



CEO CORNER

At PAI, we believe in the right for every person to have quality sexual and reproductive health services and support, no matter their age, race, gender or postal code. Yet for women, girls and their communities to achieve these aspirations, their voice, agency and power must not only be resounding, but also come together for collective impact.



As we reflect upon 2020, PAI has remained strong during one of the world’s most catastrophic events of our lifetime. The fight for sexual and reproductive health and rights has never been an easy one. In 2020, the obstacles we faced grew exponentially greater.

Yet it is the vibrant, diverse and courageous efforts of local communities around the world that have combated injustice, ensured that women and girls have the health care they deserve and uncovered the deficiencies in policies, systems and infrastructure that require urgent changes. Since COVID-19 was declared a global pandemic, the crisis has pushed health systems to the brink of collapse, restricted the availability of essential services and highlighted — and worsened — glaring systemic health and economic disparities. But the human consequences of the pandemic cannot be ignored. In addition to communities devastated by COVID-19 infections and deaths, the physical abuse of women, sexual assault of girls, inability to access contraception and other reproductive health services, unintended pregnancies and more have skyrocketed. PAI and the 96 organizations across 33 countries we supported in 2020 rose to the occasion, responding to the immediate needs related to the pandemic and continuing to work toward our collective mission.

In 2020, PAI’s U.S. government advocacy helped preserve funding levels for international family planning and reproductive health programs, despite the Trump-Pence administration’s repeated attempts to decimate them. We helped prevent further proposed expansion of the Global Gag Rule and successfully advocated for language permanently repealing this harmful policy to be included in the House of Representatives fiscal year 2021 appropriations bill. We developed bold strategies leading up to the transition of the presidential administrations and were prepared to hit the ground running at the onset of the Biden-Harris administration.

We were also able to help our funded partners weather the chaos of COVID-19, including the six highlighted in this report. PAI’s flexible funding, technical expertise and strategic guidance helped at least 23 grantees address the urgent needs in their communities and continue their critical work of protecting health and rights in their countries.

We could not have done any of this without your generosity. It allowed us to quickly respond to the rapidly changing needs of on-the-ground advocates and enabled PAI and the grantees we support to press forward on advancing the health and rights of women, girls and vulnerable communities in the Global South.

As we continue to work through the challenges of COVID-19 and address the barriers to sexual and reproductive health and rights around the world, your ongoing support is crucial to keeping PAI, the funded partners we work with and our shared mission strong.

Thank you for your unwavering trust in us. Thank you for being part of this movement.

In solidarity,

Nabeeha Kazi Hutchins
President and CEO

MEETING THE MOMENT

As grantees pivoted their work in response to the pandemic, PAI quickly adapted our support by offering flexible funding for their COVID-19 activities



MEXICO
To ensure that Indigenous youth in Chiapas have accurate information on where to access contraceptives and other sexual and reproductive health care, **Observatorio de Mortalidad Materna en México (OMM)** took to the airwaves, reaching 135,000 people via a multilingual radio program. OMM also launched a multimedia campaign, and within six months, 31,000 young people had engaged with Facebook posts and WhatsApp messages. Several youth reached out directly for more information on contraceptives, allowing OMM to refer them to operational clinics.



CÔTE D'IVOIRE
To monitor how the pandemic is impacting health services in the city of Abidjan, **La Fédération Nationale des Organisations de Santé de Côte d'Ivoire (FENOS-CI)** trained women and young people in multiple districts to collect information on the accessibility, affordability and availability of COVID-19 services, immunizations and reproductive health care, including contraceptives. FENOS-CI used the data gathered to advocate for improved access to higher quality maternal, child and adolescent health services.



Yaw Niel/Shutterstock.com
MOZAMBIQUE
In Mozambique, nonprofit-supported community health agents are a critical resource for people, providing in-home care for patients with chronic illnesses, limited mobility or those living in remote areas. But when COVID-19 cases began appearing in the country, these agents were forced to cut back on home visits due to strict lockdowns and a lack of protective equipment. As a result of ongoing advocacy efforts by **Observatório Cidadão para Saúde**, community health agents are finally starting to become credentialed, which allows them to travel outside of their neighborhoods during the lockdowns and receive personal protective equipment (PPE) so they can safely provide in-home health care, including family planning and reproductive health services.



KENYA
To effectively respond to the COVID-19 pandemic, governments need every available resource — including every health care provider — to keep people safe. Thanks to the successful advocacy efforts of **Living Goods Kenya**, the government now recognizes community health volunteers as essential to COVID-19 response strategies. This recognition has made them eligible to receive PPE and emergency payments so that community health volunteers can continue to provide primary health care, including sexual and reproductive health services, in their communities.



hadynyah/E+ via Getty Images
NEPAL
Reproductive health needs — including menstrual hygiene management — are often overlooked by government officials and others in power during a crisis. When pandemic-related lockdowns made accessing menstrual products difficult, **Visible Impact** distributed more than 1,700 reusable sanitary pads to women and girls, including those living in shelter homes, carpet factory workers, youth with disabilities and transgender people. In addition, menstrual cups were given to 100 frontline health workers so they could safely manage their menstruation while wearing protective suits for long periods of time.

Advocates in Liberia use data to maintain essential health care during COVID-19



Martin Harvey/Photodisc via Getty Images

Civil society organizations (CSOs) in Liberia were critical to helping communities respond to the Ebola outbreaks of the previous decade. While there were many lessons learned from the crisis, for Joyce Kilikpo, one stood out.

“There is more power behind collective voices than a single institution,” says the executive director of Public Health Initiative Liberia (PHIL). “I knew that civil society could better prepare for future health crises by working together.”

With a grant from PAI, Kilikpo led the formalization of the Liberia Health CSOs Network (LiHCON) in 2019. Just one year later, the coalition would find itself responding to a new emergency — one that the country’s health system was not prepared for.

While shortages of essential medicines and health supplies, including contraceptives, have long been a problem in Liberia, this issue has been exacerbated during the COVID-19 pandemic. Making matters worse, a lack of PPE caused widespread anxiety among providers, and people were hesitant to seek health care for fear of contracting the virus.

“I began getting calls from health centers saying, ‘Joyce, what did you do? We just had PPE supplies delivered!’ That’s when I knew our efforts were having an impact.”

“Much of the PPE was left over from Ebola. Items such as latex gloves had grown brittle and could no longer offer protection,” says Kilikpo.

To begin bridging the gap in lifesaving supplies and equipment, LiHCON launched an in-person assessment in June 2020 with support from PAI. Members of the coalition used a scorecard to measure the availability of PPE as well as other critical services and supplies at 45 health facilities across five counties.

“We were hearing about how these shortages were impacting communities, but anecdotal evidence isn’t enough — there needs to be data to support the claims,” explains Kilikpo.

Because the coalition members already lived and worked in these communities, they were able to gather the information quickly. In just two weeks, the assessment findings were presented to government officials.

Thanks to LiHCON’s scorecard and advocacy efforts, the government fast-tracked plans to get PPE to facilities. As a result, health care workers and patients are less fearful, and the number of people seeking care is closer to pre-COVID levels.

Supplies of commodities, including family planning and medicines used to treat sexually transmitted infections, have also improved, but shortages remain a significant problem.

LiHCON is already making plans for a follow-up assessment to track the continued availability of PPE and medicines. The coalition will also soon begin monitoring COVID-19 donor funding coming into Liberia to ensure these investments are used effectively to maintain essential health services, especially sexual and reproductive health care.

PAI’s technical assistance supports advocates navigating COVID-19 guidelines

Since the pandemic began in March 2020, PAI grantees have been critical to connecting their communities with COVID-19 information and services. At the same time, these advocates have ensured that women, youth and other vulnerable populations can continue to access sexual and reproductive health care despite strict lockdowns, the suspension of services and widespread misinformation.

As the workloads of these advocates have shifted dramatically to respond to the crisis, so have the ways that PAI supports their efforts.

Key to this response is offering increased flexibility with new and existing grants to facilitate in-country projects related to the pandemic. But beyond this critical funding, how can PAI best use our technical expertise to support these on-the-ground advocates?



Mamunur/Depositphotos.com

In June 2020, the World Health Organization (WHO) released interim guidance outlining steps governments should take to ensure continued access to essential

health services during and beyond the COVID-19 pandemic. While the WHO guidance included a section on reproductive health care, its scope was broad and did not provide detailed information on addressing the specific needs of vulnerable populations.

That’s where PAI came in. In partnership with other organizations focused on global health and family planning, we applied our subject matter expertise to the WHO guidance and created the “Optimizing the World Health Organization COVID-19 Interim Guidance” report. This advocacy tool was designed to help PAI grantees and other CSOs work with their governments on the implementation of the WHO guidance at the country level and ensure access to sexual and reproductive health care during the pandemic.

The report distilled the WHO guidance into actionable items and included specific recommendations for the continuation of care for adolescents and youth, people with disabilities and refugee populations.

Knowing that there was a critical need for this information in Francophone West Africa, the report was published in French as well as English. The guidelines were shared with PAI grantees directly and made available to other sexual and reproductive health and rights advocates via our website, webinars and foundation partners.

Donors like you ensure that PAI can quickly respond to opportunities like this and give grantees the resources they need to help keep their communities safe. Thank you for supporting this vital work.

To read the “Optimizing the World Health Organization COVID-19 Interim Guidance” report, visit www.pai.org/resources/optimizing-the-world-health-organization-covid-19-interim-guidance.

FINANCIALS

This annual report gives us the opportunity to share how we use the resources provided by our donors to make our work possible. Accountability and transparency are important at PAI. We value the trust and commitment of our donors, and we strive every day to maximize the impact of your support.

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.

Statements of Financial Position at December 31, 2020 and 2019 (in thousands)

	2020	2019
ASSETS		
Cash and cash equivalents	\$ 3,991	\$ 3,875
Restricted cash	4,909	2,133
Service contract receivable	87	176
Pledges receivable, net	11,808	18,390
Accounts receivable	18	15
Investments	5,183	4,676
Prepaid expenses and deposits	165	135
Property and equipment, net	490	621
Total assets	\$ 26,651	\$ 30,021
LIABILITIES AND NET ASSETS		
<i>LIABILITIES:</i>		
Accounts payable and accrued expenses	\$ 401	\$ 540
Grants payable	896	946
Deferred rent	604	633
Paycheck Protection Program loan payable	732	-
Total liabilities	2,633	2,119
<i>NET ASSETS:</i>		
Without donor restrictions		
Undesignated	1,853	1,934
Board designated	2,830	2,830
	4,683	4,764
With donor restrictions		
Perpetual in nature	157	157
Purpose restrictions	17,988	22,202
Time-restricted for future periods	1,190	779
	19,335	23,138
Total net assets	24,018	27,902
Total liabilities and net assets	\$ 26,651	\$ 30,021

FINANCIALS

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, young people and vulnerable populations, reduce poverty and strengthen civil society.

To receive the complete PAI 2020 Audited Financial Statements, please send your request to donations@pai.org or visit our website at www.pai.org/about/financials.

PAI Financial Statements were audited by Johnson Lambert LLP.

Statements of Activities for the Years Ended December 31, 2020 and 2019 (in thousands)

	2020			2019
	Without Donor Restrictions	With Donor Restrictions	Total	2019
SUPPORT AND REVENUE				
Grants and contributions	\$ 1,793	\$ 8,573	\$ 10,366	\$ 20,340
Service contracts	1,051	-	1,051	1,335
Investment income, net	122	-	122	113
Other	36	-	36	95
Net assets released from restrictions	12,376	(12,376)	-	-
Total support and revenue	15,378	(3,803)	11,575	21,883
EXPENSES				
<i>PROGRAM SERVICES:</i>				
Supporting International SRHR Advocacy	8,769	-	8,769	9,207
Championing U.S. Government Support of SRHR	1,455	-	1,455	1,583
Incubating New Partnerships PHCPI	3,537	-	3,537	3,270
Total program services	13,761	-	13,761	14,060
<i>SUPPORTING SERVICES:</i>				
Fundraising	1,413	-	1,413	1,314
Management and general	674	-	674	1,054
Total supporting services	2,087	-	2,087	2,368
Total expenses	15,848	-	15,848	16,428
Change in net assets from operations	(470)	(3,803)	(4,273)	5,455
Change in fair value of investments	389	-	389	565
Change in net assets	(81)	(3,803)	(3,884)	6,020
Net assets, beginning of year	4,764	23,138	27,902	21,883
Net assets, end of year	\$ 4,683	\$ 19,335	\$ 24,018	\$ 27,902

PAI'S GLOBAL IMPACT

We believe that lasting change needs to be driven by local experts. That is why we partner with on-the-ground advocates working to protect and expand sexual and reproductive health and rights in their countries during — and beyond — the COVID-19 crisis.



On average, PAI provided each grantee with \$38,000 in financial support to advocate for sexual and reproductive health and rights in their country.

Bangladesh

Benin

Burkina Faso

Central African Republic

Côte d'Ivoire

Dominican Republic

El Salvador

Ethiopia

Ghana

Guatemala

Guinea

India

Indonesia

Kenya

Liberia

Madagascar

Malawi

Mali

Mauritania

Mexico

Mozambique

Nepal

Niger

Nigeria

North Macedonia

Peru

Senegal

Sierra Leone

Tanzania

Togo

Uganda

Zambia

Zimbabwe

STAND UP FOR SEXUAL AND REPRODUCTIVE RIGHTS

Help ensure that women and girls can access the essential sexual and reproductive health care they need and deserve through COVID-19 and beyond. Visit www.pai.org/donate and make a gift today.

For more information on ways to support PAI's work, please contact Carmen Mullins at cmullins@pai.org or +1 (202) 557-3415.

- Monthly giving
- Stock/IRA transfer
- Employer matching campaigns
- Honor/memorial gifts
- Planned giving
- Donor-advised funds



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Download a digital copy
of The Catalyst at
www.pai.org/thecatalyst.

