) for cervical cancer screening, she gained the skills to detect cervical abnormalities. With newfound confidence, Ms. Phengsy now performs screenings daily at the hospital and runs mobile clinics, reaching women in remote areas who otherwise might not have access to such essential services.

Her efforts have sparked a significant rise in women seeking VIA screenings, leading to earlier detection and better health outcomes. The impact has been profound – not just for Ms Phengsy's, but on the entire community. Women now have access to crucial health screenings, empowering them to take control of their well-being.

"Let's engage in good health for women of reproductive age," she says, reaffirming her commitment to continue providing these services long after the programme ends.

#### Delivering Quality and Equitable SRH Services Through Established Channels

In **Indonesia**, the Indonesian Planned Parenthood Association (IPPA) strengthened static health facilities by training staff and healthcare providers across all 25 chapters in identifying and supporting SGBV survivors. In partnership with local organisations in Central Kalimantan and East Nusa, IPPA provided psychosocial, legal, and welfare support to survivors, referring over 15,000 individuals for follow-up care.

In **Cambodia**, the Reproductive Health Association of Cambodia (RHAC) worked closely with the Ministry of Health to integrate SGBV indicators in the national Health Information System (HIS), thereby improving SGBV data collection at government health facilities.

In the **Philippines**, the Family Planning Organisation of the Philippines (FPOP) introduced SOPs for integrating SRH and SGBV services, offering clear guidance on gender-responsive practices in SGBV case management. These SOPs emphasise

early detection, intervention, and referrals for medical treatment, counselling, and legal support. FPOP also shared the SOPs with local government partners across city, municipal, and barangay levels to improve public service delivery and strengthen referral pathways for SGBV and SRH.

### Expanding Access to Telemedicine and Alternative Service Delivery for Youth and Remote Communities in Kiribati and the Philippines

In **Kiribati**, the Kiribati Family Health Association (KFHA) launched an online clinic using the Vsee App, providing a platform for delivering SRH information and services to youth. This initiative addresses the stigma young people often face when seeking in-person care, offering a more accessible digital option. As the first telemedicine service of its kind in the Pacific run by an IPPF MA, it marks a significant step in improving healthcare access for remote communities.

Meanwhile, in the **Philippines**, the Family Planning Organisation of the Philippines (FPOP) introduced *Reproductive Health Now (RHNow)*, a home-based service for SRH commodities. After consultation via hotline or telemedicine, *RHNow* delivers self-administered family planning products, like pills, condoms, and pregnancy test kits, directly to clients. Originally launched in Quezon City, *RHNow* has expanded across Metro Manila and Rizal Province and became a key service delivery channel, especially during pandemic restrictions.

### Providing Accessible, Trusted SRH and COVID-19 Information to Pacific Communities

Across the Pacific, IPPF MAs used RESPOND to expand access to Comprehensive Sexuality Education (CSE) and SRH information for young people, both in and out of school. In the **Cook Islands**, the Cook Islands Family Welfare Association (CIFWA) partnered with local schools and key stakeholders to implement in-school CSE programmes. CIFWA's peer educators worked closely with medical staff to increase SRH service uptake among youth and led advocacy efforts to engage the wider community.

CIFWA's advocacy was also aimed at changing attitudes toward CSE, creating safe spaces for young people to access SRH services and information outside school settings. Through the RESPOND project, CIFWA established new youth-friendly spaces in Rarotonga and Aitutaki, offering a confidential, inclusive environment for underserved groups, including young LGBTQIA+ individuals, to access SRH resources.

### RESPOND PHASE II

Building on its successful outcomes and strong partnerships, RESPOND Phase II was launched in 2024, in collaboration with MSI, across at least seven countries in Asia Pacific and South Asia, including the Philippines, Vietnam, and Laos.

Over the next four years, the programme will strengthen local capacity to deliver inclusive SRH services, integrating support for sexual and gender-based violence (SGBV) and focusing on marginalised communities. In addition to providing critical SRH information, the initiative will offer CSE to young people and promote national and regional SRHR advocacy.



PILLAR 2

# Move the Sexuality Agenda



## PILLAR 2: MOVE THE SEXUALITY AGENDA

As the global anti-rights movement threatens to undo progress in sexual and reproductive health and gender equality, IPPF ESEAOR stands firm in defending and advancing hard-won gains. Our mission is to empower individuals to make informed choices about their health and futures. To achieve this, we focus on three key strategies: Ground advocacy, Shifting Societal Norms, and Acting with Youth.

**Goal:**  
Societal and legislative change for universal sexual and reproductive rights.

Results Framework		MAs reporting	2024 result	2023 result
5	Number of successful policy initiatives and legislative changes in support or defence of SRHR	7	17	8

TABLE 3: REGIONAL PERFORMANCE RESULT - PILLAR 2

In 2024, IPPF ESEAOR’s MAs achieved 17 successful policy and legislative changes in support of SRHR across seven countries. Australia led with eight wins, while China, Indonesia, and the Philippines each reported two, and Cambodia, Thailand, and Hong Kong secured one each. Of these, 11 were national-level changes, and 6 were at the sub-national level. Three of these wins focused on SRH education, while two were related to LGBTQI+ rights while the other wins spanned areas such as gender-based violence in emergencies, child and adolescent healthcare, fertility, menopause, access to safe abortion, long-acting reversible contraception (LARC), anti-discrimination efforts, and disability rights.

IPPF is dedicated to fostering meaningful youth participation, particularly through youth networks and advancing CSE. A key part of this involves empowering youth network officers, under 25, at the Kuala Lumpur Regional Office (KLRO) and the Sub-Regional Office for the Pacific (SROP). These officers serve as vital links between the Federation and youth volunteers, strengthening regional networks and ensuring that youth voices lead the way.

Additionally, IPPF ESEAOR supports two major regional youth networks: YSNAP (Youth SRHR Network in East & Southeast Asia and the Pacific) and Youth OCEANs (Youth Oceanic Consortium for Engagement, Advocacy & Network on SRHRJ), which play key roles in youth advocacy and leadership in SRHRJ.

Under Pillar 2, IPPF is embarking on research in two important areas: Gender equality and inclusion (Indicator 6), and the effectiveness, reach, and impact of comprehensive sexuality education (CSE), access to youth-centred care, and progress in youth engagement (Indicator 7). These studies are based on data from a sample of MAs and will provide valuable insights into key issues. Detailed findings from these studies are available in IPPF’s Annual Performance Report (APR).

In 2024, IPPF ESEAOR MAs reached **over 28.4 million young people with comprehensive sexuality education (CSE)**, while training more than 75,181 volunteers and providers to deliver it effectively. China led the way, reaching 28.1 million young people and training 70,000 peer educators, marking a significant contribution to the region’s CSE efforts.



**PATHWAY 1: Ground Advocacy**

**Thailand’s historic step towards equality: Legalising same-sex marriage**

In January 2025, **Thailand** made history by becoming the third country in Asia to legalise same-sex marriage, a monumental step for LGBTQ+ rights in the region. This was the culmination of over a decade of tireless advocacy by the Planned Parenthood Association of Thailand (PPAT). Since 2018, PPAT has been an active voice in the technical committee for the Marriage Equality Bill, pushing for change and engaging in grassroots outreach, especially in remote areas of Thailand.

PPAT’s success was made possible through strategic partnerships with groups like the Equal Marriage Law Committee, the National Youth Council, the Department of Rights, Liberties & Protection, and the Rainbow Sky Association of Thailand (RSAT).

Beyond advocacy, PPAT empowered youth with sexual and reproductive health education in partnership with the Ministry of Social Development and Human Security. Their work with marginalized communities raised awareness and ensured access to essential services, making this milestone a true reflection of collective effort and inclusivity.

**Indonesia: Advancing protection against SGBV in crisis situations**

In **Indonesia**, the Indonesian Planned Parenthood Association (IPPA) played a key role in revising the Minister of Women’s Empowerment and Child Protection (PPPA) Regulation No. 13 of 2020. The revision focuses on protecting women and children from gender-based violence (GBV) in crisis situations. This policy change paves the way for activating GBV sub-clusters during emergencies, ensuring better protection, care, and support for women and girls before, during, and after disasters.

IPPA is also collaborating with the Ministry of Women’s Empowerment and Child Protection to develop training modules to equip responders with the necessary skills to address GBV in disaster situations. Looking ahead, IPPA is also working with UNFPA on a national roadmap, which will integrate climate change and GBV prevention strategies for the years 2025 to 2027.

**Australia: Advancing Gender Equality and Diversity**

In **Australia**, the Family Planning Alliance Australia (FPAA) contributed to the development of the government’s International Disability Equity and Rights Strategy. This new initiative was designed to enhance the lives of people with disabilities, particularly through Australia’s international development and humanitarian efforts via the introduction

of a performance target for disability equity in Australia. Central to the strategy’s vision was a commitment to ensuring that people with disabilities, especially women and girls, had fair access to essential SRH services.

In New South Wales (NSW), FPAA’s network worked closely with the member of parliament sponsoring the Equality Legislation Amendment (LGBTIQA+) Bill 2024, sending a letter of support to the Premier. Their efforts helped push the Bill forward, and in October 2024, the NSW Parliament passed the amendments. These reforms aimed to reduce discrimination and improve protections for people with diverse gender identities, sexualities, and sex characteristics. Notably, they allowed individuals to update birth certificates without surgery, replaced outdated and

stigmatising language around HIV/AIDS, and made it an offence to reveal someone’s LGBTIQA+ status without their consent.

**Solomon Islands to Strengthen Reproductive Health Efforts**

Following a visit from IPPF Director-General Dr Alvaro Bermejo, **Solomon Islands** Prime Minister Manasseh Sogavare committed to strengthening the country’s sexual and reproductive health (SRH) efforts. He praised the Solomon Islands Planned Parenthood Association (SIPPA) for reaching 70,000 people – about 10% of the population – despite cultural barriers and challenges in remote areas. This pledge underscores the government’s dedication to improving the health and well-being of future generations in the Solomon Islands.



## PATHWAY 2: Shifting Norms

### Countering Anti-Rights and Anti-Gender Opposition

IPPF took the opportunity to address the growing anti-rights movements and present counter strategies at the Australasian AID Conference (AAC) in December 2024. The IPPF-organised panel was moderated by the Australian Ambassador for Human Rights, Bronte Moules and featured experts from the Australian National University, Justice for Prosperity (JfP), and IPPF. The discussion focused on the rise of authoritarianism and the global anti-rights movement, particularly its impact on gender and sexual rights in democracies, including those in the Asia-Pacific region. Panellists shared findings from a joint report by IPPF and JfP, which explored how powers exploit societal divisions to push ideological agendas. They also discussed harmful narratives and strategies to counter misinformation and resist regressive policies. The report and discussion sparked significant interest, highlighting the urgent need for stronger partnerships across movements to defend rights and progress.



At IPPF ESEAOR, we collaborate closely with our MAs and regional partners to counter opposition and minimise its impact on SRH service delivery. Through grants and strategic support, we influence public discourse and policy, proactively anticipating and neutralising threats. We also work to strengthen our collective ability to monitor trends and predict attacks, ensuring a more resilient response.



### Engaging Media to Counter Disinformation and Harmful Narratives

In response to growing global challenges to reproductive justice, IPPF ESEAOR, in partnership with the Asia-Pacific Institute for Broadcasting Development (AIBD), created a guide to help media professionals counter disinformation and harmful narratives. Navigating Sexual and Reproductive Health, Rights & Justice in Asia Pacific: A Practical Guide to Ethical Reporting & Content Creation for Media Practitioners offers insights on how media can approach sexual and reproductive health, rights, and justice (SRHRJ) topics amid the rise of right-wing policies and misinformation. The guide was built on a three-day online training for 50 journalists

across 17 countries, including Malaysia, Indonesia, the Philippines, and Vietnam, focusing on ethical reporting and creating impactful SRHRJ content.

IPPF ESEAOR partnered with Citizens News Services (CNS) to co-host the *Sexual Health with Equity and Rights Initiative* (SHE & Rights Initiative), a monthly webinar series aimed at enhancing media understanding and engagement on SRHRJ, bodily autonomy, and gender justice from an equity and Right to Health perspective. Launched in September 2024, the series has covered topics such as safe abortion care, Beijing+30 accountability, and disability rights and SGBV, and will continue throughout 2025.

### Collaborative Effort to Eliminate FGM in South East Asia

In July 2024, IPPF ESEAOR, IPPF Arab World Region (AWR), Malaysian Doctors for Women and Children (MDWC), and the Indonesian Planned Parenthood Association (IPPA) signed a Memorandum of Agreement to eliminate Female Genital Mutilation/Cutting (FGM) in **Indonesia**. The partnership aims to strengthen healthcare capacity, develop context-specific FGM prevention tools, and raise parental awareness through evidence-based counselling. IPPF ESEAOR and AWR, through the FGM Centre of Excellence in Mauritania, offer regional expertise in SRHR advocacy, while MDWC contributes medical knowledge and global networks. IPPA leads community engagement efforts, training local midwives and creating educational materials to raise awareness of FGM's harms. Together, the partners are implementing a coordinated approach to eradicate FGM in Indonesia.



At the national level, IPPA is collaborating with government stakeholders to refine FGM programming in line with Indonesia's Roadmap to Eradicating FGM by 2030. Through data-driven research, capacity building, and strategic partnerships, IPPA has taken proactive steps to combat FGM. In partnership with Semarang University, IPPA published research mapping FGM drivers and community needs in South Kalimantan and Riau, helping shape future programming.

Under RESPOND Phase II, IPPF will launch a regional FGM/C initiative from mid-2025 to mid-2028, involving at least five MAs in ESEAOR and SARO, including Indonesia, the Philippines, and Thailand. The initiative will focus on social change, advocacy, evidence-building, and capacity building of service providers. It will work closely with the IPPF Arab World Region FGM CoE and partner with TUSIP, UNFPA, and UNICEF to enhance FGM/C efforts across Southeast and South Asia.

### PATHWAY 3: Act With Youth

IPPF champions the power of young people to shape their own futures. Across East and Southeast Asia and the Pacific, youth leaders are taking collective action to break down cultural, social, economic, and political barriers that limit access to sexual and reproductive health and rights (SRHR). Whether facing climate crises or growing conservatism, IPPF's youth networks - YSNAP and Youth OCEANS - are on the frontlines, advancing Sexual and Reproductive Health Rights and Justice (SRHRJ) for all.

In 2024, IPPF ESEAOR appointed two Youth Networkers to lead regional initiatives. As part of the MA-facing team, they brought energy, insight, and lived experience that helped shape our youth-focused programming. Working closely with MA youth representatives, they co-designed

programmes, set youth budgets, and led initiatives across the region.

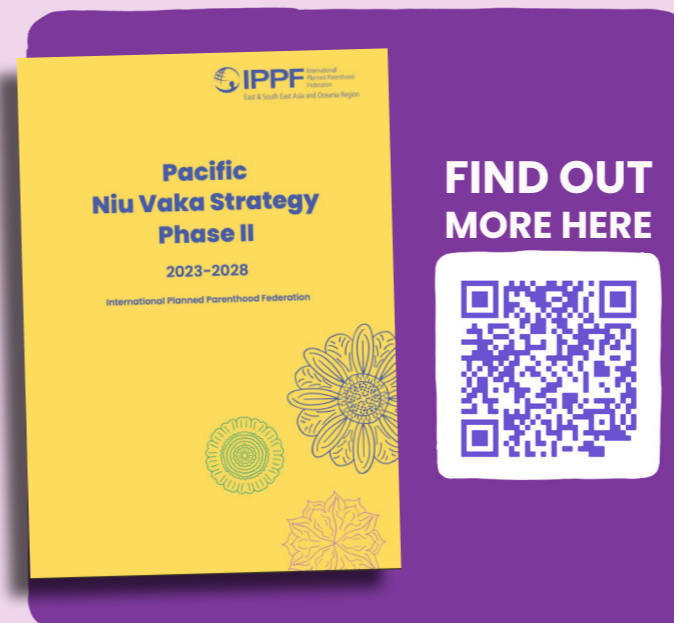
Under the leadership of Youth Networkers and youth representatives - who drove initiatives in capacity building, advocacy, campaigning, networking, and movement-building - youth engagement deepened across the region in 2024. YSNAP conducted an Advocacy Training in Mongolia for 10 youth representatives, strengthening their ability to influence policy and lead SRHR advocacy. The training focused on developing both technical and soft skills for effective collaboration and boosting participants' confidence in promoting SRHRJ. Additionally, a Communications and Advocacy Training for 13 ESEAOR participants enhanced their digital communication skills, including social media management, content creation, poster design, website maintenance, and aligning messages with IPPF guidelines.

The 2024 Regional Youth Forum brought together 21 youth representatives from Member Associations, Associate Members, and Collaborative Partners in a dynamic, inclusive space to exchange ideas and tackle SRHR challenges. Co-designed by the youth themselves, the forum featured interactive sessions, case studies, and collaborative activities that encouraged open dialogue and peer learning. The forum strengthened regional youth networks, identified key advocacy priorities, such as advancing comprehensive sexuality education (CSE), and built skills for effective, youth-led advocacy. Strategic recommendations focused on sustaining youth involvement in governance, promoting inclusive policies, using digital tools to amplify advocacy, and fostering stronger partnerships across youth and stakeholder networks. Long-term impact was a key focus, with calls for scalable, youth-driven initiatives supported by robust monitoring and evaluation.

## Pacific Niu Vaka Strategy Phase II

The Niu Vaka II builds on IPPF's Come Together Strategy 2028, aligning with the shifting priorities and unique contexts of Pacific Member Associations (MAs). In this second phase, the initiative aims to drive meaningful change in sexual and reproductive health and rights (SRHR) across the Pacific through targeted, local, relevant interventions.

At the heart of this effort is the Sub-Regional Office for the Pacific (SROP), which plays a critical role in enabling MAs to deliver high-quality SRHR programmes. These include comprehensive service delivery, sexuality education, and robust policy advocacy. Through both in-country and remote technical support, SROP strengthens governance, improves service quality, ensures data integrity, and fosters resilient, sustainable organisations that are equipped to meet the evolving needs of their communities.



In 2024, Pacific MAs delivered 507,730 SRH services to 126,102 individuals through 69 service delivery points, including static clinics, mobile clinics and community-based distribution channels.

**70%**  
female clients

**35%**  
of clients under the age of 25

**14,040**

Couple Years of Protection (CYP) delivered by nine (9) Pacific MAs  
Papua New Guinea Family Health Association (PNGFHA) contributed to nearly half

**41%**  
of clients categorised as marginalised/vulnerable

## Expanding Access and Innovation in Cervical Cancer Prevention

Cervical cancer remains a major health crisis in the Pacific, with mortality rates estimated to be nine times higher than in neighbouring Australia. It is one of the leading causes of cancer-related deaths among Pacific women. Addressing this burden, Pacific MAs are at the forefront of efforts to raise awareness and expand access to screening and treatment, working in close partnership with national health systems. Notably, Tuvalu and the Cook Islands have met the WHO target of screening at least 70% of women aged 30 to 49—marking a significant milestone in regional progress.

All Pacific MAs provide cervical cancer screening, with **Solomon Islands** and **Tuvalu** offering Visual Inspection with Acetic Acid (VIA) or self-collection swabs alongside GenXpert testing. This approach enables early detection and timely treatment of low-grade lesions using thermal ablation, improving outcomes for women across the region.

Reproductive and Family Health Association of Fiji has secured a DFAT Post grant to acquire a GenXpert machine, enabling decentralised cervical cancer testing with faster results and wider reach. This upgrade significantly boosts diagnostic capacity at RFHAF's Suva clinic and extends vital healthcare services to more communities. It also strengthens Fiji's broader healthcare infrastructure by improving access to high-quality diagnostic tools.

## Strengthening Regional Capacity to End SGBV

In 2024, SROP and several Pacific MAs took part in consultations on DFAT's new International Gender Equality Strategy, which calls for stronger action to end

SGBV and to advance and protect women's sexual and reproductive health and rights (SRHR). Launched in February 2025, the Strategy positions SRHR and SGBV as core priorities, recognising their critical role in advancing equality for women and girls in all their diversity.

As part of a two-year initiative to strengthen SGBV response across the Pacific, SROP delivered over 10 SGBV Fundamentals trainings to more than 145 staff, volunteers, and partners from MAs in the Cook Islands, Fiji, PNG, Samoa, Solomon Islands, Tonga, and Vanuatu. In 2024, the first cohort of MA SGBV Fundamentals trainers led in-person sessions, reaching 127 participants, including youth and partners. All nine Pacific MAs remained active in their national SGBV referral mechanisms, reinforcing their commitment to coordinated, survivor-centred support.

## Advancing Inclusive SRHR Through Partnerships and Outreach

Pacific Member Associations continue to foster strong informal partnerships with local disability organisations and diverse SOGIESC advocacy groups to promote inclusive SRHR. In Samoa, the Samoa Family Health Association (SFHA) works closely with Nuanua O Le Alofa (NOLA) and the Samoa Fa'afafine Association (SFA) to align efforts. In the Cook Islands, the Child Welfare Association partnered with Te Kainga O Pa Taungato to extend service reach and deepen community engagement. Meanwhile, RFHAF collaborates with the Rainbow Pride Foundation to enhance LGBTQI+ youth participation and deliver more inclusive SRH services.

The Solomon Islands Planned Parenthood Association (SIPPA) continues to deepen its partnership with the Christian Care Centre, an SGBV shelter, to provide essential clinical services and information



to survivors of violence. SIPPA has also renewed its MOU with People with Disabilities Solomon Islands to deliver SRH training tailored to women and young people with disabilities. Through targeted awareness sessions with church and youth leaders, and workshops for men as partners, SIPPA has engaged over 600 participants. These efforts are building a network of male champions, youth, and community gatekeepers advocating for inclusive SRH access and driving positive shifts in community attitudes.

Papua New Guinea Family Health Association launched two new UNFPA-supported Youth Friendly Centres in Goroka and Lae, expanding access to youth-focused SRH services. In partnership with the Provincial Health Authority, PNGFHA also carried out four mobile clinical outreach programmes in Lae, Goroka, and Port Moresby. These efforts reached 5,433 young people, distributing 14,129 condoms and 2,665 educational materials, and delivering SRH awareness sessions across 30 communities.

## Youth-led action for SRHRJ in the Pacific

Nearly a quarter of the Pacific population is made up of young people, yet many youths still face serious gaps in access to

sexual and reproductive health care.

Accurate information and services are limited, leaving many unsure where to turn. In response, the Youth Oceanic Consortium for Engagement, Advocacy and Networking in SRHRJ (Youth OCEANS) was launched in 2024 – a bold, youth-led regional initiative dedicated to advancing young people's sexual and reproductive health, rights, and justice across the Pacific. Youth OCEANS champions meaningful youth participation at all levels, including in humanitarian settings. It provides a safe, inclusive space for marginalised youth, strengthens regional networks, promotes knowledge-sharing, and fosters innovation. Through mentorship, skills-building, and leadership development, it empowers the next generation to shape the future of SRHR in the Pacific.



PILLAR 3

# Solidarity for Change



**PILLAR 3: SOLIDARITY FOR CHANGE**

Opposition to sexual and reproductive health and rights (SRHR) and gender equality is growing more coordinated and vocal. In response, IPPF ESEAOR stands firmly in solidarity with all groups and activists fighting for change. We support social movements, amplify their work, and build strategic partnerships within and outside our sector. Through innovation and knowledge-sharing, we aim to advance SRHR for all.

**Goal:**  
**Amplify impact by building bridges, shaping discourse, connecting communities, movements, and sectors.**

Results Framework		MAs reporting	2024 result	2023 result
8	IPPF’s contribution in supporting social movements and defending activists	-	This is a global indicator. Full results reported in IPPF’s AR.	
9	Number of intra- and inter-sector campaigns delivered by the federation in support or defence of SRHR, through a diversity and decolonization lens	3	36	3
10	Proportion of research and evidence initiatives generated by MA-led centres of learning that are from the global south	-	This is a global indicator. Full results reported in IPPF’s AR.	

TABLE 4: REGIONAL PERFORMANCE RESULT - PILLAR 3

Indicator 8 is based on a research study, and Indicator 10 is a global indicator; the results for both these indicators are reported in IPPF’s Annual Performance Report. Malaysia, the Philippines, and Thailand reported delivering advocacy, communications, or political campaigns to raise awareness, change public opinion, or influence public policy and/or legislation related to SRHRJ.

collaborations were transformative: In the Philippines, FPOP partnered with Voices for Sexual Rights (VSR) to bring SRHR services to sex workers, while in Indonesia, IPPA expanded harm reduction efforts for women drug users with Yayasan Suar Perempuan Lingkar Napza Nusantara (SPINN). Both initiatives centre community leadership and sustainability.

Community Engagement and Partnership (CEP) is central to IPPF’s mission of delivering SRHR for all. In 2024, IPPF ESEAOR made significant strides by amplifying the leadership of marginalised communities often excluded due to stigma, criminalisation, and systemic discrimination.

The CEP initiative also led to bold proposals like the sex work consortium by PPAT and a harm reduction project for male and transgender sex workers in Thailand, co-developed with Service Workers in Group (SWING). Regional efforts such as the South-South Dialogue lifted young LGBTIQ+ voices across Asia and the Pacific.

From trans communities and sex workers to people who use drugs, prisoners, migrants, and indigenous peoples, CEP supported MAs to forge decolonial, co-designed partnerships. These

To support this work, the CEP cohort developed a practical framework for building partnerships with community-led

organisations, grounded in regional mapping and feedback. This framework will guide future inclusive, rights-based SRHR programming across the region. Looking ahead, CEP will remain crucial in advancing IPPF's Come Together Strategy 2028, ensuring programmes are inclusive, locally owned, and rooted in equity and justice amidst growing opposition and crises.

### **PATHWAY 1: Support Social Movements**

#### **South-South Dialogue: Young LGBTIQ+ Leaders Unite for Decolonial Advocacy in Asia Pacific**

In September 2024, IPPF ESEAOR and SARO co-hosted the South-South Dialogue in Bangkok, uniting 17 emerging LGBTIQ+ activists from South Asia, Southeast Asia, and the Pacific. This landmark event created a space for intergenerational exchange among young grassroots leaders, experienced advocates, and IPPF staff, fostering solidarity, learning, and regional collaboration.

The Dialogue focused on crafting decolonial, intersectional advocacy initiatives rooted in local realities, moving beyond Western-centric perspectives to amplify experiences shaped by class, climate vulnerability, and colonial history. Participants addressed critical issues like stigma, criminalisation, and limited access to SRHR, while strategizing for change.

By facilitating South-South learning and building cross-border connections, the Dialogue set the stage for future advocacy efforts. Several youth-led projects that came out of the event are now under consideration for funding through IPPF's Opportunity Grant in 2025, further empowering grassroots leadership in LGBTIQ+ rights and SRHR.

#### **Empowering Sex Workers Through Community-Led SRHR: FPOP and VSR's Groundbreaking Partnership**

In 2024, the Family Planning Organisation of the Philippines (FPOP) launched a bold four-month project with Voice for Sexual Rights (VSR), an unregistered community group of female sex workers, supported by IPPF through RESPOND Phase I. Despite VSR's lack of legal status, FPOP formed a working partnership with VSR, hiring its members as project officers and volunteers. This groundbreaking collaboration empowered sex workers to lead as outreach workers, peer educators, and community advocates.

Through this project, sex workers took the lead in educating peers on SRHR, SGBV, HIV/STI prevention, and human rights, while also supporting them to access confidential, stigma-free services at FPOP health centres. A situational analysis conducted during the project provided crucial baseline data on street-based and online sex workers in Metro Manila.

The partnership culminated in a joint evaluation where FPOP and VSR reflected on key lessons. Following this, VSR became a member of the Asia Pacific Network of Sex Workers (APNSW) and joined a broader Sex Work Consortium project led by the Planned Parenthood Association of Thailand (PPAT). Several MAs across ESEAOR have since expressed interest in replicating this community-led model.

### **PATHWAY 2: Build Strategic Partnerships**

#### **Centering the Margins: Women Who Use Drugs Lead SRHR Change in Indonesia**

In Indonesia, a powerful partnership between PKBI (IPPA) and SPINN, a community-led group of women who use drugs, is reshaping what inclusive SRHR

programming can look like. Funded by IPPF, the project is co-designed and co-implemented by IPPF's RESPOND Phase I (in 2024) and the Opportunity Grant (in 2025). The initiative challenges top-down models by placing women who use drugs at the heart of service design and delivery. Far from being passive recipients, SPINN members lead outreach, mobile clinics, and manage shelters with child-friendly spaces. Their lived experience enriches PKBI's service delivery, while PKBI's infrastructure helps extend SPINN's impact. Together, they're closing critical gaps in SRHR and GBV services for some of the most marginalised women.

While navigating different institutional cultures has posed some challenges, the partnership shows that rights-based, decolonial approaches work. Embedding this model into core programming will require sustained investment, but it's already gaining global recognition, with insights shared at the 2024 AWID Conference and the 2025 Harm Reduction Conference.

### **PATHWAY 3: Innovate and Share Knowledge**

#### **Solidarity For Change: IPPF ESEAOR Regional Gathering 2024**

In late 2024, Iloilo City, Philippines, hosted the "Solidarity for Change" regional gathering—a vibrant space for dialogue, exchange, and strategy-building on key SRHRJ issues. Participants tackled urgent topics including barriers to safe abortion, rising opposition, community partnership-building, and climate resilience.

The event highlighted the pressing need for collective action across the region. Through open conversations and shared commitments, IPPF ESEAOR MAs and the Secretariat renewed their focus on community-



driven, context-specific solutions for marginalised groups.

The connections and insights forged here lay the groundwork for stronger alliances, locally led initiatives, and a united push for sexual and reproductive justice across the region.

#### **Building a Bold Alliance for Sex Workers' Rights**

In 2024, IPPF's CEP Leads from ESEAOR and SARO played a key role in helping MAs across the Asia Pacific co-develop a successful bid for the Strategic Fund 2 Sex Work Policy Consortium. Led by the Planned Parenthood Association of Thailand (PPAT), the winning proposal was a result of close collaboration among MAs – including IPPA (Indonesia), FPA Sri Lanka, FPOP (Philippines), and Profamilia (Colombia) – alongside national, regional, and global sex worker-led organisations.

Through strategic guidance, technical support, and effective matchmaking, the External Relations team connected MAs with networks like APNSW and NSWP, supported co-design with sex worker partners, and ensured the proposal reflected shared leadership and lived experience. The process not only strengthened the bid but also laid the groundwork for a rights-based, inclusive programme advancing decriminalisation, SRHR, and sex worker empowerment across five countries and three regions.

PILLAR 4

# Nurture Our Federation



## PILLAR 4: NURTURE OUR FEDERATION

The fourth pillar focuses on us – the Federation – grounding our work in shared values, efficiency, and sustainability. It’s about strengthening who we are to meet 21st-century challenges and deliver on our bold strategy. To Nurture our Federation, we follow three critical pathways: Charting our Identity, Growing our Federation and Walking the Talk.

**Goal:**  
**Replenish and nurture the federation from a common value base and unleash our collective power for greater impact.**

Results Framework		MAs reporting	2024 result	2023 result
11	Proportion MAs/CPs receiving less than 50% of their income from one single donor	10	70%	-
12	Overall Secretariat Efficiency Score	-	This is a global indicator. Full results reported in IPPF’s AR.	

TABLE 5: REGIONAL PERFORMANCE RESULT – PILLAR 4

In 2024, 10 MAs (70% of IPPF ESEAOR’s grant-receiving MAs) reported that their largest single donor accounts 50% or less of their total annual income, marking a shift toward greater financial resilience.

In 2023 and 2024, IPPF ESEAOR undertook a strategic realignment of its Secretariat, advancing Pillar 4 of Strategy 2028. This shift signalled a renewed commitment to responsive governance, operational excellence, and more inclusive partnerships across the region.

The realignment restructured the Secretariat into three core clusters: Member Association Support and Development, External Relations, and Corporate Services. This new setup was designed to better support MAs, strengthen advocacy and partnerships, and reinforce corporate governance.

Several new roles were created, namely Architects of Cooperation, Community Engagement and Partnership Lead, Youth Networkers, and Business Analysts, to enhance systems and processes, ensuring

the Federation is future ready.

As part of our efforts to strengthen integrity and accountability, 10 Member Associations in the region underwent re-accreditation assessments based on IPPF’s Standards and Responsibilities of Membership. These evaluations reviewed governance, programming, financial management, and compliance, creating space for continuous improvement. Internal audits were also conducted in five MAs, serving both as oversight and capacity-building tools to identify gaps, strengthen systems, and reinforce transparency.

At a time when anti-rights movements are growing louder and health systems are facing mounting pressure, IPPF ESEAOR’s work has never been more vital. By investing in people, reforming structures, and strengthening systems rooted in the Federation’s core values, we’re not just adapting, we’re preparing for the future. Through strategic restructuring, capacity building, participatory governance, and accountability, ESEAOR is contributing to a stronger, more resilient Federation.

## PATHWAY 1: Chart Our Identity

The past two years have marked a period of transformation for IPPF. In 2023, the Federation launched an identity initiative to revisit its core values and refresh its brand. Across wide-ranging internal consultations, there emerged a clear vision of IPPF as a global champion for sexual and reproductive rights – rooted in solidarity, community, and the power of collective action. A Charter of Values is now being crafted to guide this renewed identity and meet today’s challenges. In ESEAOR, Member Associations contributed to these discussions during regional forums in Bali (October 2023) and Iloilo City (October 2024). The final decisions will be made at the General Assembly in Bali, November 2025.

## PATHWAY 2: Grow Our Federation

### Mobilising Resources

IPPF’s resource allocation model is built around three funding streams. Stream 1, Accelerating the Response, directs 80% of resources to support Member Associations and the Secretariat. Stream 2, the Strategic Fund – 15% of the annual budget – supports new initiatives, removes barriers, and responds to emerging local needs. This includes the Consortium Fund and regionally managed Opportunity Grants, which help MAs seize timely opportunities. Stream 3 is dedicated to Initial Emergency Response, providing rapid, flexible funding when urgent action is needed. Together, these streams ensure the Federation stays responsive, strategic, and grounded in local realities.

Since 2023, IPPF ESEAOR has awarded Opportunity Grants to six Member Associations for eight projects, disbursing a total of US\$240,000. These include:

- Establishing a Regional Learning Hub (RLH) for Trans and Gender Diverse Healthcare in Iloilo City, the Philippines;
- Enhancing SRH service delivery by improving the accessibility and quality of care for women who use drugs in Bogor, Indonesia;
- The Family Planning Association of Hong Kong hosted an experts’ workshop on fertility and ageing;
- Empowering youth and challenging community perceptions around menstruation and related bodily functions in Thailand;
- Family Planning Alliance Australia’s *STIs Happen* 2023 and 2024 campaigns;
- Oral PrEP promotion and service in Teratai, Mawar, and Aster Clinics, West Java, Indonesia;
- Advancing CSE through a newly established youth sex education learning and training centre in Mongolia.

In **Australia**, Family Planning Alliance Australia (FPAA) launched the “STIs Happen” online campaign to tackle rising STI rates – syphilis cases have tripled, and gonorrhoea doubled over the past decade. In 2023, the campaign reached 934,715 people through targeted ads on Google, Spotify, and network-owned channels, resulting in nearly 87,000 engagements on the campaign landing page and over 335 testing appointments booked. Through the Opportunity Grant, the campaign is now in its second year.

In **Mongolia**, with support from the Opportunity Grant, the Mongolia Family Welfare Association (MFWA) is establishing an innovative sexuality education and training centre. Using modern, creative approaches, the centre will engage youth, parents, and educators to expand access to age-appropriate CSE—especially for

young people in underserved urban outskirts.

### Membership Progress

In 2023, IPPF ESEAOR welcomed Youth to Youth in Health (YTYiH) from the Republic of the Marshall Islands as a Collaborative Partner, expanding our Pacific membership to ten Pacific islands and countries. In mid-2024, the Promotion of Family Health Association of Lao PDR (PFHA) advanced from Collaborative Partner to Member Association. Meanwhile, Myanmar Maternal and Child Welfare Association (MMCWA) and the Reproductive Health Association of Cambodia (RHAC) exited the Federation due to shifts in their mandates. IPPF ESEAOR is now exploring new partnerships in both countries.

### FP2030 Asia-Pacific Hub: A Catalyst for Country-Led Action

IPPF ESEAOR hosts the FP2030 Asia and the Pacific Hub, marking an important step forward in the FP2030 Global Support Network. Launched in early 2023, the Hub strengthens collaboration and country-led efforts to expand access to modern contraception and reproductive healthcare, especially for women and girls. The official launch, held in Malaysia later that year, brought together diverse stakeholders. By 2024, the Hub had led several high-level events, including UN side meetings, an Inter-Faith Dialogue in Cambodia, and an FP Focal Point Meeting in Manila.

## PATHWAY 3: Walk The Talk

### Safeguarding

IPPF ESEAOR is deeply committed to the safety and well-being of our staff, volunteers, and the communities we serve.

Our safeguarding approach centres on supporting victims and survivors, while promoting a zero-tolerance culture against all forms of harm – including gender-based violence, bullying, harassment, sexual harassment in the workplace, and sexual exploitation and abuse within our services.

In 2024, we delivered annual safeguarding training to 67 Secretariat staff in Kuala Lumpur and Suva. Nearly 90% of ESEAOR staff completed the mandatory online refresher, strengthening their safeguarding skills and reinforcing our organisational culture. Additionally, 32 board members and 114 staff from MAs and CPs received safeguarding training, ensuring broad and consistent awareness across the Federation.

### Secretariat Realignment

In 2023, the Secretariat was restructured to better align with the Come Together Strategy, introducing three key roles. Architects of Cooperation (AOCs) were established within the MA Support and Development structure to act as a bridge between the Secretariat and MAs. The Community Engagement and Partnership (CEP) role was created to deepen connections with grassroots organisations and activists, building strategic alliances with marginalised groups and challenging IPPF’s existing hierarchies and power dynamics. Additionally, youth networkers were recruited to amplify youth voices, drive youth-led action, and support both MA youth programming and their own youth networks.

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This information is correct as of 1 May 2025



# Thank You.

Bergstrom Foundation

European Commission

Gates Foundation

Global Fund to fight AIDS, Tuberculosis and Malaria

Government of Australia

Government of Belgium

Government of Canada

Government of China

Government of Denmark

Government of Finland

Government of France

Government of Germany

Government of Japan

Government of Luxembourg

Government of Netherlands

Government of New Zealand

Government of Norway

Government of South Korea

Government of Sweden

Government of Switzerland

Government of Thailand

Government of United Kingdom

Government of United States of America

MSI Reproductive Choices

Open Society Foundation

Oxfam Canada

Swedish Association for Sexuality Education (RFSU)

United Nations Foundation

United Nations Population Fund (UNFPA)

University of California, San Diego

William and Flora Hewlett Foundation

World Health Organization

**PLUS, DONATIONS FROM GENEROUS SUPPORTERS, BENEFACTORS, AND ANONYMOUS FRIENDS.**

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**Suhana Alia Zulkifli** Executive Assistant

**Rasna Aryal** People Partner\*

**Samweli Samwel Msengi** Safeguarding & Incident Management Advisor\*

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**Hema Annadorai** Humanitarian Business Analyst

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**Mohd Anuarden Bin Latif** Senior IT Officer

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Office Custodians

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\* These roles cover both ESEAOR and South Asia Regional Office (SARO)  
This information is correct as of 1 May 2025



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