

A Trends Analysis of European Donor Support to Sexual & Reproductive Health and Rights & Family Planning

2022/2023



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to Comprehensive Sexuality Education

Going hand in hand with Universal Health Coverage and Health Systems Strengthening

SRHR acute needs in humanitarian settings

Setting the scene

ountdown 2030 Europe is the 'go-to' cross-country sexual and reproductive health and rights (SRHR) expert Consortium in Europe seeking to increase European SRHR funding in international cooperation and strengthen political support for sexual and reproductive freedom worldwide. The Consortium is made up of 15 leading European non-governmental organisations and is coordinated by IPPF European Network. To support these advocacy and accountability efforts, partners track since 2009 yearly policy and financial trends specifically for sexual and reproductive health and family planning (SRH/FP) in their respective countries*. In 2021, the Consortium started assessing European donors' support to the broader SRHR agenda, allowing to further align this exercise with donors' vision. Please see Annex 1 for information on the methodology. This report presents the outcomes of the policy and financial tracking of both SRH/FP and SRHR for the year 2022-20231.

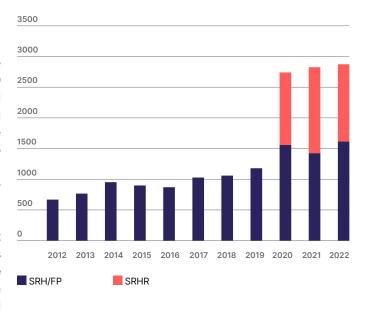
Highlights on European donors' most recent SRHR/FP funding and policy trends

2022-2023 showcased the human capacity to overcome one of the fiercest pandemics the world has faced. COVID-19 placed a significant strain over health services in a world that reached an unprecedented 8 billion people. This and other global crises have proven that more than ever we need to focus on redesigning social and health systems to withstand shockwaves and leave no one behind. Everyone in society has the right to live with dignity and it is our collective responsibility to ensure that this is a universal standard.

This is why Europe's commitments and resolve shouldn't waver in the face of crises and more importantly people's dignity and bodily autonomy should remain a priority. At the beginning of 2022 the war that broke out in Ukraine led to a massive threat to human security, both at regional and global levels, given its impact on global food and energy poverty. That same year showed European governments that progress on rights, freedom and sexual and reproductive autonomy should not be taken for granted, with the US reversing 50 years of constitutional abortion rights and several other rightwing movements gaining momentum, including in Europe. Adding to all this, the rapidly escalating violence between Israel and Hamas observed since late 2023 brought in the loss of tens of thousands of civilian lives and the targeting of health facilities in Gaza, adding further human suffering to an area of protracted humanitarian crisis ongoing for decades.

If the last years already felt agitated, 2022-2023 indicates that trying to build equitable systems able to mitigate the impact of multiple crises, particularly over the ones who are most excluded, can become a running battle. This is all the more relevant now that we are halfway on the road of the Agenda 2030 towards achieving the Sustainable Development Goals (SDGs). Today, about 257 million women and girls in low-and-middle-income countries (LMICs) are still grappling with an unmet need for contraception, against the 218 million in 2019². To secure universal access to safe and modern methods of contraception in a way that safeguards women's autonomy, UNFPA estimated that 65.1 billion Euros would be needed between 2020-2030; instead, donors across the globe have provided only 8 billion Euros up until 2023³.

Figure 1 Variance over time of overall European governments' support to SRH/FP and SRHR between 2012-2022 (million Eur)



^{*} Belgium, Denmark, Finland, France, Germany, Ireland, Italy, the Netherlands, Norway, Spain, Sweden, Switzerland, and the United Kingdom, in addition to the European Union institutions.

- Financial data presented in this report corresponds to 2022, while policy updates already reflect changes from 2023. The exceptions are the UK, whose reporting period refers to the country's financial year 2022-2023 (12 months). For more information, please see Annex 1.
- According to the State of World Population 2023: 8 Billion Lives, Infinite Possibilities: the case for rights and choices Author: UNFPA. Available <u>here</u>.
- 3. Figures converted with exchange rate 1 EUR = 1,1827 USD.

This report shows that, faced with this complex reality, European governments have the resources to step up international solidarity and place SRHR at its centre. Compared to the previous year, European donors increased overall investments in SRH/FP by 14%, amounting to 1.622 billion Euros through all funding streams (core funding to multilaterals + project funding to multilaterals + funding to international organisations/initiatives/research + government-to-government cooperation).

The report also shows that European donors prioritised SRH/FP as part of overall SRHR and against other key components: while the level of funding for SRH/FP has significantly increased, the level of funding to overall SRHR in 2022 was kept at the same level as the previous year, amounting to 2.889 billion Euros. Despite this positive news, the most recent 2023 report from the High-Level Commission on the Nairobi Summit on ICPD+25 Follow-up reinstates that the international community is once again far from meeting its ICPD+25 commitments.

This report analyses 2022 funding data and 2023 political stances adopted by thirteen European governments and the EU institutions. As such, it assesses changes in SRH/FP and SRHR funding for those specific donors and for the period at stake only – with other possible trends being observable only in the longer run.

Section 1 of this report introduces a qualitative perspective on the policy trends, drawing out key events and important dynamics influencing SRH/FP resource flows from European donors.

Section 2 looks at where European funding is going, in support to both SRH/FP and SRHR.

Section 3 links European donors' support to SRHR in relation to other political priorities.

Section 4 concludes by highlighting key issues to consider in the year ahead based on this trend analysis and the available forecasts.



Policy trends & highlights

2022-23 snapshot

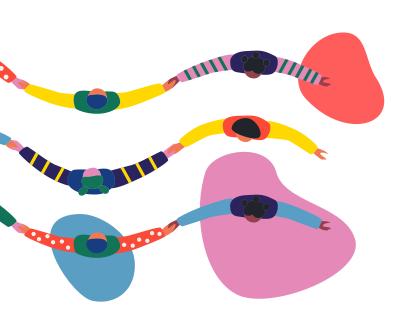




uropean donors continue to be vocal about the importance of SRHR for sustainable development. This is reflected, not only in the wide array of political and financial pledges made in the context of SheDecides⁴, ICPD+25, the Generation Equality Forum and possibly FP2030⁵, but also in the different policy documents that help to advance these commitments.

This was once again possible even in a year of some political change:

Where we have seen a prevailing right-wing shift across Europe with elections in many countries resulting in conservative parties gaining power, a trend already observed in 2022:



In 2023, Finland, the Netherlands, Spain and Switzerland held general elections.

→ Following the **Finnish** parliamentary elections held in April 2023, a new government came into office after what was a neck-to-neck race. Considered to be the most rightwing government in recent history, led by the National Coalition Party, the new program establishes that there will be reductions in ODA over the course of this four-year parliamentary period. The priority of the new conservative governmental program's Development Policy is improving the position of women and girls, right to self-determination and SRH/FP.

→ After Spanish municipal and regional elections held in May 2023 brought in poor results to the progressive coalition government, the President of the Government, Pedro Sánchez, decided to anticipate the general elections to July. In November 2023, Spain's parliament empowered, with absolute majority, acting Prime Minister Pedro Sanchez to assemble a new government, following two failed investiture attempts from right-wing opposition leader Alberto Núñez Feijóo. Sánchez outlined gender equality and climate change as two of eight governing priorities for his next term.

→ In July 2023, the **Dutch** government coalition fell due to lack of agreement over the asylum policy. Consequently, elections were announced for November 2023. The Minister of Foreign Affairs, Wopke Hoekstra of the Christian Democrats (CDA), resigned soon after. He was replaced by former Minister of Domestic Affairs Hanke Bruins Slot, also from the CDA. The November elections brought in a victory from the right-wing Party for Freedom, followed by Frans Timmermans' Labour-Green alliance. There is no agreement in sight for a new Dutch coalition at the time of writing. At the time of writing, the Party for Freedom (PVV) is leading coalition negotiations with the Liberal party, the Farmer's party and the new party New Social Contract. It is still uncertain if these will succeed and how long they will take.

→ Federal elections were held in **Switzerland** in October 2023, with the populist national-conservative Swiss People's Party winning nine seats resulting in a majority of the middle-right parties. SVP's campaigned on a platform based on concerns about immigration, which ended up eclipsing other priorities.

^{4.} SheDecides is a global movement that aims at supporting the right of every girl and woman to decide what to do with her body, life and future. It was created in 2017 as a response to the reinstatement of the 'Mexico City Policy' by the U.S. government.

^{5.} FP2030 is the successor to FP2020, a global initiative created at the 2012 London Summit on Family Planning and under which more than 60 governments made commitments to address the barriers to women accessing contraceptive information, services and supplies. Since its creation in 2021, FP2030 received more than 100 new commitments, reinstating the importance of FP around the globe.

European voices for SRHR within the broader international cooperation arena

uropean countries and institutions remain vocal about prioritising SRHR within the SDGs⁶. In 2023, Belgium, France, Ireland and the EU institutions carried out their Voluntary National Reviews (VNRs), a regular follow-up of progress. All these donors particularly addressed progress in advancing SRHR as part of their efforts towards achieving Agenda 2030's goals, be it in the context of health system strengthening (SDG 3) or the promotion of rights of women and girls (SDG 5).

European donors also continue to prioritise SRHR in the UN Commission on Population and Development (CPD) and the UN Commission on the Status of Women (CSW). During the fifty-sixth session of CPD, Sweden delivered a <u>statement on behalf of the Nordic countries</u> that confirmed that "it is a fact that SRHR saves and improves millions of lives". At the 67th session of the CSW, the first <u>Agreed Conclusions</u> on the topic of 'Innovation and technological change, and education in the digital age for achieving gender equality and the empowerment of all women and girls' included strong references to SRH, health care-services, and SRHR in addition to the recognition of the important role of digital health.

In the <u>Hiroshima Leaders' Statement of 2023</u>, the G7, which includes France, Germany, Italy and the UK, reaffirmed their commitment to promoting SRHR and specifically mentioned Comprehensive Sexuality Education (CSE) in its Statement.

In the framework of the General Debate of the 78th session of the United Nations General Assembly (UNGA), a High-Level Meeting on Feminist Foreign Policy was held with the aim of discussing how to implement this approach to foreign policy and sharing commitments among governments. Spain promoted a Political Declaration which was signed by representatives of governments of countries of the Feminist Foreign Policy Plus (FFP+) group, including Belgium, France, Germany, Sweden and the Netherlands, among others.

During the High-level Meeting on Universal Health Coverage that same month, the acting Minister of Foreign Affairs, European Union and Cooperation of the Government of Spain, José Manuel Albares, delivered an inter-regional joint statement on Sexual and Reproductive Health and Rights on behalf of 60 governments from 5 continents. These governments expressed their readiness "to work with UN agencies and civil society partners to achieve universal health coverage that fully integrates and promotes SRHR" for all.

During the Global Forum for Adolescents led by the Partnership for Maternal, Newborn and Child Health (PMNCH) in October 2023, the British Minister of State for Development and Africa publicly acknowledged the need to address sexual and gender-based violence (SGBV) during humanitarian settings, as well as the importance of bodily autonomy and the right to choose if and when to have children. In that context, the EU institutions also committed to allocate an additional 16 million Euros to the Spotlight Initiative, which contributes to eliminate SGBV in Africa, Latin America and the Caribbean, Asia and the Pacific. Furthermore, the EU launched its EU Youth Action Plan in External Action. This policy framework for a strategic partnership with young people around the world includes references to youth-friendly SRHR and eliminating SGBV and was reinstated as a key tool during the Global Forum.

Finally, in November 2023, Ireland delivered a joint statement at the UN General Assembly Third Committee for the adoption of a resolution on youth. The statement highlighted the importance of ensuring the SRHR of young people. Subsequently, the representative for Ireland expressed regret that the full realisation of SRHR was not fully reflected in the final text and called for a stronger text in next year's session.

^{6.} Within the SDGs, SRH/FP is explicitly mentioned in Target 3.7 within the Health Goal, and Target 5.6 within the Gender Equality Goal. In addition, progress in SRH/FP indirectly contributes to the achievement of many other goals. Further correlations between these can be found <u>here</u> and <u>here</u>.

European policies on SRHR

17 new European policy documents that include commitments to SRHR were endorsed in 2023:

Finland

• **Development Policy:** The priority of the new conservative governmental program's Development Policy is improving the position of women and girls, right to self-determination and SRHR.

France

SRHR international strategy 2023-2027

Embraces SRHR as a cornerstone of French feminist diplomacy, anchors the strategy in a rights-based framework and reflects a comprehensive commitment to promoting equality and bodily autonomy.

• Global Health strategy
Commits to addressing gender equality and SRHR.

Germany

- Feminist Development Policy: Features SRHR prominently, including as a central piece for feminism.
- Strategy for BMZ's core theme "Health, social security and population policy": Features SRHR prominently.
- **Gender Action Plan:** Commits to protecting and realising SRHR for women, girls and marginalised groups.
- Africa Strategy: Features SRHR prominently within Gender Equality.

Ireland

• SRHR Initiative: Commits to scaling up and expanding Ireland's work on SRHR, with a focus on SRHR in emergencies, young people's access to SRHR and the unmet need for contraception.

The Netherlands

- Africa Strategy: Maintains SRHR as a policy priority.
- Feminist foreign policy: The Netherlands announced its feminist foreign policy in 2022, which was further advanced in 2023, with the Ministry of Foreign Affairs developing an internal tool for that purpose. In the parliamentary letter about the policy, SRHR is maintained as a priority.

Norway

- SRHR guidelines for all the Embassies: The Ministry of Foreign Affairs adopted revised SRHR guidelines for all the Norwegian embassies which now have updated guidelines and recommendations on how to fulfil Norway's SRHR agenda.
- Action plan on gender equality in foreign affairs and development cooperation: Includes SRHR as the first of five main thematic goals, and harmful practices as the second.

Spain

• Law on Cooperation and Sustainable Development: Includes SRHR as one of the basic principles and objectives of Spanish international cooperation.

Sweden

• Reform Agenda for the country's development cooperation: The new Swedish Government kept gender equality and SRHR as prioritized areas of work in its new framework for international development cooperation.

The UK

- International Women and Girls Strategy: Includes an expanded 'empowering women and girls' pillar including 'championing their health and rights' within the overall framing, and in the detail of the strategy, there is significant strengthening on the FCDO's policy ambition on SRHR.
- FCDO's International Development White Paper: Commits the UK to investment in comprehensive SRHR.

EU institutions

• EU Global Health Strategy: Includes for the first time SRHR/FP as a priority.



Sweden: the Governmental Letter of appropriation to Sida 2023 gave the latter the mandate to develop a report that should form the basis for a new global SRHR strategy.

The overview of these new policies reflects European donors' continuous focus on the inclusion of SRHR in their international cooperation plans.



Where is the money going?

he C2030E methodology used in the last years to track European donor funding for SRH/FP is centred on the use of a core set of indicators⁷. To track trends in financing over time, the Consortium analyses

throughout the years variations on these indicators, and all of which measure investments in both SRH/FP and SRHR⁸. The section below details findings for the different indicators, which are at the basis of the following snapshot.

	EUROPEAN GOVERNMENTS' SUPPORT IN 2022		
1) Funding through all streems: This includes	OVERALL FUNDING TO SRH/FP	1.622.234.187 Euros	10 countries reporting an increase
1 Funding through all streams: This includes core funding to multilaterals + project funding to multilaterals + funding to international organisations/initiatives/research + government-to-government cooperation.			3 countries with funding sustained
			1 country reporting a decrease
2 Donors' spending as a percentage of ODA: This allows for an enriched depiction of cross-country	OVERALL FUNDING TO SRHR	2.888.761.666 Euros	10 countries reporting an increase
and cross-years comparison of the political weight attributed to the SRH/FP and SRHR agenda.			2 countries with funding sustained
			2 countries reporting a decrease
	MULTILATERAL FUNDING TO SRH/FP	938.049.928 Euros	9 countries reporting an increase
			2 countries with funding sustained
3 Multilateral funding: This indicator presents core funding (based on own coefficients and			3 countries reporting a decrease
reporting systems, depending on each case), plus all earmarked multilateral funding.	MULTILATERAL FUNDING TO SRHR	2.100.493.494 Euros	6 countries reporting an increase
			6 countries with funding sustained
			2 countries reporting a decrease
	FUNDING TO UNFPA SUPPORTING SRH/FP	750.325.431 Euros	9 countries reporting an increase
4 Contributions to UNFPA: Analysis of this indicator includes core funding to UNFPA, funding to earmarked UNFPA projects and funding going towards the UNFPA Supplies Partnership. This measure of funding to UNFPA is seen as a robust proxy measure for tracking funding to SRH/FP and SRHR.			4 countries with funding sustained
			1 country reporting a decrease
	FUNDING TO UNFPA SUPPORTING SRHR	790.091.462 Euros	8 countries reporting an increase
			5 countries with funding sustained
			1 country reporting a decrease

^{7.} Please see Annex 1 for an overview of the C2030E financial tracking methodology.

^{8.} In line with the revised C2030E methodology, the report considers SRH/FP in line with the same categories at the ICPD Programme of Action and assesses the following essential interventions as part of SRHR, in addition to SRH/FP: HIV/AIDS and other STIs, in line with ICPD costed package; prevention and integrated responses to SGBV; CSE; initiatives specifically targeting LGBTIQ+ people; safe abortion; other initiatives to foster human rights-based, gender-responsiveness, intersectionality and change of social norms in relation to SRH/FP. To be noted however that the methodology does not necessarily match donors' internal reporting. More information can be found in the methodology annex.

Total European donors' funding in absolute numbers

European donors' funding for SRH/FP through all streams





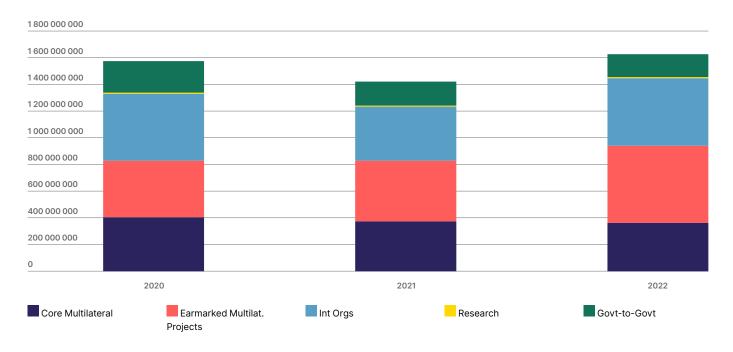


n 2022, European donors increased their contribution to SRH/FP by 14% compared to 2021, providing a total of 1.622 billion Euros (205 million Euros more than in 2021). This increase offsets curtailed support observed last year and brings back European support to SRH/FP slightly higher than in 2020.

European donors' contributions to SRH/FP in 2022 supported reproductive freedom by helping avoid at least 7 million unintended pregnancies and ensured access to modern contraceptive care for 20 million women and couples, at a minimum⁹.

As shown in Figure 2, the multilateral system remains the most used stream for European donors' support to SRH/FP, followed by international organisations and initiatives and government-to-government cooperation. Research remains the least common channel of investment, representing only 1% of total European funding of SRH/FP.

Figure 2 European donors' support to SRH/FP



^{9.} Based on the Guttmacher's Family Planning Investment Impact Calculator. This includes only some projects support by European donors and reported as FP, so the numbers would significantly increase if the broader SRHR agenda is also included.

Further disaggregating SRH/FP data provides additional context to some of the notable variances:

INCREASED LEVELS: Belgium, France, Germany, Ireland, Italy, the Netherlands, Norway, Spain, the UK and the EU institutions increased their funding. In absolute terms, the largest surge in funding came from the UK (additional 65 million Euros), while both Italy and Spain brought in the highest increase in relative terms, almost doubling investments compared to the previous year (93% and 89%, respectively). In both cases, the large increase included humanitarian support channelled mainly through UNFPA.



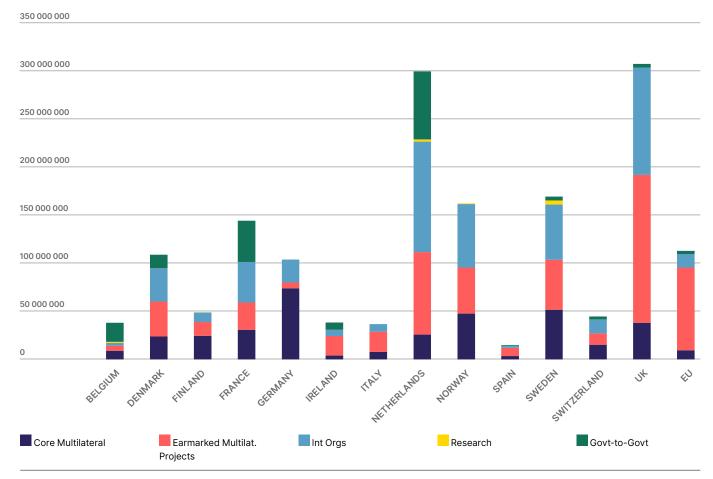
MAINTAINED LEVELS¹⁰: Denmark, Finland and Switzerland sustained the 2021 level of funding.

DECREASED LEVELS: Sweden was the only country that decreased funding compared to 2021. This follows an announcement made by the Government, to reallocate funding to Ukraine and to costs related to refugees coming to Sweden from Ukraine. Despite this curtailment, the country was still the donor that provided the third largest investment in SRH/FP in 2022 from this analysis.

Figure 3 illustrates how European donors supported SRH/FP in 2022, considering all funding streams (core funding + earmarked multilateral programmes + international organisations and initiatives and research + government-to-government support). The top three overall contributors to SRH/FP funding in absolute terms were the UK, which recovered this place after falling behind in 2021, followed very closely by the Netherlands and then Sweden.

Further details regarding countries' individual trends over time can be found in the respective country pages <u>here</u>.

Figure 3 Individual European donor support to SRH/FP in 2022



^{10.} For the purposes of this analysis, sustained funding is considered to cover the range -5% to +5% variance from the previous year.

European donors' funding for SRHR through all streams





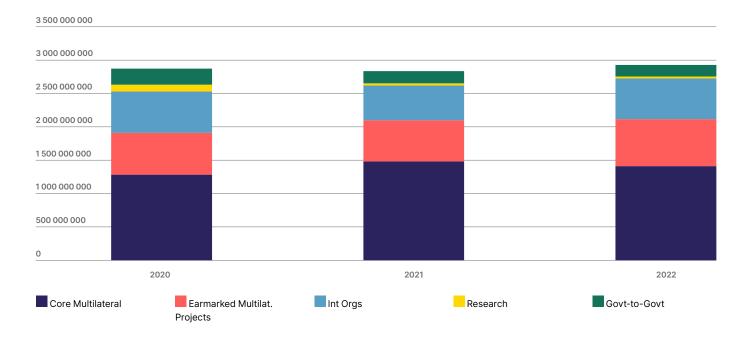


n 2022, European donors sustained their overall support to SRHR (+4%), while, as already mentioned, increasing the portion of it going to SRH/FP compared to the previous year. Data collected by the C2030E Consortium indicates that European donors contributed a total of 2.889 billion Euros to SRHR¹¹ in 2022. This includes the 1.622 billion Euros allocated to SRH/FP. This reveals that in 2022 donors opted to strengthen support to SRH/FP over other core elements within the broader SRHR agenda.

Once more, multilateral funding is the biggest channel for this type of investments. Core contributions to the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) and its focus on HIV play a big role in this overall disbursement. Conversely, research is the least used stream by European governments, amounting to only 1% of total SRHR funding.

Analysis of individual contributions confirms that European donors tend to invest on integrated approaches to SRHR, as per the <u>Guttmacher-Lancet definition</u> and as advocated by the Consortium. Much of European supported interventions aim to safeguard and advance access to SRH/FP, and at the same time promote a positive environment to sexuality and reproduction that is conducive to overall well-being. Moreover, the inclusion of HIV programmes and broader SGBV responses as part of SRHR efforts provides a diversified and comprehensive picture of investments.

Figure 4 European donors' support to SRHR



^{11.} In line with the new C2030E methodology, the report considers the following essential interventions as part of SRHR, in addition to SRH/FP: HIV/AIDS and other STIs, in line with ICPD costed package; prevention and integrated responses to SGBV; CSE; initiatives specifically targeting LGBTIQ+ people; safe abortion; other initiatives to foster human rights-based, gender-responsiveness, intersectionality and change of social norms in relation to SRH/FP. To be noted however that the methodology does not necessarily match donors' internal reporting. More information can be found in the methodology annex.

Further disaggregating SRHR data provides additional context to some of the notable variances:

INCREASED LEVELS: Belgium, Finland, France, Ireland, Italy, the Netherlands, Norway, Spain, Switzerland and the UK increased their funding. In absolute terms, the largest surge in funding came from France (additional 90 million Euros), which was mainly due to increased core funding to the GFATM.

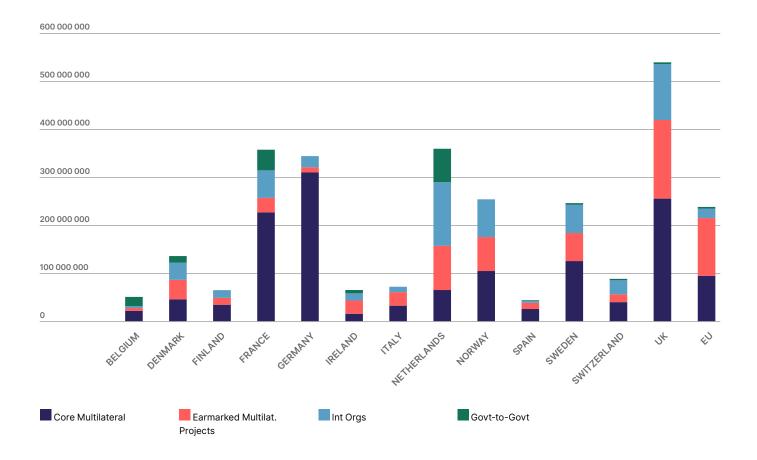


MAINTAINED LEVELS¹²: Denmark and Germany sustained the 2021 level of funding.

DECREASED LEVELS: Sweden and the EU institutions plunged levels of funding compared to 2021. This was a collective drop of about 7%, or 200 million Euros. This decrease follows Sweden's announcement to reallocate funding to initiatives in Ukraine following the Russian aggression war, and to in-country refugee costs, and it reflects the EU's reduced disbursements to the GFATM.

As Figure 5 shows, in 2022, the UK remained the largest contributor in absolute terms to SRHR, followed by the Netherlands and France, the last of which is also a key contributor to the GFATM.

Figure 5 Individual European donor support to SRHR in 2022



 $^{12. \ \} For the purposes of this analysis, sustained funding is considered to cover the range -5\% to +5\% variance from the previous year.$

Total European donors' funding as a percentage of ODA

here continues to be significant room to scale up the weight of both SRH/FP and SRHR as a share of ODA. In 2022, individual European donors allocated between 0.3 – 4.8% of their ODA to SRH/FP (against 0.3 - 5.7% in 2021) and between 1.0 – 5.9% to SRHR (against 0.8 – 7.5% in the previous year).

This trend across years is relevant when considering that the crises observed in 2022 led to an overall increase of ODA; however, a significant part of this assistance stayed within donors' borders, targeting in-donor refugee costs, rather than fully channelling investments directly into partner countries. This overall ODA increase explains why investments in SRH/FP and SRHR were lower than in the previous year, and despite respective enhancement.

But much more can be done. In a year where the war in Ukraine dominated both life and politics in Europe, severely destabilising the geopolitical landscape of the region, European donors have made an effort to increase humanitarian funding and in-donor refugee costs, which have consequently brought ODA to higher levels than the previous year. This shows that when priorities are clear, the resources can be found, and overall ODA can be increased. It is telling where priorities lay: as a matter of comparison, in 2022 European donors allocated between 7 - 51% of their ODA to in-donor refugee costs¹³, a massive gap when looking at the share of support to SRHR worldwide of those same donor governments. With such in-donor expenses as part of their ODA, in 2022 some European donor countries continue to be - or even became - the primary beneficiaries of their own Official Development Assistance. So, while the absolute increase of expenditure on SRH/FP and SRHR in 2022, as well as the overall ODA rise, are all very welcome, it is also clear that support for SRHR has not been prioritised enough, compared to other issues. As the anti-rights movements continue to attack and chip away at hard-won gains, European donors can not waver in their commitments to sexual and reproductive care for all.

Scaling up support to both SRH/FP and the broader SRHR agenda becomes even more relevant when considering donors' increased efforts to promote integrated approaches in their international cooperation, and thus being able to increase support to this agenda through different ODA sectors and pooled resources.

COUNTRY	SRH/FP AS % ODA	SRHR AS % ODA	LEVEL OF TRANSPARENCY
NETHERLANDS	4,8%	5,9%	Good
DENMARK	4,1%	5,2%	Fair
NORWAY	3,3%	5,3%	Good
SWEDEN	3,2%	4,9%	Very good
FINLAND	3,1%	4,2%	Fair
UK	2,8%	5,0%	Good
IRELAND	2,7%	4,7%	Fair
BELGIUM	1,8%	2,4%	Good
FRANCE	1,0%	2,4%	Good
SWITZERLAND	1,0%	2,1%	Fair
ITALY	0,6%	1,1%	Fair
EU	0,4%	0,9%	Good
SPAIN	0,4%	1,3%	Good
GERMANY	0,3%	1,0%	Good

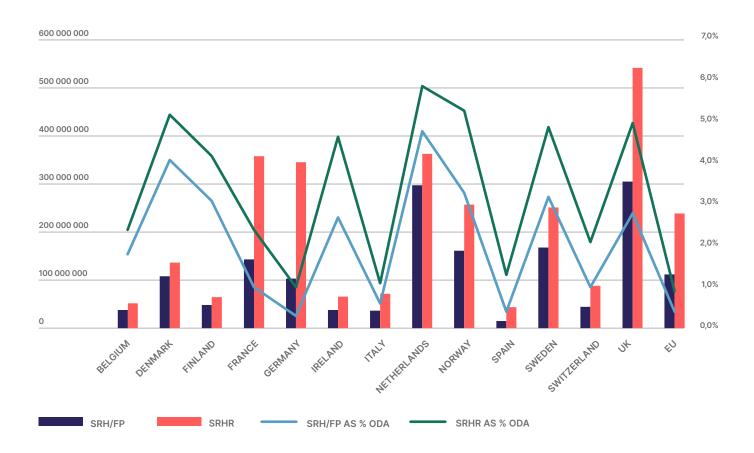
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^{13.} According to <u>OECD's preliminary data</u> published in April 2023, the European donors considered in this analysis allocated the following shares of their ODA to in-donor refugee countries: Belgium 9.4%; Denmark 15.9%; Finland 25.4%; France 9.4%; Germany 12.8%; Ireland 51%; Italy 22.9%; the Netherlands 14.6%; Norway 9.4%; Spain 20.2%; Sweden 7%; Switzerland 28.2%; and the UK 28.9%.

As in previous years, the Netherlands emerges as the donor that allocates the biggest share of its ODA to both areas. The table also provides an overview of transparency of overall ODA per country, as this indicates how easy it can be to access financial information in the different contexts. While only one European government is considered to have very good levels of transparency, there are still five considered to have a 'fair' standard. Germany is the only country considered to have upgraded since 2021, due to a new transparency portal for ODA; however, the portal also lacks granularity that allows complementing the analysis of this report.

It is paramount that European governments improve respective level of transparency as an important principle of the international cooperation effectiveness agenda. In line with the pledge made at the ICPD+25 Nairobi Summit, the C2030E Consortium will continue to demand transparency from European governments and hold them accountable for the promises made at national, regional and global levels.

Figure 6 European donors' funding to SRH/FP and SRHR - Absolute figures and % of ODA



Zoom in: European donors' multilateral funding

European donors' multilateral funding for SRH/FP

As above-mentioned, European donors continue to privilege the multilateral system to support SRH/FP, consisting both of core funding and earmarked programmes. This was further emphasised in 2022, as European donors increased the use of the multilateral system to advance access to SRH/FP by 12%, having disbursed a total of 938 million Euros. Most of this boost was observed in support to multilateral earmarked programmes (22.7% or additional 123 million Euros), including, but not only, dedicated to the UNFPA Supplies Partnership and humanitarian efforts.

European countries' use of the multilateral system varies significantly among countries. As in 2021, the UK is the country that mostly contributed to SRH/FP through the multilateral system (190 million Euros), but the EU institutions were the European donor that mostly relied on it, with 85% of their total contribution to SRH/FP being channelled through this system, namely for the GFATM and UNFPA.

Figure 7 European donors' funding of SRH/FP through the multilateral system

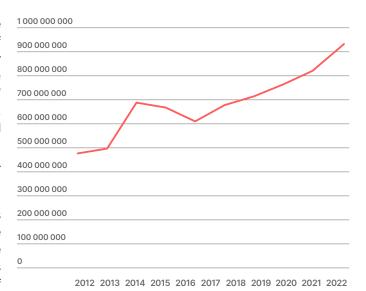
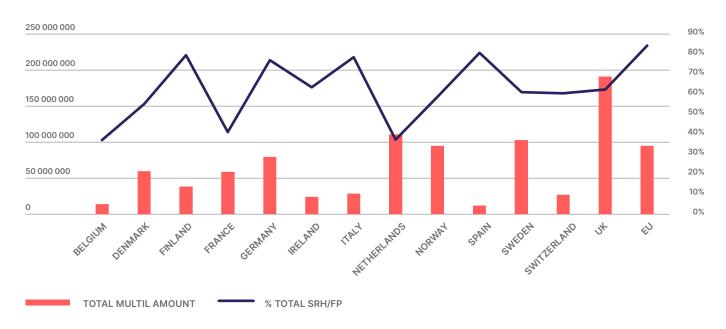


Figure 8 European individual donor spending on SRH/FP through the multilateral system in 2022



The European donor that mostly increased support in relative terms through the multilateral system was Spain (144%), due to new attention to humanitarian efforts channelled through UNFPA, among others. The Netherlands and Belgium were the countries that resorted the least to this stream to support SRH/FP in relative terms (37%), given the latter country's decision to disburse SRH/FP funding mainly through government-to-government cooperation.

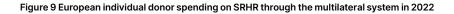
The only countries that curtailed support to SRH/FP through the multilateral system were Denmark, Finland and Sweden. To be noted however that for Denmark and Finland this is mostly due to updated percentages of multilateral core funding, which indicate that agencies allocated slightly less to SRH/FP in 2022 compared to the previous year, and not necessarily donors' decreased investments. Sweden, on the other hand, decreased overall support to this agenda in 2022, compared with the previous year.

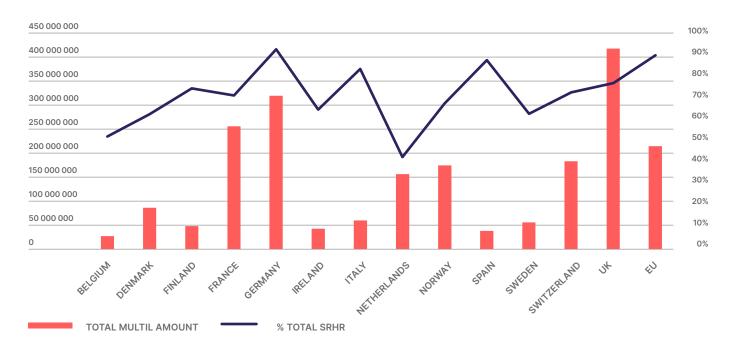
European donors' multilateral funding for SRHR

When considering European donors' contributions to the full SRHR agenda, a different picture is observed.

In total, European governments have sustained investments through this stream: disbursements amounted to 2.100 billion Euros in 2022 (+1%), equivalent of 72% of total spending on SRHR. In absolute terms, the UK remains the country with the largest contributions. Other donors also rank relatively high in their expenditure towards SRHR within the multilateral system, compared to their level of contributions to SRH/FP.

This difference is due to multilateral initiatives that promote, protect and invest in key comprehensive SRHR interventions that go beyond SRH/FP¹⁴. This is the specific case of the GFATM, given the Fund's focus on the HIV component - a key category of the ICPD costed population package. Examples of key contributors to the GFATM include the EU, France and Germany, with the first having almost halved payments to the Fund in 2022. The same can be said about the EU-UN Spotlight initiative, funded also by the EU institutions, which aims to eliminate all forms of violence against women and girls. As in 2021, Germany was the donor that mostly relied on the multilateral system to advance SRHR (93%), followed by the EU institutions (90%), while the Netherlands was the country that least used it (43%).





^{14.} As already mentioned, in line with the new C2030E methodology to assess SRHR funding, the report considers also funding beyond SRH/FP towards other essential interventions around HIV/AIDS and other STIs or prevention and integrated responses to SGBV, among others, as part of the broader SRHR package. To be noted however that the methodology does not necessarily match donors' internal reporting on SRHR expenditure.

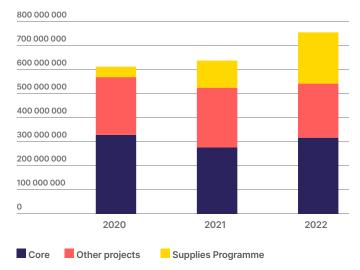
Zoom in: European donors' funding to UNFPA

European donors' funding to UNFPA supporting SRH/FP

This indicator combines European donors' contributions as core funding to UNFPA, UNFPA project funding and contributions to the Supplies Partnership.

European donors have once again increased funding to this UN agency in 2022. Overall, European governments provided over **750 million Euros** to UNFPA in support of SRH/ FP in 2022, which is 18% more than in the previous year. As in 2021, core funding remained the largest type of contribution to the agency, representing almost half of total investments (over 315 million Euros).

Figure 10 European donors' support to UNFPA - SRH/FP



The enhanced support to the agency was mainly due to almost double contributions (89%) to UNFPA Supplies Partnerships, amounting to over 212 million Euros. The biggest surge came from the UK, who more than tripled the level of investment, totalling 78 million Euros, and the EU, who resumed support to the programme since 2019.

Thanks to European donors' support to UNFPA Supplies Partnerships in 2022, the programme was able to guarantee access to avert over 2 million unsafe abortions and save more than 6.000 women's and girl's lives¹⁵.

On the other hand, support to multilateral earmarked projects decreased by 10%, even though it was the second most supported stream. While some countries significantly increased investments through this stream, including for humanitarian assistance, such as Belgium, Italy and Spain, this was not enough to offset plunged investment from Norway, Sweden and the EU institutions.

When analysing individual contributions to all three UNFPA elements, a mix picture is in place:

INCREASED LEVELS: Belgium, Germany, Ireland, Italy, Norway, Spain, Switzerland, the UK and the EU institutions. The most notable increases in monetary terms came from the UK, amounting to over 45 million Euros, mainly disbursed to the Supplies Partnership. Italy more than tripled its support to UNFPA, mainly due to new investments in humanitarian settings, by an additional 16 million Euros.



MAINTAINED LEVELS¹⁶: Denmark, Finland, France and the Netherlands, maintained 2021 levels of



DECREASED LEVELS: Sweden was the only country that decreased overall funding to UNFPA. Cuts from this country represented 19 million Euros less than

what was funded in 2021 and were mostly observed in support to earmarked programmes.

^{15.} According to the Guttmacher's Family Planning Investment Impact

^{16.} For the purposes of this analysis, sustained funding is considered to cover the range -5% to +5% variance from the previous year.

European donors' funding to UNFPA supporting SRHR

In 2022, European governments also increased levels of funding to UNFPA to support the overall SRHR agenda. In total, European countries spent **790** million Euros on SRHR channelled through this agency, which is 19% more than in 2021. As with SRH/FP, most European funding to the agency benefitting SRHR was channelled as core funding, followed by earmarked programmes, and even if the largest increase was observed in the Supplies Partnership.

The trends of individual contributions to SRHR through all three UNFPA elements across European governments are the same as those observed for SRH/FP, with the exception that Switzerland also sustained its level of funding, in addition to Denmark, Finland, France and the Netherlands. UNFPA's SRHR programmes supported by European donors include preventing and responding to SGBV (beyond SRH/FP) or focus on changing harmful social norms and combating gender stereotypes.

Analysis of individual contributions confirms that the vast majority of European SRHR support to UNFPA is centered on SRH/FP, with nuances observed in only some countries, as shown in the graph below.

Figure 11 European donors' support to UNFPA - SRHR

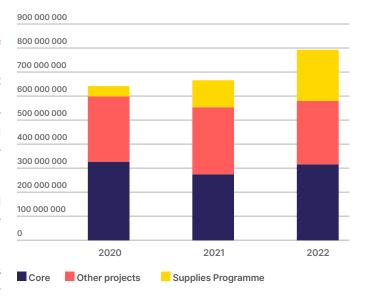
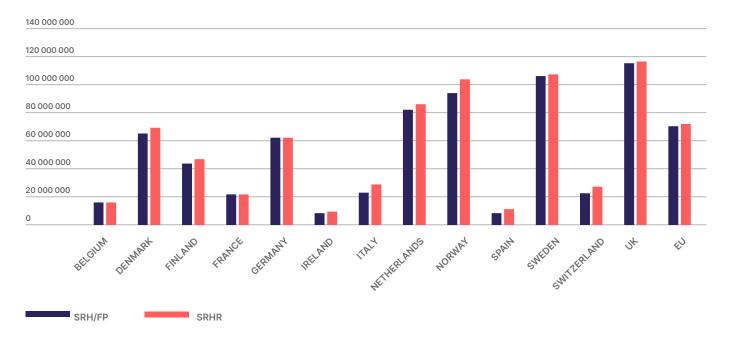


Figure 12 Individual European donors support to UNFPA in 2022





How SRHR is embedded in other European donors' priorities

FEATURED FOCUS: European donors' funding to Comprehensive Sexuality Education

omprehensive sexuality education (CSE) is critical to give children and young people the knowledge and skills they need to manage their health and form equal, fulfilling, and safe relationships, free from discrimination, coercion and violence. Rooted in both formal and informal education, CSE equips children and youth with the knowledge and skills to make healthy and informed choices about a wide array of topics including, but not limited to, relationships, respect of their rights, consent and bodily autonomy, sexual and reproductive health and well-being. CSE is also a vital prevention tool in the fight against gender-based violence (GBV).

However, huge barriers to political prioritisation and access to CSE remain across the globe, from inadequate training or skills for professionals to fierce opposition coming from anti-rights movements blocking progress on this issue. In multilateral fora the progressive SRHR voices, including those of European governments, have been met by escalated fierce and strategic opposition to CSE and SRHR more broadly, which led to mixed outcomes in recent years. Examples of this include the Transforming Education Summit (TES), held in September 2022, where governments embraced the importance of education for gender equality, including girls' education, as expressed in the UN Secretary General's vision statement, while the importance of CSE was clearly included in a Team Europe Statement on the TES.

The 56th session of CPD in April 2023 explored the interlinkages between population, education and sustainable development, but unfortunately did not end up having an outcome document. On the other hand, the Agreed Conclusions around innovation, technological change, and education in the digital age from the 67th session of CSW, held in March 2023, maintained previously agreed language around CSE, failing to advance it. Nonetheless, CSE was specifically mentioned as part of a commitment to promoting SRHR in the <u>Hiroshima Leaders' Statement of 2023</u>, at the G7, which includes France, Germany, Italy and the UK.

When looking at funding allocations in 2022, the present analysis shows that all European donors provide support to specific CSE programmes or, at a minimum, promote initiatives that include education targeting SRH or SGBV prevention.

European donor governments financially support access to CSE through three key approaches:

O1. Programmes that primarily target CSE: In 2022, these represented about 1% of overall European investment on SRHR. Examples: UNESCO's 'Our Rights, Our Lives, Our Future programme', but also several NGO or multilateral projects, such as, for example UNFPA's programmes in Niger or Sierra Leone, or 'CSE Out of school PHASE II', supported by Denmark, Ireland and Norway, respectively.

02. Broader SRHR initiatives that include key health education components¹⁷. Examples: both the UNFPA-UNICEF Global Programmes to Accelerate Action to End Child Marriage and on the Elimination of Female Genital Mutilation/Cutting include relevant education elements; several NGO projects also include relevant CSE elements as part of a wider portfolio.

03. Formal education programmes that go beyond the focus on SRHR, but which have CSE components¹⁸. **Examples:** the 'Strengthening Education Systems for Improved Learning' programme, which includes SRH education and is supported in Africa by the UK, or the 'UN Joint Programme for Girls Education phase III, Learning for all', supported by Norway in Malawi and that includes SRHR education among many other topics.

In conclusion, CSE is a crucial enabler for the full realisation of SRHR for all, and the present analysis shows that European donor governments are aware of that, and are providing funding to enable access to it. On the other hand, they can and must increase funding for this crucial component, as well as do more to counter opposition on this topic, which is one of the most fiercely attacked by the anti-rights movement within the broader SRHR agenda. To this aim, European donor government must put in place more proactive political and financial responses against the backsliding against SRHR, including increased support for CSE, if they wish to help create more gender-equal societies in which everyone is safe from harm and treated with dignity.

^{17.} This second category refers to projects included in the tracking, but without a traceable percentage of how much the health education components represent in the overall programme.

^{18.} This third category includes projects that go beyond this research piece, as they are broader than or unrelated to SRHR, and are therefore not accounted for when it comes to this report. But given their relevance in advancing access to CSE, they are mentioned here.

Going hand in hand with Universal Health Coverage and Health Systems Strengthening

nvesting in robust health systems, which are a prerequisite to progress towards universal health coverage
(UHC), is key for SRHR as much as investing in SRHR
is key for sustainable health systems. SRHR is relevant,
directly or indirectly, to all four categories used by WHO to
monitor progress of UHC¹⁹. The importance of SRHR in UHC
was already recognised in the political declaration from the
United Nations General Assembly High Level Meeting (HLM)
on Universal Health Coverage in 2019, and the same was
reinstated in the recent HLM in 2023. In fact, not only did the
HLM final declaration keep the importance of SRHR, but it
also added spotlights on issues related to rights, gender, rates
of adolescent mortality from complications in pregnancy and
childbirth, and menstrual health.

Nonetheless, the declaration fell short in referencing the crucial provision of quality, integrated and comprehensive health care services, access to CSE, the importance of bodily autonomy, and ensuring lifesaving sexual and RH care in humanitarian settings²⁰. This shows that there is still a way to go in the fight against entrenched inequalities in access to health care and the realisation of human rights, including SRHR, and despite existing efforts. There is also international agreement that the cornerstone to achieve UHC is to develop and strengthen all aspects of the health system.

Following the importance of intertwining these priorities, European donors have been investing in programmes that directly support health systems strengthening (HSS) to advance SRH/FP and vice-versa. European donors thus continued to invest in SRHR in 2022 in direct relation to the six building blocks of HSS:

Health workforce: Finland supported the NGO 'Maternity Clinic and Training Project' which provided capacity-building for local health actors in Somalia. Spain supported the Association of the Interethnic Network of Midwives in Colombia. Germany and Sweden supported the training of midwives through UNFPA's Maternal and Newborn Health Thematic Fund.

Health service delivery: Through NGO support, Italy built a health center in Burkina Faso for renewed attention to childbirth. France has been supporting UNITAID's efforts in developing better tools to reduce maternal mortality and the EU institutions funded a new phase of an NGO-WHO project in Guinea-Bissau to improve reproductive, maternal and newborn health.

Essential medicines: Belgium, Denmark, France, Germany, the Netherlands, Norway, Spain, the UK and the EU institutions supported the UNFPA Supplies Partnership. The Netherlands and Sweden funded social marketing of reproductive health supplies in sub-Saharan Africa. Ireland also invested on an NGO project to make available quality and free health care for SGBV survivors in Sierra Leone.

Health information: Sweden supported UNFPA's Country Program Documents in Ethiopia, Iraq, Liberia, Mali, and Sudan, which include, among others, capacity-building of national statistical systems to monitor the demographic dividend.

Governance and leadership: Norway supported NGO projects that used advocacy and litigation to ease the restrictions on SRHR in partner countries. Denmark continued to support Amplify Change and its subgranting work for advocacy efforts towards better governance of SRHR and health systems.

Health financing: Germany, the Netherlands, Norway and the UK supported the Global Financing Facility in 2022, which uses public grants to catalyse domestic resources for health, including SRHR. Sweden also continued to fund the programme 'COVID-19 CHAI - Sustainable health financing - Towards UHC 2017-2022'; and the EU institutions supported the NGO project 'Health system strengthening for Universal Health Coverage in African, Caribbean and Pacific countries'.

^{19.} The four categories are i) reproductive, maternal, neonatal and child health (RMNCH); ii) infectious diseases such as HIV; iii) non-communicable diseases including cervical cancer screening and iv) service capacity and access, which encompasses medicines for RH and perinatal care as part of essential medicines.

^{20.} Learn more about Countdown 2030 Europe's reaction to the HLM $\underline{\text{here}}.$

SRHR acute needs in humanitarian settings

f 2023 showed us something is that humanitarian emergencies continue to increase, both in number and intensity. Halfway through 2023, the UN estimated that 360 million people around the globe were in need of humanitarian assistance, which represented an increase of 30% compared to the start of 2022. Given the observed rise of complex emergencies, from health crises, to climate change, food insecurity, and displacement, this number may rise in a not so distant future. Unfortunately, 2023 contributed to a setting where conflict, violations of international humanitarian law and international human rights law may be the key drivers of humanitarian needs, from the war in Ukraine, to Gaza, the Democratic Republic of the Congo, Sahel and Sudan (Global Humanitarian Overview 2024).

The displacement of people caused by these global crises reinforced another trend, particularly in Europe: already since 2016, donor governments have been increasingly diversing ODA funds from international cooperation programmes in partner countries in favour of welcoming in-donor refugees. This trend became even more visible in 2022 across European governments, who increased the volume of their Official Development Assistance to, in some cases, paradoxically benefit themselves most from it (see more in section 'European Donors' SRH/FP and SRHR spending as a percentage of ODA').

It is widely recognised that women and girls are disproportionately affected by all these crises, given the daily threats they face to their health, safety and rights, added to the disruption of lifesaving services. Considering the exacerbated needs for SRHR and SGBV services, UNFPA appealed for about 1.14 billion Euros (or 1.2 billion USD) to reach 66 million women, girls and young people in 65 countries affected by humanitarian crisis. European donors have recognised these needs since a few years and in 2022 this analysis shows that they have increased investments in ensuring access to lifesaving SRH/FP and preventing and responding to SGBV in humanitarian contexts²¹. This support has been mostly channelled through the multilateral system, namely through UNFPA, but also through some NGO projects.



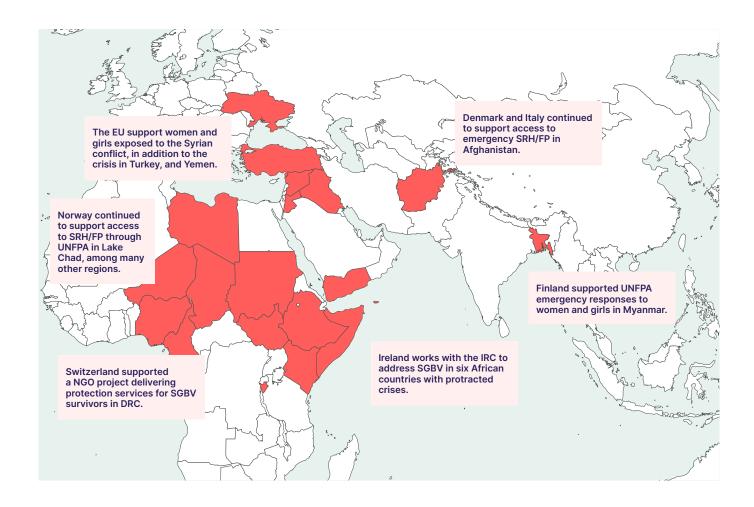
 $21. \ \ To \ learn \ more \ about \ C2030E's \ recommendations \ for \ key \ actions \ in \ emergency \ settings, \ please \ consult \ \underline{here}.$

This additional support has been particularly, though not exclusively, observed in connection to the war in Ukraine. Since the <u>outbreak of the conflict</u> in February 2022, humanitarian needs have kept increasing. <u>Millions of people across Ukraine have been and are still fighting for their lives, many of which being women and children. Amid the terrifying devastation experienced through humanitarian crises, people need first and foremost safety and protection. SRH services save lives and prevent further suffering. Prioritising these needs of key populations in emergencies is therefore a human rights imperative and should be kept at the heart of the response to all humanitarian crises, including in Ukraine.</u>

But beyond Ukraine, European humanitarian assistance continued to reach different parts of the globe in 2022. In addition to contributions to UNFPA Humanitarian Thematic Fund, some examples can be highlighted:

European donors' response in Ukraine

In 2022, almost 20 million Euros were disbursed as a response to UNFPA's appeal to address the needs of women, girls, adolescents and other marginalised groups in Ukraine and refugee-hosting countries. These funds came from Belgium, Denmark, Finland, the Netherlands, Norway, Spain and the EU. With this support, UNFPA has been able to scale up the delivery of life-saving multi-sectoral SRH and GBV information, services and supplies, including the provision of clinical management of rape and psychosocial support services, dignity kits and targeted cash assistance for women and girls and other vulnerable groups in the region.





Are European donors keeping up with their international commitments?

uropean donors have proven to be politically and financially committed to SRHR on several occasions, such as during the 25th anniversary of the ground-breaking International Conference on Population and Development (ICPD+25), celebrated at the Nairobi Summit in 2019. However, the economic slowdown and financial strain created by the multiple crises in recent years, from an unprecedented global pandemic to international conflicts and other humanitarian crises, has stressed even more the already scarce resources needed to match these global commitments.

Five years after this important milestone and looking ahead towards ICPD+30, how are in fact European governments performing against their own financial pledges?



The table below shows that most of the European donors are on track to fulfil the financial commitments made in Nairobi, even though with a few setbacks over the past years. Pledges vary significantly in terms of content, nature and

modality of funding disbursement and period of the financial commitment.

EUROPEAN DONOR	ICPD+25 FINANCIAL COMMITMENT	IMPLEMENTATION (AS OF 2022 FINANCIAL YEAR)
BELGIUM	Committed to support programmes that focus on reducing maternal mortality, promoting FP, promoting adolescent SRH and combating SGBV in Benin, Burkina Faso, Guinea (all until 2023) and Rwanda and Senegal (until 2024).	On track: through government-to-government programmes in Benin, Burkina Faso, Guinea, Rwanda and Senegal.
DENMARK	Committed to increase funding to international organizations working for the ICPD agenda within service delivery and advocacy with 30 million Euros (225 million DKK).	On track: mainly through funding towards UNFPA and international organizations.
FINLAND	Committed to increase UNFPA core funding significantly in 2020.	Fulfilled in 2020. However, it may be reversed in the future due to budget cuts.
FRANCE	Reaffirmed its commitment to organize Beijing+25.	Fulfilled in 2021: co-organised the Generation Equality Forum.
GERMANY	Pledged 100 million EUR annually on average for the BMZ Initiative on Rights-based Family Planning and Maternal Health until 2023 (extended to 2025 and renamed to "Self-determined Family Planning and Reproductive Health for All"); 20 million Euros in additional funds for projects in Cameroon, Malawi and Niger in 2019, and 33 million EUR for core funding to UNFPA.	On track: through funding provided to the BMZ Initiative on Self-Determined Family Planning and Reproductive Health for All and UNFPA in 2022.
IRELAND	Reaffirmed commitment to delivering 0.7% of GNI to Official Development Assistance by 2030.	Off track.
	Committed to developing a new SRHR initiative, incorporating partnerships for health and HIV/AIDS.	On track: the SRHR initiative was finalised in 2023.
ITALY	Reconfirmed the collaboration with UNFPA and additional funds to support projects aimed at improving women's sexual and reproductive rights.	On track: through financial earmarked support to UNFPA.
THE NETHERLANDS	Committed to a reservation in the budget of 420 million Euro on annual basis to improve SRHR including HIV and Aids, and in particular of young people.	On track: the official budget has been safeguarding the resources but budget cuts were introduced in 2022.
NORWAY	Committed to invest approximately 1.1 billion Euros (10.4 billion NOK) in SRHR for the period 2020-2025. This includes approximately 970 million Euros (9.6 billion NOK) to SRHR and 77 million (760 million NOK) for the period 2020-2023 to eliminate harmful practices.	On track.
	Pledged 102 million Euros (1 billion NOK) for the period 2019-2021 to protection against SGVB and provision of SRH services in humanitarian situations.	On track.
	Pledged to increase the percentage of its bilateral development assistance that has gender equality as a primary or significant goal from 33% to 50%.	Off track: The % of ODA projects with this primary or significant goal in fact decreased, from 41% in 2021 to 35% in 2022.
SPAIN	The Basque Country Government committed to support the Joint Programme on Essential Services for GBV and to start to contribute to the 'We decide' programme as well as to humanitarian setting in Bosnia focusing in refugees and migration at a value of 120,000 Euro.	Fulfilled in 2020. The Basque Country Government increased support to these programmes up to 140,000 Euros in 2020 and 2021, however this decreased in 2022 and 2023.
SWEDEN	Committed to continue being a long-term financial supporter, through bilateral programmes and support to the multilateral system, to SRHR. Some 13% of Swedish ODA is spent on health, and almost 60% of that is devoted to SRHR.	On track: continuous support is provided through the multilateral system and other organisations, but budget cuts were introduced in 2022.
SWITZERLAND	Generally committed to the <u>ICPD+25 final statement</u> and its specific outcomes.	On track: through core funding to UNFPA and IPPF.
THE UK	Committed to reinstate the 2017 commitment to spending on average 256 million Euros (£225m) per year between 2017/18 – 2021/22 on FP.	Off track: cuts to overall ODA and UNFPA Supplies Partnership in 2020/21 broke the commitment.
	Committed to a new programme which will provide 684 million Euros (£600m) over 2020-2025 and will buy FP supplies for millions more women and girls in the world's poorest countries each year. This includes those affected by humanitarian crises, such as Syria, Yemen and Cox's Bazaar in Bangladesh.	Off track: in 2023, the UK announced a further 50% cut to its flagship Women's Integrated Sexual Health (WISH) programme, which was already operating at reduced capacity due to previous budget cuts.
	Pledged to join the Ouagadougou Partnership.	Off track.
EU INSTITUTIONS	Support through bilateral programmes, UNFPA Supplies and UN Spotlight Initiative, among others.	On track: under the new budget cycle 2021-2027

Even though the analysis above shows that most of European governments are on track with what they promised to deliver during the 25th anniversary of the ICPD Programme of Action in 2019, the multiple crises hitting the globe after that milestone led to exacerbated needs and inequalities. The key question to be answered may be: were those commitments ambitious enough? Being presented with a new opportunity with the celebration of the 30th anniversary of ICPD in 2024,

it is key for European governments to adopt an approach which looks at addressing the long-term structural and systemic issues that contribute to undermine the fulfilment of SRHR and to leave people behind. The aftermath of the COVID-19 pandemic was centred on the concept of building back better and this should be applied in the context also of renewed European commitments to the ICPD agenda.



Beyond ICPD+25, another crucial platform to advance the SRHR agenda, whose implementation C2030E is closely monitoring, was the 25th anniversary of the Beijing Declaration and Platform for Action (Beijing+25), celebrated during the Generation Equality Forum (GEF) in 2021. This brought in new commitments, although sometimes these were a reinstatement of pledges done during ICPD+25 and did not necessarily imply additional funding, depending on a case-by-case basis. The next 'Tracking What Counts' report will offer an opportunity to analyse and review more in depth the performance of European governments performing against their own financial pledges made at the GEF.

Another crucial platform for SRHR is FP2030, the successor to FP2020. Since its creation in 2021, FP2030 received more than 100 new commitments, reinstating the importance of FP around the globe. The only European government that committed financially to this global initiative so far is Germany, who pledged approximately 200 million Euros of its bilateral funding in 2022 and 2023 to rights-based family planning and reproductive health. Approximately 95 million Euros have been committed in 2022. However, it is not possible to assess whether this commitment is on track or not in 2022, due to the lack of granular information for the disbursements – more information can be found in the respective country page. The UK is also currently exploring a financial and policy commitment to FP2030, but this may only be expressed in 2024.



2030E welcomes the increase of European financial contributions to SRH/FP in 2022. The steady level of investment on SRHR overall is nonetheless concerning, as it is the overall prioritisation of this agenda, when looking at other areas receiving higher attention.

European governments had already shown in 2020 that it is possible to scale up the weight of SRH/FP and SRHR investments in nominal and relative terms, as a share of European ODA, in the face of crises - and considering donors' increased efforts to work across sectors and to integrate SRHR in the response to the COVID-19 pandemic. But, as it happened with the financial downturn of SRH/FP funding in

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2021, there is a risk that European attention provided to these lifesaving elements is time-bound, rather than a sustained level of support. Existing data also shows that the resources exist but are mostly channelled to other priorities: as an example, while European governments allocated between 1.0-5.9% of their ODA to SRHR in 2022, according to OECD preliminary data, the same year they spent between 7-51% of ODA for in-donor refugee costs.

While it is not possible to forecast overall European expenditures to SRH/FP and SRHR in the years to come, there are some available elements that suggest a steady prognosis – based on individual contributions, to be found in the country pages:

Belgium		SRHR ODA expected to increase
Denmark	\ominus	SRHR ODA expected to be at least kept at the same level
Finland	\Rightarrow	RHR ODA expected to be at least sustained until 2023, by when it could decrease
France	\Longrightarrow	SRHR ODA expected to be at least maintained
Germany		SRHR ODA expected to decrease in 2023 and also in 2024
Ireland		SRHR ODA may increase, also in line with the rise of overall assistance
Italy		Overall ODA expected to decrease, and therefore also funds for SRH/FP
The Netherlands		SRHR ODA expected to decrease in 2023
Norway	\Longrightarrow	SRHR ODA expected to at least be sustained
Spain	\ominus	SRHR ODA expected to be at least sustained
Sweden		SRHR ODA expected to decrease, even though it may be sustained in relative terms (%)
Switzerland	?	Information unavailable
UK	\bigcirc	SRHR ODA expected to be kept while overall ODA remains reduced
EU institutions	\Rightarrow	SRHR ODA expected to be at least kept at the same level

2024 will also offer new opportunities to scale up European support to SRH/FP and SRHR, namely in synergies with different stakeholders. This year will celebrate the 30th anniversary of the International Conference on Population and Development, which will offer a renewed opportunity for European donors to take stock of progress and boldly recommit to the agenda. Moreover, as we are halfway to 2030, and the world is nowhere near of reaching the SDGs, it is crucial to invest in SRHR for sustainable development and work across sectors.

On the other hand, 2024 is also being considered by many as 'the' year of elections, with countries representing about half of the world population going to the polls. Depending on the outcome of such elections, including the EU, the UK and US ones, this might contribute to shape differently not only geopolitical dynamics among countries and regions, but also funding flows, including towards sexual and reproductive health and rights, and family planning.

The current multiple global crises, from the pandemic to international conflicts or the climate, energy and food emergencies, stress even more the already scarce resources needed to match global commitments for sustainable development. There is a need for further investment in

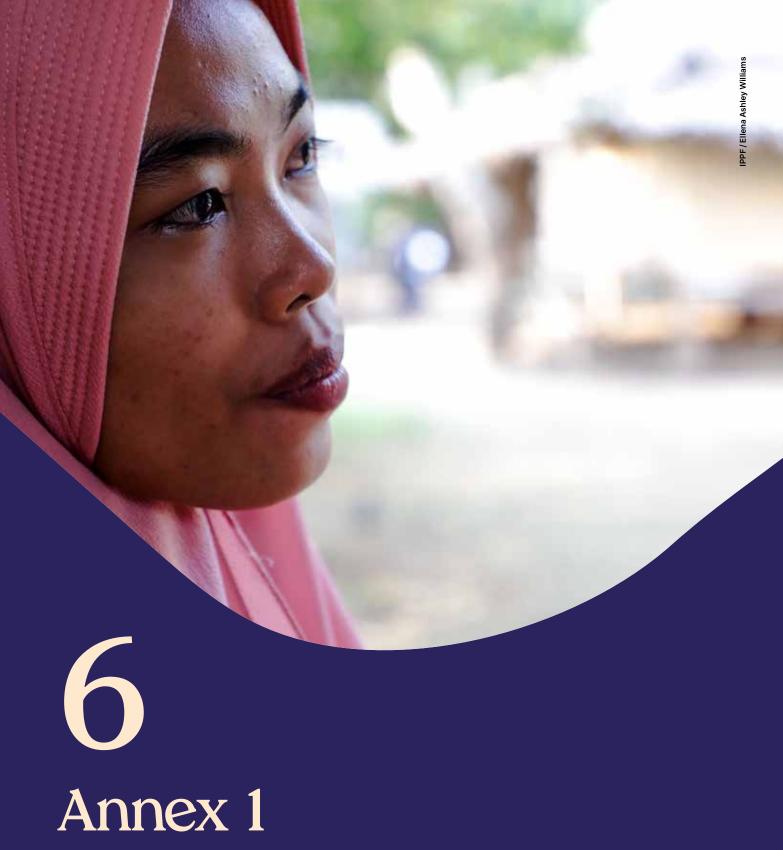
promoting universal access to SRHR and European donors should play their part in reinforcing this. 2022 proved that it is possible to scale up resources where the need arises, so European governments should ensure that their political commitments to SRHR are indeed adequately matched with the financial efforts.

The current setting only justifies the need to further integrate SRHR in the responses to multiple crises that the world will keep facing in 2024 and beyond. This is particularly the case in low-income countries, where out-of-pocket expenditures are still high due to the limited integration of SRH services at the primary healthcare level²². It is thus fundamental to, not only sustain the current level of investment on SRH/FP and SRHR, but also to scale it up, given its importance to global sustainable development.

Going forward, advocacy will be key to safeguard focus on the critical importance of SRHR and, in that context, SRH/FP. The C2030E Consortium is, as always, committed to continue its role in calling for increased investments in this field, whilst ensuring accountability by tracking financial expenditures and the implementation of policy commitments towards advancing the SRHR agenda.



 $22. For more information, please refer to: \underline{https://www.unfpa.org/sites/default/files/pub-pdf/SRHR_an_essential_element_of_UHC_2020_online.pdf$



Methodology and Added Value of Countdown 2030 Europe tracking

Why was the Countdown 2030 Europe tracking methodology created?

- → Back in 2009, C2030E needed a consistent way to collect national data for local advocates the C2030E Partners to track what their national governments were committing and expending on SRH/FP, using national expenditure reports, easily to refer to in national advocacy activities. This consistent approach would be useful to assess trends across years and donor countries, even though individual governments report internally in significantly different ways.
- → C2030E Partners looked at the SRH/FP financial data available but, despite their added value, some shortcomings made them unsuitable for local advocacy, namely:
- 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 there is huge scope for different interpretation and classification of the codes, both among donors and within their own administrations, thus affecting the quality or comparability of data. Moreover, some individual donors report non-directly related SRH/FP expenses under CRS codes for population assistance such as migration –, hence inflating key findings. The data was also not published quickly enough to be useful for national advocates to use for monitoring purposes.
- Former UNFPA-NIDI Resource Flows data: This relied partly on the OECD DAC data, and therefore faced the same challenges as above. In addition, data on population assistance were collected through questionnaires, directly sent to donors. The initial little detail on SRH and FP financial breakdowns was overcome on the initiative of C2030E, but the often-low response rate on these details kept the use of these data for monitoring purposes challenging.

- Euromapping, Donors Delivering for SRHR and other reports relying on the Muskoka methodologies: Many national advocates found that the presentation of these reports is excellent to depict cross-country comparisons in donor trends. But the data source is again OECD DAC, which is out of date for the purposes of national advocacy and timely monitoring of European donor funding. Plus, the attributed percentages applied to CRS codes – based on a global reporting sample – does not allow to accurately depict how the individual European donors contribute to SRH/FP.
- → There was no systemised forum for presenting policy trends in SRH/FP across European donors. C2030E 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 do so; this made it difficult for them to 'match' political commitments from their governments with funding allocations, a key component of advocacy and accountability.

What does the Countdown 2030 Europe tracking measure?

- → The report includes two different sets of findings for **14 European donors** (Belgium, Denmark, Finland, France, Germany, Ireland, Italy²³, the Netherlands, Norway, Spain, Sweden, Switzerland, the United Kingdom, the European Union):
- 1) the first referring to sexual and reproductive health, including family planning (SRH/FP), in line with what has been collected since the beginning of this tracking exercise and

 $23. \ \text{ltaly was added in the 2021/2022 report.} \\$

2) an extended set that considers the broader **sexual and reproductive health and rights** (SRHR) agenda²⁴, which has been introduced in 2021 – by default, the latter will always include the former.

This additional measure was introduced because European donors tend to increasingly embrace a more comprehensive definition of what is SRHR, going beyond the specific elements of FP and SRH. This expanded definition is aligned with the tendency to further integrate SRH into other services and sector-wide approaches, as both the ICPD Programme of Action and the Sustainable Development Goals call for. This vision is also endorsed by C2030E and is aligned with the new SRHR definition from the Guttmacher-Lancet Report, which has been already embraced by the majority of European donors. It is however important to note that not all European governments use all these interventions to measure their investments on SRHR, with some completely detaching, for example, expenditures on HIV/AIDS and other STIs, SGBV or even harmful practices.

- → C2030E partners collect data on their country's financial contributions in current prices and in reference to **specific streams of support**, namely:
- Core multilateral: Core funding to a selection of relevant multilateral institutions (UNFPA, UNICEF, WHO, the World Bank and the Global Fund to fight AIDS, TB and Malaria for SRH/FP, complemented by UNAIDS for SRHR)²⁵. As UNFPA NIDI Resource Flows came to an end, since 2021 the report uses percentages provided directly by UNFPA for SRH/FP, and calculates a five-year trend of OECD-DAC coefficients from the other multilateral organisations, based on their own reporting. The same is applicable to the Global Financial Facility (reported under international organisations and initiatives).
- Multilateral projects: Funding to multilaterals that is earmarked for specific projects on SRH/FP and/or SRHR.
- International Organisations & Initiatives and Research: Funding for organisations (both national and international), campaigns, specific initiatives and research on SRH/FP and/or SRHR. This includes funding to the International Planned Parenthood Federation, MSI Reproductive Choices, or the Global Financngl Facility, among others. As some European donors substantially rely on this channel to advance the SRHR agenda in 2021, the list of collected initiatives has been extended in order to better depict European investments through this channel.
- Government-to-Government cooperation: Funding channeled directly to the general government of partner countries including all central, state or local government or non-profit institutions that are controlled or financed by government units. This stream excludes funding through

any of the above streams. As governments have been striving to improve transparency of their annual funding, this stream started being accounted for as of 2021, for 2020 data.

- → The report also sheds a light on:
- SRH/FP and SRHR spending as a percentage of ODA: For a more enriched depiction of cross-country comparison in funding trends, this report calculates the percentage of donors' spending on SRH/FP and SRHR as part of their annual ODA.
- Transparency of ODA: The report focuses on the donors' overall transparency level of ODA. External sources are used as baselines, such as the Global Partnership for Effective Development Cooperation (GPEDC) or Publish What You Fund (PWYF), that can be then adapted by partners.
- Quantifying the impact of European donors' contributions:
 The report includes impact numbers from European governments' investments on FP. Calculations are based on the Guttmacher's Family Planning Investment Impact Calculator, which is an interactive tool for estimating these impacts in LMICs. As it is not always possible to separate donors' investments on FP and SRH, only some of the FP programmes are selected for these calculations, to illustrate the minimum impact reached.
- → C2030E represents summary data on a dedicated webbased platform: https://www.countdown2030europe.org/ tracking-what-it-counts/. All data can be changed in 'realtime' – i.e. as it happens. So, when elections happen in country X that affect SRH/FP, or when financial commitments are made in country Y, the C2030E partner can alter their national profile
- → Policy data, a key feature of the report, is public; financial data may be restricted, only accessible to C2030E partners given their strong relationship with their own governments. This is because some government counterparts do not always feel comfortable with sharing financial data that is not always an official record yet.

^{24.} HIV/AIDS and other STIs, in line with ICPD costed package; Prevention and integrated responses to Sexual and gender-based violence (SGBV) that go beyond SRH/FP (so far only SRH/FP focused responses were included); Comprehensive sexuality education; Initiatives specifically targeting Lesbian, Gay, Bisexual, Transgender, Intersex or Queer (LGBTIQ+) persons; Safe abortion; Other initiatives to foster human rights-based, gender-responsiveness, intersectionality and change of social norms in relation to SRH/FP.

^{25.} There were also assessment to include UN Women as a relevant agency for SRHR core funding; however, given the lack of detailed financial information per relevant outcomes, this has proven unfeasible to do with the required level of accuracy.

What added value does the Countdown 2030 Europe tracking offer?

- → Obtaining data primarily from national annual sources 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 that reflects the country's vision.
- → The process of collecting data helps to build the relationship of trust and communication between the advocacy partner and the government SRHR focal point person, while it broadens networks for advocacy with government departments beyond the traditional SRH/FP ones. This level of proximity also allows for interpretation and discussion around how data is categorised, unlike OECD DAC data.
- → 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).

- → Data collected by C2030E partners is the **most recent financial data available** in the country and **policy data is real- time**.
- → C2030E is unique in actively and routinely using the data it collects for increasing donors' accountability and transparency. C2030E thus **bridges research and advocacy**. Several case studies have highlighted how this has **improved donor accountability** and data transparency over time.

Data updates and comparability with prior reports

While Countdown's methodology has remained consistent over time, the yearly updates of financial data may lead to retroactive adjustments. For example, in 2020, full dataset since 2012 was revised to further streamline the methodology across partners, namely in terms of i) what is reported as SRH/FP and ii) how, or which streams are used to report funding. Percentages provided by NIDI for core funding were also updated since 2015 and 2020 data referred to percentages from the previous year, given the absence of updated figures. Finally, in 2021, the accounting method for EU funding of earmarked multilateral programmes has been reorganised in line with other European donors. As such, findings from the different yearly reports should not be used as a time series.

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About C2030 Europe

Countdown 2030 Europe is the 'go-to' cross-country sexual and reproductive health and rights (SRHR) expert Consortium in Europe seeking to increase European SRHR funding in international cooperation and strengthen political support for sexual and reproductive freedom worldwide. The Consortium is made up of 15 leading European non-governmental organisations and is coordinated by IPPF European Network.

Consortium











