

Overview of

Canadian investments and activities in Neglected Areas of Sexual and Reproductive Health and Rights between 2017-2020



CanWaCH

Canadian Partnership for
Women and Children's Health

CanSFE

Partenariat canadien pour la
santé des femmes et des enfants

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Executive Summary

Key Messages:

- **Important progress has been made:** With funding from the Government of Canada, significant progress has been made by civil society organizations and their partners to address neglected areas of sexual and reproductive health and rights (SRHR). Projects across 28 countries report addressing at least one of the five SRHR Neglected Areas to some extent, with an average of three neglected areas addressed per project. Additionally, partners appear to be investing more of their overall budgets in neglected areas than was estimated by the Government of Canada.
- **Persistent gaps remain:** More investment and programming is needed around the Neglected Areas of Safe and Legal Abortion and Support for Advocacy, and more work serving adolescent girls must be included to ensure the full realization of SRHR rights for all.
- **More data and greater clarity is needed:** There is a need for more data on the neglected areas to be shared openly, where it is safe and feasible to do so. This includes data on the current investment projects (which have or will begin to conclude), but also on forthcoming SRHR projects funded under future Canadian commitments, or via other sources. Given the challenge in coding projects by neglected areas using OECD DAC codes, and in ensuring common definitions of neglected areas among stakeholders, alternative strategies are needed to collect and aggregate data in future. Shared definitions should also be considered.

Background: In [2017](#), the Government of Canada made a significant investment in sexual and reproductive health and rights (SRHR) by committing \$650M¹ over three years (hereafter referred to as the ‘investment’), delivered via a selected group of projects. To date, Global Affairs Canada has publicly announced SRHR projects representing 84% of the expected total investment allocated (a value of **\$547,780,233** out of the committed \$650M). Following dedicated efforts to collect information on these projects, the [CanWaCH Project Explorer](#) contains a comprehensive list of **109 development and humanitarian projects** funded under this investment.

However, data is limited in terms of the scale and impact of projects which specifically address five frequently neglected areas of SRHR; namely:

- Adolescent SRHR (including comprehensive sexuality education)
- Comprehensive Contraceptive Care
- Safe and Legal Abortion
- Sexual and Gender Based Violence (SGBV)
- Support for Advocacy relating to SRHR

¹ Unless otherwise specified, all financial figures are expressed in Canadian dollars.



CanWaCH collected programmatic data on the neglected areas of SRHR directly from the lead organizations funded under the Global Affairs Canada investment in order to draw a snapshot picture that endeavours to capture the extent to which the neglected areas are currently addressed.

Methodology: CanWaCH implemented a ‘data drive’ between *July-August 2020* to gather detailed data on programming in the neglected areas of SRHR. A custom data collection form, using CanWaCH’s Project Explorer standard data fields as a basis, was developed and sent to **33 Canadian-based and global civil society organizations** funded under the \$650M SRHR funding envelope.² These organizations were identified using the available published list of projects provided by Global Affairs Canada, as well as CanWaCH’s existing database.

Results:

Neglected Area-specific analysis:

The following findings were extracted specifically from CanWaCH’s own request for data from civil society organizations named by Global Affairs Canada as being funded under the investment. Organization response rate to CanWaCH’s call for data was **approximately 60%**,³ with 19 of 33 organizations contacted providing responses on **31 projects**, with a total budget value of \$262,504,105 and spanning 28 countries.

- **SRHR Neglected Area Coverage:** 82.4% of total project funds (\$94,853,453) were estimated to be allocated to the neglected areas. The majority of the projects reported addressing multiple SRHR neglected areas with an average of three areas (range: 1-5) addressed per project. **SGBV** was the most commonly cited (84% of projects) and **Safe and Legal Abortion** was the least (29 percent).

Notably, partners appear to be investing more of their overall budgets in neglected areas than was estimated by the Government of Canada. This suggests a potential lack of clarity and consistency between how organizations classify their own budgets to neglected areas, and how Global Affairs Canada codes and reports on those projects. Notably, some projects reported contraceptive care, SGBV and post-abortion care project activities under **Adolescent SRHR** as they felt that this classification was more accurate. CanWaCH did not adjust the classification that organizations themselves provided on their activities.

² Multilaterals were excluded from this outreach. 44.2% of the total investment was disbursed to 10 multilateral organizations, for the delivery of 37 SRHR projects. CanWaCH conducted online research to assess whether information could be found on the Neglected Areas disaggregated by projects and budgets, but conclusions could not be easily drawn. Work is therefore needed to identify the best ways to assess the extent to which Neglected Areas are being addressed in those projects.

³ Data sharing was optional and invited participants were informed that their contributions would be made publicly available via the CanWaCH Project Explorer. About half of the projects received included estimates on SRHR Neglected Areas fund allocations. We recognize that there may be several reasons why other organizations did not provide this data.



- [Budget allocations to Neglected Areas](#): **Adolescent SRHR** had the highest overall budget allocation, followed by **Comprehensive Contraceptive Care**, **SGBV**, **Support for Advocacy**, and finally **Safe and Legal Abortion**. **Support for Advocacy** and **Safe and Legal Abortion** were reported as being the least addressed, and as having the lowest budget allocations overall.
- [Population Reach](#): Respondents reported reaching over **8.9 million people** *directly* across **30 projects**, with **Adolescent SRHR** having the largest reach of approximately 5 million people, and **Safe and Legal Abortion** having the smallest reach of approximately 91,000 people.
- [Population Group](#): Adults and adolescents were cited as the main population groups targeted by these projects. Overall, more adult females and adolescent girls were reported as target demographics; however, men and adolescent boys were cited across all neglected areas as also being targeted through activities. **Adolescent girls** were not reported to be one of the main target groups for Comprehensive Contraceptive Care or Safe and Legal Abortion. However, it is not clear if (a) projects reporting work on Adolescent SRHR also incorporated Comprehensive Contraceptive Care and Safe and Legal Abortion within that neglected area; (b) this reflects other considerations such as classification of adolescent girls under women of reproductive age; or, (c) it is a true indication that adolescent girls are not a focus target group of these areas in the projects analyzed.
- [Outputs](#): The top three most commonly cited outputs were: people trained; awareness campaigns delivered; and, SRHR services provided. The neglected area with the most people trained was **Sexual and Gender-based Violence** and the one with the least was **Support for Advocacy**.
- [Indicators](#): 87% of projects reported tracking some of the standard [SRHR KPI indicators](#) (recommended by Global Affairs Canada), with the most commonly used related to **Adolescent SRHR** and the least commonly used related to **Safe and Legal Abortion**. **SGBV** was reported to be addressed by the majority of projects but fewer than half (10/26 projects) reported measuring a related standard SRHR KPIs recommended by Global Affairs Canada. This may suggest that organizations might be tracking their efforts in SGBV with other indicators, and/or that the provided indicators do not align with the activities undertaken.

Conclusion and Recommendations:

Results indicate that progress is indeed being made in all five SRHR neglected areas assessed. However, in light of the present COVID-19 crisis, it is more crucial than ever to safeguard the gains already made in SRHR. The pandemic is likely to further exacerbate the barriers that already exist for women and girls in accessing sexual and reproductive health services, especially those provided as part of work in neglected areas. In addition to not losing gains already made, there is a need to increase investment and programming efforts around these neglected areas, especially in areas like abortion care and services and support for advocacy where current work is limited. Additionally, including adolescent girls in all neglected areas of

programming should be prioritized. The involvement of men and boys should continue to be viewed as essential.

There is a clear need for more data on SRHR neglected areas showing the impact of the work being achieved globally by the full pool of projects under the SRHR \$650M Investment. Beyond this, it will be imperative to collect more detailed data in an ongoing manner from future projects which disaggregate by specific areas of work in SRHR, so that we can understand which areas are being addressed through a comprehensive approach, and which may be permanently neglected. Without a clear, common, and shared definition of each of the neglected areas, or a common methodology for the allocation of specific activities under each area, it is possible that some neglected areas may be represented differently by each partner. The value of developing working definitions that are shared between stakeholders should be considered.

Cognizant of data privacy and safety concerns, we encourage all organizations in the sector to collect and share their data when safe to do so, in order to contribute to this critical understanding.

Sample Size Notes for Executive Summary:

Sample size Adolescent SRHR (including comprehensive sexuality education) Analyzed projects: 61% (19/31) of projects reported addressing Adolescent SRHR. Out of those projects, 63% (12/19) reported population numbers, 74% (14/19) reported related outputs, and 95% (18/19) reported measured indicators.

Comprehensive Contraceptive Care. Analyzed projects: 68% (21/31) of projects reported addressing Comprehensive Contraceptive Care. Out of those projects, 67% (14/21) reported population numbers, 76% (16/21) reported related outputs and 71% (15/21) reported measured indicators.

Safe and Legal Abortion. Analyzed projects: 29% (9/31) of projects reported addressing Safe and Legal Abortion. 56% (5/9) reported population numbers, and 78% (7/9) reported both related outputs and indicators measured.

Sexual and Gender Based Violence. Analyzed projects: 84% (26/31) of projects reported addressing Sexual and Gender Based Violence. 69% (18/26) of these reported both population numbers and related outputs, while 39% (10/26) reported measured indicators.

Support for Advocacy. Analyzed projects: 55% (17/31) of projects reported addressing the Neglected Area Support for Advocacy. 53% (9/17) of those projects reported population numbers, 59% (10/17) reported related outputs and 76% (13/17) reported the indicators measured.

Introduction

In 2017, the Government of Canada made a significant investment in sexual and reproductive health and rights (SRHR) by committing \$650M⁴ over three years (hereafter referred to as the ‘investment’), delivered via a selected group of projects. The CanWaCH Project Explorer database contains a comprehensive list of **109 projects** funded under the investment. However, data is limited in terms of the scale and impact of projects which specifically address 5 frequently neglected areas of SRHR; namely:

- Adolescent SRHR (including comprehensive sexuality education)
- Comprehensive Contraceptive Care
- Safe and Legal Abortion
- Sexual and Gender Based Violence (SGBV)
- Support for Advocacy relating to SRHR

As a result of dedicated data collection efforts, CanWaCH collected programmatic data on the neglected areas of SRHR directly from Canadian-based and global civil society organizations funded under the Global Affairs Canada investment in order to draw a snapshot picture that endeavours to capture the extent to which the neglected areas are currently addressed. This report provides an overview of the scale and impact of the investment by aggregating data gathered directly from projects to investigate the extent to which neglected areas of SRHR are being addressed.

\$650M SRHR Investment By the Numbers

Total Investments & Lead Organizations: A total of **109 development and humanitarian assistance projects** were analyzed. These projects were led by **51 different organizations and institutions** with a total budget value of **\$1,050,104,878⁵**. These projects represent **\$547,780,233 (84%)** of the \$650M investment. Of these projects, **16.0%** of the \$650M funds were issued to Canadian partners (including NGOs and academic institutions), **44.2%** to multilaterals, and **19.4%** to non-Canadian partners (including NGOs, academic institutions and private sector) [see **Appendix 1 - Table 1**].

Countries: The investment covers projects being implemented across **47 countries** in **13 regions** of the world [see **Appendix 1 - Table 2**]. The **top 10 countries** of investments are: Bangladesh, Burkina Faso, Congo DRC, Ethiopia, Haiti, Iraq, Lebanon, Mozambique, Nigeria and the Syrian Arab Republic [see **Appendix 1 - Table 3**].

Areas of Focus: The top **10 Areas of Focus** covered by projects are, in order of investment (highest to lowest): Reproductive Health & Rights including Maternal Health; Humanitarian Response; Law,

⁴ Unless otherwise specified, all financial figures are expressed in Canadian dollars.

⁵ The total budget value of these projects includes all project costs for all activities, as many projects tackle SRHR programming as a component of their work rather than a sole focus.

Governance & Public Policy; Sexual & Gender-based Violence; Health Systems, Training & Infrastructure; Education; Sexual Health & Rights; Human Rights, Advocacy & Public Engagement; and, Gender Equality [see [Appendix 1 - Table 4](#)].

Target Populations: To date, from the 65 SRHR projects (60% of projects) reporting population data, projects have reached a total **15,546,752** people *directly* with project budgets totalling **\$594,916,297**. Populations targeted are of all ages and genders with the top three population groups being adult females, adolescent girls and school-aged girls. Projects are being implemented in urban and rural settings and cover a wide range of population groups including internally displaced persons (IDPs), refugees, LGBTQ2I communities, and persons with disabilities. [[Appendix 1 - Figure 1](#)]

Partners: To date, from 76 SRHR projects (70% of projects) reporting partner organizations, the majority of partners are non-Canadian NGOs (total of 38 different non-Canadian partners including international, regional and national NGOs) and local ministries (total of 32 different government partners). Other partners include multilateral organizations (three in total) and academic and research institutions (six in total). [[Appendix 1 - Table 5](#)].

Focus on the Neglected Areas

Data is limited on the scale and impact of projects addressing the neglected areas of SRHR. An analysis of the Global Affairs Canada SRHR \$650M commitment was completed in 2018 by the Guttmacher Institute and focused on Family Planning specifically ([Just the Numbers](#)). The analysis demonstrated the benefits of the investment and showed the added impact that an increase in funding could provide, with the ultimate goal of decreasing maternal deaths. In an effort to build on this work, CanWaCH collected programmatic data on the neglected areas of SRHR directly from the lead organizations funded under this investment. Given the challenge in coding projects into the various neglected areas of SRHR using OECD DAC codes due to the lack of specific codes for these areas of programming (with the exception of Family Planning), CanWaCH launched a call for this data using the Project Explorer.

Definitions of Neglected Areas used in this report

Four⁶ Neglected Areas in sexual and reproductive health and rights (SRHR) have been identified as critical priorities; namely: Comprehensive Contraceptive Care; Safe and Legal Abortion; Adolescent SRHR (including comprehensive sexuality education); and Support for Advocacy. For this report, sexual and gender-based violence (SGBV) was added as an additional neglected area to understand the extent to which it was being addressed in projects.

⁶ See Government of Canada documentation [here](#) and [here](#), as well as '[Advancing Canada's Global Leadership on Sexual and Reproductive Health and Rights](#)' (2019)

Methodology

CanWaCH implemented a ‘data drive’ between *July-August 2020* in order to gather detailed data on programming in the neglected areas of SRHR. A custom bilingual data collection form, using CanWaCH’s Project Explorer standard data fields as a basis, was developed and sent to **33 Canadian-based and global civil society organizations** funded under the \$650M SRHR funding envelope. These organizations were identified using the available published list of projects provided by Global Affairs Canada, as well as CanWaCH’s existing database. Data for this report was extracted from the CanWaCH Project Explorer in September 2020. A full map and list of projects is available [on the CanWaCH Project Explorer](#).

CanWaCH did not include multilateral organizations and foreign governments funded under the investment in the outreach for data for various reasons, including a challenge in identifying a contact person and the need to analyze those projects in a different way⁷. Nevertheless, online research was conducted to assess whether information could be found on the neglected areas being addressed in those projects. Progress on SRHR work by multilaterals was found to be reported in aggregate, making it challenging to extract information disaggregated by projects and budgets under this funding envelope specific to the neglected areas of SRHR. Work is therefore needed to identify the best ways to assess the extent to which neglected areas are being addressed in those multilateral and bilateral projects.

Summary of Results

Organization response rate to CanWaCH’s call for data was **approximately 60%**, with 19 of 33 organizations contacted providing responses on **31 projects**, with a total budget value of \$262,504,105 and spanning 28 countries [**Appendix 2 - Table 1**].

Neglected Areas Coverage

Respondents were asked to specify which neglected area is being addressed in their project. All 31 projects indicated at least one neglected area, with the majority of the projects addressing multiple areas. The average number of neglected areas addressed by projects was three (range: 1-5) [**Appendix 2 - Tables 1.1 and 1.2**].

Table 1 below shows that the neglected areas addressed by most projects were, in order:

- Sexual and Gender Based Violence (26/31; 83.9% of projects)
- Comprehensive Contraceptive Care (21/31; 67.7% of projects)
- Adolescent SRHR (including comprehensive sexuality education) (19/31; 61.3%)
- Support for Advocacy (17/31; 54.8%)

⁷ **Multilateral lead organizations:** 44.2% of the total \$650M Commitment (\$287,226,040) was disbursed to 10 multilateral organizations to implement 37 global SRHR projects (IBRD Trust Funds - World Bank, IDLO, IOM, OHCHR, OAS, UN Women, UNDP, UNFPA, UNICEF, WHO). **Foreign governments lead:** 4.7% of the total \$650M Commitment (\$30,450,000) was disbursed to 4 foreign governments to implement four SRHR projects (Burkina Faso, Mali, Mozambique, Netherlands).

- Safe and Legal Abortion (9/31; 29%)

Table 1: Projects addressing Neglected Areas of SRHR

Neglected Area category	Number of projects	% of projects
Adolescent SRHR (including comprehensive sexuality education)	19	61.3%
Comprehensive Contraceptive Care	21	67.7%
Safe and Legal Abortion	9	29.0%
SGBV	26	83.9%
Support for Advocacy	17	54.8%
Total projects	31	-

Neglected Areas Budget Allocation Estimates

Respondents were asked to specify the extent to which each neglected area is addressed by estimating the percentage and/or total budget amount out of the total project budget [see [Appendix 2 - Tables 2 and 3](#)].

From the data received, respondents provided SRHR neglected areas fund allocation estimates for 14 projects. The response rate for this question (45% of the sample) may indicate that this data may not be straightforward for programmatic staff to derive a response.

Of the 14 projects, the total budget amount was **\$115,110,879** of which **82.4% (\$94,853,454)** was estimated to be allocated to the neglected areas. Six projects reported that their entire project budget was dedicated to Neglected Areas whereas for the others, budget allocation estimates ranged from 9.2% to 90%.

When combining all projects, the neglected area with the highest budget allocation was **Adolescent SRHR** (39%; \$37,116,319), followed by **Comprehensive Contraceptive Care** with 31% (\$29,672,017), **SGBV** with 16% (\$14,922,178), and **Support for Advocacy** with 9% (\$8,629,264). **Safe and Legal Abortion** was estimated to have the lowest budget allocation at 5% (\$4,513,676).

Although 71% (10/14 projects) of projects reported addressing **SGBV**, the budget allocation estimates for **SGBV** were lower (\$14.9M) compared with **Adolescent SRHR** (\$37.1M) addressed in 64% of projects (9/14 projects) and **Comprehensive Contraceptive Care** (\$29.7M) addressed in 50% of projects (7/14 projects).

Support for Advocacy and **Safe and Legal Abortion** were reported as being both the least addressed neglected areas, and as having the lowest budget allocations overall. Based on this preliminary analysis of projects, one can reasonably assume a similar finding among the other SRHR projects funded under this investment. Furthermore, based on an exploratory analysis conducted by CanWaCH on the neglected areas being addressed under the same pool of projects (September 2019, unpublished⁸) using a combination of project indicators and OECD DAC codes, a similar finding was observed with the least funds being allocated to the same two areas.

Comparing the \$650M SRHR Commitment to the Neglected Areas

For each project funded, [Global Affairs Canada](#) provided estimates of the budget amounts contributing to the SRHR investment. For 80% of projects listed on the Global Affairs Canada website, the total value of the project is greater than the investment amount specifically allocated to SRHR (likely meaning that the SRHR activities are a component of a larger project). For the remaining 20%, the values are the same (likely meaning that SRHR activities are the sole focus of the project). To the best of our understanding, Global Affairs Canada's budgetary contribution to the SRHR investment covers all areas of SRHR, including the neglected areas as well as the more commonly tackled areas of SRHR.

For the analyzed projects, when comparing the investment amounts estimated by Global Affairs Canada with the budget amounts estimated for the neglected areas by partners, results show that 29% of projects estimated the same allocation while 57.1% of projects estimated higher budget amounts for the neglected areas [[Appendix 2 - Table 4](#)]

When aggregating budget amounts estimated towards the investment as a whole and those estimated towards the neglected areas by partners for the analyzed projects, and then comparing with the total project funds (\$115,110,879), **82.4%** of total project funds (\$94,853,453) were estimated to be allocated to the **neglected areas** by the partners whereas **62%** (\$71,687,913) of total project funds was estimated to be allocated to the investment.

Notably, partners appear to be investing more of their overall budgets in neglected areas than was estimated by the Government of Canada for the same project. This suggests a potential lack of clarity and consistency between how organizations classify their own budgets to neglected areas, and how Global Affairs Canada codes and reports on those projects. It may also indicate partners from the analyzed projects (and potentially others in the larger sample) are investing in the neglected areas beyond what was originally estimated by Global Affairs Canada. Additional data would be needed to further interpret this difference, but it may be well worth investigating.

⁸ Please contact impact@canwach.ca to request this analysis

Population reach, Outputs and Indicators by Neglected Area

Respondents were asked to complete detailed population and output data tables with numbers and descriptors specific to all applicable neglected areas addressed by the project. They were also asked to select the SRHR indicators being measured in their projects. The list of indicators included the full list of Global Affairs Canada finalized SRHR [Key Performance indicators](#) (KPIs) classified into separate categories for each neglected area of SRHR. The detailed methodology (see [Appendix 2](#)) describes how the various target population groups were categorized by age and gender, and how the outputs were grouped into categories to provide a global picture of the various project activities and scale. For respondents who provided the same population or output details for multiple neglected areas, the numbers were divided evenly between the neglected area categories. For the sake of simplicity and to avoid any double counting of numbers when comparing the various neglected areas, a conservative approach was used, even though it might result in an under-estimation of the true population reach.

Population Reach: Overall Results

Respondents reported reaching a total of **19,049,882 people (directly and indirectly) across 30 projects** with **Adolescent SRHR** having the largest reach and **Support for Advocacy** having the smallest reach:

- 74% of the population reached (14,170,329) was classified under the neglected area **Adolescent SRHR**: When gender was specified, data indicated that more adolescent girls were being reached as compared to adolescent boys. Adult males and females were also reported to be served, likely in service provision capacities.
- Approximately 10% (1,908,915) of the population reach was classified under **Comprehensive Contraceptive Care**. Most projects reported reaching more females than males, and close to 1,000,000 were women of reproductive age or adult women (Table 5.2). Adolescents were not reported to be the main target group in this Neglected Area.
- 7% (1,259,266) of the population reached was classified under **SGBV**. Projects reported reaching a large number of male populations (both adults and adolescents), for a total of 355,440. After Adolescent SRHR, this area of SRHR is the area that reported reaching the largest population of males.
- 1% (202,311) of the population reached was classified under **Safe and Legal Abortion**. While females were the primary population reported to be reached, males were also the target group in some projects.
- 1% (165,580) under **Support for Advocacy**. The adult population appears to be the main target population group in this area of work. No specific age data regarding adolescents were provided.
- Additionally, 7% (1,343,482) of the population reported to be reached was not classified under any specific neglected area.

The above results on population reach follows a similar pattern to that seen for budget allocation [see **Appendix 2 - Table 2**], with **Adolescent SRHR** being the area with the most fund allocation while **Safe and Legal Abortion**, and **Support for Advocacy** both have the least fund allocations. The majority of the target population being reached were adults and adolescents with females being the largest groups compared to males. Only one project specifically mentioned targeting children under five.

[see **Appendix 2 - Table 5 and Tables 5.1-5.6**]

Projects tackling SGBV reported reaching a large number of male population (adults and adolescents). After Adolescent SRHR, this area of SRHR is the area that reported reaching the largest population of males demonstrating that men and boys are being involved in realizing sexual and reproductive health and rights for all.

Outputs: Overall Results

The top three outputs the most commonly cited with the most reach were in order:

1. **People trained:** examples include health service providers, teachers, peer educators, personnel/staff, government officials, and community members.
2. **Awareness campaigns:** examples include outreach activities and learning events conducted, and people reached through these events.
3. **SRHR services provided:** examples include adolescent girls and young women linked to referral services, including family planning, contraceptives, post-abortion care, and sexual and gender-based violence.

Out of the analyzed projects, the neglected area with the most people trained was **Sexual and Gender-based Violence** (over 180,000 people trained including healthcare personnel, staff and teachers, IDPs, government officials and peer educators, on gender, women's and girl's rights, SGBV prevention and response). **Adolescent SRHR**, **Comprehensive Contraceptive Care**, and **Safe and Legal Abortion** were also reported as areas with a large number of people trained (ranging from approximately 49,000 - 52,000 people for various areas) including community healthcare workers trained on gender-responsive family planning and SRHR services, healthcare workers trained on providing safe abortion care and management, as well as training on women's rights. **Support for Advocacy** was the neglected area reported with the least people trained (1,600 people trained including government officials, Community Based Organizations, local advocacy groups).

Another output commonly cited was **Facilities established, refurbished or equipped**. Examples include health facilities renovated, shelters constructed, community-based centres established, as well as systems supported through the provision of training, supplies and equipment.

[see **Appendix 2 - Tables 6.1-6.5**]

Overall, the majority of the projects implemented similar interventions focused on increasing knowledge and awareness of SRHR and services, including training, awareness campaigns and community outreach activities on different components of these neglected areas. Strong efforts were also noted in the establishment and strengthening of facilities through provision of supplies and equipment, as well as the establishment of support groups to offer gender sensitive support services.

Indicators: Overall Results

87% (27 of 31) of the analyzed projects provided the indicators being tracked in their projects. The most common of the standard SRHR KPI indicators measured were related to **Adolescent SRHR** while the least common were related to **Safe and Legal Abortion**. The standard SRHR KPIs indicators measured are shown below in order of the most commonly measured to least commonly measured:

- 18 projects measured indicators related to the Neglected Area **Adolescent SRHR**.
- 15 projects measured indicators related to the Neglected Area **Comprehensive Contraceptive Care**
- 13 projects measured indicators related to the Neglected Area **Support for Advocacy**.
- 10 projects measured indicators related to the Neglected Area **SGBV**.
- 7 projects measured indicators related to the Neglected Area **Safe and Legal Abortion**.

One can reasonably assume that if an indicator is being measured in a certain area of focus, that there are programmatic activities associated in that same area. Using that rationale, the indicator results were compared with Table 1 showing which neglected area is being addressed in each project. When doing the comparison, the results are aligned with the exception of **SGBV**. Indeed, SGBV was reported to be addressed by the majority of projects but only a small proportion (10 of 26 projects) reported measuring a related standard SRHR KPI. This may suggest that organizations might be tracking their efforts in SGBV with other indicators and/or that the provided indicators do not align with the activities undertaken.

[See **Appendix 2 - Table 7.0 and Tables 7.1-7.5**]

Limitations and Challenges

Data was gathered from 31 projects out of the 62 projects solicited from civil society organizations funded under the investment. Despite the data not being fully comprehensive, the response rate achieved for each question asked concerning the neglected areas demonstrates the feasibility of collecting such data using CanWaCH's Project Explorer data fields as a basis. Due to the sample size of projects for some data derived on budgetary allocations, population numbers, outputs and indicators, generalization of the results to the full pool of projects funded under this investment is not recommended. Nevertheless, some conclusions can be made based on the results reported here to determine next steps for measuring progress, identifying the gaps and demonstrating the collective impact of the SRHR investment.

Two major challenges were identified from the analysis: i) the difficulty related to determining budget allocations to neglected areas; and, ii) the challenge of assigning neglected areas to population numbers and output details. Participation in CanWaCH's data outreach was completely optional and invited participants were informed that data shared would be made publicly available via the Project Explorer database. The overall organization response rate was close to 60%. Approximately half of the data received included estimates on SRHR neglected areas fund allocations. The requested data on the neglected areas may not have been straightforward to derive for the non-respondents.

At this time, it is unknown if organizations did not to provide data due to:

- Challenges in allocating estimated funds or assigning population numbers and outputs to each neglected area;
- Sensitivity issues/confidentiality concerns around the neglected areas addressed in certain settings that could compromise project implementation and/or the safety of staff and the community;
- Limited/no work being done in those areas;
- Response burden / limited staff resources; or,
- Other reasons not specified.

While some projects reported incorporating the same activities across multiple neglected areas, others appeared to incorporate different components of one neglected area into another. For example, some projects classified contraceptive care, SGBV, and post-abortion care activities under Adolescent SRHR. CanWaCH did not adjust the classification that organizations themselves provided on their activities. In addition, from the analyzed projects, adolescent girls were not reported to be one of the main target groups for Comprehensive Contraceptive Care, and only one out of five projects addressing Safe and Legal Abortion reported reaching adolescent girls. It is unclear if this is an indication of: i) whether projects reporting working on Adolescent SRHR also incorporated Comprehensive Contraceptive Care and Safe and Legal Abortion within that neglected area ; ii) whether adolescent girls are indeed not reported as being the main target group because they are classified under women of reproductive age; or iii)

whether adolescent girls are indeed not a focus target population group of Comprehensive Contraceptive Care and Safe and Legal Abortion.

Conclusions and Recommendations

Tracking Progress

Without a clear, common, and shared definition of each of the neglected areas, or a common methodology for the allocation of specific activities under each area, it is possible that some neglected areas may be represented differently by each partner. This has the potential to particularly affect reporting on Safe and Legal Abortion or Support for Advocacy activities, which may be perceived as more sensitive to disclose. The value of developing working definitions that are shared between stakeholders should be considered, in order to improve the quality and consistency of reporting.

Results are being tracked using the standard [SRHR KPI indicators](#) (recommended by Global Affairs Canada) in addition to other SRHR-related indicators. Common indicators being measured across projects are a good way to track and compare in order to understand collective progress. Where this is not feasible or appropriate, disclosing indicators used in a project also provides a useful mechanism for understanding the nature of activities. For this reason, CanWaCH invited respondents to share additional indicators used in their projects beyond those required by Global Affairs Canada. In the absence of detailed data, the classification of standard SRHR indicators being measured in a project into the neglected areas, like was done in the present analysis, is a useful way to pinpoint the neglected areas being addressed by projects.

There is a clear need for more data on SRHR neglected areas showing the impact of the work being achieved globally by the full pool of projects under the SRHR \$650M Investment. Beyond this, it will be imperative to collect more detailed data in an ongoing manner from future projects which disaggregate by specific areas of work in SRHR, so that we can understand which areas are being addressed through a comprehensive approach, and which may be permanently neglected. Cognizant of data privacy and safety concerns, we encourage all organizations in the sector to collect and share their data when safe to do so, in order to contribute to this critical understanding.

Looking ahead

This analysis highlights the efforts made so far in the neglected areas of SRHR under the investment. From the projects analyzed, 82.4% of total project funds (\$94,853,453) were estimated to be allocated to the neglected areas. Projects reported reaching close to 9 million people directly, with Adolescent SRHR having the highest population reach of about 5 million people and support for advocacy having the lowest population reach of over 110,000 people.

Results indicate that progress is indeed being made in all five SRHR neglected areas although data shows that there is minimal coverage of Safe and Legal Abortion, and Support for Advocacy, in the SRHR programming analyzed.

In light of the present COVID-19 crisis, it is more crucial than ever to safeguard the gains already made. Canadian organizations and their global partners have made it clear that they view sustained programming in SRHR, particularly the neglected areas, as essential priorities.⁹ It is estimated that about 47 million women in low and middle income countries will lose access to modern contraceptives, with an additional 7 million unintended pregnancies and close to 50,000 maternal deaths likely to occur due to COVID-19 restrictions¹⁰. During a crisis, we know that young people, especially adolescent girls, are disproportionately affected and among the populations often overlooked. The pandemic is likely to further exacerbate the barriers that already exist for women and girls in accessing sexual and reproductive health services, especially safe abortion services.

In addition to not losing gains already made, there is a need to increase investment and programming efforts around these neglected areas of SRHR, especially in areas like abortion care and services, and support for advocacy, and including adolescent girls in all neglected areas. The involvement of men and boys should continue to be viewed as essential. Finally, investments in health information systems, data management and infrastructure, and operational capacity in evaluation and reporting should be prioritized in order to better understand the full scale and scope of Canadian and global efforts to address neglected, critical areas of SRHR.

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Disclaimer: The Project Explorer collects data across 17 primary data fields. Data is collected on an ongoing basis. Numbers are accurate to the time of publication, and may change as projects are updated; as such, the figures in this report may differ from current data shown on the website. Data is collected and gathered in English and/or French through a variety of methods, including: general calls for contributions; targeted outreach to organisations and institutions via electronic communication; online search and report review; and the Global Affairs Canada Project Browser

⁹ See '100 Days of a Pandemic: Canada's Evidence-Driven Global Response' (June 2020).

¹⁰ <https://www.canada.ca/en/global-affairs/news/2020/06/minister-gould-announces-support-for-sexual-and-reproductive-health-and-rights.html>

and other public databases. CanWaCH does not independently verify data or evaluate projects. The designations and maps referenced in this report do not imply the expression of any opinion whatsoever on the part of CanWaCH concerning the legal status of any country, territory, city or area or its authorities, or concerning the delimitation of its frontiers or boundaries.

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International Planned Parenthood Federation (IPPF)
Ipas
Islamic Relief Canada
Médecins du Monde Canada
Oxfam Canada
Oxfam Québec



Pathfinder International
Population Services International
Save the Children Canada
Tearfund Canada

Correspondence: Comments or questions on this report may be direct to impact@canwach.ca

Appendices - Detailed Results

Appendix 1 - Table of Results: \$650M Investments by the Numbers

Table 1: Funding by organization type

Lead organisation type	Number of unique lead organizations	Number of projects	\$650M budget (CAD \$)	Funding Allocation (%)
Canadian Partners*	18	43	\$104,199,160	16.0%
Multilateral	10	37	\$287,226,040	44.2%
Bilateral - Foreign Government	4	4	\$30,450,000	4.7%
Non-CAD Other**	19	23	\$125,905,033	19.4%
Unknown***	-	-	\$102,219,767	15.7%
TOTAL	51	108	\$650,000,000	100%

*Canadian NGO/CSO



**Includes other organization types such as non-Canadian: Academic and Research, NGO/CSO or Private Sector.
 *** Projects unidentified.

Figure 1 [INTERNAL - Original visual in PPT format saved [here on GD](#)]



Table 2. List of SRHR project countries & regions (alphabetically)

Countries	Regions
Bangladesh	Caribbean
Benin	Central America
Bolivia	Central Asia
Burkina Faso	East Asia
Côte d'Ivoire	Europe
Cameroon	Middle East
Canada	North Africa
Central African Republic (the)	North America
Chad	Oceania
Colombia	South America
Congo (DRC)	South Asia
Cuba	Southeast Asia
Dominican Republic (the)	Sub-Saharan Africa
El Salvador	
Ethiopia	
Ghana	
Guatemala	
Haiti	
Honduras	
Indonesia	
Iraq	
Jordan	
Kenya	
Lebanon	
Libya	



Malawi	
Mali	
Mongolia	
Morocco	
Mozambique	
Myanmar	
Nicaragua	
Niger (the)	
Nigeria	
Palestine, State of	
Peru	
Philippines (the)	
Senegal	
Somalia	
South Sudan	
Sri Lanka	
Syrian Arab Republic	
Tanzania, United Republic of	
Uganda	
Ukraine	
Yemen	
Zambia	

**The global "Regions" chosen use the same regional conventions as the United Nations Department of Economic and Social Affairs, including the 2018 Report Statistical Annex measuring progress towards the Sustainable Development Goals (SDGs). The UN code list was chosen as the reference, as it specifies explicitly what countries are categorized in what regions.*



Table 3: Total investments per country

Countries	Total Project Budgets*
Mozambique	\$169,804,406
Bangladesh	\$78,028,600
Burkina Faso	\$69,857,489
Congo (DRC)	\$54,910,798
Nigeria	\$48,147,200
Iraq	\$47,000,000
Syrian Arab Republic	\$46,000,000
Ethiopia	\$41,781,841
Haiti	\$40,000,000
Lebanon	\$31,310,300
Bolivia	\$27,471,926
Mali	\$26,640,000
Benin	\$22,955,475
Honduras	\$21,350,185
Senegal	\$20,786,000
Myanmar	\$19,850,000



Philippines (the)	\$18,630,000
Palestine, State of	\$17,260,000
Tanzania, United Republic of	\$15,500,000
Ghana	\$15,000,000
Guatemala	\$14,554,000
Jordan	\$14,189,700
Côte d'Ivoire	\$13,960,000
Yemen	\$11,304,240
Peru	\$11,200,000
South Sudan	\$10,765,028
Colombia	\$10,640,000
Somalia	\$8,100,000
Indonesia	\$8,000,000
Zambia	\$6,502,941
Uganda	\$4,875,000
Malawi	\$4,811,841
Chad	\$4,800,000



Canada	\$4,091,841
El Salvador	\$3,996,160
Niger (the)	\$3,480,000
Morocco	\$3,000,000
Mongolia	\$2,995,846
Central African Republic (the)	\$2,499,950
Cameroon	\$2,000,000
Kenya	\$1,759,700
Ukraine	\$1,350,000
Sri Lanka	\$900,000
Nicaragua	\$498,000
Dominican Republic (the)	\$400,000
Libya	\$399,960
Cuba	\$150,000

**The total project budget represents the budget provided in the Project Explorer, which includes in-kind contributions from organizations as well as other sources of funding.*

Table 4: Funding by Area of focus, highest to lowest - All projects

Area of Focus	Total Budget (CAD \$)
Reproductive Health & Rights incl. Maternal Health	\$270,304,695.92
Humanitarian Response	\$199,311,502.00
Law, Governance & Public Policy	\$164,917,157.72
Sexual & Gender-based Violence	\$114,563,309.62



Health Systems, Training & Infrastructure	\$82,256,576.61
Education	\$67,000,000.00
Sexual Health & Rights	\$47,251,522.30
Human Rights, Advocacy & Public Engagement	\$19,548,507.15
Gender Equality	\$18,328,189.70
Adolescent Health	\$15,831,249.90
Nutrition	\$15,329,586.15
Primary Health Care	\$13,162,874.45
Protection	\$7,000,000.00
Economic Development & Empowerment	\$4,785,863.20
Newborn & Child Health	\$4,576,000.00
Financing for Development	\$2,749,101.50
Other (Livelihood)	\$1,960,200.00
WASH	\$570,000.00
HIV	\$555,000.00
Other ()	\$98,574.89

Table 5. Partner types working on SRHR projects

Total number of unique partner organizations	Canadian-based	Other countries	Total
NGOs	4	38	42
Academia & Research	2	4	6
Private Sector	0	0	0



Multilateral	n/a	n/a	3
Foundation	0	2	2
Government & Public Sector	0	32	32
TOTAL	6	73	82

n/a=not applicable

**Sample size of projects: 76*

Appendix 2 - Tables of Results and Methodology: Focus on the Neglected Areas

Results: Neglected Areas Coverage

Table 1. Project profiles of responding organizations

Total number of projects	31
Number of countries*	28
Number of Reporting organisations	19
Total project budget (\$CAD)	\$ 262,504,105
Total \$650M GAC Commitment	\$121,582,805

***List of countries shown below:**

Countries List
Bangladesh
Benin
Bolivia
Burkina Faso
Côte d'Ivoire
Canada

Chad
Colombia
Congo (DRC)
Dominican Republic (the)
Ethiopia
Guatemala
Haiti
Iraq
Kenya
Lebanon
Malawi
Mali
Mozambique
Myanmar
Niger (the)
Nigeria
Philippines (the)
South Sudan



Uganda
Ukraine
Yemen
Zambia

Table 1.1: Number of Neglected Areas reported to be addressed by projects

Number of Neglected Areas	Number of Projects	Percentage of projects
1	3	10%
2	10	32%
3	8	26%
4	5	16%
5	5	16%
-	31	100%

Table 1.2: Number of Neglected Areas addressed by each project

Sample size: 31 projects

Average number of neglected areas: 3 (range: 1-5)

CanWaCH Project ID (in Project Explorer Database)	Number of Neglected Areas Addressed
424	3
513	2
518	1
519	3
520	5
521	1
524	3



525	3
526	3
527	2
528	3
532	2
537	3
543	2
545	2
548	5
554	4
557	4
558	4
559	4
582	4
597	2
599	2
600	2
608	1
610	5
617	2
636	5
654	5
715	2
791	3
31 Projects	-



Results: Neglected Areas Budget Allocation Estimates

Table 2: Project budget amounts (CAD\$) with percent allocation to the Neglected Areas

CanWaCH Project ID	Total Project Budget	Adolescent SRHR	Comprehensive Contraceptive Care	Safe and Legal Abortion	SGBV	Support for Advocacy	Budget estimated to be allocated to Neglected Areas	
							Total amount \$ CAD	% project budget
513	1,110,000	586,049	-	-	-	-	586,049	52.8%
518	1,150,000	-	-	-	379,500	-	379,500	33%
519	3,540,000	-	-	-	708,000	-	708,000	20%
521	1,350,000	-	-	-	124,206	-	124,206	9.2%
537	9,857,489	2,957,247	1,478,623	-	-	492,874	4,928,744	50.0%
545	3,000,000	665,328	-	-	2,334,672	-	3,000,000	100%
548	19,536,906	9,768,453	3,254,849	2,713,676	2,713,67	1,086,251	19,536,906	100%
554	12,000,000	1,800,000	6,600,000	1,800,000	-	600,000	10,800,000	90%
557	10,000,000	3,500,000	2,500,000	-	2,500,000	1,500,000	10,000,000	100%
558	12,000,000	6,000,000	3,600,000	-	1,200,000	1,200,000	12,000,000	100%
559	7,878,483	3,939,242	2,363,545	-	787,848	787,848	7,878,483	100%
597	6,678,000	-	-	-	2,374,275	187,290	2,561,565	38.4%
715	7,260,000	-	-	-	1,800,000	800,000	2,600,000	35.8%
791	19,750,000	7,900,000	9,875,000	-	-	1,975,000	19,750,000	100%



TOTAL	115,110,879	37,116,319	29,672,017	4,513,676	14,922,178	8,629,265	94,853,453	-
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Table 3: Budget Allocation per Neglected Area (CAD)

Neglected Area	Total Budget estimated to be allocated to Neglected Area	% of the total budget estimated to be allocated to the SRHR Neglected Areas
Adolescent SRHR (including comprehensive sexuality education)	\$ 37,116,318.45	39
Comprehensive Contraceptive Care	\$ 29,672,016.94	31
Safe and Legal Abortion	\$ 4,513,676.24	5
SGBV	\$ 14,922,177.59	16
Support for Advocacy	\$ 8,629,264.77	9
Total	\$ 94,853,454.00	100



Results: Comparing the \$650M SRHR Commitment to the Neglected Areas

Table 4: Project budget % (CAD\$) allocated to the \$650M investment and to the Neglected Areas

CanWaCH Project ID	Total Project Budget* (\$CAD)	Project contribution to the \$650M SRHR Commitment - estimated by Global Affairs Canada		Budget allocation to Neglected Areas - estimated by partners	
		Budget amount (\$CAD)	% Total Project Budget	Budget amount (\$CAD)	% Total Project Budget
513	1,110,000	430,000	38.7%	586,049	52.8%
518	1,150,000	379,500	33.0%	379,500	33.0%
519	3,540,000	700,000	19.8%	708,000	20.0%
521	1,350,000	108,000	8.0%	124,206	9.2%
537	9,857,489	9,860,000	100.0%	4,928,744	50.0%
545	3,000,000	2,000,000	66.7%	3,000,000	100.0%
548	19,536,906	5,444,736	27.9%	19,536,906	100.0%
554	12,000,000	12,000,000	100.0%	10,800,000	90.0%
557	10,000,000	10,000,000	100.0%	10,000,000	100.0%
558	12,000,000	8,558,122	71.3%	12,000,000	100.0%

559	7,878,484	5,364,210	68.1%	7,878,483	100.0%
597	6,678,000	1,600,781	24.0%	2561565	38.4%
715	7,260,000	1,760,300	24.2%	2,600,000	35.8%
791	19,750,000	13,482,314	68.3%	19,750,000	100.0%
TOTAL	115,110,879	71,687,963	62.3%	94,853,453	82.4%

**The total project budget represents the budget provided in the Project Explorer, which includes in-kind contributions from organizations as well as other sources of funding.*

Results: Population Reach

Methodology

Respondents were asked to complete detailed population data tables with numbers and descriptors specific to all applicable neglected areas addressed by the project. The target population, disaggregated by age and gender, reflects the direct and indirect population reach reported, for the Neglected Areas. For this report, target populations were grouped into four main categories of age; women of reproductive age (ages 15-49), Adolescents (between ages 10 and 19), Adults (ages 18 and older) and All ages (when the age was not specified). When gender was specified, target populations were grouped into two main categories: men and women. For respondents who provided the same population details for multiple neglected areas, a conservative approach was used to provide cumulative numbers by dividing the totals evenly between the neglected areas to avoid any overlap.



Results Tables

Table 5: Population reach by Neglected Area

Total number of projects	30
Budget allocated to Neglected Areas (sample size: 14)	\$94,853,454.00
Total Population (direct and indirect): (sample size: 30)	19,049,882
Total Population, Women: (sample size: 25)	8,762,400
Total Population, Men: (sample size: 20)	1,559,430
Population Breakdown specific to SRHR Neglected Areas (total population reached):	



Neglected Area	Project Sample size	Direct Population	Indirect Population	Total Population	% of Total Population
Adolescent SRHR (including comprehensive sexuality education)	12/30	4,960,138	9,210,191	14,170,329	74%
Comprehensive Contraceptive Care	14/30	1,676,948	231,967	1,908,915	9.9%
Safe and Legal Abortion	5/30	91,349	110,962	202,311	1.1%
Sexual and Gender Based Violence	18/30	1,152,422	106,844	1,259,266	7%
Support for Advocacy	9/30	113,780	51,800	165,580	1%
Neglected Areas Not Specified	9/30	928,482	415,000	1,343,482	7%
Total		8,923,119	10,126,764	19,049,882	100%

Note: numbers are cumulative and there are no overlap between the categories

Results Tables: Population Reach: Adolescent SRHR (including comprehensive sexuality education)

From the analyzed projects, organizations reported reaching over 14 million people of all ages and genders, both directly (close to 5 million) and indirectly (above 9 million) in Adolescent SRHR. Population data shared indicated that approximately 1 million adolescents were reached directly (Table 5.1). When gender was specified, data indicated that more adolescent girls were being reached as compared to adolescent boys. Adult males and females were also reported to be served, likely in service provision capacities.

Table 5.1: Disaggregated population reach data by Neglected Area: **Adolescent SRHR (including comprehensive sexuality education)**

Sub-sample size: 12	
Total Budget allocated to Adolescent SRHR (including comprehensive sexuality education)	\$ 37,116,318.45
Total Population (sub-sample: 12)	14,170,329
Total Direct Population	4,960,138



Total Indirect Population		9,210,191	
Sample Size	Disaggregated Population:	Direct	Indirect
3/12	Adults, both sexes	8,345	869
1/12	Adults, females	300	0
1/12	15-49, males	269,334	481,222
3/12	15-49, WRA	308,349	5,475,910
1/12	15-49, both sexes	17,280	0
4/12	Adolescents, females	297,763	0
4/12	Adolescents, male	187,657	0
3/12	Adolescents, both sexes	620,761	50,390
4/12	All ages	3,210,164	3,201,800
1/12	Age and gender not specified	40,186	0

Note: numbers are cumulative and there are no overlap between the categories

WRA=Women of Reproductive Age

Adolescent age ranges given varied between 10 and 19.

Results Tables: Population Reach: Comprehensive Contraceptive Care

Results from the analysis showed organizations reached close to 2 million people of all ages and genders, both directly (approximately 1.6 million) and indirectly (over 200,000) in Comprehensive Contraceptive Care. Most projects reported reaching more females than males, and close to 1,000,000 were women of reproductive age or adult women (Table 5.2). Adolescents were not reported to be the main target group in this neglected area.

Table 5.2: Disaggregated population reach data by Neglected Area: **Comprehensive Contraceptive Care**

Sub-sample size: 14

Total Budget allocated to Comprehensive Contraceptive Care		\$ 29,672,016.94	
Total Population		1,908,915	
Total Direct Population		1,676,948	
Total Indirect Population		231,967	
Sample Size	Disaggregated Population:	Direct	Indirect
4/14	Adults, both sexes	137,470	135,000
2/14	Adults, females	275,000	21,423
1/14	Adults, males	0	3,111
4/14	15-49, WRA	742,082	2,873
2/14	15-49, males	192,271	17,760
1/14	15-49, both sexes	17,280	0
1/14	Adolescents, both sexes	6,000	0
1/14	All ages, females	49,252	0
1/14	All ages, males	10,912	0
2/14	All ages, both sexes	0	51,800
4/14	Females, age not specified	246,556	0
1/14	Males, age not specified	125	0

Note: numbers are cumulative and there are no overlap between the categories

WRA=Women of Reproductive Age

Adolescent age ranges given varied between 10 and 19



Results Tables: Population Reach: Safe and Legal Abortion

From the data received, approximately 200,000 people were reached, directly (over 91,000) and indirectly (over 110,000) through projects focusing on Safe and Legal Abortion. A combined total of 18,578 males (adults and adolescents) and 76,025 females (adults and adolescents) were reached by all projects (Table 5.3). Even though more females were reported to be reached, males were also the target group in some projects.

Table 5.3: Disaggregated population reach data by Neglected Area: **Safe and Legal Abortion**

Sub-sample size: 5			
Total Budget allocated to Safe and Legal Abortion		\$ 4,513,676.24	
Total Population		202,311	
Total Direct Population		91,349	
Total Indirect Population		110,962	
Sample Size	Disaggregated Population:	Direct	Indirect
1/5	Adults, females	0	21,423
1/5	Adults, males	0	3,111
2/5	WRA	4,000	34,628
1/5	Adolescents, females	5,350	0
1/5	Adolescents, male	4,555	0
2/5	All ages, females	49,252	0
2/5	All ages, males	10,912	0
1/5	All ages, both sexes	0	51,800

Note: numbers are cumulative and there are no overlap between the categories
WRA=Women of Reproductive Age

Adolescent age ranges given varied between 10 and 19

Results Tables: Population Reach: Sexual and Gender-Based Violence

From the data received, projects reached close to 1.3 million people of all ages and genders, both directly and indirectly in SGBV. (Table 5.4). Projects reported reaching a large number of male population, adults and adolescents, for a total of 355,440. After Adolescent SRHR, this area of SRHR is the area that reported reaching the largest population of males.

Table 5.4: Disaggregated population reach data by Neglected Area: **SGBV**

Sub-sample size: 18			
Total Budget allocated to SGBV		\$ 14,922,177.59	
Total Population		1,259,266	
Total Direct Population		1,152,422	
Total Indirect Population		106,844	
Sample Size	Disaggregated Population:	Direct	Indirect
2/18	Adults, both sexes	13,272	2,900
6/18	Adults, females	63,125	21,423
5/18	Adults, males	52,551	3,111
4/18	WRA	421,907	0
1/18	15-49, males	12,216	0
1/18	15-49, both sexes	17,280	0
2/18	Adolescents, females	73,536	0
1/18	Adolescents, male	4,555	0
1/18	Adolescents, both sexes	875	0

3/18	All ages, females	73,699	6,834
3/18	All ages, males	17,641	3,851
3/18	All ages, both sexes	10,271	68,725
4/18	Males, age group not Specified	268,477	0
1/18	Females, age group not specified	86,000	0
1/18	Both sexes, age group not specified	37,017	0

Note: numbers are cumulative and there are no overlap between the categories

WRA=Women of Reproductive Age

Adolescent age ranges given varied between 10 and 19

Results Tables:Population Reach: Support for Advocacy

From the data received, organizations reported a total population of 165,580 people reached directly (113,780) and indirectly (51,800) through projects focusing on Support for Advocacy. (Table 5.5). The adult population appears to be the main target population group in this area of work. No specific age data regarding adolescents were provided.

Table 5.5: Disaggregated population reach data by Neglected Area: **Support for Advocacy**

Sub-sample size: 9			
Total Budget allocated to Support For Advocacy		\$ 8,629,264.77	
Total Population		165,580	
Total Direct Population		113,780	
Total Indirect Population		51,800	
Sample Size	Disaggregated Population:	Direct	Indirect
2/9	Adults, both sexes	1,900	0



3/9	Adults, females	4,700	0
1/9	Adults, males	40	0
1/9	WRA	136	0
1/9	Both sexes (15-49)	17,280	0
2/9	All ages, both sexes	20,000	51,800
1/9	Both sexes, age group not specified	69,097	0
1/9	Females, age group not specified	265	0
1/9	Males, age group not Specified	362	0

Note: numbers are cumulative and there are no overlap between the categories

WRA=Women of Reproductive Age

Adolescent age ranges given varied between 10 and 19

Results Tables:Population Reach: No specific Neglected Areas

For some analyzed projects, the population reached was unable to be classified into the neglected area categories. Close to 1.35M people were reached through these projects.

Table 5.6: Disaggregated population reach data by Neglected Area: **Neglected Area Not Specified**

Sub-sample size: 9	
Total Population	1,343,482



Total Direct Population		928,482	
Total Indirect Population		415,000	
Sample Size	Disaggregated Population:	Direct	Indirect
2/9	Adults, both sexes	550	415,000
1/9	Adults, males	81	0
2/9	Adolescents, both sexes	141,791	0
2/9	Adolescents, females	37,440	0
1/9	Adolescents, males	2,586	0
1/9	WRA	170,266	0
1/9	Under 5, both sexes	386,041	0
1/9	All ages, both sexes	38,019	0
1/9	All ages, females	8,000	0
1/9	All ages, males	8,000	0
1/9	Both sexes, age group not specified	2,459	0



1/9	Females, age group not specified	133,249	0
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Note: numbers are cumulative and there are no overlap between the categories

WRA=Women of Reproductive Age

Adolescent age ranges given varied between 10 and 19

Results: Outputs

Methodology

Respondents were asked to complete detailed output data tables with numbers and descriptors specific to all applicable neglected areas addressed by the project. In this report, outputs were grouped into categories based on the type and description provided. For respondents who provided the same output details for multiple neglected areas, a conservative approach was used to provide cumulative numbers by dividing the totals evenly between the Neglected Areas to avoid any overlap.

Analysis of the results from 96.7% (30/31) of projects, with at least one output, included the following output type categories:

- **Advocacy activities:** examples include key influencing activities, and advocacy initiatives/strategies identified and implemented.
- **Awareness campaigns:** examples include outreach activities and learning events conducted, and people reached through these events.
- **Facilities established, refurbished or equipped:** examples include health facilities renovated, shelters constructed, community based centres established, as well as systems supported through the provision of training, supplies and equipment.
- **People trained:** examples include health service providers, teachers, peer educators, personnel/staff, government officials, and community members.
- **SRHR services provided:** examples include adolescent girls and young women linked to referral services, including family planning, contraceptives, post-abortion care, and sexual and gender-based violence.
- **Groups established:** examples include men's watch groups, community action groups, youth friendly and gender-sensitive spaces.

Results

Results on Outputs: *Adolescent SRHR (including comprehensive sexuality education):*

Number of projects addressing Adolescent SRHR: 19

Number of projects with outputs attributed to Adolescent SRHR: 14 (74%)

64% (9/14) of projects with reported outputs trained close to 50,000 people on Adolescent SRHR, including healthcare personnel, youth and peer educators (Table 6.1). Another 44,785 people were reached through awareness campaigns and outreach activities among the communities to improve knowledge and access to sexual and reproductive health and rights for young women, youth and parents. Other reported outputs linked to Adolescent SRHR covered facilities established refurbished or equipped; groups established for gender-sensitive and youth friendly safe spaces; and provision of IEC materials.

Table 6.1: Outputs attributed to Adolescent SRHR (including comprehensive sexuality education)

Sample size	Output Type	Number of Outputs
4/14	Awareness campaigns (number of outreach events/activities)	687
2/14	Awareness campaigns (number of people reached)	44,785
5/14	Facilities established/refurbished/equipped	95
2/14	Groups established (gender-sensitive and youth friendly safe spaces)	33
9/14	People trained (Healthcare personnel, youth and peer educators)	49,434
3/14	SRHR services provided	39,060
2/14	IEC materials provided	22

Results on Outputs: *Comprehensive Contraceptive Care:*

Number of projects addressing Comprehensive Contraceptive Care: 21

Number of projects with outputs attributed to Comprehensive Contraceptive Care: 16 (76%)

38% (6/16) of projects reported providing SRHR or Family planning services to over 70,000 people, 34, 812 of whom received information on family planning and post abortion care (Table

6.2). Approximately 85,500 people were reached through awareness campaigns and another 51,700 were trained on Comprehensive Care. Other reported outputs linked to Comprehensive Contraceptive Care included facilities established/refurbished or equipped; groups established for gender-sensitive and youth friendly safe spaces; provision of IEC material and provision of scholarships to health professionals.

Table 6.2: Outputs attributed to Comprehensive Contraceptive Care

Sample size	Output Type	Number of Outputs
6/16	Awareness campaigns (number of outreach events/activities)	847
3/16	Awareness campaigns (number of people reached)	45,410
5/16	Facilities established/refurbished/equipped	28
1/16	Groups established (gender-sensitive and youth friendly safe spaces)	33
7/16	People trained (Healthcare personnel, youth and peer educators)	51,690
5/16	SRHR services provided	39,073
1/16	Family planning services provided (including information on post abortion care)	34,812
1/16	IEC materials provided	13
1/16	Scholarships provided to health professionals	25

Results on Outputs: *Safe and Legal Abortion:*

Number of projects addressing Safe and Legal Abortion: 9

Number of projects with outputs attributed to Safe and Legal Abortion: 7 (78%)

44% (4/9) of projects with reported outputs trained over 50,000 people on providing safe abortion care and management, as well as training on women's rights (Table 6.3). An additional

44,785 people were reached through awareness campaigns and outreach activities among the communities to improve knowledge and access to SRHR services, including post-abortion care. Other reported outputs linked to Safe and Legal Abortion covered facilities established refurbished or equipped; groups established for gender-sensitive and youth friendly safe spaces; and provision of IEC materials.

Table 6.3: Outputs attributed to Safe and Legal Abortion

Sample size	Output Type	Number of Outputs
5/9	Awareness campaigns (number of outreach events/activities)	694
2/9	Awareness campaigns (number of people reached)	44,785
3/9	Facilities established/refurbished/equipped	29
1/9	Groups established (gender-sensitive and youth friendly safe spaces)	33
4/9	People trained (including healthcare personnel, youth and peer educators)	50,091
1/9	SRHR services provided	39,060
1/9	IEC materials provided	13

Results on Outputs: *Sexual and Gender-Based Violence:*

Number of projects addressing Sexual and Gender-Based Violence: 26

Number of projects with outputs attributed to Sexual and Gender-Based Violence: 18 (69%)

69% (18/26) of projects with outputs trained over 180,000 people, such as healthcare personnel, staff and teachers, IDPs, government officials and peer educators, on gender, women's and girl's rights, SGBV prevention and response. Approximately 16,000 people were reached through

awareness campaigns and outreach activities to raise awareness of SGBV, referral pathways and support services. Other output types reported were women's groups, youth-friendly and safe spaces established, women's empowerment programs implemented, grant support provided, and other SRHR services provided such as medical management to GBV victims (Table 6.4).

Table 6.4: Outputs attributed to Sexual and Gender-Based Violence

Sample size	Output Type	Number of Outputs
5/18	Awareness campaigns (number of outreach events/activities)	2,039
2/18	Awareness campaigns (number of people reached)	16,291
3/18	Facilities established/refurbished/equipped	86
3/18	Groups established (women and men's watch groups, including youth friendly spaces)	134
9/18	People trained (government officials, health staff, teachers and peer educators)	180,437
2/18	Health services provided (including nutrition services)	30,434
1/18	SRHR services provided (including medical management to GBV victims)	156,241
1/18	IEC materials provided	13
1/18	Women's empowerment program	2
1/18	Grants supported	13

Results on Outputs: *Support for Advocacy:*

Number of projects addressing Support for Advocacy: 17

Number of projects with outputs attributed to Support for Advocacy: 10 (59%)

Close to 1,600 awareness campaigns, 450 meetings, and 1,110+ advocacy activities were implemented by more than 50% of projects. These included activities involving stakeholder engagement and coordination around advocacy strategies. Other outputs reported were training provided to government officials, Community Based Organizations and local advocacy groups;

research studies done on advocacy; grant support provided; and IEC materials produced (over 90,000 materials provided) (Table 6.5).

Table 6.5: Outputs attributed to Support for Advocacy

Sample size	Output Type	Number of Outputs
5/10	Awareness campaigns (number of outreach events/activities)	1,603
4/10	Meetings (number of stakeholder engagements)	440
4/10	Advocacy activities	1,117
1/10	IEC materials produced	92,372
3/10	People trained (government officials, Community Based Organizations, local advocacy groups)	1,600
1/10	Research studies done (learning initiatives)	20
1/10	Grant support	10

Results: Indicators Results

Methodology

Respondents were asked to **select from a predetermined list** the SRHR indicators being measured in their projects. The list of indicators included the full list of 16 Global Affairs Canada finalized SRHR [Key Performance indicators](#) (KPIs) classified into separate categories for each neglected area of SRHR.

Results

Table 7.0: Standard indicator categories tracked in projects

Indicator Category	# Projects	# Unique Indicators

Adolescent SRHR (including comprehensive sexuality education)	18	3
Comprehensive Contraceptive Care	15	4
Safe and Legal Abortion	7	3
Sexual and Gender Based Violence	10	2
Support for Advocacy	13	3

Results on Indicator Category: *Adolescent SRHR (including comprehensive sexuality education)*

Sub-sample size (projects measuring indicators in this category): **18**

Projects reported measuring **three** of the SRHR KPIs related to Adolescent SRHR (Table 7.0), with the majority (78%; 14/18) measuring “*number of health service providers trained in SRHR services*” followed by 39% (7/18) who measured “*number of teachers/facilitators trained on comprehensive sexuality education*” and 6% (1/18) measuring “*\$ invested and # of GAC-funded projects that promote the integration of comprehensive sexuality education in school curriculums*”, while 28% (5/18) reported measuring other Adolescent SRHR related indicators (Table 7.1).

Table 7.1: Adolescent SRHR indicators being measured

Adolescent SRHR related Indicators	# of projects measuring this indicator	% of projects measuring this indicator
# of health care service providers trained in SRHR services	14	78%
# of people treated with antiretroviral therapy	0	0
# of teachers/facilitators trained on comprehensive sexuality education	7	39%
\$ invested and # of GAC-funded projects that promote the integration of comprehensive sexuality education in school curriculums	1	6%
Other Adolescent SRHR related indicators	5	28%

Results on Indicator Category: *Comprehensive Contraceptive Care*

Sub-sample size (projects measuring indicators in this category): **15**

Projects reported measuring **four** of the SRHR KPIs related to Comprehensive Contraceptive Care (Table 7.0). Most of the projects (87%; 13/15) reported measuring “*number of women and girls provided with access to sexual and reproductive health services, including modern methods of contraception*”, followed closely by “*number of people provided with modern contraception (by method)*” (60% ; 9/15), “*Percentage of women who decided to use family planning, alone or jointly with their husbands/partners*” (53%: 8/15), and “*Percentage of primary service delivery points with at least 3 modern methods of contraception available on the day of assessment*” (47%; 7/15) (Table 7.2).

Table 7.2: Comprehensive contraceptive care indicators being measured

Comprehensive contraceptive care related Indicators	# of projects measuring this indicator	% of projects measuring this indicator
# of women and girls provided with access to sexual and reproductive health services, including modern methods of contraception	13	86.6%
# of people provided with modern contraception (by method)	9	60%
Percentage of primary service delivery points with at least 3 modern methods of contraception available on the day of assessment	7	46.7%
Percentage of women who decided to use family planning, alone or jointly with their husbands/partners	8	53%
Other comprehensive contraceptive care related indicators	2	13%

Results on Indicator Category: *Safe and Legal Abortion*

Sub-sample size (projects measuring indicators in this category): **7**

Projects reported measuring **three** of the SRHR KPIs related to Safe and Legal Abortion (Table 7.0). The majority of projects (85%; 7/9) reported measuring “*number of health professionals*

trained to provide safe abortion and post-abortion care”, followed by “number of health facilities that provide care for complications related to unsafe abortion or where it is not against the law, that provide safe abortion” (57%; 4/7), and “number of women provided with a safe, legal abortion and post abortion care” (43%; 3/7) (Table 7.3).

Table 7.3: Safe and Legal Abortion indicators being measured

Safe and Legal Abortion related Indicators	# of projects measuring this indicator	% of projects measuring this indicator
# of health facilities that provide care for complications related to unsafe abortion or where it is not against the law, that provide safe abortion	4	57%
# of health professionals trained to provide safe abortion and post-abortion care	6	85.7%
# of women provided with a safe, legal abortion or post-abortion care	3	43%

Results on Indicator Category: *Sexual and Gender Based Violence*

Sub-sample size (projects measuring indicators in this category): **10**

Projects reported measuring **two** of the SRHR KPIs related to Sexual and Gender Based Violence (Table 7.0). The majority of projects (70%; 7/10) reported measuring “# of people who have experienced, or are at risk of, any form of SGBV that have received related services in the previous 12 months” and “# of women and girls, men and boys, demonstrating positive attitudes towards ending SGBV” (Table 7.4).

Table 7.4: SGBV indicators being measured

Sexual and Gender Based Violence	# of projects measuring this indicator	% of projects measuring this indicator
# of people who have experienced, or are at risk of, any form of SGBV that have received related services in the previous 12 months	7	70%
# of women and girls, men and boys, demonstrating positive attitudes towards ending SGBV	7	70%

Results on Indicator Category: *Support for Advocacy*

Sub-sample size (projects measuring indicators in this category): **13**

Projects reported measuring **three** of the SRHR KPIs related to Support for Advocacy. Nearly all of the projects (92%; 12/13) reported measuring the “*number of advocacy and public engagement activities completed*”, followed by 62% (8/13) who reported measuring “*number of women’s rights organizations and networks (international and local) advancing SRHR*” and 54% (7/13) who reported measuring “*number of national laws, policies and strategies relating to SRHR*” (Table 7.5).

Table 7.5: Support for Advocacy indicators being measured

Support for Advocacy related Indicators	# of projects measuring this indicator	% of projects measuring this indicator
# of women's rights organizations and networks (international and local) advancing SRHR that receive direct GAC support or that receive support*from GAC-funded partners *support is financial or other	8	62%
# of national laws, policies and strategies relating to SRHR implemented or strengthened	7	54%
# of advocacy and public engagement activities completed by GAC-funded partners which are focused on SRHR	12	92%