



# OUR MISSION

At PAI, we are motivated by one powerful truth: a woman who is in charge of her reproductive health can change her life and transform her community.

Our mission is to promote universal access to sexual and reproductive health and rights through research, advocacy and innovative partnerships. Achieving this will dramatically improve the health and autonomy of women, reduce poverty and strengthen civil society.

## HOW WE WORK

For over 50 years, PAI has championed policies that enable women to exercise their reproductive rights and eliminate barriers to the supplies and services they need.

In the United States, PAI leads the movement to protect U.S. government investments in family planning. Globally, our success is rooted in our advocacy with a network of civil society partners. We achieve change by simultaneously strengthening the capacities of our partners and by promoting policy and funding solutions that make the delivery of comprehensive sexual and reproductive health care possible. We provide financial and technical support and help bring the voices of women, youth and girls to the forefront of policy processes.

### Our model is grounded in:

- Locally driven solutions—we adapt to partner-identified and local needs with capacity-building support, long-term advocacy investments and emergency response funding.
- Evidence-based advocacy—our partnerships are driven by local knowledge, country-specific strategies and research. Our evidence builds political will by showing that investments in sexual and reproductive health and rights lead to prosperity and a better future for women and communities.
- Sustainability—our partnerships lay the groundwork for the sustainability of advocacy achievements. We work with partners to translate advocacy into lasting policies and build resilience to political change.





# **ACCESO**

Acceso is a PAI initiative that provides technical support to subregional and national organizations in Latin America and the Caribbean to address gaps in sexual and reproductive health services. Although the region has made important strides over the past two decades, high levels of inequality undermine universal access to sexual and reproductive health.

Through high-impact advocacy for health sector reform, PAI's local partners engage governments, regional networks and community leaders to improve access to high-quality services and strengthen contraceptive security.

### MEXICO: INDIGENOUS YOUTH LEAD THE WAY

There are steep disparities in reproductive health outcomes in Mexico for two key groups: young people and indigenous populations. In the southern states of Campeche, Chiapas, Quintana Roo and Yucatan, these disparities are heightened given the large proportion of indigenous adolescents and youth, high levels of poverty and geographic barriers to access. Advancing the sexual and reproductive health and rights of indigenous communities and youth requires a multipronged, sustained advocacy approach.

To address the unique challenges Mexican youth face, including linguistic barriers and social stigma around youth and sexuality, PAI partners Elige Youth Network for Sexual and Reproductive Rights and the Maternal Mortality Observatory advocate for the implementation of youth-friendly and culturally relevant policies at the state and national levels. These local partners empower historically marginalized youth to lead government accountability efforts to ensure policies meet their complex needs.

## DOMINICAN REPUBLIC: TACKLING SUPPLY CHAIN ROADBLOCKS TO ENSURE ACCESS FOR ALL

In the Dominican Republic, high rates of adolescent pregnancy and maternal mortality underscore uneven access to high-quality services, including contraception. To ensure access for all, PAI partner the National Health Institute is working with the Ministry of Health and the National Contraceptive Security Committee to tackle administrative and cultural barriers like stockouts, poor counseling and out-of-pocket fees. This collaboration among institutions means a range of contraceptive methods will be available for women and youth who need it.

## EL SALVADOR: MOBILIZING GRASSROOTS NETWORKS TO END SEXUAL AND GENDER-BASED VIOLENCE

El Salvador has strived to expand access to critical sexual and reproductive health services for women and girls in low-income and rural communities since the end of its civil war. However, both rising insecurity and violence against women threaten to undermine the government's efforts and the well-being of Salvadorans. With support from PAI, the Maquilishuatl Foundation partners with the Ministry of Health to map the roots of violence, remove administrative barriers to access and increase the range of contraceptive methods available to women and girls in El Salvador.

Working as a promoter, I see the problems firsthand and learn about the demand and need in the community. I want to think about solutions, what we can do to address problems and provide follow-up. I'm here and ready to be a part of it.

- MAURA GIRÓN GÓMEZ. YOUTH PROMOTER



# OUR OTHER INITIATIVES

Government Accountability for Family Planning Budgets: Through the Government Accountability initiative, PAI's civil society partners in six countries—Burkina Faso, Côte d'Ivoire, Malawi, Tanzania, Uganda and Zambia—conduct budget monitoring and advocacy to increase government investments in family planning and ensure that the funds are being properly disbursed and used.

Opportunity Fund: The Opportunity Fund is a flexible source of funding for family planning advocacy managed by PAI for Advance Family Planning. It helps civil society organizations seize advocacy opportunities to accelerate Family Planning 2020 (FP2020)'s success. PAI supports advocates in the Global South to secure policy and funding decisions aimed at achieving FP2020 and Ouagadougou Partnership commitments at national, state and district levels.

Primary Health Care Strategy Group: A strong primary health care system not only delivers high-quality care and services; it also builds trust with communities to promote health and well-being. PAI convenes the Primary Health Care Strategy Group (PHC SG), a coalition of civil society health advocates from around the world. The PHC SG is dedicated to improving global and domestic financing and policy to strengthen primary health care systems for the achievement of universal health coverage. Ensuring quality of care, health equity and access to health services underpins the coalition's efforts.

**YOUAccess Fund:** YOUAccess provides flexible funding to youth-led organizations for creative risk-taking in projects that increase access to and use of contraception for young people. Grant awardee efforts contribute to building family planning champions among policymakers, community leaders, organizations and individuals at national, district and community levels. The fund offers the opportunity for innovative project development, knowledge sharing and evidence-building for the best course for future initiatives to meet youth contraceptive needs.



# **FINANCIALS**

PAI's 2018 Financial Statements show an overall increase in net assets of \$3.4 million. This increase is primarily due to several restricted grants totaling \$12.3 million received and recognized in 2018, with the significant portion of this funding earmarked for spending in 2018 and future periods.

#### Statements of Financial Position at December 31, 2018 and 2017 (IN THOUSANDS)

ASSETS	2018		2017		
Cash and cash equivalents	\$	12,897	\$	8,846	
Investments		3,996		4,182	
Pledges receivable (net)		5,812		5,264	
Other receivables		264		574	
Prepaid and other assets		156		233	
Property and equipment (net)		751		910	
TOTAL ASSETS	\$	23,876	\$	20,009	
LIABILITIES AND NET ASSETS					
Liabilities	•				
Accounts payable and accrued expenses	\$	401	\$	206	
Subgrants payable		1,014		582	
Other liabilities		-		32	
Deferred rent		579		509	
TOTAL LIABILITIES		1,994		1,329	
Net Assets					
Net assets without donor restriction		4,580		4,951	
Net assets with donor restriction					
Time and/or purpose		17,145		13,572	
Perpetual		157		157	
TOTAL NET ASSETS		21,882		18,680	
TOTAL LIABILITIES AND NET ASSETS	\$	23,876	\$	20,009	

Accounting standards require restricted grants that cover expenditures over multiple years to be recognized in the year they are received as grants and contributions with donor restriction. These net assets are then released from restriction as related program costs are incurred.

PAI is a 501(c)(3) nonprofit organization that promotes universal access to sexual and reproductive health and rights through research, advocacy and partnerships. Achieving this mission will dramatically improve the health and autonomy of women, reduce poverty and strengthen civil society. To receive the complete PAI 2018 Audited Financial Statements, please send your request to donations@pai.org.

PAI Financial Statements were audited by Johnson Lambert LLP.

### Statements of Activities for the Years Ended December 31, 2018 and 2017 (IN THOUSANDS) 2018

SUPPORT AND REVENUES	WITHOUT DONOR RESTRICTION				TOTAL			2017
Grants and contributions	\$	1,978	\$	12,322	\$	14,300	\$	12,878
Service contracts		666		-		666		2,284
Investment income (net)		92		6		98		86
Other		87		-		87		81
Net assets released		8,754		(8,754)		-		-
from restriction								
TOTAL SUPPORT AND REVENUES	\$	11,577	\$	3,574	\$	15,151	\$	15,329
EXPENSES								
Program services	\$	9,775	\$	-	\$	9,775	\$	8,084
Resource development		715		-		715		813
General and administrative		1,175				1,175		1,164
TOTAL EXPENSES		11,665		-		11,665		10,061
CHANGE IN OPERATIONS		(88)		3,574		3,486		5,268
CHANGE IN FAIR VALUE OF INVESTMENTS		(284)		-		(284)		245
BEGINNING NET ASSETS		4,952		13,728		18,680		13,167
ENDING NET ASSETS	\$	4,580	\$	17,302	\$	21,882	\$	18,680

# **PEOPLE**

### **ACCESO**

Shilpa Kothari, Project Manager, Latin America and the Caribbean

Maria Hernandez, International Advocacy Associate

### **EXECUTIVE TEAM**

Suzanne Ehlers, President and Chief Executive Officer

Carolyn Gibb Vogel, Chief Operating Officer

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