SHARING 

OUR 

STRENGTHS

ANNUAL REPORT 2021
Dear friends,

For nearly 60 years, PAI has been on a journey to ensure that everyone — no matter where they live, their economic status or the color of their skin — can realize their fundamental right to sexual and reproductive health.

We do this by amplifying evidence, experiences and our voices, so that U.S. policies and global actions do no harm. We also support and collaborate with partners around the world so they can speak truth to power in their own countries.

The progress and promise of the stories shared in our 2021 annual report demonstrate how PAI and our partners are mitigating threats, driving progress and sharing our strengths so that women, youth and at-risk communities can achieve and thrive.

Our role as advocates — as truth seekers, truth speakers and defenders of sexual and reproductive health and rights — is more urgent than ever before. With the increase in teenage pregnancy and gender-based violence rates around the world, erosion of access to contraceptives during the COVID-19 crisis, threats to safe abortion access and more, our work and that of our fellow advocates is far from over.

We must ensure that our drumbeat remains strong, constant and clear, and the advocacy and policy wins PAI and our partners achieve reverberate across countries, communities and contexts.

With the support and encouragement of champions and supporters like you, we have both the courage to carry out our mission and the fortitude to achieve sexual and reproductive health and rights for all in our lifetime.

We are thinking bigger and bolder than ever before and are ready to usher in a new era of impact with partners around the world. We are excited about what we will accomplish in the years ahead and hope we can count on you to stand with us for what is to come.

In solidarity,

NABEEHA KAZI HUTCHINS
President and CEO, PAI

NEERAJA BHAVARAJU
Chair of the Board of Directors
REACH

$41,357
ON AVERAGE, PAI PROVIDED EACH PARTNER WITH $41,357 IN FINANCIAL SUPPORT.

120
PARTNERS

$7.3M
NEARLY $7.3 MILLION IN FUNDING, ADVOCACY GUIDANCE AND TECHNICAL ASSISTANCE

36
COUNTRIES

SRHR
SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

>> COUNTRIES

BANGLADESH
BENIN
BURKINA FASO
CENTRAL AFRICAN REPUBLIC
CHAD
CÔTE D’IVOIRE
DEMOCRATIC REPUBLIC OF CONGO
DOMINICAN REPUBLIC
EL SALVADOR
ETHIOPIA
GHANA
GUATEMALA
INDIA
INDONESIA
KENYA
MADAGASCAR
MALAWI
MALI
MAURITANIA
MEXICO
MOZAMBIQUE
NEPAL
NIGER
NIGERIA
NORTH MACEDONIA
PAKISTAN
PERU
RWANDA
SENEGAL
SIERRA LEONE
SOUTH SUDAN
TANZANIA
TOGO
UGANDA
ZAMBIA
ZIMBABWE
PAI’S PARTNERS ARE BEST POSITIONED TO RESPOND TO URGENT NEEDS IN THEIR COMMUNITIES.
ON JANUARY 20, 2021, Joe Biden was inaugurated as the 46th president of the United States, signaling the end of four years of hostile rhetoric, harmful policies like the Global Gag Rule (GGR) and incessant assaults on women’s rights. There was reason to be optimistic, but we knew that this alone wouldn’t guarantee progress for women, youth and other at-risk communities.

That’s why PAI began working with the Biden-Harris transition team as soon as the election results were final, laying the groundwork for advancing our key priorities and for the incoming administration to unequivocally commit to protecting and expanding sexual and reproductive health and rights (SRHR).

Within days of being sworn into office, President Biden signed an executive memorandum rescinding the GGR and restoring funding to the United Nations Population Fund (UNFPA). He also went on the record stating that SRHR, both domestically and internationally, would be a priority for this administration.

While these were welcomed steps, PAI’s work was far from over.

Until the GGR is permanently repealed through legislation, it can and likely will be reinstated the next time a Republican president sits in the White House, which is why PAI continued to push for permanent repeal in 2021, approaching our advocacy from multiple angles.

We pursued passage of the Global Health, Rights and Empowerment (Global HER) Act, securing a record number of original co-sponsors of the bill, including several newly sworn-in freshman members of Congress.

We also worked with congressional champions to use the appropriations process — the funding bills that keep the federal government running — as the vehicle to end the GGR once and for all. By the fall of 2021, we reached a significant milestone when, for the first time, language repealing the GGR was included in both the House and Senate appropriations bills for fiscal year 2022.

Throughout the year, PAI’s trusted analysis, country- and community-level data and partner perspectives sent a loud and clear message to decision-makers in Washington, D.C., about the human impact that U.S. policy and funding decisions have on communities across the globe.

The threats to health and rights are as unrelenting as ever, which is why PAI’s strong, steady advocacy in Washington, D.C., is so urgently needed.
As part of its strategy, SERAC organized "human chains" in each of the eight administrative divisions of Bangladesh. These events brought together 500 adolescents and youth who sent a clear message to policymakers about the need for extended hours at Adolescent Friendly Health Centers.

"In advocacy spaces it’s very rare that organizations have funding to support human chains on the streets, but PAI’s flexible support enabled us to do this. The human chains made news and the news influenced the policy landscape in the country."

>> SM SHAHJAT
Executive Director, SERAC

As part of its strategy, SERAC organized ‘human chains’ in each of the eight administrative divisions of Bangladesh. These events brought together 500 adolescents and youth who sent a clear message to policymakers about the need for extended hours at Adolescent Friendly Health Centers. (Photo by SERAC)
INVESTING IN ORGANIZATIONAL CAPACITY

PAI’s 120 partners in 36 countries are expanding access to essential sexual and reproductive health services, advancing gender equality and transforming the lives of people in their communities. But these dedicated advocates are often severely underfunded, particularly when it comes to building and strengthening the capacity of their organizations.

PAI knows that without strong, well-resourced champions advocating for better policies and funding, we’ll never achieve our shared goal of access to SRHR for all. That’s why we invest in partners’ long-term growth, providing flexible funding and guidance so they can hire staff, train volunteers and expand internal systems.

WHILE STILL a university student in 2015, Dr. Natasha Salifyanji Kaoma and a friend decided to launch a nonprofit to help keep girls in school by providing access to menstrual health supplies. They held a door-to-door fundraiser on their school’s campus and raised $300 to purchase sanitary napkins for girls in a school near Lusaka.

In the years since, Copper Rose Zambia has expanded its reach in a big way, establishing itself as a key influencer in policy and budget decisions that impact the lives of Zambia’s youth and building a network of young, passionate advocates ready to stand up for their rights.

PAI has worked with Copper Rose since 2017, providing steady, flexible funding, strategic guidance and peer-to-peer learning opportunities to support the organization’s goal of expanding from community-level activism to advocacy at the regional and national levels.

This continued support has helped Copper Rose strengthen its internal capacity and strategically grow the organization. In 2021, it doubled the number of projects from three to six and became the only youth-led organization in Zambia to receive direct funding from USAID. To support its expanded programming, Copper Rose grew its staff from nine to 20, including hiring a full-time advocacy and communications officer to lead key SRHR initiatives.

“We cannot overemphasize how beneficial collaboration is and how important it is for us to learn from others. Being able to collaborate with other partners gave us an opportunity to learn from their best practices and some common mistakes we all make when implementing projects.”

MICHELLE MALUNGA
Advocacy and Communications Officer, Copper Rose

All of this sets the organization up for greater impact but also comes with additional expenses, such as legal representation, information technology support and an internal audit. Thanks to the flexibility of PAI’s funding, Copper Rose was able to cover the costs of these critical internal needs.

Funding isn’t the only way that PAI has helped Copper Rose. Early in the partnership, we trained members of the Copper Rose team on the Specific, Measurable, Attainable, Relevant and Time-Bound (SMART) approach—a systematic advocacy method that PAI has propelled that hones clear, achievable objectives and enables the development of strategies to reach them.

Since then, Copper Rose has used SMART across its advocacy work and regularly trains new staff and volunteers on how to advocate for important policy and funding changes. In 2021, in the Mazabuka and Petauke districts, SMART advocacy training was deployed to help peer educators and traditional and community leaders, such as teachers and religious leaders, understand their roles in driving and sustaining change in their communities. Thanks to their collective efforts and strategic advocacy, three health facilities in these districts are now offering abortion and other sexual and reproductive health services, impacting the lives of more than 20,000 young people.

Copper Rose has big plans for its future growth, and PAI looks forward to continued partnership and impact in Zambia.
EMPOWERING SOCIAL ACCOUNTABILITY

Everyday PAI and our partners fight for expanded access to essential health care, including sexual and reproductive health services. But access alone isn’t enough: Services must be equitable, culturally sensitive and tailored to local needs.

Citizen monitoring is an important step in providing oversight and ensuring that public health clinics and providers are meeting the pressing needs of the communities they serve. That’s why PAI works with our partners to fund and strengthen their accountability initiatives.

STOCKOUTS OF MEDICINES. Mistreatment by doctors and nurses. Illegal charges for emergency transport. Limited and often irregular clinic hours.

These are just a few of the issues faced by Indigenous communities in Guatemala, where historic levels of institutionalized discrimination prevent them from equity in access to essential health services, including sexual and reproductive health care.

There are no formal systems in place for reporting violations, and few ways to hold public health care workers — and ultimately the government that is responsible for providing services — accountable.

Centro de Estudios para la Equidad y Gobernanza en los Sistemas de Salud (Center for Equity and Governance Studies in Health Systems, CEGSS) is fighting to change that by training and equipping Community Health Defenders — a network of citizen monitors who advocate for quality, dignified and equitable health care in Indigenous communities.

These defensores comunitarios (community defenders) travel to public clinics, hospitals and rural health care outposts in underserved, often hard-to-reach communities. There, they monitor whether facilities are open when they are supposed to be, the availability of medicines and other supplies and whether providers treat patients with compassion and respect.

During COVID-19 lockdowns, there were reports of increased violations of health rights in rural Indigenous areas of Guatemala. The need for defensores comunitarios was greater than ever, but COVID-19 made travel and in-person data collection difficult.

With support from PAI, CEGSS adapted its community-based monitoring and volunteer resources to a hybrid model. Short training videos were created and sent out every week via WhatsApp, covering topics such as human rights, the right to access health care during the pandemic and overcoming inequalities for Indigenous communities. Participants and facilitators would discuss what they had learned and share their own experiences through online chats and small group in-person meetings.

Of the more than 150 current monitors and new volunteers that signed up for the training, more than 90% completed the course. Thanks to CEGSS’ online tools, this cohort of defensores comunitarios was ready to safely monitor essential health services, including reproductive, maternal and newborn care, in the pandemic.

This innovative approach has the potential to help communities well beyond the borders of Guatemala. CEGSS is sharing its knowledge and resources with fellow members of the Community of Practitioners on Accountability and Social Action in Health (COPASAH), a global coalition of over 400 health advocates spanning more than 40 countries.

PAI partners with each of the six steering committee members of COPASAH, including CEGSS, providing funding and guidance to support the organizations’ community-centered accountability work and help build a broader movement for social accountability.

Together, we are strengthening a diverse and vibrant ecosystem of voices to advocate for the health and rights of all.

“We learned that participating in the monitoring of public services is our right, but we must exercise that right and participate in the decision-making. We must be responsible citizens.” – A Community Health Defender, CEGSS

Graduates of the Community Health Defenders’ first hybrid training course from the Sololá province display their certificates of completion at an outdoor graduation ceremony. (Photo by CEGSS)
EXPANDING THE GLOBAL ECOSYSTEM

Solidarity in vision, diversity of voices and the sharing of power have defined the most successful movements for justice, equality and human rights. The global SRHR movement is no different.

PAI knows that achieving this mission requires a coordinated, highly engaged civil society network — comprised of advocacy organizations, community groups and other nongovernmental organizations — that know the local needs and are best positioned to advocate for positive change in their countries and communities.

That’s why we bring together a bold and energized network of partners — 120 organizations across 36 countries and counting — and facilitate opportunities for them to exchange knowledge, collaborate on solutions and strengthen the ecosystem of SRHR champions that is driving positive, sustainable change for women, young people and communities around the world.

LOCATION
CENTRAL AFRICAN REPUBLIC
SENEGAL
PARTNERS
AWLN-RCA
REPAOC

STRENGTHENING THE MOVEMENT

In 2015, the World Bank introduced the Global Financing Facility for Women, Children and Adolescents (GFF) — a global partnership to improve reproductive, maternal, newborn, child and adolescent health and nutrition currently working in 36 countries.

Civil society organizations (CSOs) — including PAI partners — play a critical role in ensuring that the national governments that access funds and support from the GFF to advance national health priorities are accounting for the needs, challenges and desires of the very communities the GFF mechanism is meant to support.

PAI knew that to unleash the full potential of CSOs to advance these goals, they needed information and resources to help them better understand GFF processes and outcomes. Enter the Civil Society GFF Resource and Engagement Hub (CSO GFF Hub).

Launched by PAI in 2018, the CSO GFF Hub provides catalytic funding, technical assistance and an online resource library to help deepen civil society’s engagement with the GFF. CSOs make the case for sustained domestic investments in sexual, reproductive, maternal, newborn, child and adolescent health and nutrition, holding governments accountable for the allocation of funding and delivering high-quality health care to women, youth and other at-risk communities.

The CSO GFF Hub also connects organizations through workshops and peer-to-peer learning exchanges, fostering a network of global advocates who push for greater accountability and can learn from one another’s experiences and collaborate on solutions.

Based in Senegal, le Réseau des Plates formes Nationales d’ONG d’Afrique de l’Ouest et du Centre (the Network of National Platforms of NGOs in West and Central Africa, REPAOC) is a regional coalition of African organizations working in the areas of health and human rights. With a grant from PAI, REPAOC developed a tool to guide advocates through the process of analyzing the cost and value of increased health investments.

In 2021, REPAOC gathered country-based coalitions from Burkina Faso, the Central African Republic, Côte d’Ivoire, Guinea and Niger, training participants on how to use the tool to conduct in-depth analysis and gather data that would strengthen their advocacy efforts.

The tool and training led to several advocacy wins for attendees, including Réseau des Femmes Leaders de Centrafrique (African Women Leaders Network — Central African Republic, AWLN-RCA), which secured a commitment from the Ministry of Health to fund the purchase of contraceptives.

Through the creation and expansion of the CSO GFF Hub, PAI is building an ecosystem of advocates working in GFF-focus countries who support one another by sharing knowledge, experiences and resources to advance goals and ensure the sustainability of the global SRHR movement.

The sharing of knowledge isn’t a one-way street: These organizations, like all PAI partners, also provide us with critical insights. They guide our own U.S. and global advocacy, investment priorities, calls to action and the strategic direction of a coalition approach to improving the health and wellness outcomes of women, youth and at-risk communities.

By sharing our collective strengths, we are fueling a bold, diverse global movement to drive health, equity and prosperity for all.
Throughout 2021, PAI and our network of global partners supported one another to advance the health and human rights of women, young people and at-risk communities and strengthen a bold, diverse global movement.

None of this would be possible without our donors and supporters sharing your strengths with us.

Thank you for propelling us and this mission forward. With you by our side, we won’t stop fighting until SRHR are a reality for all.
STATEMENTS OF ACTIVITIES
for the Years Ended December 31, 2021 and 2020

(in thousands)

<table>
<thead>
<tr>
<th></th>
<th>WITHOUT DONOR RESTRICTIONS</th>
<th>WITH DONOR RESTRICTIONS</th>
<th>TOTAL</th>
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<td>Grants and contributions</td>
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<td>Other</td>
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<td>Gain on extinguishment of debt</td>
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<td>PROGRAM SERVICES:</td>
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<td>Incubating New Partnerships PHCPI</td>
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<td>Fundraising</td>
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<td>Management and general</td>
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<td>674</td>
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<td>Change in fair value of investments</td>
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<td>Change in net assets</td>
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<td>(6,914)</td>
<td>(3,884)</td>
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<td>27,902</td>
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<td>Net assets, end of year</td>
<td>$5,938</td>
<td>$11,166</td>
<td>$17,104</td>
<td>$24,018</td>
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</tbody>
</table>

STATEMENTS OF FINANCIAL POSITION
as of December 31, 2021 and 2020

(in thousands)

<table>
<thead>
<tr>
<th></th>
<th>2021</th>
<th>2020</th>
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</thead>
<tbody>
<tr>
<td>ASSETS</td>
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</tr>
<tr>
<td>Cash and cash equivalents</td>
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<td>Restricted cash</td>
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<td>Investments</td>
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<td>Service Contracts Receivable</td>
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<td>Accounts receivable</td>
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<td>Pledges receivable, net</td>
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<td>Prepaid expenses and deposits</td>
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<tr>
<td>Property and equipment, net</td>
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<td>490</td>
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<tr>
<td>Total assets</td>
<td>$18,826</td>
<td>$26,651</td>
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<tr>
<td>LIABILITIES AND NET ASSETS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>LIABILITIES:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accounts payable and accrued expenses</td>
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<td>$402</td>
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<td>Grants payable</td>
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<td>Deferred rent</td>
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<tr>
<td>Paycheck Protection Program loan payable</td>
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<tr>
<td>Total liabilities</td>
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<td>NET ASSETS:</td>
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<td>Without donor restrictions</td>
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<td>With donor restrictions</td>
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<tr>
<td>Perpetual in nature</td>
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<td>157</td>
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<tr>
<td>Purpose restrictions</td>
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<tr>
<td>Time-restricted for future periods</td>
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<tr>
<td>Total net assets</td>
<td>$17,104</td>
<td>24,018</td>
</tr>
<tr>
<td>Total liabilities and net assets</td>
<td>$18,826</td>
<td>$26,651</td>
</tr>
</tbody>
</table>

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 SRHR through research, advocacy and partnerships. Achieving this mission will dramatically improve the health and autonomy of women, young people and at-risk communities, reduce poverty and strengthen civil society.

To receive the complete 2021 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.
LEADERSHIP

>> BOARD OF DIRECTORS

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President and CEO

NEERAJA BHAVARAJU
Board Chair

ADA WILLIAMS PRINCE
Vice Chair

NANCY DECK
Secretary

SUELLEN LAMBERT LAZARUS
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KIMBERLY C. BROOKS

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(through June 2021)

PATRICIA FAIRFIELD, PH.D.

LUIS GUARDIA

SUJATA LAMBA

ELIZABETH LULE, PH.D.

TAMMY PALMER

JACKIE PAYNE, J.D.
(through June 2021)

MARI SIMONEN, PH.D.
(through Dec. 2021)

>> EMERITUS MEMBERS

POURU BHIWANDI, M.D.

SHARON L. CAMP, PH.D.

THE HONORABLE WILLIAM H. DRAPER III

THOMAS E. LOVEJOY, PH.D.
(deceased)

PHYLIS TILSON Piotrow, PH.D.

NAFIS SADIK, M.D.

>> EXECUTIVE LEADERSHIP TEAM

NABEEHA KAZI HUTCHINS
President and CEO

CYDNEY BUNN
Vice President of Human Resources, Inclusion and Operations

BERYL ISAAC
Chief Financial Officer

CARMEN MULLINS
Vice President of Institutional Advancement

ELIANNE RAMOS
Senior Director of Communications

At the Faizina Mosque in Paba, Kenya, women gather for a discussion about family planning. PAI partner Kenya Muslim Youth Development Organization (KMYDO) is facilitating trainings for Muslim leaders and discussions with service providers about Islamic support for family planning. (Photo by Allison Shelley for PAI)
Cover:
With support from PAI partner Sahayog Society for Participatory Rural Development (SAHAYOG), accredited social health activist Shabnam Sheikh (center) was able to bring together girls in Lucknow, India, to discuss matters related to menstrual health, self-esteem, gender equality and other aspects of their sexual and reproductive health. (Photo by Sala Lewis for PAI)