GLOBAL PARTNERSHIPS FOR STRONGER LOCAL COMMUNITIES
The IBP Initiative (IBP) is a network of member organizations dedicated to supporting the dissemination, implementation, and scale-up of evidence-based guidelines, tools, and resources in family planning and reproductive health (FP/RH).

The IBP Initiative is managed by the Secretariat housed at WHO and currently chaired by the International Planned Parenthood Federation (IPPF).

Support for IBP comes from the United States Agency for International Development (USAID), the World Health Organization (WHO), and the United Nations Population Fund (UNFPA).

**MISSION**

IBP engages the global sexual and reproductive health (SRH) community to implement and scale up effective practices and global guidelines through its convening power and neutral platform for knowledge-sharing and collaboration.

**VISION**

Global SRH guidelines and effective practices are disseminated, implemented, and scaled up to improve reproductive health outcomes around the world.
2017
STRATEGIC OBJECTIVES

INCREASE ACCESS
IBP focuses dissemination efforts on WHO Tools and Guidelines, High Impact Practices, and tools and methodologies for scale-up.

SUPPORT IMPLEMENTATION AND SCALE-UP
By leveraging regional and country opportunities, making linkages between WHO guidance and programmatic interventions, and improving better documentation, IBP can better support efforts to implement and scale up evidence-based practices.

FACILITATE PARTNERSHIP AND COLLABORATION
Through its neutral convening power, IBP connects local and regional partners, facilitating collaboration and reducing duplication.
IBP MEMBER ORGANIZATIONS

Abt Associates  
<abtassociates.com>

Association for Reproductive Health Professionals  
<arhp.org>

Bill and Melinda Gates Institute for Population and Reproductive Health  
<gatesinstitute.org>

CARE  
<care.org>

Centre Régional de Formation, de Récherche, et de Plaidoyer en Santé de la Reproduction (CEFOREP)  
<ceforep.org>

Chemonics  
<chemonics.com>

ChildFund  
<childfund.org>

CORE Group  
<coregroup.org>

East Central and Southern African Health Community (ECSA-HC)  
<ecsahc.org>

Education Development Center Inc. (EDC)  
<edc.org>

EngenderHealth  
<engenderhealth.org>

ExpandNet  
<expandnet.net>

Female Health Company  
<fc2femalecondom.com>

FHI 360  
<fhi360.org>

Hesperian Health Guides  
<hesperian.org>

Institute for Reproductive Health, Georgetown University (IRH)  
<irh.org>

International Federation of Gynecology and Obstetrics (FIGO)  
<FIGO.org>

International Planned Parenthood Federation (IPPF)  
<IPPF.org>

IntraHealth  
<intrahealth.org>

Ipas  
<ipas.org>

Jhpiego  
<jhpiego.org>

John Snow Inc. (JSI)  
<jsi.com>

Johns Hopkins Center for Communications Programs (JHU-CCP)  
<CCP.jhu.edu>

Management Sciences for Health (MSH)  
<msh.org>

Management Systems International (MSI)  
<MSIworldwide.com>

Marie Stopes International  
<mariestopes.org>

Palladium  
<palladiumgroup.com>

Partners in Population and Development (PPD)  
<partners-popdev.org>

PATH  
<path.org>

Pathfinder International  
<pathfinder.org>

Plan International USA  
<planusa.org>

Population Council  
<popcouncil.org>

Population Media Center  
<populationmedia.org>

Population Reference Bureau (PRB)  
<prb.org>

Population Services International (PSI)  
<PSI.org>

Promundo US  
<promundoglobal.org>

Public Health Institute (PHI)  
<phi.org>

Regional Centre for Quality of Health Care, Makerere University  
<chs.mak.ac.ug>

Save the Children  
<savethechildren.org>

The Bixby Center for Population, Health and Sustainability, UC Berkeley  
<bixby.berkeley.edu>

The White Ribbon Alliance  
<whiteribbonalliance.org>

United Nations Population Fund (UNFPA)  
<unfpa.org>

University Research Co. LLC  
<urc-chs.com>

United States Agency for International Development (USAID)  
<usaid.gov>

West Africa Health Organization (WAHO)  
<wahooas.org>

WINGS Guatemala  
<wingsguate.org>

World Health Organization (WHO)  
<who.int>
WHO is centered around normative leadership for health. From our position globally, we do this by generating scientific evidence for informing the standards that will allow country programs to best provide family planning services in their contexts. We are focused on supporting national programs, policies, and their implementation to align with these global standards—so that programming everywhere is evidence-based, protective of rights, and upholds global consensus on sexual and reproductive health and rights.

IBP is a unique ally in this aim. Without mandates or obligations, global FP/RH actors come together of their own volition through IBP, to act as one community, because IBP resonates with what our global community needs. And that’s true for WHO’s own participation as well. WHO is increasingly prioritizing even stronger presence and partnership at local country level. As we see it, all roads lead to universal health care. IBP is a means of achieving this goal for FP/RH—as the IBP consortium continues to expand to bring in more donors, more INGOs, more local CBOs and CSOs, and youth voices, there is great potential to bring them all together in IBP, to leverage our collective strengths to close the gap in unmet need for contraception. —When you think about family planning, that’s really what universal coverage is all about. “

“As we see it, all roads lead to universal health care. IBP is a means of achieving this goal for FP/RH.”

IAN ASKEW
IBP’s strength is in its membership.

The IBP network, through its members, spans the spectrum of actors and influencers of FP/RH programming internationally—from global researchers, to international NGOs, to local civil society advocates, and students. It is through members’ participation and vision for a stronger global FP/RH community that IBP is able to achieve its mission.

In 2017, IBP prioritized outreach to increase the global representativeness of its members. We are pleased to have welcomed to the IBP community:

**The Association for Reproductive Health Professionals (ARHP):** ARHP brings together health care professionals across disciplines and specialties for evidence-based training and network building.
[arhp.org](http://arhp.org)

**Centre Régional de Formation, de Récherche, et de Plaidoyer en Santé de la Reproduction (CEFOREP):** CEFOR EP is a center of excellence in Africa in the areas of training, research, monitoring/evaluation and the development of advocacy tools for RH.
[ceforep.org](http://ceforep.org)

**The Female Health Company:** As a social enterprise, FHC invests profits from manufacturing the female condom into free capacity building and training to support integrated and sustainable SRH and rights.
[fc2femalecondom.com](http://fc2femalecondom.com)

**Promundo US:** Promundo US is a global leader in promoting gender justice and preventing violence by engaging men and boys in partnership with women and girls.
[promundoglobal.org](http://promundoglobal.org)

**WINGS Guatemala** WINGS provides quality RH education and services to underserved, primarily rural Guatemalan youth, women, and men.
[wingsguate.org](http://wingsguate.org)

“I’ve always seen IBP as a center where we can come together, broker our way forward, and set agendas as one FP/RH community.”

Milka Dinev, Reproductive Health Supplies Coalition
Value of the IBP Partnership

IBP has long prioritized responsiveness to its members’ needs, and members see this as a core part of IBP’s added value. In a 2017 survey of IBP member organizations, 87% of respondents expressed that IBP aligns with their own organization’s mission, and agree or strongly agree that their participation in IBP adds value to their organization. A majority of member organizations (83%) report using the resources developed by other members, reflecting IBP’s contribution to learning across our FP/RH community and reducing duplication. IBP continues to uphold its longstanding commitment to the global FP/RH community’s capacity for impact.
To achieve the 2030 agenda of universal access to sexual and reproductive health, it is crucial that we draw from, learn, and build on best practices. The IBP initiative is a key global platform for this vital knowledge sharing and collaboration among partners, particularly through its engagement of civil society, and the Knowledge Gateway has become a trusted space in which we can share resources and work together to seek solutions to achieve our common goal of improved reproductive health, especially for the most vulnerable and marginalized. At UNFPA, we look forward to further strengthening regional and country collaboration through IBP to push the boundaries in terms of innovation and scaling up and supporting South–South learning.”

GIFTY ADDICO
IBP offers multiple channels to share and access information.

IBP maintains a website and the Knowledge Gateway platform which serves as an online network to disseminate information and host technical communities of practice. The reach and use of these platforms is high. The Knowledge Gateway continues to be the largest online platform dedicated to FP/RH in the world, reaching 10,641 members working specifically in FP/RH, and over 80,000 working across subject areas. Updated in July 2017, the IBP website has had high use this year with over 1000 visits to access WHO and IBP key tools.

Dissemination through IBP results in wide engagement for impact

High Impact Practices
IBP has facilitated the dissemination of High Impact Practices (HIP) in FP around the world. By building on existing regional platforms and in person opportunities, HIPs have been disseminated throughout Latin America, Africa and Asia. Eighty-one percent of IBP member organizations routinely include HIPs in their programmatic work.

WHO Guidelines
By linking clinical guideline developers at WHO with implementing partners working on the ground, IBP has facilitated critical information exchange to ensure guidelines are developed in a way that facilitates use. In addition, IBP’s reach has enabled wide engagement with and endorsements of WHO guidelines. Following dissemination through IBP channels, the WHO FP Handbook received rapid endorsement from over 70 organizations worldwide—almost twice the number (46) that endorsed the previous edition in 2011.
As a regional organization, one of WAHO’s chief opportunities to advance FP/RH is through helping to build local capacity and leadership. We have found IBP to be a highly strategic partner for us toward this aim.

IBP is a critical instrument at the worldwide level, and helps us at the regional level to connect with global conversations, evidences, and experiences. IBP has many partners around the world, so it is a natural and compelling platform that we can use to encourage local partners to engage directly in global dialogue, and apply global insights locally. It was through IBP that we brought a systematic approach to scale-up to our region, working with ExpandNet to conduct several in-country workshops. Through IBP, we bring the power of the WHO and make it local. We get connected to what is happening in other countries, other continents, and other regions within Africa, and we ourselves become better able to build local capacity to lead for FP because of this.

As I think about our future with IBP, my only hope is that its focus on the local will continue to grow deeper over time. IBP is uniquely suited to attract and engage the variety of actors and perspectives that are needed to make global evidences really work for local realities. This is what we need, and IBP can be a real force for us to achieve that goal.”

Translating Global Guidance to Local Context

Namoudou Keita,
Professionnel chargé des Soins de Santé Primaires et Renforcement des Systèmes de Santé Organisation Ouest Africaine de la Santé (OOAS/WAHO)
Connecting the global FP/RH community to foster dialogue and engagement.

Since its inception, IBP has brought its members together to discuss current issues in FP/RH science and practice through its topic-dedicated task teams, semi-annual global partner meetings, and interactive webinars.

IBP Interactive Webinars

IBP’s interactive webinar series provide another opportunity to engage with IBP-supported tools and guidelines. IBP Webinars are unique because they not only include presentation of core content but also dedicate time for discussants and participants to consider emerging insights, and questions into “what it takes” to implement in real-world settings.

In 2017 IBP supported nine webinars on HIPs and 12 webinars on WHO guidelines. Through IBP’s wide reach, webinars consistently saw high participation from a range of countries.

Proactively supporting the use of WHO tools and guides at regional and country levels

Under the leadership of the West Africa Health Organization (WAHO), IBP partners have supported the WAHO Good Practice forums and technical pre-conferences. Through these platforms, WHO tools and guidelines, HIPs, and other materials are shared to new networks of regional and local implementing partners. In January 2017, WHO supported the development of “A guide to identifying and documenting best practices in FP programmes,” a tool that was built on previous work by IBP in partnership with WAHO. The WHO documentation tool is currently being used in West Africa, through collaboration with WAHO and the Ouagadougou Partnership in eight African Francophone speaking countries.

IBP has also built strong regional linkages with partners in Latin America and the Caribbean (LAC). As funding for FP activities in LAC is reduced, IBP has been an important and consistent broker to ensure that new evidence is shared and used in the region. As a follow-up to the first FP Conference in Latin America, IBP, Latin America Regional Forum (ForoLAC) and other member organizations convened a FamPlan workshop in El Salvador, to train 14 countries to utilize this tool to project FP requirements needed to reach national goals for addressing unmet need. In addition, IBP initiated the documentation of adolescent-friendly contraceptive services scale-up in Colombia.
Global partnerships require leadership and collaboration for meaningful impact.

As the WHO now looks to 2023, it places high priority on direct support and partnership with countries. As the 2019-2023 General Programme of Work states, WHO is placing countries “squarely at the center of its work,” seeing this as the “epicenter” of what will enable WHO to reach its own aims of universal health coverage— that includes family planning.

IBP is well positioned to contribute to WHO’s new vision given its consistent link to implementing partners working at country level. In addition, IBP’s ability to connect the dots between various global partnerships can help facilitate better coordination for impact among many FP stakeholders.

**FP2020**

FP2020 has mobilized regional focal points to galvanize commitment for the 120 million new FP users by 2020 goal. IBP has consistently participated in these Focal Point workshops to share WHO guidelines and HIPs with regional and in-country partners. In addition, efforts to further strengthen the link between IBP and FP2020 civil society Focal Points are underway. IBP has also engaged FP2020 in the HIP webinar series and together IBP and FP2020 co-host the HIP Task Team.
Helping the Reproductive Health Supplies Coalition Extend Its Reach

Milka Dinev, ForoLAC Regional Advisor/Technical Leader Maternal Health Supplies Caucus, RHSC

“IBP has been a chief resource and support to me in my work. In partnership with IBP, we keep the discussion on FP programs open and active.”

MILKA DINEV

HIP Initiative
Since their creation in 2010, IBP has provided technical support as a core convener to the HIP Technical Advisory Group. In addition, IBP has consistently supported the widespread dissemination of HIPs in Family Planning (HIPs) to its wide network of implementing partners. In 2014, IBP created the HIP Task Team to further support efforts to disseminate and support implementation and documentation of HIPs in country programs.

RHSC/ForoLAC
IBP has partnered with the RHSC and ForoLAC to introduce IBP supported tools and materials to the LAC region. Through joint webinars on enabling environment factors like financing, commodity security, and policy, global evidence has been shared and the LAC experiences have been brought to the global conversation.
A SUSTAINABLE, RELIABLE PLATFORM FOR OUR COMMUNITY

IBP has been a consistent platform for members to disseminate and exchange information critical to advancing FP/RH knowledge and practice.

IBP communities of practice have stood the test of time, enabling consistent and direct engagement among our global FP/RH community. Beyond country or organizational boundaries, and beyond the life of any specific project, IBP is a lasting means of creating and sustaining connections— a vehicle for collective action. As we look to the future, we remain committed to serving and facilitating global, unified collaboration for improved FP/RH impact.

IBP members by country/territory
Locations obtained from member organization’s websites and are current as of December, 2017. List is organized by WHO regions.

The Americas
ANGUILLA
IPPF
ANTIGUA
IPPF
ARGENTINA
IPPF
ARUBA
IPPF
BAHAMAS
IPPF
BARBADOS
IPPF
BELIZE
IPPF
BERMUDA
IPPF
BOLIVIA
IPPF, MSI
BRAZIL
IPPF
CHILE
IPPF
COLOMBIA
IPPF
DOMINICA
IPPF
DOMINICAN REPUBLIC
IPPF
EL SALVADOR
IPPF
ECUADOR
IPPF
GRENADE
IPPF

Africa
ANGOLA
Bidy Center, UC Berkeley, MSH
BENIN
Abt Associates, CARE, FHI 360, IPPF, IntraHealth, PSI, PATH, Plan, URC, WAHO
BOTSWANA
Abt Associates, IPPF
BURKINA FASO
Gates Institute, IntraHealth, IPPF, Jhpiego, PSI, Pathfinder, Population Council, URC, WAHO, Bixby Center, UC Berkeley, MSH
BURUNDI
CHF, IPPF, ExpandNet, FHI 360, IntraHealth, PATH, PSI, Pathfinder, Save the Children
CAMEROON
CARE, Chemonics, FHI 360, IPPF, MSH, Palladium
CAPE VERDE
IPPF, WAHO
COMOROS
IPPF
CONGO
IPPF
DEMOCRATIC REPUBLIC OF THE CONGO
Gates Institute, EngenderHealth, ExpandNet, IntraHealth, IPPF, Institute for Reproductive Health, Jhpiego, PSI, PATH, Pathfinder, PSIPalladium, PSI, Promundo US, Save the Children, URC
CENTRAL AFRICAN REPUBLIC
IPPF
CÔTE D’IVOIRE
Gates Institute, EngenderHealth, IPPF, IntraHealth, Jhpiego, PSI, Pathfinder, Population Council, URC, WAHO
ETHIOPIA
Abt Associates, Gates Institute, ExpandNet, FHI 360, IPPF, IntraHealth, Jhpiego, JSI, MSH, MSF, Pathfinder, Population Council, PSI, USAID, Save the Children, URC
GABON
MSH
THE GAMBIA
ChildFund, IPPF, WAHO
GHANA
Abt Associates, Gates Institute, FHI 360, IntraHealth, JSI, MSH, PATH, PSI, Population Council, Plan USA, Save the Children, URC, WAHO
GUINEA
FHI 360, IntraHealth, IPPF, Jhpiego, JSI, MSH, PATH, PSI, Population Council, URC, WAHO
GUINEA-BISSAU
IPPF, WAHO
KENYA
Abt Associates, CESAC-HC, EngenderHealth, IPPF, Jhpiego, JSI, MSH, PATH, PSI, Population Council, URC, WAHO
LIBERIA
FHI 360, IPPF, Jhpiego, JSI, Save the Children, PATH, PSI, Population Council, WAHO
MAURITANIA
EngenderHealth, IntraHealth
MAURITIUS
CESAC-HC, IPPF
Mozambique
ExpandNet, IntraHealth, IPPF, Jhpiego, JSI, MSH, PATH, PSI, Population Council, URC, WAHO
MALAWI
Abt Associates, CESAC-HC, EngenderHealth, IntraHealth, IPPF, Jhpiego, JSI, MSH, PATH, PSI, Save the Children, URC
MALI
FHI 360, RH, IPPF, IntraHealth, Jhpiego, JSI, MSH, PATH, PSI, USAID, Save the Children, URC, WAHO
MAURITANIA
EngenderHealth, IntraHealth
MAURITIUS
CESAC-HC, IPPF
MOZAMBIQUE
ExtendNet, IntraHealth, IPPF, Jhpiego, JSI, MSH, PATH, PSI, Save the Children, URC
NAMIBIA
Abt Associates, IPPF, Jhpiego, JSI, MSH, PATH, PSI, Save the Children, URC
NIGER
Gates Institute, Bidy Center, UC Berkeley, EngenderHealth, IPPF, IntraHealth, Jhpiego, JSI, MSH, PATH, PSI, Population Council, URC, WAHO
NIGERIA
Abt Associates, CESAC-HC, CHF, FHI 360, Gates Institute, Jhpiego, Jhpiego, JSI, MSH, PATH, PSI, Save the Children, URC, WAHO
Rwanda
FHI 360, IntraHealth, Jhpiego, JSI, MSH, PATH, PSI, Save the Children, URC
SENEGAL
Abt Associates, CESAC-HC, EngenderHealth, IntraHealth, IPPF, Jhpiego, JSI, MSH, PATH, PSI, Save the Children, URC
SIERRA LEONE
Abt Associates, CARE, EngenderHealth, IntraHealth, IPPF, Jhpiego, JSI, MSH, PATH, PSI, Save the Children, URC, WAHO
SOUTH AFRICA
Abt Associates, CESAC-HC, CHF, FHI 360, Gates Institute, Jhpiego, Jhpiego, JSI, MSH, PATH, PSI, Save the Children, URC
SWAZILAND
CESAC-HC, IPPF, MSH, PSI, URC
TANZANIA
Abt Associates, CESAC-HC, CHF, FHI 360, Gates Institute, EngenderHealth, IPPF, IntraHealth, Jhpiego, JSI, MSH, PATH, PSI, Save the Children, URC, WAHO
ZAMBIA
Abt Associates, CESAC-HC, CHF, FHI 360, Gates Institute, IntraHealth, Jhpiego, JSI, MSH, PATH, PSI, Save the Children, URC, WAHO
ZIMBABWE
Abt Associates, CESAC-HC, CHF, FHI 360, Jhpiego, Jhpiego, PSI, PATH, PSI, Save the Children, URC, White Ribbon Alliance

The Americas
ANGUILLA
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ANTIGUA
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ARGENTINA
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BAHAMAS
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BARBADOS
IPPF
BELIZE
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