



# European Support to Reproductive Health & Family Planning

## Trends Analysis for 2014-15

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## 1. Setting the scene

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This past year of 2015 has seen European donors retain their long-standing commitment to the issues of reproductive health and family planning (RH/FP) through vocal support within Open Working Groups on the post-2015 global goals, in European Council processes, and in other global fora. This has contributed to a strong platform for RH/FP within the recently-accepted Sustainable Development Goals (SDGs).

This report analyses both financial and policy data collected by Countdown 2015 European national partners<sup>1</sup>. The second section concludes that overall, the policy basis underpinning reproductive health and family planning (RH/FP) remains strong across most European countries. In some countries – including Germany, the UK and Sweden – encouraging progress has been made in 2015 towards policy commitments that increase official development assistance (ODA). The same is seen in the European Commission, with their revised and recently released Gender Action Plan. However, there have been some new governments elected in various European countries, and forthcoming budget changes in 2015 are likely to decrease the amount allocated to ODA; critically, this ODA cut is likely to affect expenditure on RH/FP. The prominence of the refugee crisis in Europe might also threaten ODA expenditure in the next year, and again this might see a change in the amount spent on RH/FP. Therefore, in 2015 it will be critical to increase and intensify advocacy by a vibrant civil society to their governments to ensure European alignment of financial expenditure to RH/FP policy commitments. The situation is particularly pronounced in long-standing donors to RH/FP, including Denmark, Finland, the Netherlands, and Norway.

The third section of the report analyses the financial commitments of European governments to RH/FP. The financial data is broken down into two different indicators, and these are tracked to demonstrate both past year trends (2013-2014) and six-year trends (2009-2014). The data is also examined from an absolute amount but also from a percentage increase/decrease perspective to provide a fuller picture of trends. Overall, the amount of money disbursed to population assistance has remained stagnant over the past year, whilst growing over the past six years. The amount of money the Countdown 2015 Europe partners spent on UNFPA – the proxy indicator since data is robust – has increased in the past year. There are various conclusions that can be drawn from the combination of these policy and financial data, and these are discussed in the final section 4.

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<sup>1</sup> Countdown 2015 Europe is an IPPF EN-led consortium of leading European NGOs working in 12 European countries to raise awareness and promote increased European donor support in terms of policies and funding to ensure universal access to reproductive health and family planning worldwide. For more information, please contact [countdown2015europe@ippfen.org](mailto:countdown2015europe@ippfen.org), or visit [www.countdown2015europe.org](http://www.countdown2015europe.org).

## 2. What are the policy highlights?

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**European support to RH/FP through policy commitments has remained strong in 2015. This success is evident from the strong featuring of RH/FP in the SDGs, and in some specific country examples.** Within the SDGs, of particular relevance to RH/FP is Target 3.7 within the Health Goal, Target 4.7 within the Education Goal, and Target 5.6 within the Gender Equality Goal. European countries and institutions were vocal in their support for inclusion of RH/FP priorities within the SDGs. Within the European Commission, the Gender Action Plan was revised and released in September 2015 as a Staff Working Document, called 'Gender Equality and Women's Empowerment: Transforming the Lives of Girls and Women through EU External Relations 2016-2020'. It was adopted as the Gender Action Plan 2016-2020 by the Council in October 2015. This document is supportive of reproductive health with a specific objective, including indicators on family planning. Within countries, three main highlights of the larger European donors stand out: Sweden maintained its public policy commitments to RH/FP, and launched a new SRHR sub-Saharan strategy in 2015 (worth approximately EURO 37,800,000 annually). The UK continues its strong commitment to RH/FP, and the newly elected government in 2015 publically renewed its commitment to women and girls, and enshrined ODA as 0.7% of GNI as a law. Germany also recently (November 2015) announced its largest ever increase to ODA funding. In Belgium, Ireland and Switzerland, policy commitments to ODA and specifically to RH/FP remain strong. Furthermore, of the 8 European governments who pledged commitments to reach 120 million additional women and girls to use contraceptives by 2020 in the 2012 Family Planning Summit, four have already fulfilled their commitments (Denmark, European Institutions, Netherlands, Sweden), three are on track to achieving their commitments (Germany, Norway and the UK), and there is limited financial data available for France.

**However, ODA budgets are being cut in several key long-standing RH/FP supporters – Denmark, Finland, Netherlands and Norway. Close monitoring and strong advocacy is needed to ensure financial commitments match the policy pledges.** Many European governments have continued to include emphasis on provision to family planning, and access to reproductive health and rights, within their policy documents. For example: Denmark adopted 'The Right to a Better Life' in 2011, and there is 'The Danish strategy to support SRHR' (launched in 2006, then reviewed in 2010 and 2014), and the new 'Strategic Framework for Gender Equality, Rights and Diversity in Danish Development Cooperation'. Similarly, recent policy documents explicitly state Finland's strong commitment to RH/FP. These include: Finland's Development Policy Programme (launched February 2012 for a four year period); the Human Rights Strategy and the UN Strategy for the Finnish Foreign Service and an associated Action Plan in 2013. The Netherlands has a policy document issued in 2013 'A World to Gain. A New Agenda for Aid, Trade and Investment' that guides its commitment to RH/FP. Norway announced support to the newly established Global Financing Facility, to the extent of 600 million Norwegian Krona 2015-2020 (just under 65 million Euros). However, several new governments (in Norway, Finland and Denmark) are proposing to – or have already committed to – cutting ODA in 2016. There is also the issue of the very public refugee crisis in Europe, which has meant that ODA spending could be diverged. This leaves

RH/FP at risk, and civil society has an especially strong role to play in monitoring and advocating for financial commitments of their governments matching policy pledges. There is evidence that advocacy has worked in the past – for example, when the Dutch ODA budget has been decreasing since 2013, but the 2014 budget for RH/FP was safe-guarded from this budget cut. However, given the link between ODA and the GNP, budget cuts were announced in the budget for 2014 (as presented in September 2013), including for RH/FP and HIV/AIDS. An ensuing intervention by the Dutch Parliament ensured that the 2014 budget for RH/FP and HIV/AIDS was not cut. In 2015, the Dutch government actually released more money specifically earmarked to support RH/FP civil society in the Netherlands. In Norway, a very recent example is the protection of the overall development budget at 1.1% of GNI. This has been maintained after intense negotiations in late 2016. Positively, funding to civil society organisations – including those working on RH/FP – has been restored to the same level as it was previously, reversing a previous proposal of drastic cuts; in other words, advocacy to maintain the Norwegian government’s focus on civil society, and RH/FP, has been successful. This type of advocacy across all European countries is becoming more and more essential to maintain funding in 2016 is aligned to the European countries’ policy commitments.

**In countries where the majority of assistance is channelled through bilateral expenditures, it is difficult to match policy commitments to financial spending.** Even in countries that have seen a growing trend in actively supporting RH/FP, it is sometimes hard to match figures to policy, particularly if the majority of spending is channelled directly through bilateral channels. For example in Germany, where very recent increases in ODA are very welcome, it will be difficult to outline what proportion of the total ODA goes to RH/FP since most of its spending is through bilateral expenditure with specific developing countries.

**Belgium:** Belgium's Minister for Development Cooperation committed to support RH/FP, in the 2014-2019 Policy Declaration. RH/FP is also a priority in operational policy documents on health in development.

**EC:** Revised and recently released the new gender plan for 2016-2020, with specific reference to RH/FP.

**Germany:** The German focus on RH/FP in 2015 has been consistent throughout the post-2015 negotiations and the ICPD review process, however Germany's main focus is on bilateral expenditure (where specific spending on RH/FP is harder to track). In 2015, Germany announced the largest ever increase in ODA budget for 2016.

**Sweden:** Continues to be a long-standing supporter of RH/FP issues, and in 2015 the new budgetary summary included specific mention of RH including access to contraceptives. The new SRHR Sub-Saharan Strategy (worth 350 million SEK annually) launched in 2015.

**Switzerland:** The latest Health Policy document from Switzerland (published 2015) commits to improving SRHR as one of the three health priorities. The Swiss Parliament agreed to increase Switzerland's ODA to achieve the goal of 0.5% of GNI by 2015.

**UK:** In 2015, the UK enshrined in law that 0.7% of GNI would go to official development assistance (through the International Development Act). Within this, RH/FP has remained at the forefront of the UK's policy efforts, and included wider issues of SRHR such as preventing early and forced childhood marriage and female genital mutilation/cutting.



**Denmark:** A long-standing and dedicated supporter to RH/FP, Denmark's commitment is based on several policy documents. Whilst the newly-elected government quickly announced its support for RH/FP when elected, it has also recently announced a cut in ODA for 2016, from 0.87% to 0.7% of GNI. Strong advocacy will be needed to ensure RH/FP suffers as little as possible within these cuts.

**Finland:** Recent policy documents explicitly state Finland's strong commitment to RH/FP. These include: Finland's Development Policy Programme (launched February 2012 for a four year period); the Human Rights Strategy and the UN Strategy for the Finnish Foreign Service and an associated Action Plan in 2013. Finland supported RH/FP throughout the post-2015 negotiations. Although RH/FP funding has so far been safe-guarded, close monitoring is needed for 2016 as the newly-appointed government continues with plans to cut ODA.

**Netherlands:** Another long-standing and dedicated supporter of RH/FP, the Dutch policy document issued in 2013 'A World to Gain. A New Agenda for Aid, Trade and Investment' guides its commitment to RH/FP. In 2015, the Dutch government issued a call for civil society working on SRHR to the region of EURO 215 million. However, close monitoring of financial expenditure on RH/FP continues to be needed given the cuts in ODA that continue in the Netherlands (started in 2013).

**Norway:** Historically a strong supporter of RH/FP, but close and continued monitoring is needed since there were proposed cuts in 2016 to ODA that would have drastically effected RH/FP and civil society funding – these were protected after negotiations and strong civil society action in late 2015.

**France:** France's first Development Law was passed in 2014, with specific mention of reproductive health including family planning. The French Development Agency endorsed a Health Strategy in June 2015, and a Population / SRHR Strategy is forthcoming from the Ministry of Foreign Affairs.

**Ireland:** Irish Aid's 2013 overseas development policy statement 'One World, one Future' includes a commitment to ICPD (a first for Irish Aid policy). Irish Aid policies on gender equality and gender-based violence consistently and increasingly include reference to reproductive health.

**Spain:** In recent years, there have been significant budget cuts to ODA in Spain, and changes in development cooperation instruments, that have back-tracked on previous policy gains RH/FP. The austerity period continued in 2015, with significant cuts in international development spending across the board, and policies much less focused on RH/FP or related gender issues.

### 3. Where is the money going?

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The Countdown 2015 Europe data has been collected using the same methodology since 2009. This allows for historical comparison of RH/FP funding trends, comparing two different ‘indicators’ over time; each paints a slightly different picture<sup>2</sup>. We present an overview of analysis of all two methods and then provide a short summary to synthesise these findings. Please see Annex 1 for further explanation on the methodology used to gather and analyse the data, as well as its added value.

#### **a) Analysis of core funding to UNFPA (core funding to UNFPA + funding to RHCS)**

This analysis takes core funding for UNFPA + funding going towards the UNFPA Global Programme to Enhance RH Commodity Security (RHCS). This is an important indicator for Countdown 2015 Europe partners because it is the most robust indicator, collected by most countries consistently; it therefore often becomes the proxy indicator by which to measure RH/FP funding. Table 2 below provides the full breakdown of funding analysed in this manner.

**Analysis of core funding to UNFPA coupled with funding to the RHCS in the past year indicates that overall, across all Countdown 2015 Europe countries, funding for UNFPA has increased by 7.6%, from EUROS 382,636,259 to EUROS 411,698,170.**

**Countries reporting an increase level of funding for UNFPA for 2013-2014 include: Denmark, Finland, France, Germany Ireland, Norway, Switzerland, and Sweden for core funding; and Norway for financial support to the UNFPA RHCS.**

Of note:

- Of particular note, despite a difficult economic climate, Finland saw a 43% increase in funding between 2013 and 2014 (from EUROS 35,550,000 to EUROS 50,970,000)
- Denmark increased core funding to UNFPA substantially, from 32,830,000 to 47,838,000 (almost 46% increase)

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<sup>2</sup> In other reports, a third indicator – just covering ‘RH/FP’ – was sometimes included. However, data limitations made it difficult for partners to report with full accuracy this year.

- Due to the currency fluctuations between the Norwegian Krona and the Euro, Norway's increase in core funding and project funding to RHCSP appear smaller in percentages than they actually were. However, there is prediction that Norwegian funding to UNFPA will decrease in 2016 – and that is something that should be closely monitored.

**Countries reporting a basic stagnation (minimal increase or decrease) in UNFPA core funding between 2013 and 2014 are Belgium, Spain and the UK; Denmark and the Netherlands saw no change in the level of funding to RHSCP between 2013 and 2014.**

**Countries reporting a decrease in UNFPA funding between 2013 and 2014 are the UK for project funding to UNFPA RHCS (14.5 %), and the Netherlands in core funding to UNFPA (12.5%).**

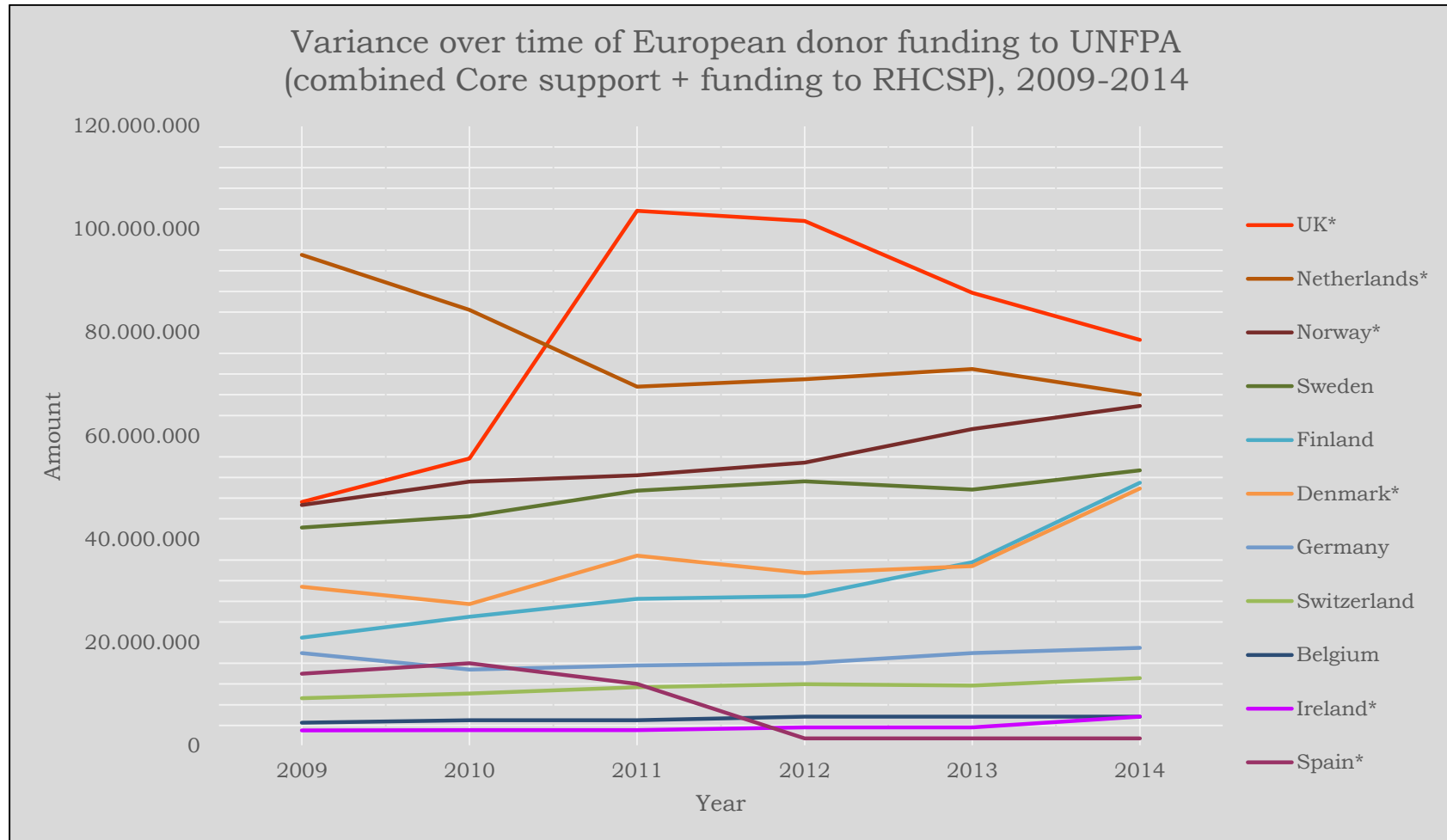
- The UK drop of 14.5% in project funding to UNFPA RHCS between 2013 and 2014 seems to be due to a change in funding instruments used to support this project.
- The Netherlands drop in core funding to UNFPA seems to be due to cuts in ODA budgets.

Table 1: Comparison of cross-European support to UNFPA (core support + RH Commodity Security programme), 2009-2014, in Euros								
Country	2009	2010	2011	2012	2013	2014	% change (2009-2014)	% change (2013-2014)
Belgium	4,500,000	5,000,000	5,000,000	5,700,000	5,700,000	5,700,000	26.67%	0.00%
Denmark (core)	30,820,000	27,470,000	34,170,000	33,500,000	32,830,000	47,838,000	55.22%	45.71%
Denmark (RHCSP)	-	-	2,680,000	-	2,010,000	2,010,000		0.00%
Finland	21,000,000	25,000,000	28,500,000	29,000,000	35,550,000	50,970,000	142.71%	43.38%

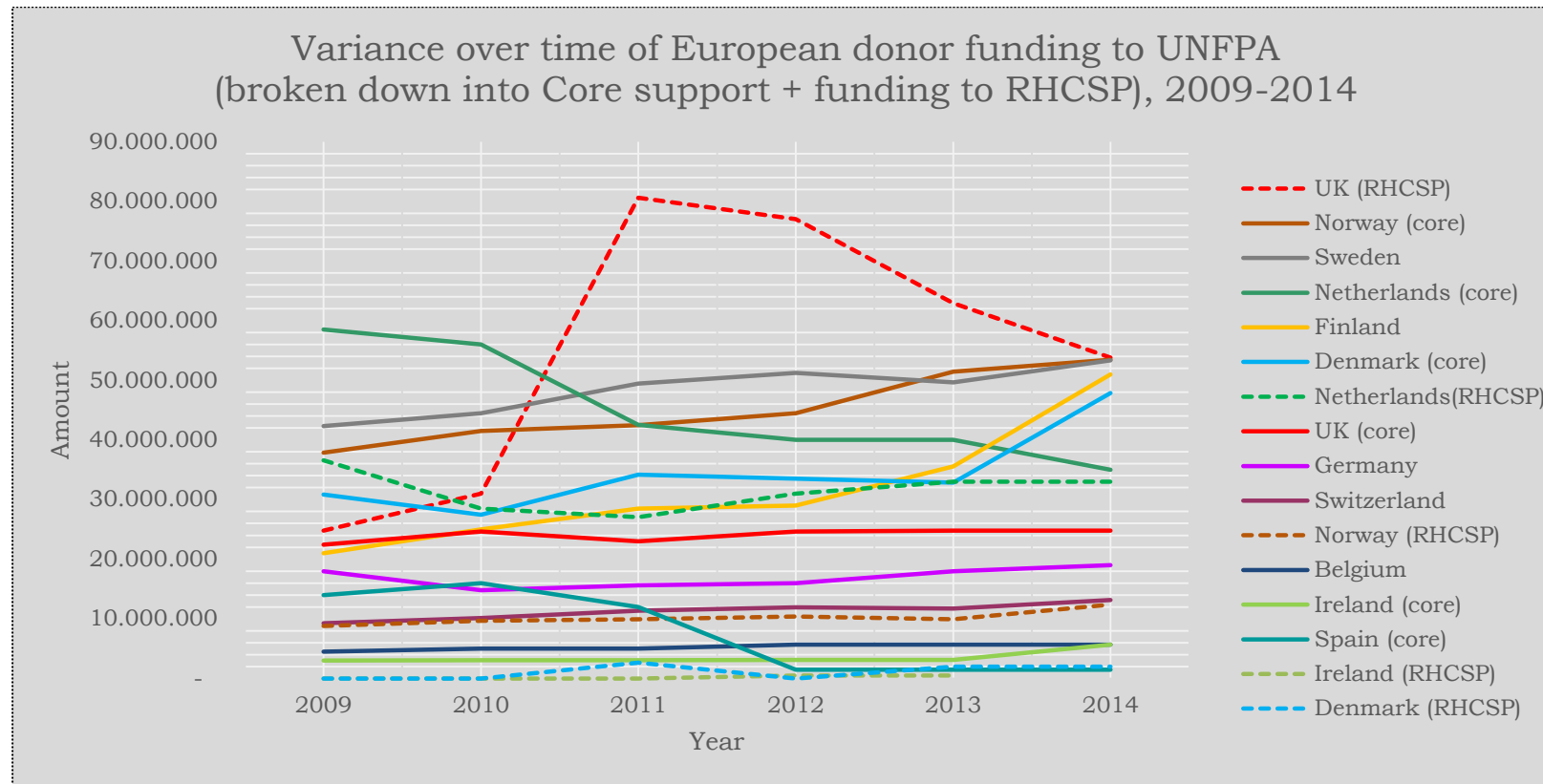
Germany	18,000,000	14,800,000	15,600,000	16,000,000	18,000,000	19,000,000	5.56%	5.56%
Ireland (core)	3,000,000	3,050,000	3,050,000	3,100,000	3,100,000	5,700,000	90.00%	83.87%
Ireland (RHCSF)	-	-	-	500,000	500,000			
Netherlands (core)	58,500,000	55,987,929	42,538,000	40,000,000	40,000,000	35,000,000	-40.17%	-12.50%
Netherlands(RHCSF)	36,589,474	28,462,634	27,027,026	31,000,000	33,000,000	33,000,000	-9.81%	0.00%
Norway (core)	37,848,000	41,500,000	42,496,000	44,488,000	51,456,000	53,444,000	41.21%	3.86%
Norway (RHCSF)	8,831,552	9,683,719	9,916,128	10,380,947	9,916,128	12,400,000	40.41%	25.05%
Spain (core)	14,000,000	16,000,000	12,000,000	1,500,000	1,500,000	1,500,000	-89.29%	0.00%
Spain (RHCSF)	-	-	-	-	500	-		
Sweden	42,300,000	44,467,500	49,450,500	51,232,500	49,624,800	53,350,000	26.12%	7.51%
Switzerland	9,268,000	10,136,000	11,368,000	11,952,000	11,707,200	13,168,000	42.08%	12.48%
UK (core)	22,440,000	24,641,020	23,020,000	24,660,000	24,800,000	24,800,000	10.52%	0.00%
UK (RHCSF)	24,800,000	31,000,000	80,600,000	77,004,000	62,941,631	53,818,170	117.01%	-14.50%
<b>Total (Euros)</b>	<b>331,897,026</b>	<b>337,198,802</b>	<b>387,415,654</b>	<b>380,017,447</b>	<b>382,636,259</b>	<b>411,698,170</b>	<b>24.04%</b>	<b>7.60%</b>
France	-	3,000,000	5,000,000	5,000,000	-	550,000		



Graph 1 below depicts the trends in European donor funding to UNFPA over the past five years:



Graph 2 depicts the same trends in European donor funding to UNFPA, but breaking down core support to UNFPA and project support to UNFPA:



**b) Analysis of all funding through all streams reported by Countdown 2015 Europe partners.**

This method takes a total of all funding streams reported by partners: core funding to multilaterals + project funding to multilaterals + funding to international organisations + funding to research. This measure does NOT include bilateral funding or funding specifically to multilaterals to work in specific countries (commonly called ‘multi-bilateral funding’). Table 1 below provides the full breakdown of funding provided through all reported streams.

**Overall, funding for population assistance has increased in all European countries between 2013 and 2014, except the UK and Norway (the latter of which just showed a small stagnation). Between 2009 and 2014, funding for population assistance across all European countries actually increased by 32%.**

The analysis shows that the majority of countries report an increase in funding to population assistance between 2013 and 2014.

**Countries showing an increase in population assistance funding between 2013 and 2014 are: Belgium, Denmark, Finland, Germany, the Netherlands, Spain and Switzerland.**

Of note:

- In Finland, where RH/FP has been protected despite overall ODA cuts, funding to population assistance increased by almost 45% between 2013-2014.
- In the Netherlands, Denmark and Finland – all significant donors for RH/FP – there were increases in funding between 2013 and 2014.

**Countries reporting a minimal increase or decrease in population assistance funding between 2013 and 2014 are: Norway and Sweden.**

Of note:

- Norway reported a minimal decrease in overall population assistance funding between 2013 and 2014 – decreasing by 2.7%. In Sweden, the overall increase between 2013 and 2014 was of 3.7%. And in both Norway and Sweden, the variance between 2009 and 2014 shows an overall increase in funding, especially for Norway.

- It is also important to combine this information with what is known to have been committed for 2015 onwards - Norway's new and substantial financial commitment to the Global Financing Facility from 2015 onwards, and Sweden's new SRHR Strategy for Sub-Saharan Africa.

**Countries showing a substantial decrease in population assistance funding between 2013 and 2014 is the UK.**

- As can be seen from Table 2 below, the UK has shown a substantial decrease in population assistance between 2013 and 2014. However, this has to be taken in context: as well as the limitations of the certain data availability (particularly on RH/FP research in the UK), when the UK's funding to population assistance is analysed further, this seems to be due to a substantial decrease in funding to international organisations, primarily because support to the Global Fund to Fight TB, AIDS and malaria (2013-2017) was front-loaded in 2013. In all other categories of population assistance, the UK's financial contribution has actually increased. And when a five-year trend is seen (2009-2014), the UK has actually increased its contribution to population assistance by 200%, and is ranked as the top in Europe.

Table 2: Comparison of cross-European support to population assistance, 2009-2014, in Euros

Comparison of cross-European support to Population Assistance, 2009-2014, in Euros								2014		2014	
Rank	Country	2009	2010	2011	2012	2013	2014	Amount'	% change'	Amount	% change
1	UK	164,262,953	276,217,728	532,772,371	315,106,710	669,503,507	493,171,596	328,908,643	200.2%	-176,331,911	-26.3%
2	Norway	167,775,944	187,036,513	162,498,235	180,337,069	225,092,914	219,000,483	51,224,539	130.5%	-6,092,431	-2.7%
3	Netherlands	183,046,388	163,936,312	193,747,311	166,076,173	187,229,752	191,808,172	8,761,784	4.8%	4,578,420	2.4%
4	Sweden	146,867,258	141,584,861	227,855,324	233,390,303	186,728,706	193,671,613	46,804,356	31.9%	6,942,907	3.7%
5	Germany	160,844,587	141,318,492	142,330,026	146,486,276	150,065,945	175,317,131	14,472,544	9.0%	25,251,186	16.8%
6	Denmark	90,699,709	74,106,462	69,612,263	65,957,356	79,370,746	108,179,951	17,480,242	19.3%	28,809,205	36.3%
7	Finland	38,443,135	41,522,900	46,478,738	48,573,369	53,868,992	78,062,517	39,619,382	103.1%	24,193,525	44.9%
8	Switzerland	30,183,331	29,673,837	31,946,665	33,152,354	40,474,691	48,389,483	18,206,152	60.3%	7,914,792	19.6%
9	Ireland	14,628,300	14,575,900	15,740,300	17,254,300	19,573,600	21,216,100	6,587,800	45.0%	1,642,500	8.4%
10	Belgium	40,758,466	35,519,191	32,492,403	28,735,410	27,821,955	33,248,705	-7,509,761	-18.4%	5,426,750	19.5%
11	Spain	158,779,580	95,250,372	61,973,764	19,199,043	10,244,768	14,338,790	-144,440,790	-91.0%	4,094,022	40.0%
-	France**	461,000,000	526,830,000	433,100,000	434,700,000	493,648,600					
	<b>Total (excl. France)</b>	<b>1,196,289,650</b>	<b>1,200,742,567</b>	<b>1,517,447,400</b>	<b>1,254,268,362</b>	<b>1,649,975,576</b>	<b>1,576,404,542</b>	<b>380,114,892</b>	<b>31.8%</b>	<b>-73,571,034</b>	<b>-4.5%</b>

For the UK multilateral projects, a % rate was applied for the proportion of funding that was sector coded specifically for FP. This does not include all RH/Pop Assistance funding (for example other sector codes such as HIV/STIs, Reproductive Health), but was a more accurate figure to use than to use the total funding amount for projects (as many were broader development programmes only partially related to RH/FP)

For multilateral projects, a rate of 56% was applied to all GFATM funding, assumed to be for RH/FP (vs TB and malaria). This historic rate was applied for all years to each country with GFATM funding since 2009.

The figures for France's contributions have not been updated for 2014. Therefore, France has not been included in the ranking.

## 4. Issues to consider ...

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The strong policy commitment of European governments for RH/FP continued through 2015. This contributed to RH/FP featuring prominently within the SDGs. The 17 SDGs with their 169 targets present an encouraging platform with several entry points for reproductive health and family planning. The next step now is to mobilise European donors to finance the SDGs adequately, and monitor the implementation of the various aspects of the SDGs at national level.

When comparing 2014 financial data disbursed with 2013 money disbursed, overall it seems that the amount to population assistance has increased in all but 2 countries across Europe. However, funding to UNFPA – both core and project funding – remained strong, and increased between 2013 and 2014. Interestingly in 2015, some new ways of financing RH/FP were introduced or continued. Whilst the Muskoka Initiative ended, the Global Financing Facility was set up, with particularly strong Norwegian commitment. The Danish and the Dutch governments continued support to AmplifyChange (the civil society fund to support SRHR advocacy), joined in late 2015 by the UK and Norwegian governments. The Swedish government launched an SRHR Sub-Saharan initiative, the Netherlands launched its call to Dutch civil society for SRHR.

The overall policy context for ODA is not encouraging for many key European countries for 2016. Although Germany and the UK have seen increases in ODA, several significant European donors to RH/FP now have heightened pressure being placed on their ODA budgets; funding to RH/FP is due, or is threatened, to be cut. Increased monitoring and advocacy by civil society is needed to ensure that donors practically fund the issues they have committed to through their policy documents. Advocacy has been proven to work – as demonstrated in late 2015 by sustained funding to civil society in Norway despite previously proposed budget cuts.

## Annex 1: Methodology and Added Value

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### Why was the Countdown 2015 Europe methodology created?

- C2015E is a group of European NGO partners working in 12 European countries to advocate with their governments for support to RH/FP. The consortium is led by IPPF European Network.
- C2015E needed a consistent way to collect national data for local advocates – the C2105E Partners – to track what their national governments were committing and expending to RH/FP.
- C2015E Partners looked at the RH/FP financial data available, but none were ideal for the local advocacy partners, namely:
  - Funding data categorised under OECD/DAC population assistance: Although systematised, official and in the public domain, the data was questioned by many national government counterparts. This is mostly because the data come from official statistical units rather than RH/FP-specific units within the government, and because there is huge scope for different interpretation and classification of the codes (either due to difficulty in assigning a specific CRS code onto a multi-faceted project, to lack of political motivation, or to lack of sufficient project information), thus affecting the quality of data. There is also difficulty in categorising general budget support that goes to RH/FP. The data was also not published quickly enough to be useful for national advocates to use for monitoring purposes.
  - NIDI UNFPA Resource Flows data: This relies partly on the OECD/DAC data, and therefore faces the same challenges as above. In addition, data on population assistance are collected through questionnaires, directly sent to donors. The initial challenge of the data giving too little detail on RH and FP breakdowns was overcome on the initiative of C2015E, suggesting to modify the questionnaire and ask for specific % on RH and FP, but the often low response rate on these details keep the use of these data for monitoring purposes challenging. Nevertheless, the % of a multilateral organisation's budget that goes to RH or FP as reported by the multilateral agencies themselves is very useful for C2015E partners and part of its methodology.
  - Euromapping reports: Many national advocates found that the presentation of these reports is excellent to depict cross-country comparisons in donor trends. But the data was again based on OECD/DAC categories and NIDI data, and was out of date by the time of presentation for the purposes of national advocacy and timely monitoring of European donor funding.
- There was no systemised forum for presenting policy trends in RH/FP across European donors, for example legislature, common development strategy approaches, or election effects. C2015E partners had this first-hand knowledge of their local scenes, and wanted to place financial trends within this wider context, but they lacked a forum to articulate the

context; this made it difficult for them to ‘match’ policy commitments from their governments with funding allocations, a key component of advocacy and accountability.

### How does the Countdown 2015 Europe methodology tracking work?

- C2015E represent financial and policy data on a dedicated web-based platform: ([www.countdown2015europe.org](http://www.countdown2015europe.org)). All data can be changed ‘real-time’ – i.e. as it happens. So when elections happen in country X that affect RH/FP, or when financial commitments are made in country Y, the C2015E partner can alter their national profile. C2015E tracks the past year’s financial expenditure, and also provides reflections on future budgets based on commitments in the policy section.
- Policy data is public; financial data is password-protected, accessible to C2015E partners. This is because some government counterparts do not always feel comfortable with sharing financial data that is not always an official record.
- C2015E partners collect data on their country’s financial data to:
  - Core support to multi-lateral organisations (UNFPA, UNICEF, UNIFEM/UN Women, WHO, World Bank, UNAIDs, UNDP). This is automatically categorised as being spent on the ICPD categories of: Population Assistance, RH, FP, HIV/AIDS/STDs using the proportions updated annually from the NIDI questionnaire to multi-lateral organisations.
  - Project support to the same multi-lateral organisations that are relevant to Population Assistance, RH, FP, and HIV/AIDS/STDs.
  - Core funding to international organisations/campaigns/specific initiatives on RH/FP with proportions and amount for population assistance, RH, FP, and HIV/AIDS/STDs.
  - Funding to research organisations with relevance to population assistance, RH, FP and HIV/AIDS/STDs
  - Bilateral funding to countries with relevance to population assistance, RH, FP and HIV/AIDS/STDs.
  - Sources of data: C2015E partners obtain their data from national annual reports and from online national databases, followed by personal follow up with RH/FP government counterparts and/or parliamentary questions. A handful of countries use the official statistics of OECD/DAC as the starting source of data.
  - The most challenging financial data to collect is bilateral funding. This is because many countries themselves do not categorise how much of their bilateral funding (especially through general budget support) goes to RH/FP. In several countries this has led to increased demands from civil society for accountability on how general budget support or support through sector-wide approaches (SwAPs) is going to RH/FP.

### What added value does the Countdown 2015 Europe tracking offer now?

- Obtaining data primarily from national annual reports allows for **reporting to be aligned to national reporting and coding systems**, rather than often less-detailed coding into OECD/DAC categories. This is nationally-owned and up-to-date data.



- The **process** of collecting data helps **build the relationship of trust and communication** between advocacy partner and government RH/FP point person and broadens networks for advocacy with government departments beyond the traditional RH/FP ones.
- Gathering the same data, in the same formats, within a network allows advocacy partners to compare their data availability and trends over time; this gives them the information to approach their national counterparts with requests for **more transparency**.
- Tracking both policy and financial data together allows for **analysis of trends within wider realistic contexts** (i.e. numbers, and increases/decreases in values over time, are not presented in isolation but instead understood within a wider context of what is going on in the country). This has led to significant advocacy gains in a few countries (case-studies available upon request), when budget allocations in recent years may not have matched with political commitment to RH/FP but was caught out by advocacy partners including C2015E partners.
- Data collected by C2015E partners is the **most recent financial data available** in the country and **policy data is real-time**. For example, as elections happen, national advocacy partners are able to update the tracking with results and analysis about how results affect the RH/FP scenario.
- Financial data is mostly obtained in direct communication with the RH/FP-relevant point person in the relevant Ministries. This is possible because the **C2015E partners are local advocates** who have pre-existing relationships with the RH/FP focal points in government, and **who know their national context intimately**. This allows for interpretation and discussion around how data is categorised, unlike OECD/DAC data reported on the CRS system which is normally completed by Statistics department who are not involved in the context of RH/FP support.
- C2015E is unique in actively and routinely using the data it collects for increasing donors' accountability and transparency. C2015E thus **bridges research and advocacy**. Several case studies have highlighted how this has **improved donor accountability and data transparency** over time.