

2020 IMPACT REPORT

Abortion is essential health care



BOARD OF DIRECTORS

Lilián Abracinskas
Montevideo, Uruguay

Manju Badlani, MA
Laurel, Maryland, USA

Pamela Barnes, MBA
New York, New York, USA

Laurie G. Campbell, MBA
New York, New York, USA

Ishita Chaudhry
New Delhi, India

Linda DeNicola, MBA
Vienna, Virginia, USA

Yirgu Gebrehiwot, MD, MSc
Addis Ababa, Ethiopia

Trish Karlin, MBA
Sherman Oaks, California, USA

Hans Linde
Göteborg, Sweden

Hayford Mensah, CPA, MBA, MS
Silver Spring, Maryland, USA

Monica Oguttu, MPhil, PhD
Kisumu, Kenya

Piper Orton, MBA
Auburndale, Massachusetts, USA

Mario Martín Pecheny, PhD
Buenos Aires, Argentina

Carlos Plazas, MS
Baltimore, Maryland, USA

Sandeep Prasad, Chair, LLB
Ottawa, Canada

Rubina Sohail, MD
Lahore, Pakistan

John Stanback, PhD
Chapel Hill, North Carolina, USA

Louise Winstanly, LLB, MS
Chapel Hill, North Carolina, USA

Ipas's 2020 Impact Report shares our results during our 2020 fiscal year: July 1, 2019–June 30, 2020.

We believe in a world where every person can determine their own future.

Ipas is the only international organization solely focused on expanding access to abortion and contraception. Why abortion? Because if people don't have the right to make fundamental decisions about their own bodies and health, they can't fully enjoy the human rights to which we are all entitled.

We know the right to abortion is not a standalone right. It depends upon people also having other human rights: to health, to equality, to live free from violence and discrimination. That's why Ipas works with diverse local, regional and international partners toward the goal of reproductive justice: a world where all human rights are respected, protected and fulfilled. We strive to integrate abortion rights into the broader movements for health-care access, gender equity and social justice.

Abortion is essential health care

When the COVID-19 pandemic hit in early 2020, Ipas pivoted quickly to adapt to a new and changing reality. We knew that abortion must remain an essential health service—and that the need for abortion and contraception would be even greater.

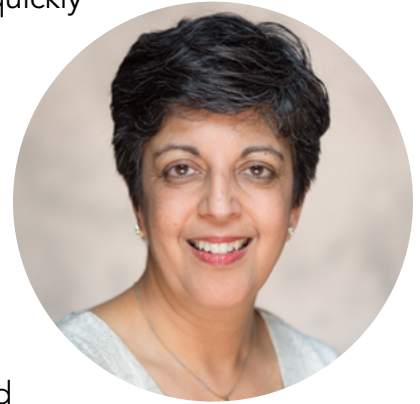
The pandemic is hitting hardest in countries where Ipas works: low-resource settings where persistent barriers to sexual and reproductive health services existed long before the outbreak. The pandemic is also shining a harsh light on longstanding gender, racial and economic inequities that make it harder for women, people of color, LGBTQ people and other marginalized groups to get the essential health care they need.

We got to work finding innovative solutions to protect and expand abortion access, such as telehealth models for abortion care and virtual trainings for abortion providers. We supported health facilities with personal protective equipment, so they could continue to safely provide abortion care. And we developed educational TV and radio programs, plus resources for teachers, to address the spikes in sexual violence and unintended pregnancy caused by lockdowns and limited access to health centers.

In 2020 we also saw massive racial justice protests roil the U.S. and the world. We stood with Black communities in protest, in anger and in pain. Dismantling systems of oppression like racism and patriarchy is at the core of Ipas's mission—and our commitment to do so grew stronger than ever.

An important step in that direction is our work with partners to repeal the Helms Amendment, a policy rooted in racism and colonialism that denies abortion access to people around the world. We were part of a broad coalition that launched an historic effort in 2020 to repeal Helms—and we will continue this important work in 2021. Repealing Helms is crucial for realizing our vision of a world where everyone has the right to determine their own future.

Despite the unprecedented times we are living through, I feel inspired and hopeful. Alongside our partners in the global movement for reproductive justice, Ipas will keep working, no matter the challenges, to ensure that everyone has the right to make informed decisions about their body and health. We weathered the challenges of 2020 and remain focused on the work ahead: integrating abortion rights into the broader movements for health-care access, gender equity and racial justice.



Anu Kumar
Ipas President and CEO

Anu Kumar

Protecting and expanding abortion access during the COVID-19 pandemic

Around the world, the pandemic is creating many barriers to abortion care. To ensure people still have the power to make their own reproductive health choices during this challenging time, we're working to:

- Expand women's ability to access abortion without having to visit a health center, by building telehealth solutions and supporting women to self-manage abortion with pills
- Ensure governments identify abortion as an essential health service
- Give abortion providers the information, training and supplies they need—including personal protective equipment—to safely offer abortion and contraceptive care
- Provide young people and communities with education on sexual and reproductive health



Photo left courtesy of Joypurhat District Hospital; right © Ipas Malawi

Building telehealth solutions and expanding access to abortion pills



With physical access to health centers severely limited in some settings during the pandemic, women need other ways to access abortion—such as telehealth services (which can refer for in-clinic care or provide abortion pills for home use) and self-management of abortion with pills. We’re working with partners to build telehealth programs and find innovative ways to reach women with the information and support they need to safely self-manage an abortion.

“We’ll do everything we can to expand access to abortion pills and telemedicine so women can safely end unwanted pregnancies during the pandemic. I’m hopeful these services will continue into the future as well.”



—**María Antonieta Alcalde**, director of Ipas Central America and Mexico



Ipas developed “Nurse Nisa,” one of the first artificial intelligence abortion providers. The simple and private WhatsApp-based chatbot recently launched in **Kenya** and **Democratic Republic of Congo** to support women with abortion and contraception information and referrals.

In **Pakistan**, Ipas and partners are training health professionals to provide telehealth consultations with women and girls who want contraception or an abortion with pills. In addition, Ipas-trained “lady health workers” are ensuring communities know these consultations are available free of charge.

Our **Central America** and **Mexico** team created two videos about how to safely use abortion pills and shared them on YouTube, where they now have almost two million views combined—evidence of the huge need for accurate information on abortion with pills, especially during the pandemic.

In 2020, we achieved 55 changes to laws, policies and systems that expand access to abortion with pills.

Making abortion an essential health service

As COVID-19 began its global spread, Ipas and partners in Africa, Asia and the Americas began calling on governments and health systems to designate abortion care as an essential health service. We continue this advocacy work, aiming to both protect and expand abortion access during the pandemic. We're also advocating for better protections against sexual violence, which is on the rise during the pandemic, and better access to sexual and reproductive health care for victims of violence.

In **Mexico**, the government affirmed that sexual and reproductive health care—including abortion—must remain essential services. Then Ipas helped the Ministry of Health develop guidelines for how to provide abortion care during the pandemic. Importantly, the guidelines include self-managed abortion with pills and telemedicine.

- ▼ In **Nigeria**, a coalition of partners led by Ipas is advancing state-level legislation to combat gender-based violence—which has spiked since the pandemic began. Ipas-sponsored radio programs in Jigawa State on sexual violence offer guidance on how to report rape and seek needed health care.



Photo © Ipas Nigeria



Photo © Farzana Hossen

In 2020, Ipas had 37 programs in fragile and conflict-affected settings.

- ▲ Since 2017, Ipas has been training paramedics, midwives and doctors to provide reproductive health care in **Bangladesh's** camps for Rohingya refugees. When COVID-19 arrived in the camps, abortion services were initially suspended. Ipas staff advocated for weeks to have abortion designated a "critical" health service.

In **Malawi**, Ipas-trained youth educators on sexual and reproductive health and rights are meeting with chiefs, who are local community leaders, helping them understand how to prevent unintended pregnancies in their communities and how to protect reproductive health services as essential during the pandemic.

▼ In collaboration with **Bolivia's** government, Ipas produced resource kits for teachers that include videos, comics, brochures, and teachers' guides—all focused on preventing sexual violence and unwanted pregnancy, which have increased during the pandemic. A nationwide training for teachers will roll out the new material in all public schools.



Providing education on sexual and reproductive health

A major barrier facing women and girls who need abortion or contraception is a lack of basic information about sexual and reproductive health and how to access care. And right now, the pandemic is keeping millions of youth out of the classroom, where they would have received sexuality education. We're working to reach young people and communities with essential health information so they'll know how to access abortion care and contraception if needed.



Photo by Reflection Photography, courtesy of Pindah Planet film

▲ In **Indonesia**, Ipas partnered with an acclaimed filmmaker and a youth-focused nonprofit organization to produce a short "coming of age" film highlighting the complexities of teenage pregnancy. The government selected it to be part of a mandatory online learning program for junior and high school students nationwide.

In 2020, Ipas supported 88 partner organizations that ran comprehensive sexuality education programs

Giving abortion providers the information, training and supplies they need

We're working to give health providers the information, training and supplies they need—including personal protective equipment (PPE)—so they can safely offer abortion and contraceptive care during the pandemic. Our solutions include websites and mobile apps with specially tailored resources for health professionals, online trainings on infection prevention for providers and facility staff, and deliveries of needed PPE and other supplies such as contraceptives.



▲ In **Kenya's** crowded Kakuma Camp—home to 190,000 refugees—social distancing is impossible. Recognizing the urgent need for facemasks, the refugee-led organization Resilience Action International (RAI) partnered with Ipas to quickly make masks for health clinics in the camp, plus others in need.

Photos by Uwezo Ramadhani, courtesy Resilience Action International (RAI)



▲ In **Nepal**, Ipas supports the government's COVID-19 response by distributing personal protective equipment (PPE) to health centers—with a focus on remote and isolated districts with acute needs. We also distribute PPE directly to Female Community Health Volunteers who connect women with health information and referrals.

Photos © Ipas Nepal



◀ Ipas Development Foundation (IDF) in **India** is working to reduce the impact of COVID-19 on the public health system by providing personal protective equipment and virtual trainings to health workers. "These health workers are standing tall in the midst of the pandemic," says Vinoj Manning, chief executive officer of IDF.

Photo © Ipas Development Foundation (IDF)

History in the making: A call to repeal the Helms Amendment

In January 2021, President Biden rescinded the Global Gag Rule—a crucial first step to undo the harms of the previous administration’s relentless attack on sexual and reproductive rights. But **the Global Gag Rule is only the tip of the iceberg** when it comes to harmful U.S. foreign policies.

For 48 years, the Helms Amendment has been denying people access to abortion services around the world. And for almost that long, Ipas has been a leading voice in the call to repeal this harmful policy. Rooted in racism and colonialism, the Helms Amendment uses the power of U.S. foreign assistance funds to control the bodies of women—mostly Black and brown women living in low- and middle-income countries.

That’s why Ipas has been working with a coalition of partners to advance the Abortion Is Health Care Everywhere Act, which would permanently repeal the Helms Amendment. This historic bill was introduced in the U.S. Congress on July 29, 2020—the first time such a bill has ever been introduced, and with more than 100 U.S. representatives signed on as cosponsors.



“I’m hopeful that over the next year, this bill will garner even more support and that we will sign it into law alongside other critical legislation to ensure coverage of abortion for every woman in the United States and to prevent states from enacting medically unnecessary restrictions on access to abortion.”

—**Congresswoman Jan Schakowsky (D-IL)**, lead sponsor
of the Abortion Is Health Care Everywhere Act

Two harmful U.S. foreign policies

Global Gag Rule: Restricts organizations that receive U.S. global health funds from using their own private funds or other donor/government funds on anything related to abortion. Executive order introduced by Reagan administration in 1984—rescinded by every Democrat and reinstated by every Republican since.

Helms Amendment: Blocks U.S. foreign assistance funds from being used for abortion “as a method of family planning,” thereby reducing the availability of safe, legal abortion services. Enacted in 1973.

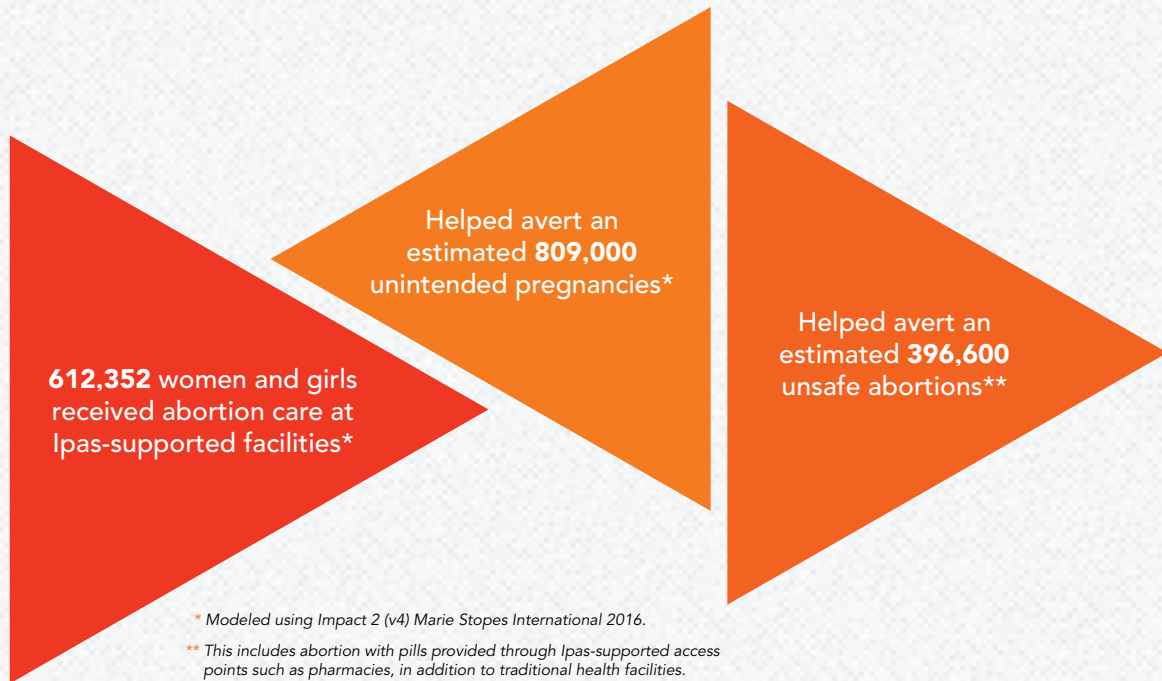


the Global
Gag Rule

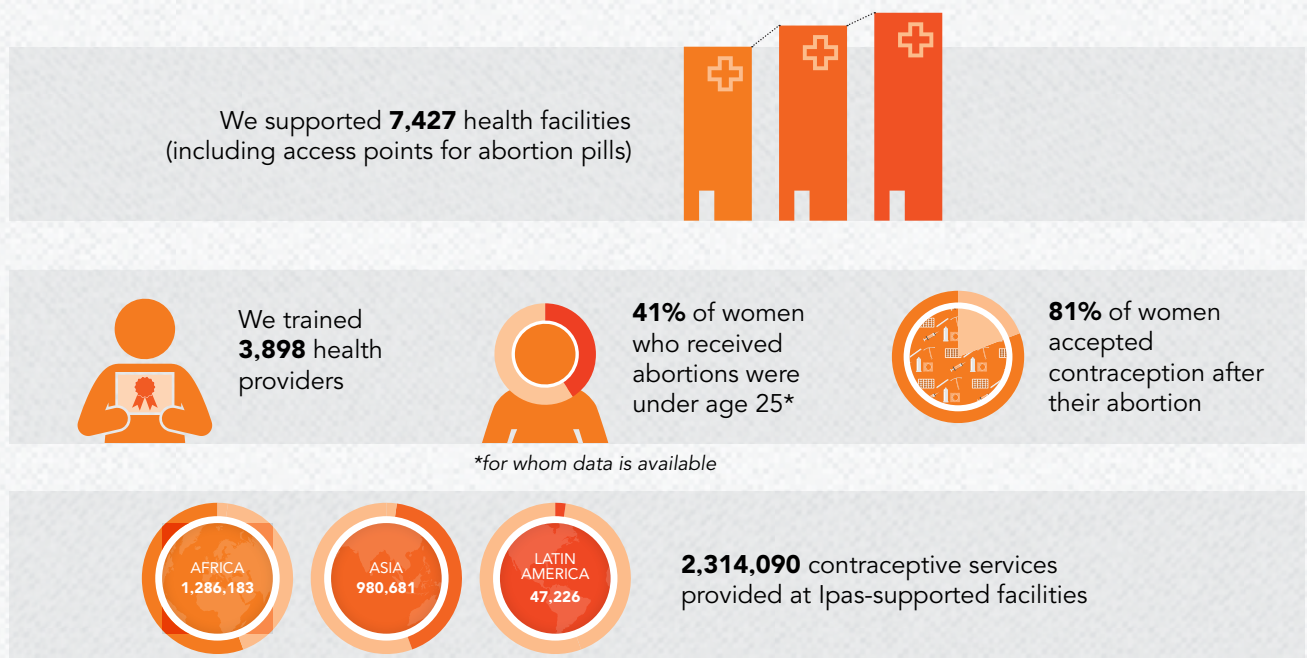
the Helms
Amendment

Our global impact

Results from our 2020 fiscal year: July 1, 2019–June 30, 2020



Our impact on health care



Our impact on abortion access

Treating women with dignity and respect

Fear of being stigmatized or discriminated against by health providers prevents many women and girls from seeking safe abortion care. That's why one of our measures of high-quality care is how women and girls feel about the services they receive. **In a recent survey of abortion clients at Ipas-supported health facilities, on average:**



95% said they were treated with dignity and respect



94% said they would return to this facility for additional care



93% said they would recommend this facility to a friend



90% said they trusted staff to give private/confidential care

Reaching women who want contraception

Of the women we surveyed who accepted contraception after their abortion, on average:



58% were not using a method before their visit

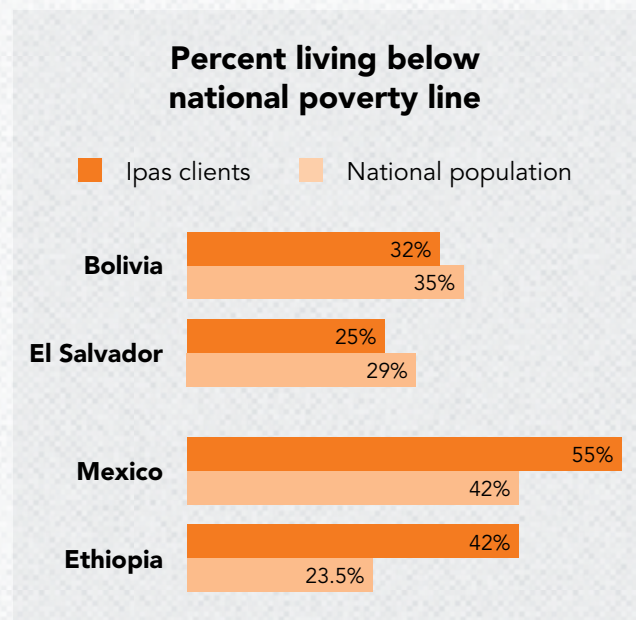
Of that 58%, **39%** were first-time contraception users



91% got the method they wanted

Equitable abortion access

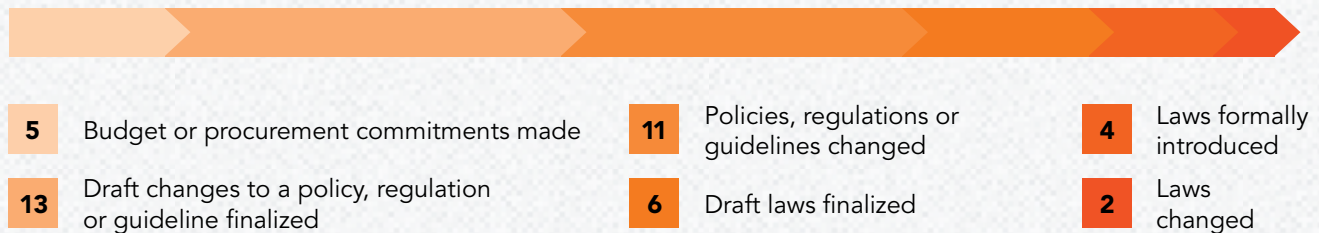
We work to ensure women can access abortion regardless of their economic status. In **Bolivia** and **El Salvador**, our recent survey of abortion clients at Ipas-supported facilities shows we're serving approximately the same percentage of women living in poverty as the national population of women of reproductive age. And we're exceeding that percentage in **Mexico** and **Ethiopia**.



Our impact on abortion rights

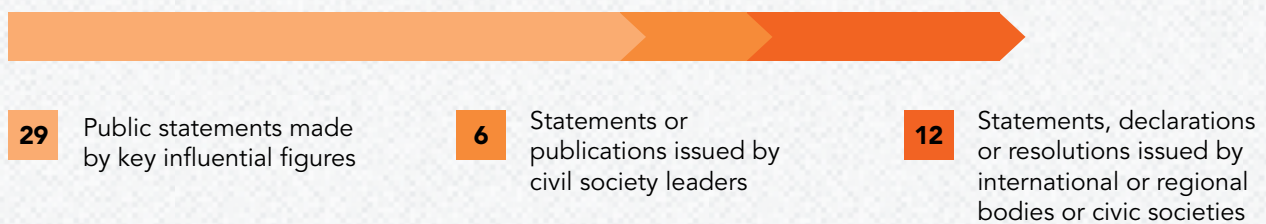
Changing laws and policies

Laws and policies must support abortion access to guarantee an individual's abortion rights. We collaborate with various partners and coalitions on the years-long work needed to make change. In 2020, our achievements were:



Building political support and leadership

Sustainable abortion access requires that leaders, governments and civil society prioritize sexual and reproductive rights—and show their commitment with public statements. We work to build champions for abortion rights at all levels, and many spoke out in 2020:



Partnering for success

We simply could not do our work without the collaboration, support and expertise of our many partners worldwide—including ministries of health, international NGOs, community-based organizations, and regional coalitions. We're proud that of those partners who completed a recent survey, **98%** said they would recommend that other organizations partner with us as well.

Statement of financial position

Year ended June 30, 2020

ASSETS

	(in thousands)
Current assets	
Cash and investments	\$ 73,803
Advances and prepaid expenses	\$ 2,324
Grants receivable	\$ 32,843
Contracts receivable	\$ 2,489
Total current assets	\$ 111,459
Fixed assets	\$ 898
Grants receivable, non-current	\$ 11,967
Total assets	\$ 124,324

LIABILITIES AND NET ASSETS

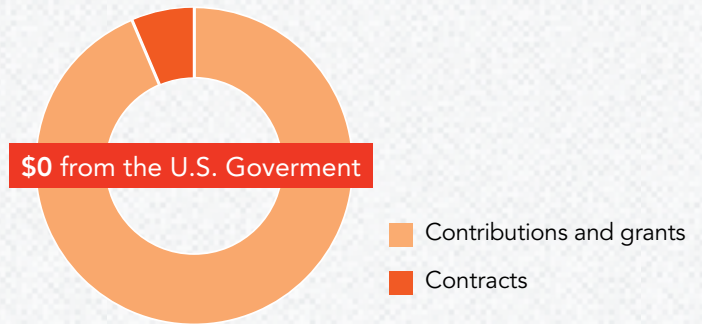
	(in thousands)
Current liabilities	\$ 7,229
Net assets	
Unrestricted	\$ 34,431
Temporarily restricted	\$ 82,664
Total net assets	\$ 117,095
Total liabilities and net assets	\$ 124,324

Statement of activities

Year ended June 30, 2020

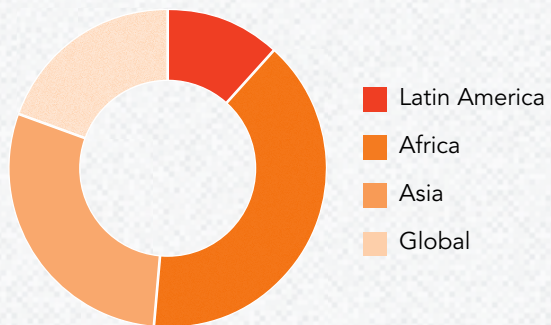
REVENUE

	(in thousands)
Contributions and grants	\$ 72,437
Contracts	\$ 4,819
Other revenue/expense	-\$ 1,406
Total revenue	\$ 75,850



EXPENSES

	(in thousands)
Program services	
Latin America	\$ 6,441
Africa	\$ 21,411
Asia	\$ 15,619
Global	\$ 10,467
Total program services	\$ 53,938
Supporting services	
Central operations	\$ 11,505
Development	\$ 1,875
Total supporting services	\$ 13,380
Total expenses	\$ 67,318





Donate

You can make a difference around the world.

Access to abortion and contraception puts people in control of their reproductive health. When you contribute to Ipas, you give women and girls everywhere the opportunity to determine their own futures.

There are many ways to give.

Learn more: www.ipas.org/donate



Stay informed

Sign up for email updates: www.ipas.org/SignUp

Learn more about our work: www.ipas.org

© 2021 Ipas.

Produced in the United States of America.

P.O. Box 9990 • Chapel Hill, NC 27515 USA
1.919.967.7052 • www.ipas.org


Ipas is a registered 501(c)(3) nonprofit organization. All contributions to Ipas are tax deductible to the full extent allowed by law.

IPASART-E21

Join the conversation

 [Twitter.com/IpasOrg](https://twitter.com/IpasOrg)

 [Facebook.com/IpasOrg](https://facebook.com/IpasOrg)

 [Instagram.com/IpasOrg](https://instagram.com/IpasOrg)